

Efficacy of Rational Emotive Therapy in Remediating Proneness to Violent Behaviour among Secondary School Students in Katsina State

S. Y. Tsagem, Ph.D

*Department of Educational Foundations
Usmanu Danfodiyo University, Sokoto
shehu.yahaya@udusok.edu.ng*



Abstract

The study investigated the effectiveness of rational emotive therapy (RET) in remediating proneness to violent behaviour among secondary school students in Katsina state, Nigeria. It was guided by two research questions and two hypotheses. A pre-test post-test quasi-experimental design was employed in conducting the study using an adapted Violence Proneness Scale in collecting data, whose construct, content and face validities and a reliability index of 0.74 were documented. Also by using the Children Inventory of Anger, a sample of 120 participants were purposively targeted and exposed to a developed rational emotive counselling package. Paired sample t-test and an independent samples t-test were used to analyze the data generated. Findings revealed that rational emotive therapy is effective in remediating proneness to violent behaviour among the students and that though female students benefit the most, it was concluded that RET proved effective for both genders. Recommendation made was that the main conceptual and practical ideas of RET should be further exploited to particularly target the students through employing professionally trained personnel that can effectively and sufficiently utilize this type of counselling intervention.

Keywords: rational, emotive, therapy, remediating, proneness, violent, behaviour

Introduction

Counselling gave opportunity for behaviour modification and rehabilitation through various techniques among which is Rational Emotive Therapy (RET). Synonymous with rational therapy, rational emotive therapy and rational emotive behaviour therapy, rational emotive counselling technique is a comprehensive, active-directive, philosophically and empirically based psychotherapy which focuses on resolving emotional and behavioural problems and disturbances and enabling people to lead happier and more fulfilling lives. Created and developed by the American psychotherapist and psychologist, Albert Ellis, who was inspired by many of the teachings of Asian, Greek, Roman and modern philosophers, precursors of certain

fundamental aspects of RET have been identified in various ancient philosophical traditions, particularly Stoicism. For example, Ellis' first major publication on rational therapy describes the philosophical basis of RET as the principle that a person is rarely affected emotionally by outside things but rather by 'his perceptions, attitudes, or internalized sentences about outside things and events.'

One of the fundamental premises of RET is that humans, in most cases, do not merely get upset by unfortunate adversities, but also by how they `construct their views of reality through their language, evaluative beliefs, meanings and philosophies about the world, themselves and others (Ellis, 2001). In RET, clients usually learn and begin to apply this premise by learning the A-B-C-model of psychological disturbance and change. The A-B-C model states that it is normally not merely an adversity (or activating event) (A) that contributes to disturbed and dysfunctional emotional and behavioural consequences (C), but also what people believe (B) about the adversity (A). Adversity (A) can be either an external situation or a thought or other kind of internal event, and it can refer to an event in the past, present, or future (Dryden & Neenan, 2003).

The beliefs (B) that are most important in the A-B-C model are explicit and implicit philosophical meanings and assumptions about events, personal desires, and preferences. The beliefs (B) that are most significant are highly evaluative and consist of interrelated and integrated cognitive, emotional and behavioural aspects and dimensions. According to RET, if a person's evaluative belief (B) about the activating event (A) is rigid, absolutistic and dysfunctional, the emotional and behavioural consequence (C) is likely to be self-defeating and destructive. Alternatively, if a person's evaluative belief (B) is preferential, flexible and constructive, the emotional and behavioural consequence (C) is likely to be self-helping and constructive.

Through RET, by understanding the role of their mediating, evaluative and philosophically based illogical, unrealistic and self-defeating meanings, interpretations and assumptions in upset situations, people often can learn to identify them, begin to dispute (D), refute, challenge and question them, distinguish them from healthy constructs, and subscribe to more constructive and self-helping constructs (Ellis, 1994).

In relation to RET's effectiveness in counselling interventions, Abayomi (2013) observed that psychotherapy treatments are effective to different categories of students irrespective of sex, age, or educational level. To buttress this, Flanagan, Allen and Henry (2010) indicated that the addition of the Rational Emotive Behaviour Therapy component to anger management reduced anger as well as depression, while improving social skills, suggesting that the addition of a specialized behavioural

