

EFFECTS OF SINGLE AND COMBINED TREATMENTS ON THE SOCIAL MALADJUSTED BEHAVIOR OF YOUTHS IN NIGERIAN SECONDARY SCHOOLS.

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ABSTRACT

This study examined the effects of single and combined treatments on the social maladjusted behavior among youths in Nigeria Secondary Schools. A 4×2×2 factorial design was used involving a sample of 120 maladjusted youths who were randomly selected through simple and stratified random sampling techniques. Three self-designed instruments were used, namely: Moral Assessment Scale; social skills Questionnaire and the combination of both. The subjects were assigned into three experimental groups and one control group: social skills training (SSQ Group 1); Moral Development Training (MDT Group 2) and the combination of the two (SSQ plus MDT Group 3).

ANCOVA was used to analyse the data. The results showed that SSQ was effective in improving the social maladjustment of youths, while SSQ plus MDT reflect more improvement on the social maladjustment. In view of the outcome of the findings, the use of social plus moral skills training was recommended for modifying the social maladjustment problem of youths in Nigeria Secondary Schools. Parents' supports are also enlisted in all behavior treatment programs.

Keywords: Social maladjustment, moral skills, social skills, Nigeria youths, combined treatments.

Introduction

Behavior deals with the ways individuals express themselves in actions and words. The behavior of a person may be determined by social experiences, values and expectations of individuals. This may assist us to know and categorise such a person as either maladjusted or adjusted. These are people whose behavior at one time or the other violates the set rules and acceptable conduct in a socialized environment. Most maladjusted behavior may show forth in forms of aggression, lack of intimate relationship, low self-esteem, hatred, resisting control, quarrelsomeness, violation of school rules and regulations as identified by Gerry-Eze (2000).

Psychosocial adjustment is very pivot for achieving human social relationships, self-actualization, assertiveness and individual identity. Oyinloye and Salami (2010) stressed that attainment of this will assist an individual to live a life of full integration, satisfaction and enhanced productivity. They expressed further that for an individual to achieve full integration and positive identification with others, such an individual must be well adjusted, achieve behavioral integration, and relate well with others in his/her environment.

Maladjusted behavior becomes so worrisome from the numberless of different devastating effects they produced on individuals, society and the nation. The moral, social and cultural values seem to have been seriously eroded.

Nigeria seems to be a nation in moral crisis which appears to be affecting every segments of life. The country has been witnessing religious and political intolerance, financial frauds, ethnic violence, high sexual Immoral practices. The cause of which may be attributed to social and moral maladjusted behavior. These are been exhibited on daily basis by the Nigerian youths. The nation appears not being saved with hostility and lack of trust in one another. The insecurity problem in the nation today could not be far fetched from lack of appropriate social and moral skills by the youths.

Social and moral maladjustment of youths have generated concern with different efforts from government, non-government organisations, religious institutions and learning institutions in order to bring sanity and high socio-moral probity to the youths. The awfulness of the lives of the maladjusted youths make them vulnerable to risks of low personal relationship, depression, negative self-image, anxiety and frustrations. According to Policy Centre (2007) youths that exhibit social and moral maladjusted behavior may face other problems such as withdrawal, drop out, play truancy, isolation and school phobic reactions. They may also be disruptive and disturbing, hyperactive and lack concentration.

The problems posed by social and moral maladjustment have attracted definite and purposeful attempts to introduce training programmes as a process for helping youths to develop the knowledge, understanding and skills that could enhance positive and adjusted behavior. Training programmes are interventions that are designed to influence affective, cognitive and behavioral system in young people.

As pointed out by Walsh (1990) such training could promote character through moral and social skills training for youths such as honesty, justice, cooperation, positive assertion, empathy, tolerance, self-control, dependability and the like.

In the same vein Queensland Government (2008) sees social and emotional learning as an approach that teaches students to regulate and express the social and emotional aspects of their lives, which enable them to operate successfully in the world and manage life risks. On this note, it is considered that moral and social skill training may assist in remediating the maladjusted behavior of youths. It is assumed that if these skills are properly inculcated into the youths, it could enhance peace and harmonious living in the nation whose peaceful coexistence is currently being threatened. Baron (2000) as supported by Queensland Government (2008) identified core areas around which moral and social skills

training could be developed such as: Moral awareness, self management, social awareness, relationship skills, assertiveness, decision making. The outcome from such inventory could possibly help in development of training programmes that focus on promoting desired skills.

