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Influence of Biological Parenting, Kinship Care and Geographical Location on Altruistic Behaviour in a Nigerian Sample.

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Abstract

Altruism may best be described as an unselfish behaviour, attitude and concern towards the welfare of others. It is a form of prosocial behaviour, which is of obvious importance to the quality of interactions between individuals and among groups in the society. However, people have been particularly intrigued with the causes of altruism, hence; researchers have come forth with different approaches to explain the underlying or causative factors of altruistic behaviours. In this study, the researchers examined the influence of factors such as biological parenting, kinship care and geographical location on altruistic behaviour. A 26-item questionnaire comprising of two sections was used and data was gathered from 563 undergraduates of Nnamdi Azikiwe University, Awka. Of the sample, 275 (48.8%) were females and 288 (51.2%) were males with their age ranging from 16-44 years. The Independent group and 2X2 factorial designs were employed in testing the hypotheses. Results showed that students raised by both biological parents were more altruistic than those raised by a single biological parent and that students who lived in rural areas were more altruistic than their urban counterparts. No significant difference was found in altruistic behaviour between students raised by kins and those raised by their parents.

Keywords: Altruistic behaviour, biological parenting, kinship care and geographical location.

INTRODUCTION

To understand and explain behaviour, psychologists usually explore two major facets: the biological and environmental determinants. Altruism, a form of prosocial behaviour, is of obvious importance to the quality of interaction between individuals and among groups in the society. It is also crucial to the building of good societies. This research explores the possible influences biological parenting, kinship care and geographical location may have on the quality of an individual, thereby expanding the already existing knowledge on altruistic behaviour.

One of the key human characteristics is the willingness to help others (Warnekan, 2013), often associated with prosocial behaviour. As a form of prosocial behaviour, altruism is defined as an unselfish behaviour, attitude and concern towards the welfare of others. Cardwell, Clark and Meldrum (2002) stated that altruism is a form of prosocial behaviour in which a person will voluntarily help another at a cost to himself. The International Encyclopedia of the Social Sciences defined "psychological altruism" as a motivational state with the goal of increasing another's welfare (page 87). In psychological research on altruism, studies often observe altruism as demonstrated through prosocial behaviour such as helping, volunteering,

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comforting, sharing, co-operation, philanthropy and community service (Batson, 2012). The American Sociology Association acknowledges that intrinsic scientific policy and public relevance of the field of altruism is unquestionably relevant to helping to construct good societies.

Altruism is a core value across various religions (Somashekar et al, 2011). In Christianity, altruism is central to the teachings of Jesus Christ as found in the gospel. Love for others is emphasized and one characteristics of love is that "it is not selfish". Similarly, the parable of the Good Samaritan, who pitied and helped an injured man, is often cited as an example for the Christians. In Islam, the concept of I'thar is an altruistic notion of preferring others to oneself. It means devotion to others through complete forgetfulness of one's own concerns. Concern for others is rooted in a demand made by Allah on the human body. In Buddhism, it is the principal truth that many illnesses can be cured by one medicine of love and compassion; these qualities are the ultimate source of human happiness and the need for them lies at the very (Einsenberg, Fabes and Spinrad, 2006). In Judaism, altruism is the desired goal of creation and the command "Thou shalt love thy neighbour as thyself" is a basic tenet.

Studies have shown that altruism can be broken down into two main types: biological altruism and reciprocal altruism. Biological altruism is the idea that people may help others regardless who they are but are more likely to be help a relative as opposed to a stranger. Anderson & Ricci (1997) theorized that the reason for this was due to the fact that relatives, in differing degree share a portion of our genes, so their survival is a way of ensuring that some of the individual's gene will be passed on. The claim is that altruistic behaviour between non-relations will have no evolutionary advantage so it would be highly unlikely for a person to show altruism towards a non-relation.

