

Effects of Peer Tutoring and Cognitive-Behaviour Therapies in the Reduction of Delinquent Behaviours among Secondary School Adolescents in Bayelsa State

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Abstract

This study sought to determine the effects of Peer tutoring (PT) and Cognitive-Behaviour Therapies (CBT) on delinquent behaviour reduction among secondary school adolescents in Bayelsa State. Two research questions and two hypotheses guided the study. It was quasi-experimental research design. Samples of sixty seven (67) students in senior secondary school (SSI&II) were identified as delinquent (drug addiction) using Delinquent Behaviour Scale (DBS). The experimental groups were treated with peer tutoring and cognitive behaviour therapies for six weeks while the control group received no treatment. The instrument was validated by test experts and the reliability was established as 0.84, using Cronbach alpha statistics. Data collected were analyzed with mean, standard deviation and paired t-test. Results showed that, peer tutoring (PT) and Cognitive behaviour therapy (CBT) had significant effect on the reduction of drug addiction based on their pretest and posttest mean scores. Based on the results, recommendations were made including that school management, community leaders, youth leaders and other stakeholders in the society should liaise with guidance counsellors to employ these strategies, and organize seminars and conferences to train youths on the resultants effect of drug addiction.

Keywords: Peer, Tutoring, Cognitive-Behaviour, Therapy, Delinquency, Drug, Addiction, Adolescent

Introduction

The continuous rise in crime amongst adolescents in the society has been an issue of great concern. The spate of violent acts in the society and schools to be specific is of a distressing rate. As a society develops, many changes take place technologically, economically, socially, politically, morally and culturally. The modifications might have negative or positive outcomes. In the instance of social change, adolescents' delinquency seems to be among the most unfortunate outcomes. When adolescents are

vulnerable to different cultures, new norms and values which result from sophistication, disorganization and re-organization of the society, these tend to drive them into involving in delinquent acts. Nwankwo, Kemjika and Ekeh (2006) stated that delinquent act is a deviation from the social codes of people or society.

According to Hall cited in Soetan (2012), adolescence is a period of pressure and storm but if properly guided, this period might be the most interesting because, adolescents have all it takes to fully maximize their talents and put their energy to great use without engaging in delinquent behaviours. Adolescent is the transitional period in the middle of childhood and adulthood. The period is conveniently put amid the years of 10 and 19 (Soetan, 2012). Adolescence is a time of speedy growth when the individual changes physically, sexually, emotionally, psychologically, morally, intellectually and socially from dependence and the protective boundaries to social productivity. It consists of multitude of emotional peaks and valleys, ranging from high exhilarating highs to depressive lows, which may create problems of adjustment for the young person (Fischman 1987 cited in Soetan, 2012). Adolescence marks the period when many youngsters take the risk to assess themselves and also begin the procedure of getting to know individual identities. Part of this process includes questioning previously accepted beliefs and keeping distance from adult influences (Nwolisa, 2011). Part of adolescent thinking, refers to that in which instant needs precede over long term ones and without being skilled and knowledgeable enough to make healthy choices, there is the tendency for them to go into delinquent behaviour (Olusakin & Nwolisa, 2010).

Delinquent actions displayed by adolescents, which is the main point for discussions in this research, is drug addiction. Drug is any substance which may have medicinal functions, enhances the body or has some other consequence when taken or put into a human body or that of another animal which cannot be regarded as food or exclusively food (Wikipedia, 2016). In effect, drug is any chemical substance that once it gets into the body, alters the body system (Jabo & Muduru, 2009). Okoye (2001) defines drug as a chemical element that is capable of changing the biological function through its actions. Therefore, drug refers to substances taken into the body by swallowing, eating, and drinking and/or through injection that changes the body's functions.

Addiction as habit refers to drug seeking and intake that individuals find hard to control, not minding its dangerous consequences. At first, most persons may wilfully decide to take drugs, but incessant use of drug may bring about brain changes that could make it difficult for an addicted person to control their drug intake thereby interfering with their drug resistance ability.