Moral and self-awareness was explained to include identifying and recognizing moral values, recognizing emotions, moral personal interests and strengths and maintaining a well-grounded sense of self-confidence. Self-management refers the ability to regulate emotions, handle stress, control impulses and motivate oneself to persevere in overcoming obstacles, setting and monitoring progress towards the achievement of personal and academic goals and also expressing emotions appropriately. Social awareness in the expression of Queensland Government (2008) is to take perspective of and empathise with others, recognizing and appreciating individual and group similarities and differences. Obidoa and Onwubolu (2010) explained that relationship skill are those that deal with establishing and maintaining healthy and rewarding relationships based on cooperation and resistance to inappropriate social pressure (assertiveness), preventing, managing and constructively resolving interpersonal conflict; seeking help when needed. Responsible decision making should be made with consideration of all relevant factors which include applicable ethical standards, safety concerns, and social norms. Obviously, these core areas of social and moral skills described assisted this study in designing the tools and treatment packages that could help in inculcating the moral and social skills that may assist in remediating the maladjusted behavior of youths in Ekiti state.

Some educators may believe that dealing with social and moral maladjustment is the responsibility of parents. Many educators may not feel qualified to identify, prevent and intervene with the maladjusted. Despite these reservations educators should take on the challenge of dealing with maladjusted behavior for several reasons. Teaching the “whole child” is a desirable goal. Social and moral skills are often prerequisite to learning. Moral and social skills may be as important as reading and math for students. The question then is that, if educators do not focus on the development of skills, then who will? Maladjusted behavior may detract both the maladjusted and victims ability to learn.

Harrington (2012), explained that good intervention plans for maladjusted will specify consequences as well as pro-social skills building. Good intervention plans specify training needs, the collaborative roles of staff, faculty and administration. He however reported that teachers, who received bullying awareness training, felt a personal responsibility for students’ behavior. While on the other hand students who received combined treatments of communication training and problem solving conflict resolution skills reported better self-control and emotional regulation skills. Harrington (2012) submitted that bullies should be taught new social skills. The whole classes should be taught tolerance and understanding of diversity in race, gender identity, disability,

religion, ethnicity, language, physical attributes, age and sex. For instance, rather than requesting students to stop fighting, teachers might work on developing skills of respect between students, an environment of tolerance, understanding and empathy. Alternative behaviors that are incompatible with the maladjusted behavior are taught such as friendship making skills, listening skills or calm down skills. This is assumed could solve the problem of aggression, vandalism, thurgery and so on.

Skills training according to Spiegler and Guevremet (2002) refer to treatment packages designed to overcome clients’ skills deficits. Skills training may include modeling, direct instruction, prompting, shaping, reinforcement, behavior rehearsal, role-playing and corrective feedback. Matson, Sevin and Box (1995), submitted that skills training has been extensively used to teach social and moral skills to both children and youths including specific social interaction skills related to social isolation and sexual behaviors.

Spiegler and Guevremet (2002) observed that social skills training have been beneficial with children and youths who engage in aggressive and disruptive behaviors. In specific terms Greves, Openshaw and Adams (1992) noted that social skills had been effective in treating, sexual problems, and interaction with others, while normal skills had been used for youths with habitual violation of others rights.

Crambrill (1995) reported that numerous studies have demonstrated the efficacy of assertive training (one of the skills in social and moral training) for clients with diverse problems across the age spectrum. In specific terms, he revealed that assertion skill training is being used increasingly to prevent sexual immorality there by preventing HIV Infection among vulnerable populations and those with heterosocial skills (the social behaviors necessary for initiating, maintaining and terminating social and sexual relationships with persons of the opposite sex).

Nigerian youths seem to be embroiled in social and moral crisis. Even a cursory glance would indicate that the society is changing morally and socially in ways that produce discomfort for most people. Most observers of situations perhaps believe that the state of and lack of proper social and moral skill training might be responsible for the upsurge of maladjusted behavior of youths.

Research Rationale:

Diverse programmes and series of efforts have been put in place and also suggested to correct maladjusted behavior among youths. These seem not to have yielded expected results probably because skills of moral awareness and other moral variableness are not fully fussed into the skill training programs. More so, most of the programmes may lack the essential psychological principles of human behavior. These reasons inspired the idea of this research, that youths may be exposed to moral and social skill training which assist them to respond constructively in life situations.

Methodology:

The 4×2×2 factorial quasi experimental pretest, post test, control group design was adopted in this study. The design is shown below.