Trivers (1985) highlights the concepts of Reciprocal Altruism; the idea that if you behave kindly to a person or help them in the past, the individual will be inclined to help you in the future. In reciprocal altruism, it is necessary that the individuals should interact with each other more than once. The reason for this is because if individuals only interact with each other once in their lifetimes and never meet again, there is no possibility of any form of return benefit, so there is nothing to be gained by the helping individual.

Baston & Shaw (1991) introduced the concept of universal altruism; a term that describes a helping behaviour undertaken in order to lessen the helper's own distress at the suffering of the person who needs to be helped. A social exchange theory of altruism was proposed by Aronson, Wilson & Alkert (2010). They argued that much of what we do stems from the desire to maximize our rewards and minimize our costs. Altruism is based on self-interest with no genetic basis. Here, helping can be rewarding in three ways: it can increase the probability that someone will help us in return in the future; it can relieve the personal distress of the bystander; and it can gain us social approval and increased self-worth. Helping can also be costly; thus, it decreases when costs are high. The theory presumes that people help only when the rewards outweigh the costs. Kahana, Kahana & Kercher (2004) supporting this theory, stated that one possibility of altruistic behaviours is that they may ameliorate normative stress on aging.

Baumrind (1991) described important dimensions of parenting. These are warmth (as opposed to conflict or neglect) and control strategies. Parenting typologies were thus constructed from a cross of warmth, conflict and control; Authoritative (high warmth, positive/assertive control and in adolescence high expectations), Authoritarian (low warmth, high conflict and coercive, punitive control attempts), Permissive (high warmth coupled with

low control attempts) and Neglectful/Disengaged (low warmth and low control). These four typologies have been repeatedly associated with child outcomes. Children and adolescents of authoritative parents are consistently described as most prosocial, academically and socially competent and least symptomatic, children whose parents are described as authoritarian, permissive and disengaged show significantly worse outcomes, with children of authoritarian parents showing typically the most disturbed adjustment of the four of the four parenting types. Hudson and Rapee (2002) suggest that internalizing behaviours in children may be linked with parenting styles that might not have been traditionally assessed, such as over protectiveness.

The family is a basic group in the society and the primary unit of socialization. A family typically consists of one or two parents and their children. Lichi (2014) opined that it is from the family that people learn about themselves (self concept); about others and how to develop relationships; important values bothering on spirituality, personal health, attitudes towards money, conformity and nonconformity to what are considered normal behaviour in the society, honesty and approach to education. Encyclopedia Britannica defined socialization as the process whereby an individual learns to adjust to a society and behave in a manner approved by the society. It is a whole process of learning and it is a central influence on the behaviour, beliefs and actions of adults as well as children. The fundamental purpose of socialization is the acquisition of culture. It begins immediately after birth and early childhood is the most and crucial period of socialization (O'Neil, 2011). It is in the process of socialization that we learn the roles we are supposed to play in life. O'Neil (2011) also stated that while much of human personality is as a result of genes, the socialization process greatly moulds an individual's character in particular directions by encouraging specific beliefs as well as selectively providing experiences. As children, we are very vulnerable to our parents; we rely on them for supervision, provision and guidance in the greater part of our early life. Warneken (2013) opined that helping behaviours originate in cultural practices such as our parents having taught us moral norms or having rewarded us for being nice to others. The school, the churches and the law can help in the process of character development, but they have much less independent force of their own. Their main function is to reinforce what has already been taught at home thus if morality and character were not taught at home, other institutions cannot be relied upon to undo the damage.

Bandura (1977) proposed in his theory of social learning that observation and modeling are major ways through which individuals learn new behaviours. Modeling is one of the most fundamental dimensions of raising a prosocial child. Children pay more attention to what an adult does than what an adult merely says (Popenoe, 2010). Lichi (2014) stated that modeling is one of the most powerful tools of parents; children are more likely to do what they see their parents do than what they tell them to do. He further claimed that children raised by parents who are always preoccupied with themselves tend to grow into yet another generation of selfish adults. Character formation in children is an intentional parent-led endeavour (Sisk, 2008).

