

THE EFFICACY OF COGNITIVE BEHAVIOURAL APPROACH IN MANAGING ADOLESCENTS PSYCHOSOCIAL CRISIS IN NIGER DELTA UNIVERSITY, BAYELSA STATE

By

Dr. Johnson Etaverho Maciver

*Department of Educational Foundations
Niger Delta University
Wilberforce Island
Bayelsa State*

And

Oderhohwo Akpojotor Joseph

*Department of Educational Foundations
Niger Delta University
Wilberforce Island
Bayelsa State*

Abstract

This study examined the application of model in managing adolescent psychological crisis in Niger Delta University among the 300 level and 400 level counsellors in training. A simulated problem situation, which is a laboratory approach, was used in determining the psycho-social crisis and propensity to drug-abuse in adolescents was adopted with quasi-experimental design. 60 counsellors in training were randomly selected from 200 volunteer adolescent counsellors in training in Niger Delta University, Bayelsa State. The instrument was a 10 items psycho-social Stress and Proponent (30-membered control and experimental groups respectively) before and after treatment. It was found that problem-solving and self-talk skills training of cognitive behavioural model enhance adolescent positive reactions to psycho-social stress and reduce propensity to drug abuse in adolescents. For the parents, it was recommended that they should use counselling services for the management of the psycho-social crisis and propensity to drug abuse of their adolescent children in the university.

The adolescence period of the human being is full of stress and restiveness, between the ages of 11 years to 19 years. It is a period of storm and stress for the growing adolescent. Some scholars put the age of the adolescence bracket at 13 and

Academic Excellence

22. During this period, the growing adults achieve emotional and economic independence from their parents. The adolescence is a period of heightened conflict with parents, mood disruptions and risk behavioural outburst (Daris&Palladino, 2007). These two researchers opined that in traditional cultures the adolescents storm and stress is lower compared to the western worlds.

From the above lining, Hillier and Harrison (2004) opined that psychosocial crisis is brought about by the fact that some adolescents find the identity expected of them to be acceptable but are unable to replace it with an acceptable alternative, thus developing a negative identity by adopting behaviours opposite to those that are expected of them. This condition may culminate into frustrations, especially where the adolescents accept totally the values and desires of their parents (Maciver, 2012). In addition, the peer group determines the adolescents conformity to societal norm, which in turn influence positively or negatively their behaviours, values and attitudes. However, males are likely to frequently take to drug abuse than the females in the secondary schools as a result of peer group influence (Okorodudu&Enakpoya, 2009).

Seriously, parents should grant reasonable autonomy and or independence to their adolescent children in the adoption of important decisions that concern their social life. Thus, the parents are admonished to expose their adolescent children to a structured developmental guidance that would smoothen their transition into self-actualized adult. Parents are greatly worried and emotionally stressful when their adolescents break away from parental control and seek to make their own choices about their activities, diet, time schedule and spend their time and emotional support with peers.

The resultant effect of this could bring about some restive attitudinal tendencies in the adolescents, which could make them fall prey to peer pressure which might hamper their economic academic and psychological potentials. The misuse of marijuana had reached an epidemic level in Nigeria, and could lead to reduction of academic achievement or its final abrogation. (Fayombo&Aremu, 2000). Alien drugs like amphetamines are taken by these youths as an antidote for success in examinations (Olatunde, 2001).

It is of this researcher's opinion that the users of drugs as study aids are those adolescents with poor academic records, family instability and maladaptive records. He equally opined that others use drugs to increase their self-confidence, heighten pleasure, cope with depression, facilitate communication and aids to defense mechanisms.

As a result of poverty, frustration and parental neglect, a relatively high number of adolescents use hypo-sedatives to cope with maladaptive themselves (Jimoh, 2012). This researcher suggested the establishment of centres for drug control in every

The Efficacy of Cognitive...

community to be overseen by professional counsel or well-trained so as to manage family stress and reduce adolescents propensity to drug abuse. It is pertinent to determine measures of managing family stress and reducing adolescents involvement to avert the hampering effects on them, their family and the Nigerians. This research study was made to X-ray the use of cognitive behavioural counselling model and those not into drug abuse in Niger Delta University, Bayelsa State.

1. Hypothesis

There is no significant difference between the adolescents treated with cognitive behaviour model and those not to drug abuse in Niger Delta University, Bayelsa State.

Methodology

Design

This study adopted the quasi-experimental design using a simulated problem situation.

Population

For this study, the population comprises 200 volunteer adolescent students (ages 18-22 Years) who are undergoing a practicum course in Guidance and Counselling in 300 level and 400 level in Niger Delta University, Bayelsa State.

Sample

In this study, a random sample selection of 60 students by balloting out of 200 volunteer group of adolescent students, with no gender barriers was used.

Instrument

A laboratory approach using a stimulated problem situation to determine the effectiveness of cognitive-behavioural model of counseling in managing psycho-social crises and propensity to drug-abuse in adolescents was used. A 10 item Psychosocial Stress Reaction Questionnaire (PSSRQ) constructed by the researcher was used. The instrument was face-validated with a test re-test reliability co-efficient of 0.65 was used to determine the reaction of the students to a simulated stressful situation before and after treatment of the experimental group. Self-talk and problem-solving skills", were the areas of emphasis in the behavioural cognitive model in this study.

For a 3 hour session of discussion with the 60 students, the simulated stress situation that could exist in family daily transactions amongst parents, adolescents, siblings and significant others were exhaustively mentioned or taught. In addition, conditions that could lead to emotional trauma, obesity, autonomy/dependence, academic under achievements, health challenges, anxiety, career indecision, exhibitionism, identity diffusion, inferiority complex and peer pressure challenges were exhaustively taught and discussed by the researcher. The stressors were analysed and the 60 subjects put into control and experimental groups (30 subjects each) were made to respond to the PSSRQ.