Group	Pre-test	Treatment	Post test
Experimental group I	O ₁	X ₁	O ₂
Experimental group II	O ₃	X ₂	O ₄
Experimental group III	O ₅	X ₃	O ₆
Control Group	O ₇	-	O ₈

Where O₁, O₃, O₅, O₇ are pretests; O₂, O₄, O₆, O₈ are post tests, X₁ is a social skill Training (SST), X₂ is Moral Development Training (MDT), X₃ is Social Skill and Moral Development Training, while - is no treatment.

Sample:

The target population for the study was the maladjusted youths in Ekiti State public Secondary Schools. There are 170 public Secondary Schools at the period of the study. 120 Senior Secondary School Students were selected through multi-stage sampling technique from the three senatorial districts out of the existing 16 local government areas in the State. Two Senatorial districts were also randomly selected. Simple random sampling was used to select one school from each sampled local government areas (4 schools were used). Initially, a total of 600 youths were involved in the preliminary screening exercise through maladjusted behavior Questionnaire. After scoring, the mean was determined. Any score that is less than mean minus 1 standard deviation is regarded as low maladjustment. Any one that is between mean plus 1 standard deviation is referred to as moderate maladjustment. Any score that is greater than the mean plus 1 standard deviation is regarded as high maladjustment. Socially maladjusted mean scores are between ≤ 33.29 and ≥ 41.78 , while the morally maladjusted mean scores are between ≤ 35.19 and ≥ 44.65 . Only 469 were available for screening. Their responses were categorized, 325 respondents were socially maladjusted, and 190 respondents were morally maladjusted, while 85 respondents were socially and morally maladjusted. Those who were maladjusted in each school as categorized above were given Moral Assessment Scale (MSAS) and Social Skills Assessment Questionnaire (SSQ) respectively as pretest for further assistance to prime down the number and determine those who are to participate in the study. This enables the researcher to select 30 subjects from each school through stratified random sampling technique to gather a sample across gender.

The participants who were selected were randomly assigned to four groups (three experimental and one control group). Three experiment groups were formed thus:

- (i) Social Skill Training (SST)
- (ii) Moral Development Training (MDT)
- (iii) Moral Development plus Social Skill Training (MDT plus SST)

And one Control group.

Table 1: ANCOVA on the Social behavior of respondents exposed to social skills training and control group.

Source	SS	Df	MS	F-Cal	F-table
Corrected Model	2415.851	2	1207.925	8.361	3.23
Intercept	12393.966	1	12393.966	85.786	4.08
Covariate (pretest)	171.034	1	171.034	1.184	4.08
Group	2163.815	1	2163.815	14.977	4.08
Error	8235.133	57	144.476		
Corrected Total	10650.983	59			
Total	538745.000	60			

Each group belongs to a school to avoid interference. Research assistants were the school counselors of each school with the assistance of teachers. A day pre-treatment training based on the experiment package was given to the research assistants in each of their schools. This lasted for a week. Four sessions were conducted over four weeks based on treatment packages.

Treatment Stages:

Group A was exposed to social skills Training (SST); Group B to Moral Development Training (MDT) while Group C was exposed to both SST and MDT. The treatment took place simultaneously in three experimental groups, while no treatment was given to the control group. The SST include trainings in intrapersonal, self-awareness, assertiveness, interpersonal, Stress tolerance, Self-control and adaptability skills; while MDT contains training in skills such as moral awareness, empathy, respect, self-discipline. Members in the three experimental groups took part in the treatments with the aim that acquiring these skills will assist them in correcting their moral and social maladjustment problems. Participants were given assignment and treatment while assignments were also given to evaluate their responses to training on each skill. Posttest was given to all the four groups after the treatment.

Data Analysis:

The data obtained for this study were analysed to determine the effects of single and combined treatments on the social maladjusted behavior of youths. The ANCOVA inferential analysis was used while multiple classification analysis was also used to know the effect of treatments on the dependent variables.

The results of the study were presented according to the hypothesis that guided the study.

Hypothesis 1: There is no significant difference in the social maladjusted behavior of respondents exposed to social skills training and those not exposed.

2. There is no significant difference in the social maladjusted behavior of respondents exposed to social skills training and respondents exposed to social plus moral skills training.

P < 0.05

Table 1 shows that f-cal (14.977) is greater than f-table (4.08). The null hypothesis is rejected at 0.05 level of significance. Therefore, there is a significant difference in the social behavior of respondents exposed to social skill training and those not exposed. The result further reveals the covariate (pretest) value of .281 f-cal. (1.184) less than f-table (4.08), which indicates no significant difference in the result of pretest and post-test. On the other hand the result indicates that there is a significant interaction between the group and treatment with f-cal (85.786) greater than the f-table (4.08) at 0.05 level of significance.