Drug addiction, according to Singleton and Wolfson (2009), is a state of periodic or chronic intoxication detrimental to the person and society. They further opined that drug addiction results from frequent intake of drugs. Therefore, drug addiction is a condition with which the user has developed a psychological dependence on substance and that such person finds it difficult to refrain from the intake of such drugs. The addict has an intense desire or need to continuously take the drugs and will acquire it by all means which includes stealing of money, breaking into pharmacy shops and getting intricate in hostile act during the process.

Today, much Nigerian adolescence engages in illicit drugs; such drugs include alcoholic drink and cigarette smoking, while Nigeria gradually journeys from the position of a drug-consuming nation to that of a drug-producing one. Other substances like Indian hemp, alcohol which is usually produced here in Nigeria and some other ones like Methamphetamine and tablet with codeine which can intoxicate are mostly found in schools (Staff, 2012).

Peer tutoring is an instructional system which allows students to teach their fellow learners (Harris, 2002). It is the procedure in which proficient pupils with minimal training and with guidance from teachers help learners at equivalent grade level to acquire a skill or concept (Thomas, 2000). Peer tutoring is explained as a procedure which is a teaching plan where students are trained by peers, whom had been taught and supervised by their class teachers. It comprises of students working together in pairs. The approach is used as a support to teacher-directed teaching in the schoolroom. Peer tutoring is an exceedingly powerful method of improving students' academic, social, and behavioural operative which goes beyond typical teacher-directed instruction.

Zahn (2011) described peer tutoring by way of "one-on-one assistance in scientific programs when teaching alone does not meet their academic needs." It is vital to solicit for assistance from the teacher first, as peer tutors cannot and is not projected to replace the teacher's role, but if extra help is necessary then a peer tutor could be of help. According to Beasley (1997), "Peer tutoring (or peer mentoring, proctoring, and supplemental instruction) is a cheap but effective means of providing academic support to learners throughout a valuable instruction learning and resource." This involves training more knowledgeable learners to tutor novice learners in a combined learning experience in which both parties richly benefit in various ways, including improved understanding and performance on the issue on ground, improved confidence and study skills, coupled with an ongoing friendship.

Cognitive-behavioral therapy, according to Cherry cited in Womiloju and Ayodele (2016), is a therapeutic measure that helps client to grasp how views and emotional state impact behavior. It is a joint approach where the psychotherapist and the clients work collectively to recognize connections between his/her dysfunctional thought and feelings thus to modify maladaptive cognitions in the “here and now,” with the therapist providing strategies for the individual to effectively manage the situations; to manage distress, identify the errors in the reasoning pattern and providing alternative explanations to faulty beliefs.

Cognitive-behavioral therapy is centered on the notion that thoughts bring about behaviours, and these thoughts determine the way in which individuals perceive, interpret, and give meaning to the environment. Thus, maladaptive behaviours can be changed by modifying thought processes, not minding the differences in our environment. Cognitive-behavioral therapy is concerned with psychosocial therapy which believes that maladaptive, or irrational thinking patterns are the bases for maladaptive behaviour and negative emotions. Maladaptive behaviour is defined as a behaviour that interferes with an individual’s activities of daily living or ability to adjust to and participate in a particular setting. Behaviours that limit people from operating and lessen life gratification are referred to as maladaptive behaviours. Considering the high involvement of adolescents in the use of drugs, violence, unprotected sex and its hampering effects on them, their families and inadvertently the Nigerian economy, it becomes pertinent to determine measures in helping adolescents with delinquent behaviours. Odigie (2013), in her investigation, examined the effectiveness of Cognitive Behavioural Counselling Model in managing adolescents’ psycho-social crises. A sample of 30 students was randomly selected from 100 volunteer adolescents’ students. A 10-item psycho-social stress reaction questionnaire designed by the researcher was used for the study. Chi-square analysis was used to analyze the data. Results indicates that problem-solving and self-talk training of cognitive behavioural therapy counselling model enhanced adolescent positive reactions to psycho-social stress and reduce propensity to drug addiction in adolescents. It is in the light of this that this study was focused on the use of peer tutoring and cognitive behaviour therapy in managing delinquent behaviour of secondary school adolescents.