component increased the effectiveness of intervention. Moreover, the study by Fives, Kong, Fuller and DiGiuseppe (2011) demonstrated that gender, anger, and an irrational belief of intolerance of rules frustration predicted physical aggression, while anger and irrational belief of intolerance of rules frustration uniquely predicted indirect aggression; anger alone predicted verbal aggression. Additionally, a study by Berekatain, Taghavi, Salehi and Hasanzadeh (2006) revealed that Rational Emotive Behavioural Therapy (REBT) intervention group was superior to control group in reduction of aggressive behaviours when they examined the effectiveness of group therapy in reducing aggressive behaviours of male adolescents whose fathers have war-related Post Traumatic Stress Disorder (PTSD). Other studies that confirmed the effectiveness of such intervention were those of Campbell and Morales as cited in Yahaya (2014), Lesure-Lester (2002) and Sukhodolsky, Solomon and Perine (2000). Campbell and Morales as cited in Yahaya (2014) maintained that RETs are effective ways to reduce recidivism (relapse into crime) among serious juvenile offenders. Likewise, Lesure-Lester's (2002) study results showed a greater decrease in aggressive behaviours for male adolescents trained in RET behaviour techniques than for those who received indirect therapy. In the same vein, Sukhodolsky, Solomon and Perine (2000) reported that compared to the attention-control condition, participants of treatment groups displayed a significant reduction on teacher reports of aggressive and disruptive behaviour and a significant improvement on self-reports of anger control. To cap it, positive effects of RET were seen in studies involving REBT skills training as noted in a meta-analysis by Gonzalez, Nelson, Terry, Saunders, Galloway and Shwery (2004), who reported that in terms of magnitude, there was a large positive mean effect of REBT on disruptive behaviours and so concluded that REBT appeared equally effective for children and adolescents even though children benefitted the most.

Violent behaviour simply implies hostile, injurious, or destructive behaviour or outlook especially when caused by frustration and it covers a wide range of activities including verbal or physical bullying, extreme temper tantrums, fights in the playground, cruelty to animals, vandalism, starting fires, verbal abuse, and self-mutilation (Berk, 2010). As pointed out by Bardick and Bernes (2008), violent behaviour among students is a major concern to the teachers, parents and all interested with the education of learners. Also, as noted by Basch (2011), gang activities, locker theft, bullying, intimidation, gun use and fighting are among the many forms of school violence.

Though, many instances of human aggression result from symbolic exchanges (for example, insults to our honour or our beliefs), rather than palpable threats to our welfare (Gleitman, Fridlund & Reisberg, 2004), numerous studies have shown interplay of risk factors that can be considered predictive of potential violent behaviour

among adolescents (boys and girls). Such studies indicate such factors to include bullying, aggressiveness and vandalism to school property (Manguwo, Whitney & Chareka, 2011; Chimhenga, 2002), the development stage of the learner (Marais & Meier, 2010), exposure to violence at home, peer group pressure and mental pressure to excel (Barbour, 2011), as a way of seeking attention (Resnick, Ireland & Borowsky, 2004), learning difficulties and poor academic performance (Difonzo, Gall & Quante, 2008), anxiety and depression problems (Gasa, 2005; Poipoi, Agak & Kabuka, 2011), retaliation against provocation and bullying (Bester & Plessis, 2010), high number of students studying in a particular school (Gottfredson, Gottfredson, Payne & Gottfredson, 2005), lack of love and affection by parents or guardians (Resnick, Ireland & Borowsky, 2004), lack of guidance and positive role models at school (Blakeslee, 2003), the school curriculum (Bester & Plessis, 2010), lack of self-regulation skills (Paterson, 2012), and involvement with drugs (Reddington, 2007).

The present study was framed upon consideration of Bandura's social learning theory. Gudyanga, Gudyanga and Matamba (2015) noted that Bandura believed that people are aggressive only if they learn that it is to their advantage to be aggressive. Fieldman (as cited in Gudyanga, Gudyanga & Matamba, 2015) states that Bandura pointed out that one will act aggressively in relation to frustration only if he or she has learned to do so. Bandura also believes that one can learn by observing the behaviour of others, which is what he called modelling. In Bandura's laboratory studies of modelling, children learned to be more aggressive or less fearful as a result of observing the behaviour of models. Accordingly, by demonstrating violent behaviour in the communities one can unknowingly encourage violent behaviour amongst students.

Statement of the Problem

The problem of students' violent behaviour is a serious issue which continues to generate a lot of concern among educationists, counsellors, parents, the government and the general society. Reports of violent acts are common in the society and the schools now, including violent outburst at school, display of a weapon in a rude manner, inciting riot, violence towards teacher, assault, assault with deadly weapon, fire setting, battery, rape, assault with intent to commit murder, voluntary manslaughter and many more. Likewise, the nature of the issue of 'seniority' in the schools had given some students chance to punish others, which when carefully looked into, sometimes, can be categorized as violence in disguise. A disturbing trend is that such violence is noted among the female students too. These and the like have prompted the researcher to conduct this study.

Research Questions

The following generated research questions guided the study:

1. What is the relative effectiveness of rational emotive therapy in remediating proneness to violent behaviour among secondary school students in Katsina state?
2. What is the differential effectiveness of rational emotive therapy in remediating proneness to violent behaviour between male and female secondary school students in Katsina state?