Since it is evidently revealed that there is a significant difference in the social behavior of respondents exposed to social skills training and those not exposed, multiple classification analysis was further used to know the effect of the treatment on the dependent variables.

Table 2: Multiple Classification Analysis of Social Behavior of Respondents in Social Skills Training and Control Group.

Variable Category +	Grand Mean=93.82				
	N	Unadjusted Deviation	Eta	Adjusted for independent Covariate +	Beta
Social	30	5.21		5.08	1.54
Control	30	-6.12		-6.00	
Multiple R ²					.024
Multiple R					.154

The table shows that with a grand mean of 93.82, youths exposed to social skills training obtained the highest adjusted post-test mean score of 98.90 (93.82 + 5.08), while those in control group had an adjusted post-test mean score 87.82 (93.82 + (-6.00)). This implies that social behavior in youths exposed to it than those not exposed to the training. Also R² which is the coefficient of determination indicates the joint contribution of all the independent variables (Social behavior) which stands at 2.4%. while .154 (R) is the value of how the various independent variables relates to dependent variable e.g ;Y=X₁ + X₂.

Beta shows the strength of prediction of each independent variables to the dependent variable.

Table 3: ANCOVA showing Social behavior of respondents exposed to social skills training and those exposed to social plus Moral skills training.

Source	SS	Df	MS	F-Cal	F-table
Corrected Model	2415.851	2	1207.925	8.361	3.23
Intercept	12393.966	1	12393.966	85.786	4.08
Covariate (pre-test)	171.034	1	171.034	1.184	4.08
Group	2163.815	1	2163.815	14.977	4.08
Error	8235.133	57	144.476		
Corrected Total	10650.983	59			
Total	538745.000	60			

P < 0.05

Table 3 shows that f-cal (14.977) is greater than F-table (4.08) at 0.05 level of significance. The null hypothesis is rejected. Therefore, there is a significant difference in the social behavior of respondents exposed to social skills training and respondents exposed to social plus moral skills training.

Multiple classification analysis was used to know which of the groups exposed to social skills and that exposed to social plus moral skills training was more affected by the treatments.

Table 4: Multiple classification analysis on social Behavior of youths in social skills and social plus Moral skills training.

Variable Category +	Grand Mean=93.82				
	N	Unadjusted Deviation	Eta	Adjusted for independent Covariate +	Eta
Social	30	6.11		5.65	1.54
Control	30	-6.12		6.98	
Multiple R ²					0.24
Multiple R					.154

The multiple classification analysis reveals that, with a grand mean of 93.82, respondents exposed to social plus Moral skills training with an adjusted post test mean score of 100.80 (93.82 +6.98) than those exposed to social skill training with an adjusted post test mean score of 99.47 (93.82 +5.56). It can be inferred that social plus Moral skill training produce better social plus moral skill training, though the range is very low. The joint contribution of the independent variables (Social and social plus moral) to the dependent variable (social behavior) was 2.4% which was considered relatively low. Each of the independent variables has the strength of prediction of 15.4% (Beta) to the dependent variable. This was considered low.

Discussion:

The findings of this study show that social skill training is potent in modifying the social behavior maladjustment of youths. However, combining Moral with social skill strengthens the efficacy of the treatments the more in modifying youth's maladjusted behavior. The groups that received no treatment at all maintained their original position of social maladjustment. This was in line with the research findings of Hundert, Boyle, Cuningham, Heale (2000) that the students who were assigned to social skills (SS) showed positive playground behavior and appropriate classroom behavior in all school programs while those who were not given the treatment worsened in their school behavior. Horne, Bartolomucci, and Newman (2003) indirectly support this finding through the use of positive Behavioral Supports (PBS), which is a school wide behavioral Management approach that could be applied to prevent and intervene in maladjusted behavior. The programme encompassed all social and moral skill variables. Newman and Haaga (1995), also clearly agreed that skills training has been employed to alleviate a wide array of skills deficits, which include cognitive, problem solving, self-appraisal, stress management and so on.

Conclusion:

The Study demonstrates that all the treatments (both Single and combined) are effective in handling the youths social maladjusted behavior . Nevertheless, the combined treatment shows better improvement on the behavior problem. Counsellors need to teach new skills such as anger control, listening skills, apology skills, restorative and character or moral education. This appears necessary since it seems as if moral and social behavior affects each other. Teaching these skills will enhance the continuity of the prevention programmes and strengthening it. Parents' supports are enlisted in all behavior treatment programmes.

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