The structure of biologically parented families varies from single-parent families to both-parent families. A single parent is defined by the Family Paediatrics Report (2003) as a parent not living with a spouse or partner, who has the most of the day-to-day responsibilities in raising the child or children. Historically, death of a parent was the major cause of single parenting, nowadays, common causes of single parent homes are divorce or separation of a couple with children, child neglect or abuse and unplanned pregnancies. Jayson (2009) states that the demographics of single parenting show a general increase worldwide of children living in single parent homes. The Family Paediatrics Report (2003) stated that children of divorced

parents are at a great risk of emotional and behavioural problems. It was also fast to point out that although two-parent household may facilitate parenting, it does not guarantee success. Statistics have shown that children raised in healthy single parent homes have more problems emotionally, interpersonally, in school and with the law than those raised in healthy two-parent family. No matter how good a single parent is, that parent can never model for the child how two, present, committed parent partners share and work together; communicate and solve problems together (Stevens, 2011). However, the effects of single parenting families on the child are not all negative. Some positive effects have been identified by research. Wolf (2010) observed that most times the extended family step up and plays a significant role in the child's life, thereby giving the child a community experience which fosters familial bonding. Another positive effect is that the child learns more about responsibility and sacrifice early. Jeffery (2011) held that when children see their single parent hard at work to provide for the family needs, they will naturally develop a sense of responsibility and realize that to strive, they have to help in any way they can. He further asserted that children from single homes, as a result of their experiences, learn to be realistic quite early in life, having a wholistic view about life and being considerate.

Kinship Care

In some circumstances, children are not raised by their biological parents thus bringing the concept of kinship care to the platform. Kinship care is generally defined as the full time nurturing and protection of children who must be separated by their parents, by relatives, members of their tribe or clan, godparents, stepparents or other adults who have a kinship bond with the child (Winokur, Holtan & Valentine, 2009). The International Guidelines for Alternative Care of Children (2009) defined kinship care as a family based care within the child's extended family or with close friends of the family known to the child whether formal or informal in nature. It arises from the inability or unwillingness of the biological parents to take care of their children. Factors that lead to kinship care are death (of one or both parents), financial instability, family breakdown (divorce, remarriage and separation), urbanization, conflict, insecurity, illnesses, diseases, traditional practices, incarceration, substance abuse and polygamy (Smith, 2013).

Kinship caregivers are the silent safety net; the unsung heroes of children unable to live with their parents. Historically, kinship care has been a mechanism to maintain social stability, creating and helping to sustain bonds of co-operation and interdependence. Schroeder (1995) states that children are more likely to be altruistic when they have another person as a model for altruistic behaviour. Therefore, an individual who has been impacted so positively by a kin caregiver would have a typical model for altruistic behaviour and may be more likely to imbibe the character.

Kinship care is also referred to as relative, friends, family and kith (persons from the child family's community) care (Bromfield & Osborn, 2007). The practice of kinship foster care is a process whereby children are passed on to people for training or companionship without the parents losing parental rights. Afua (2012) opines that the process helps to cement kinship bonds, reaffirm family ties or political relationships and sometimes provide companionship or household help to a childless person. Kinship care also provides opportunities for a child in a rural setting to migrate to a town and, for urban children to live with better endowed adults who may send them to school or enroll them in apprenticeship (Goody, 1982). Nsamenang (1992) was of the opinion that kinship care is an alternative source for domestic help and social support for childless and aged relatives.

Winokur, Holtan & Valentine (2009) made a difference between informal and formal kinship care. Informal care (also known as private kinship care) is an arrangement made by the family (and extended family) without statutory or child welfare involvement. These children are usually not in guardianship or custody arrangement with state and statutory authorities. Conversely, formal kinship care is arranged by statutory authorities as a result of substantiated child harm and the necessity for the child to be placed out of the home. The Child Protective Initiative, West Africa (2013) observes that formalization of kinship care in West Africa may prevent some caregivers from taking responsibility for their relatives' children, as they may not want to engage in a bureaucratic process associated with formal care arrangements which they may perceive as invasive, time consuming and potentially expensive.