Hypotheses

The following null hypotheses were formulated for the conduct of the study:

Ho1: There is no significant difference between the pre-test and post-test scores of students exposed to rational emotive therapy in their proneness to violent behaviour.

Ho2: There is no significant difference in the post-test scores of the male and female students exposed to rational emotive therapy in their proneness to violent behaviour.

Methodology

This study employed a pre-test post-test quasi-experimental design. The model used was a two-factor classification with one level of the treatment variable. The model measured the effect of the technique (the treatment or independent variable) on gender (Male and Female) in remediating proneness to violent behaviour (the criterion or dependent variable). This type of design required that the participants be tested with the same instrument before and after treatment. The researcher determined the effects of treatment by comparing the results of the participants in the intervention (Olusakin & Aremu, 2009). The intervention group received the rational emotive therapy treatment.

The population of this research was the entire students of secondary schools in Katsina state. The students' population concerned here comprised only senior secondary school students in public secondary schools (N = 118,778), (Planning, Research and Statistics Department, 2019). Subjects for this study were drawn through purposive sampling technique. The study decided on using this technique based on the fact that it aimed at only those students, from the school records, with contact with the police, those who keep bad company, those who are having difficulty adjusting academically, those who are having any problems with peers, those who have broken school laws, those who are exercising unnecessary seniority on juniors and those who have school disciplinary record. Participants were selected based on the degree of the exhibited problem in an ascending order. Furthermore, those selected were asked to respond to sub-scales of frustration, peer relationships and authority relations of the Children Inventory of Anger (ChIA) developed by Nelson and Finch (2000) and only those with a percentile score of more than 75% were then used for the study. The study

specifically chose its samples from schools in the three senatorial districts in Katsina state. Thus, a sample size of 120 students were drawn for the research, this constituted a 95% confidence interval with a Margin of Error of about $\pm 8.9\%$ (Research Advisors, 2006). Furthermore, equal numbers of students were chosen in such a way that a male only school, a female only school and a mixed school were selected to accommodate the gender categorization (See Table 1).

Table 1: The Schools and the Distribution of the Sampled Participants

SN	Schools	School Type	RET Intervention	Sample Size
1.	GSSS K/Kaura, Katsina	Mixed	20(Male) + 20(Female)	40
2.	GC(P) Funtua	Male	40	40
3.	GGSS Rogogo, Daura	Female	40	40
TOTAL			120	120

To achieve this study's purpose the adapted version of Violence Proneness Scale (VPS) was used to obtain relevant information. Originally, it was a scale to assess proneness to commit an act of violence developed by Tarter, Kirisci, Vanyukov, Cornelius, Pajer, Shoal and Giancola, (2002) that was adapted by Yahaya (2014) to suit the cultural setting and subjects in northern Nigeria. In validating the instrument, it was subjected to experts in the Department of Educational Foundations at Usmanu Danfodiyo University, Sokoto going through the modified instrument. A major modification done to the items were that all the 13 items were originally in question forms requiring a simple 'Yes' or 'No' answer, but they were subsequently changed into statement form in a Likert-type response to take 4 (Always) as the highest score and 1 (Never) as the lowest score per item. So, the instrument has 13 as the total lowest score but, 52 as the total highest score. Consequently, analysis of the VPS under the basic factors of school adjustment and peer relations obtained a unanimous agreement as to content and quality of the items, thus it was deemed to have both construct, content and face validities. The reliability was established by the measure of equivalence. This was done through pilot testing by administering the adapted version of the VPS to a group of mixed students (N=80) at G. S. S. S. Natsinta, Katsina and after an interval of three weeks another test was administered with the same set of students. The indices produced from the first and the second administration of the test were correlated and a 0.74 reliability index was realized.

The intervention was based on rational emotive therapy package that spelt out procedural skills and techniques taken in disseminating an efficient counselling intervention developed by Yahaya (2014). The package consisted of weekly counselling sessions for a period that lasts for eight weeks, designed based on the short term nature of the intervention. A pilot study was carried out to validate the package by experts in the Department of Educational Foundations, Usmanu Danfodiyo University, Sokoto and also of the Department of Counselling and Psychology, Ahmadu Bello University, Zaria. It was adjudged to possess both construct and content validities. Through measure of equivalence technique carried out among secondary school students (N=80) in Daura Zonal Directorate of Education, Katsina state, a reliability index of 0.73 was realized. The procedure for intervention for this study was divided into three phases; pre-intervention phase, intervention phase and post-intervention phase. The administration of the instrument and the training interventions were done in the three selected schools at different times and dates. Only respondents who consented were allowed to participate in the study.