Academic Excellence

For the experimental group which was subjected to a 20-day treatment sessions of a two (2) hours per day , the control group was not made to know the activities going on, while the cognitive behaviouralcounselling model was administered. The training on problem solving and self-talk skills was given to the treatment group.

The results presented below show the problem-solving training:

Table1: Item by item analysis of the propensity to drug abuse in PSSRQ

S/N	ITEMS	RESPONDENTS			
		Before treatment		After treatment	
		Control group	Treatment group	Control group	Treatment group
1	I am easily frightened by adult control of my choices	90 46.4%	140 53.6%	86 51.1%	70 44.9%
2	I see myself as a failure because, academically I am an under achiever	86 46.7%	98 53.3%	94 61.8%	58 36.2%
3	I always feel an inner conflict because I feel neglected by those who should care for me in the family	90 55.6%	72 44.4%	80 57.1%	70 42.9%
4	I feel resentful when corrected by scolding.	98 52.7%	88 47.3	98 55.7%	78 44.3%
5	I do not find it easy to flow along smoothly with my parents authoritarian attitude towards me, and as such I interact less with them.	90 52.9%	80 47.1%	86 55.1%	70 44.9%
6	I will take to drinking alcohol and other drug as (e.g. velium, coffee, smoking analgesic coke, indian	78 4.5%	96 55.2%	100 62.5%	60 37.5%
7	I can challenge constituted authority/parents because I want to be independent of adults over-bearing attitudes.	90 52.9%	80 47.1%	86 55.1%	70 44.9%
8	I find it difficult to manage anger when irritated	64 42.1%	88 57.9%	78 47%	88 53%
9	I disregard family rules and parental guidance and easily follow the dictate of my peers	80 44.9%	98 55.1%	98 55.1%	80 44.9%
10	I feel confused about who really I am. Sometimes, I act positively or negatively towards those I should ordinarily respect	100 51%	96 49%	86 62.3%	52 37.7%
	Total	866 49%	900 51%	892 57%	686 43%

Table 2: chi-square (χ^2) analysis of adolescent reaction to cognitive behavioural model of treatment against psycho-social crisis

Responses to Items

Groups	1	2	3	4	5	6	7	8	9	10	Total	Df	X ² cal	X ² crit
Control	86	94	80	88	86	100	86	78	88	86	892			
	(44)	(43)	(40)	(50)	(44)	(45)	(44)	(47)	(50)	(39)				
												9	6.56	16.92
Experimental	70	58	60	78	70	60	70	88	80	52	686			
	(34)	(33)	(30)	(38)	(33)	(70)	(34)	(36)	(39)	(30)				
Total	156	152	140	176	156	160	156	166	178	138	1578			

From Table 2 above, the calculated chi-square $x^2 = 6.56$ is lower than the critical chi-square $x^2 = 16.92$. Therefore, the null hypothesis which states that there is no significant difference between the adolescents treated with cognitive-behavioural model and those not treated in their reaction to psychosocial crisis and propensity to drug abuse was accepted in this research.

Discussion of Findings

From the result of this study, it is crystal clear that is relevant in the remediation of the effects of transitional crisis and storm of the adolescents in our university. Though the training effects were not very significant, possibly due to short period of rehearsals and training, but table 1 shows there was a positive reaction to psychosocial crisis in the experimental group compared to that of the control group at the end of the treatment. In overall, the experimental group score is 37.7% but the control group scored 62.3% in the propensity to using drugs when there are stresses. In fact, drug abuse and addiction is caused mostly by family instability and or some family psychosocial trauma (Jimoh, 2012). With Odigie's (2013) finding of the effectiveness of cognitive behavioural model in managing adolescents psychosocial crisis, problem-solving and self-skills training would help the young adults reduce those kind of instincts and put up positive reactions to psychosocial crisis in the family.

Conclusion and Recommendation

1. Adolescents parents should embrace service or the management of psychosocial crisis and their propensity to drug abuse.
2. Trained counsellors in the schools should see to it that these youths (adolescents) indulging in drug abuse are properly counselled. This can be done at school assemblies, during free period and career days. For the parents, PTA sessions can be used to educate parents on remediation.
3. Trained counsellors should apply various techniques in handling psychosocial crisis among teenagers.
4. There should be group counselling sessions or counselling clinics in which the adolescents should undergo problem solving and self-talk skills training in the schools.

References

- Fayombo, G.A &Aremu, S. (2000). Drug education and its effectson the educational performances of some adolescent drugabusers in Ibadan. *TheCounsellor*, 18(15) 378-387.
- Hillier, L. &Harrison2, L. (2004). Homophobia and the production of shame: *young people and same-sex attraction culture, health and sexuality*, 6, (1) 79-94.
- Jimoh, H.M, (2012). Prevalence of drug abuseamong NigerianAdolescents: implications forcounselling .*A Dissertation submitted to the Department of Guidance and ;Ph.D University of Ado-Ekiti Nigeria.*
- MacIver, J.E (2012). *Millennium Principles and Practices of Guidance and Counselling*. Warri: PECHAMS Press.
- Odigie, J.I, (2013). The effectiveness ofcognitive behavioural model inmanaging adolescents and psycho-social crisis. *TheCounsellor*. 32 (1&2) 24-29.
- Okorodudu, R.I &Enakpoya, E. (2009) Prevalence of drug abuse among Nigerian adolescents. *The counsellor*, 26 (2), 21-29.
- Olatude, A(2001). *Self-Medication Benefits, Precautions and Dangers*. Lagos: MacmilianPublishers.