There is a perception that based on African Culture, families take relative in cases of death and other reasons including economic hardship and that the government does not need to interfere in this arrangement. Green & Goodman (2010) observed that kinship care is a rapidly growing form of care in Australia and internationally. Reasons which they suggested for the increase in kinship care are: changes in legislation and policy regarding placement preference; decreasing number and shortage of available foster placements; substance abuse by parents so kin are taking care of the children; changing family structures and conditions; children and families indicating a preference for kinship care and increase in children requiring out-of-home care. Other motivations for the kin caring for the children are often; family loyalty, commitment and attachment to the child, obligation, not wanting sibling groups to be split up and wanting the child to stay with the family (Lernihan & Kelly, 2006). The Child Protection Initiative for West Africa (2012) indentified some factors that influence kinship care in Nigeria, Sierra Leone and the Democratic Republic of Congo to include; the significance of local traditions; family poverty; increasing value for education and lack of access to secondary schools; polygamy and family breakdown, accusation, of witchcraft; conflict, insecurity and displacements and its impact upon families; outbreak in diseases, including HIV/AIDS, poor health and maternal mortality; urbanization and migration.

It has been observed that in West Africa, key factors influencing negative or positive experiences of children living with relative caregivers include: socio-cultural tradition concerning closer ties with maternal or paternal relatives which may influence the likelihood of a child being welcomed in the family; female and male caregiver active participation in decision making to care for a child and in particular whether the primarily caregiver chooses to care for or feels "forced" to care for a child; and the lack of or existence of shared responsibilities by the parents and caregivers for children's well-being and needs (C.P.I West Africa, 2013).

Some children living in the Democratic Republic of Congo reported that they are more likely to face negative experiences in their kinship care setting if the female caregiver in the household was not part of the decision making to care for them. Such situations are more likely when the child is related to the paternal side of the family, rather than the maternal side of the family. In general, children living with grandparents tended to express a greater sense of belonging and more happiness compared to children living with other caregivers (Claherty, 2008).

Numerous negative and positive impacts of kinship care on children have been identified. Positive impacts include provision of needs, love, care, a sense of belonging, livelihood and vocational skill training. Possible negative impacts of kinship care are discrimination (which may adversely affect the child's access to quality education, nutrition and protection), hatred, hard labour, risk of molestation, intolerance, insufficient care and inadequate material resources. It has been suggested that some negative behaviour of children raised by kin

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caregivers seem to be exhibited as a result of the tension and unfriendly environment they face at home.

In West Africa, an estimated 15.8% of children do not live with their biological parents (CPI, 2013). However, only a very small number of 0.002% live in formal alternative care, while the majority live in informal care alternatives especially with their extended families in kinship care. Family structure has been suggested to indirectly influence individuals' psychological wellbeing by affecting family processes such as parent-child relationships. The psychological wellbeing of individuals is crucial to attitude formation and consequently, social relations.

Psychologists study the relationship between an environment and how it influences its inhabitants in the branch of Environmental Psychology which is also referred to as Behavioural Geography. The term environment encompasses the natural and built features and also the social settings. Geographical location refers to the type of human settlement which is characterized by its size, density and centrality and basically classified under two umbrellas: rural and urban. An urban settlement is usually called a city or town and is characterized by a large population, high population density, developed infrastructure and services, social complexity and cultural heterogeneity (Weisner, 1979). Rural settlements on the other hand are usually characterized by low populations, low density, social simplicity, basic services and cultural homogeneity.

Researchers have found significant differences in some behavioural patterns of urban and rural settlers (e.g. Milgram, Mann and Harter, 1965; Hanson and Slade, 1997; Bridges and Coady, 1996). Sudsywolf (2008) postulates that when looking at rural-urban differences in behaviour, it is necessary to take into account the socio-structural factors and socialization experiences through which people form their environmental values, attitudes and behaviours. The divergent socialization experiences which are peculiar to urban and rural settlements provide a gap for incongruence in behaviours of its settlers which should be explored.