In order to test the hypotheses, statistical technique of paired sample t-test was used for hypothesis one while an independent samples t-test statistical technique was used to test hypothesis two. A significant alpha level of .05 was used for all statistical tests.

Presentation of results

Ho1: There is no significant difference between the pre-test and post-test scores of students exposed to rational emotive therapy in their proneness to violent behaviour.

This hypothesis was tested by subjecting the pre-test and post-test scores of students exposed to rational emotive therapy to t-test analysis as presented in table 2.

Table 2: Difference between the Pre-Test and Post-Test Scores in Rational Emotive Therapy

Variables	N	Mean	SD	t-Cal	P-Value	Decision
Pre-Test	120	30.88	6.804	24.471	.000	Rejected
Post-Test		16.08	1.591			

From table 2, a paired sample t-test indicated that scores were significantly lower for the post-test ($\bar{x} = 16.08$, $SD = 1.59$) than for the pre-test ($\bar{x} = 30.88$, $SD = 6.80$), $t(118) = 24.47$, $p < .05$. Thus, the students' proneness to violence reduced significantly after being exposed to rational emotive therapy because the realized p-value is less than the

.05 level of significance. This indicated that there was significant reduction in proneness to violent behaviour among the students due to the effect of rational emotive counselling. Therefore, the first hypothesis which stated that there is no significant difference between the pre-test and post-test scores of students exposed to rational emotive therapy in their proneness to violent behaviour is rejected.

Ho2: There is no significant difference in the post-test scores of the male and female students exposed to rational emotive therapy in their proneness to violent behaviour.

This hypothesis was tested by subjecting the post-tests scores of the male and female students exposed to rational emotive therapy to an independent samples t-test analysis as presented in table 3.

Table 3: Difference between the Post-Tests Scores of the Male and Female Students Exposed to Rational Emotive Counselling

Variables	N	Mean	SD	t-Cal	p-Value	Decision
Male	60	16.20	1.549	.802	.424	Accepted
Female	60	15.97	1.636			

From table 3, an independent sample t-test indicated that scores were lower for the female (\bar{x} = 15.97, SD = 1.636) than for the male (\bar{x} = 16.20, SD = 1.549), $t(118) = .802$, $p > .05$. Thus, the male students' proneness to violence though reduced significantly after being exposed to rational emotive counselling but not more than that of the females because the realized p-value is more than the .05 level of significance. This indicated that there was no significant difference in the reduction of proneness to violent behaviour in relation to their gender due to the effect of rational emotive therapy. Therefore, hypothesis two which stated that there is no significant difference in the post-tests scores of the male and female students exposed to rational emotive counselling in their proneness to violent behaviour is accepted.

Discussion of the findings

Analysis of tables 2 indicated that there was significant reduction in proneness to violent behaviour among the students due to the effect of rational emotive therapy. The relative differences seen here were as a result that the proneness to violent behaviour exhibited by the students before the intervention was much more than what was obtained after the treatment. In other words, it can be concluded that the students benefitted much from the interventions and this has been observed in how they

approached issues unlike before. The students also confirmed that they now have a new perspective on issues, relationships and life in general different from the distorted views of before. This has also been observed through their newly acquired acceptable modes of behaving. The findings is supportive to findings of studies like that of Abayomi (2013), Flanagan, Allen and Henry (2010), Fives, Kong, Fuller and DiGiuseppe (2011), Barekatin, Taghavi, Salehi and Hasanzadeh (2006) and that of Gonzalez, Nelson, Terry, Saunders, Galloway and Shwery (2004) which all pointed to a positive effect of REBT on disruptive behaviours.

Analysis of table 3 indicated that there was no significant difference in the reduction of proneness to violent behaviour in relation to gender due to the effect of rational emotive therapy. The results realized in this study which pointed to the relative effectiveness of rational emotive technique in remediating violent behaviour among students may well have to do with the simple and rational approach of the technique which must have appealed to the understanding and nature of the respondents. Furthermore, during the intervention it has been observed that the respondents easily responded and understood the processes involved. The finding is in support of earlier findings of Campbell and Morales as cited in Yahaya (2014), Lesure-Lester (2002), Sukhodolsky, Solomon and Perine (2000) which all pointed to the fact that, irrespective of gender, everyone benefits from RET techniques of counselling.

Conclusion

Based on the findings of the study, the conclusion drawn was that rational emotive therapy was effective in reducing students' proneness to violent behaviour; and though there was an observed difference between male and female students exposed to rational emotive therapy in their proneness to violent behaviour, both genders benefitted equally.

Recommendations

Since rational emotive therapy has proven adequately effectual in remediating proneness to violent behaviour among the students, it is hereby advocated that its main conceptual and practical ideas should be further exploited to particularly target them through employing professionally trained personnel that can sufficiently and effectively utilize this type of counselling intervention.

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