Research Questions

Two research questions were answered in this study.

1. What is the effect of Peer Tutoring on the reduction of drug addiction among secondary school adolescents?
2. What is the effect of Cognitive Behaviour Therapy on the reduction of drug addiction among secondary school adolescents?

Hypotheses

The following null hypotheses were tested at 0.05 level of significance:

Ho1: There is no significant effect of Peer Tutoring on the reduction of drug addiction among secondary school adolescents.

Ho2: There is no significant effect of CBT on the reduction of drug addiction among secondary school adolescents.

Methodology

The study design adopted in this research is quasi-experimental. Quasi-experimental research design according to Levy and Ellis (2011), Leedy and Omrodi (2010), and Kpolovie (2010), is an experimental design which the researcher had limited leverage and coverage over the participants in the study. They also asserted that in quasi-experimental research, the researcher have no leverage to ensure the sample selected is homogenous as desirable.

The researchers administered Delinquent Behaviour Scale on all the students in SS1 and SS11 with a total population of 305; out of which 67 were identified as delinquents. Those whose mean scores were above 25 were regarded as delinquents and so were conscripted for this research. The second instruments that was used for this study was the adapted Leed Dependency Questionnaire (LDQ) that was developed by Raistrick, Bradshaw and Tober (1994). The instrument was modified and adapted to Nigerian situation. The scale consists of 10 (Ten) items for the evaluation of drug dependency/addiction. The items on the instrument were responded to in a four point likert scale ranging from never (1), sometimes (2), often (3) and nearly always (4). The internal reliability method using Cronbach Alpha was used because it measures inter-item correlation. The reliability process involved one time administering of the questionnaire. Thirty copies of the instrument were given to thirty students that are within the population but who were not in the main study. The reliability was calculated to be 0.84.

Prior to treatment, delinquent behaviour (drug addiction) was first diagnosed on the students through the use of Delinquent Behaviour Scale (DBS). The sample was randomly assigned into experimental groups and control group. In doing this, balloting was used to assign subject into experimental and control groups. (A, B, C, D) in which

A group received Peer tutoring treatment (PTT), B group received Cognitive Behaviour Therapy (CBT) and C group also received Peer Tutoring and Cognitive Behaviour Therapy (PT and CBT combined) and D group received no treatment, (Control group). Peer tutoring and cognitive-behaviour therapies treatment plan was administered in 8 sessions that spread across a period of 6 weeks. The DBS was re-administered to the groups after the 6 week treatment. For the purpose of this article, data generated from groups A and B were used as they were relevant to the objectives of this study. Data collected were analyzed using mean and Standard deviation which were used to answer the research questions, while paired t-test was used to test the hypotheses.

Presentation of results

Research Question One: What is the effect of Peer Tutoring on the reduction of drug addiction among secondary school adolescents?

Ho1: There is no significant effect of Peer Tutoring on the reduction of drug addiction among secondary school adolescents.

Table 1: Mean, Standard Deviation and paired t-test on the effect of PT on the reduction of drug addiction

	N	Mean	Std	Reduction Mean	df	t	P
Pretest		28.58	3.85				
	19			-16.34	17	16.81	0.00
Posttest		12.21	2.27				

Summary of results on table 1 indicates that pretest mean and standard deviation scores of drug addiction on students taught with Peer Tutoring was 28.58 (SD =3.85) while their posttest mean and standard deviation scores were 12.21 (SD =2.27). This yielded a mean reduction of 16.37 (posttest-pretest mean). This showed that Peer Tutoring was able to reduce drug addiction of students by 16.37. In order to determine whether the reduction of drug addiction was significant, a paired t-test was applied. With a degree of freedom of 17, the calculated t-test value of 6.81 was significant at 0.00 at alpha level of 0.05. Therefore the null hypothesis was rejected. By implication, Peer Tutoring significantly reduced addiction of students to drug, as determined by their pretest and posttest mean scores.