Geographical Location Differences on Altruistic Behaviour

Milgram (1970) proposed an overload theory for urban and rural differences in response to an altruistic model. He contended that city dwellers, in adapting to stimulus overload caused by increasing population densities, would curtail or limit the depth and breadth of social contacts. Consequently, he suggested that people in cities would be generally more indifferent to unimportant others and less likely to make distinctions between unimportant others than would people in smaller towns. Both Hansson & Slade (1977) and later Whitehead & Metzger (1981) observed that not only community size but interaction with deviant status affect altruism displayed to strangers (Bridges & Coady, 1996).

Crook (2012) posits that geographical location or residence tends to influence people's behaviour of caring and sharing due to their social interactions. For instance, rural residents are more likely to help or share due to the fact that they have been used to living cohesively as opposed to urban residents who are more disintegrated. Afolabi 2013) observes that people in the rural areas are more helpful. This effect holds over a wide variety of ways of helping and in many countries. One explanation is that people from rural settings are brought up to be more neighbourly and more likely to trust strangers. People living in the cities are likely to keep to themselves in order to avoid being overloaded by all the stimulation they receive. This is because where an accident occurs can influence helping more than where potential helpers were born, and that population density is a more potent determinant of helping than is population size (Aronson, Wilson & Akerty, 2010)

Mullen (2013) tested a hypothesis that young adults who had one biological parent upbringing or those who had an upbringing with neither biological parent would have lower levels of altruism than the young adults who had an upbringing with both biological parents. The interaction effect between family composition and altruism was statistically significant. More specifically, the Turkey HSD post hoc analysis highlighted that the group who had an upbringing with one biological parent had lower levels of altruism than the group who had an upbringing with two biological parents and the group who had an upbringing with neither biological parent.

Similarly, Afolabi (2013) carried out a survey on 440 undergraduates in Nigeria to examine if place of residence would have a significant influence on the prosocial behaviour. The results showed that place of residence had a significant influence on prosocial behavior, with students living in the villages scoring a higher mean (43.61) than their city counterparts who scored, 38.24.

Statement of the Problem

Altruism is a component of prosocial behaviour that is central to the wellbeing of social groups. Altruistic behaviours have been noted to be crucial to the building of good societies. People have been particularly intrigued with the causes of altruism hence researchers have come forth with different approaches to explain the underlying or causative factors of altruistic behaviours.

Osori (2013) opines that Nigeria desperately needs altruism from its people: a need to sacrificially contribute to a cause for public good but did not highlight factors that could facilitate or inhibit this behaviour among Nigerians. It is therefore a lacuna that needs to be closed hence this research lends itself to bridging the gap by investigating how the factors of biological parenting, kinship care and geographical location may influence altruistic behaviour and possibly establish a prelude to how altruistic behaviour can be increased in individuals.

This study will therefore test the following hypotheses:

1. Students raised by both biological parents will show significantly higher altruistic behaviour than those raised by a single biological parent.
2. Students raised by their parents will show significantly higher altruistic behaviour than those raised by a kin.
3. Students who lived in rural areas will show significantly higher altruistic behaviour than students who lived in urban areas.

METHOD

Participants

Five hundred and sixty-three (563) 1st and 2nd year undergraduates of Nnamdi Azikiwe University, Awka participated in the study. Out of the 563 participants, 288 (51.2%) were males while 275 (48.8%) were females. The participants were drawn from five different faculties: Social Sciences (112), Engineering (114), Education (110), Law (126) and Arts (101). The ages of the participants ranged from 16-44 years with a mean age of 21.7 and standard deviation of 2.76.