Research Question Two: What is the effect of Cognitive Behaviour Therapy on the reduction of drug addiction among secondary school adolescents?

Ho2: There is no significant effect of CBT on the reduction of drug addiction among secondary school adolescents.

Table 2: Mean Standard Deviation and paired t-test on the effect of CBT on the reduction of drug addiction

	N	Mean	Std	Reduction Mean	df	t	P
Pretest		35.05	2.95				
posttest	19	13.74	2.42	-21.32	17	23.64	0.000

The results summarized in table 2 show that the pretest mean and standard deviation scores of drug addiction was 35.05 (SD = 2.95) while their posttest mean and standard deviation scores were 13.74 (SD = 2.42). This yielded mean reduction of 21.32 (posttest-pretest mean). This showed that cognitive behaviour therapy reduced drug addiction of students' by 21.32. In order to decide if the reduction of drug addiction was significant, paired t-test was applied. With a df of 17, the calculated t-test value of 23.64 was significant at 0.00 when exposed to alpha level of 0.05. Therefore, the null hypothesis was rejected. By implication, cognitive behaviour therapy significantly reduced addiction of students to drug, as determined by their pretest and posttest mean scores.

Discussion of findings

The results of this study in relation to the two research questions and two hypotheses are discussed under the following:

The effects of Peer Tutoring on the reduction of drug addiction among secondary school adolescents

In table 1, findings showed that Peer Tutoring significantly reduced drug addiction based on their pretest and posttest mean scores. The pretest mean scores of addiction to drug participants taught with Peer Tutoring was 28.58 (SD = 3.85) while their posttest mean and standard deviation scores were 12.21 (SD = 2.28). This yielded a mean reduction of 16.37; this showed that Peer Tutoring was an effective therapy that reduces the drug addiction of participants by 16.37. Hence, there was a rejection of the null hypothesis. This indicates that the therapy, Peer Tutoring, has effectively reduced drug addiction in secondary school adolescents.

The effect of Cognitive Behaviour Therapy on the reduction of drug addiction among secondary school adolescents

In table 2, finding revealed that Cognitive Behaviour Therapy significantly reduced drug addiction based on their pretest and posttest mean scores. Their pretest mean and standard deviation of drug addiction with participants taught with Cognitive Behaviour Therapy scores were 35.05 (SD = 2.95), while their posttest mean and standard deviation scores were 13.74 (SD = 2.42). This yielded a mean reduction of 21.32; this showed that Cognitive Behaviour Therapy reduced drug addiction of participants by 21.32. Hence, there was a rejection of the null hypothesis. This indicated that the therapy, CBT, has effectively reduced drug addiction in secondary school adolescents. The result of this study is in congruent with Odigie's (2013) study that examined the effectiveness of cognitive behavioural counseling model in managing adolescents' psycho-social crises. Results indicated that problem-solving and self-talk training of cognitive behavioural therapy counselling model enhanced adolescent positive reactions to psycho-social stress and reduced the tendency on addiction to drug in adolescents.

Conclusion

Established on the results of this review, the researchers concluded as follows:

1. Peer tutoring is an effective therapy on the reduction of drug addiction amongst students.
2. Cognitive behaviour therapy which involves the learners to make a rethink to alter unhealthy beliefs and unrealistic expectations has been established to be effective on the reduction of drug addiction.

Recommendations

Based on the findings of the study, the following recommendations were made:

1. Teachers should train students to become peer tutors; peer tutors will in turn train other students to control drug usage amongst the peer group or classmates. These peer tutors will become good role model to the peer group and the society at large.
2. Students identified as drug addict should be stimulated to avail themselves of these psychological therapies on peer tutoring and cognitive-behaviour therapy.

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