Instrument

The instrument for the study was a questionnaire comprising two (2) sections (A & B) with twenty-six (26) questions altogether. Section A consisted of the demographic variables (sex, age, faculty and department) and six (6) questions constructed by the researcher that tapped

information on who brought up the participant (parent(s) or kins), and location of residence before admission into the University. Section B contained a 20-item Self Report Altruism scale (SRA) by Rushton, Chrisjohn and Fekken (1981) and this was the major instrument for the study. The scale is designed to measure altruistic tendency by gauging the frequency one engages in altruistic acts primarily towards strangers. Respondents answer on a 5-point scale (where 1 =Never, 2+Once, 3=More Than Once, 4=Often and 5=Very Often). Responses are scored as a continuous measure and possible scores range from 20-100. The range of scores for participants in this study was 20-92 with a mean score of 54.98.

Reliability and Validity of the Instrument

Rushton et al., (1981) reported an internal consistency reliability coefficient of .84 for the Self Report Altruism scale, and for all study, forty-five (45) copies of the questionnaire were administered to students of Anambra State University, Igbariam by the researcher in a pilot study. Their responses which were subjected to reliability analysis using Cronbach's Alpha yielded an internal consistency coefficient of .78.

Procedure

Five (5) out of the ten (10) faculties in Nnamdi Azikiwe University, Awka Campus were selected by the researchers through a simple random sampling technique, and they were the faculties of Arts, Education, Engineering, Law and Social Sciences. The researcher met with the President of the respective Students' Faculty Associations and fixed a date with them to access the students, which fell on the same date they held their general association meetings.

On the fixed dates, at the beginning of the meetings, the president introduced the researchers to the students after which the researcher using a convenience sampling technique distributed copies of the questionnaires to all the students available for the meeting. The researchers waited to the end of the meeting to collect the filled questionnaires from the students. Out of six hundred (600) copies of the questionnaire distributed, five hundred and seventy-eight (578) copies were returned, of which fifteen (15) were found invalid due to erroneous completion. Eventually, five hundred and sixty-three (563) copies were used for the statistical analysis of the date.

Design and Statistics

The independent group design was used to text hypothesis 1 while 2X2 factorial design was employed in testing hypothesis II and III. The independent t-test statistics was employed for testing hypothesis I because the variable, biological parenting has two independent levels (both parents and single parent) and when comparing the means of the two independent samples to see if there is a statistically significant difference between them, an independent t-test is used.

The 2-Way Analysis of Variance (ANOVA) statistics was employed in testing hypotheses II and III because there are two independent variables with 2 and 3 levels respectively, kinship care with kin-raised and parent-raised as its levels; geographical location with rural, suburban and urban as its levels and when comparing two variables, each with multiple levels, it is appropriate to use 2-Way ANOVA.

RESULTS

Table I: Summary table of mean and standard deviation for parenting with respect to altruism

	Biological Parenting	Mean	SD	N
Altruism	Both Parents	57.67	12.78	178
	Single Parnet	51.44	8.90	139

Table 1 above shows that students raised by both biological parents has a higher mean score (57.67) than those raised by a single biological parent (51.44).

Table II: Summary table of mean and standard deviation for kinship care and geographical location with respect to altruism.

Kinship Care	Location	Mean	SD	N
Kin parting	Rural	63.42	12.35	96
	Suburban	50.15	9.94	53
	Urban	49.39	10.91	97
	Total	55.03	13.12	246
Biological parting	Rural	62.09	12.10	105
	Subarban	51.94	11.36	53
	Urban	51.21	9.03	159
	Total	54.94	11.65	317
Total	Rural	62.72	12.20	201
	Suburban	51.05	10.66	106
	Urban	50.52	9.80	256
	Total	54.98	12.30	563

Table II above shows that students that had kinship care had a higher mean score of 55.03 when compared with students under biological parenting who recorded a mean score of 54.94 on altruism. For geographical location, students who lived in rural areas recorded higher mean score of 62.70, while those in urban areas had the lowest mean score of 50.52 with suburban areas recording 51.05.

Table III: Summary table of Independent t-test for biological parenting on altruism, testing Hypothesis I.

Variable (Biological Parenting)	N	Mean	SD	DF	T	P
Both Parents	178	57.67	12.78	315	4.89	<.05
Single Parent	139	51.44	8.9			

The result from the table above shows that there was a significant difference in the level of altruistic behaviour of students raised by both biological parents and those raised by a single biological parent ($t=4.89$; $df=315$; $p<.05$). The hypothesis that students raised by both biological parents will show a significantly higher level of altruistic behaviour was accepted.

Table IV: Summary table of 2-Way ANOVA for kinship care and geographical location on altruism testing hypothesis II and III.

Sources	Sum of Square (SS)	DF	Mean Square	F	Sig.
Kinship Care	70.21	1	70.21	.593	.441
Location	19025.28	2	9512.64	80.41	.000
Kinship Care Location	314.13	2	157.07	1.33	.266
Error	65897.03	557	118.31		
Total	1786686	563			

The table above shows that there is no significant difference between the altruistic behaviour of students raised by their parents and those that had kinship care [$F(1, 557)=.593$; $P<.05$) hence the hypothesis that students raised by their parents will show significantly higher levels of altruistic behaviour than those raised by a kin was rejected.

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For hypothesis III, the 2-Way ANOVA table shows that altruistic behaviour differed significantly in respect to geographical location [f(2,557) = 80.41; p<.05). Therefore, the Tukey HSD post hoc analysis was carried out.

DISCUSSION

This study examined the influence of biological parenting, kinship care and geographical location on altruistic behaviour. The researchers hypothesized firstly that students raised by both biological parents will show significantly higher altruistic behaviour than those raised by a single biological parent, which was confirmed or upheld. This reiterates the findings in the study by Mullen (2003), that when correlating altruism with upbringing, young adults who grew up in two-parents families consisting of both biological parents had greater levels of altruism than those who grew up in one parent families. This may be implicated on the principle of observation and modeling, both of which have been generally identified as major channels through which individuals learn and adopt new behaviours. This implies that students who were raised by both parents may have had greater chances of exposure to models of altruism and altruistic acts because they have the advantage of two possible models while students raised by a single parent have just one possible model. It is also plausible that single parents stay away from their children more often, living the child without a significant person to observe/learn from, or even in the hands of bad/ negative models.

Secondly, the researchers also hypothesized that students raised by their parents will show significantly higher altruistic behaviour than those raised by a kin, which was rejected. Purpose this to say that while emphasis has been laid on the crucial role of parents in rising prosocial children; it is not just the presence of the parents but the quality of their parenting that inculcates such positive character in children. Hence, it is not the mere presence of biological parents in raising the children that propagates prosocial and altruistic tendencies in the children but the particular environment created by the parent or parents. An individual raised by his biological parent(s) does not necessarily have better moral and psychological foundation than one raised by a kin, provided the kin possesses the psychological qualities to impact.

Thirdly, the hypothesis which stated that students who lived in the rural areas will show significantly higher altruistic behaviour than those who lived in urban areas was confirmed. This result agrees with some previous studies on helping behaviour differences between rural and urban settlers (Afolabi, 2013; Bridges and Coady, 1996). The differences could be as a result of the unique prevailing culture and practices that are greatly influenced by the population density of the areas. Rural settlements are usually characterized by a small population size and density which encourages cohesive living and neighbourliness because there is a tendency that "everyone knows the other person or at least knows someone that knows the other person" unlike in urban areas which are more populated and without such closely knit human interaction. Again, in this part of the world, belief in gods, God, and law of retributive justice is more prevalent among rural dwellers, who are often less educated.

CONCLUSION

From the findings, the researcher concluded that: 1) Students raised by both biological parents were significantly higher in altruistic behaviour than those raised by a single biological parent. 2) Students who lived in rural areas were also found to be significantly more altruistic than those who lived in urban areas. 3) No significant difference was found in the levels of altruistic behaviour of students raised by their biological parents and those raised by a kin. Thus, biological parenting and geographical location were confirmed as influencing factors of the altruistic behaviour of undergraduates. These findings strongly suggest that altruism is learnt,

hence Nigerian educational system must figure in cultural values into western educational schemes.

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