Effect of Self-Efficacy Skills Training in Reducing Aggressive Behaviour among In-School Adolescents in Ogbomoso-Nigeria

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Abstract
This study investigated the effect of self-efficacy skills training in reducing aggressive behaviour among in-school adolescents. The study involved 52 respondents randomly selected from 115 students who were initially screened in two secondary schools in Ogbomoso-Nigeria. A 2x2 experimental group design was adopted, and respondents were randomly assigned to the treatment and control groups. The instrument used was Aggressive Behaviour Assessment Scale Questionnaire (ABASQ). It contained thirty items, designed to elicit response from the respondents. The psychometric property of the study was established using content validity and test re-test reliability method. The Pearson Product Moment Correlation Coefficient Formula was used and 0.75 was obtained using the ABASQ questionnaire. Thirteen males and 13 females were randomized into two groups with eight training sessions which lasted for eight weeks. Analysis of covariance (ANCOVA) and t-test were used to analyse the data generated at 0.05 level of significant. Results showed that the treatment package (self-efficacy skills training) was effective in reducing aggressive behaviour among adolescents. Based on the result of the findings, it was recommended that self-efficacy skills training should be incorporated into the counselling programme within the school setting to reduce the incidence of aggressive behaviour among in-school adolescents.

Keywords: Self-efficacy, Aggressive, Adolescents,

Introduction
The global trend of aggressive behaviour among adolescents today calls for serious concern. The increasing rate of aggression and violence demands immediate intervention procedures. In the past the adolescents are seen and known to be well behaved, properly nurtured and brought up. But nowadays the reverse is the trend, often adolescents are the one that cause quarrel, vandalism and violent behaviours. The school environment is no longer safe and conducive for teaching and learning activities. Bully, hooliganism, gang behaviour which are subset of aggression are often in display by angry and uncultured adolescents within the school premises. Toch (1993) stated that in the olden days teachers were confronted with minor disciplinary problems such as chewing gum, talking out of turn or making a noise. He noted that today when teachers are surveyed about disciplinary problems in their schools; they listed such things as rape, robbery, drug addiction and assault. Little quarrels and misunderstanding have led to serious inter-school crisis and turmoil. (Ojewola, 2009). Pages of national and international dailies are filled with issues of violence and aggression among adolescents. Inter-school debates and sport competitions have led to serious issues of corruption and undermining. Therefore, there should be urgent intervention especially the use of more robust scientific procedure such as self-efficacy packages that could be used to reduce aggressive behaviour.

Aggression can be described as a forceful action or procedure intended to dominate or master another person. It is a hostile injurious or destructive behaviour or outlook especially when cause by frustration (Merriam-Webster 1998) the media (Prints and broadcast) are daily filled with reports of violence and aggression among adolescents. Yousset, Attia & Kamel (1999) observed that involvement in physical fighting is very common in many parts of the world among adolescents. Schools are no longer safe for academic work because violence and aggression have become the order of the day there. Many adolescent students go to school with charms, arms and ammunition. Little quarrels and misunderstanding have led to destruction of lives and properties in schools and the society. This is supported by the assertion of Flisher (1993) that in Cape Town South Africa 9.8% of males, and 1.3% of females in secondary schools were reported carrying knives to schools in a period of four weeks, while in Scotland, 34.1% of males and 8.6% of females adolescents (11-16 years old) said they had carried weapons at least once during their life time (Mckeganey & Norrie 2000).

Youth aggression can develop in different ways. Some children exhibit behavioural problem in early childhood that gradually escalates to severe forms of aggression before and during adolescent (Huizinga, Loeber & Thornbery, 1995; General Surgeon, 2001). Statlin and Magnusson (1989) noted that childhood aggression is a good predictor of violence in adolescent and early adulthood. According to Pulkkinen (1987) & Farrington (2001) in a follow up study in Finland, of nearly 400 youths, rating by peers of aggression at the ages of 8 and 14 years significantly predicted aggression up to the ages of 20. Researches that were conducted which monitored individuals from childhood through adolescence and into adulthood found very high correlations between behavioural problem at one time and antisocial behaviour later in the lives of those individuals.
Many aggressive and violent adolescents grow up to be adults who are diagnosed as suffering from antisocial personality disorder and thus they persist in the delinquent and criminal behaviour.

Aggression and violence tend to affect man, societies in variety of ways. It is the belief of the generality of people that most societies are becoming violent. In fact it is horrifying to note the amount of violence and aggression by adolescents or even younger children in the societies today. Since it has been established that there is continuity in aggressive traits from the various reviewed literature, it is imperative that youths must not be left all to themselves to destroy their future (Pulkkinen, 1987 & Farrington, 2001). There should be an active steps to alleviate this problem of aggressive behaviour through the use of counselling particularly self-efficacy procedure.

Self-efficacy is a social cognitive theory, it is the belief people have about their capabilities to perform, organize and execute courses of action required to attain designated types of performance (Bandura, 1996). It is until people believe that their actions can produce the out-come they desire, then they have little incentive to act or persevere in the face of difficulties. How people behave can often be better predicted by the beliefs they hold about their capabilities than by what they are actually capable of accomplishing. Self-efficacy beliefs help in determining the outcome one expects when performing a task. Confident individuals anticipate successful outcomes in a given task (Pajares, 2002). Individuals who are confident in their social skills expect high marks in examinations and expect the quality of their work to provide personal and professional benefits - the opposite is true for those who lack confidence. Individuals who doubt their social skills often envisage rejection or ridicule even before they establish social contacts. While, those who lack confidence in their academic skills envisage low grade before they begin an examination or enroll in a course (Parares & Schunk, 2001).

One way to help aggressive adolescent raise self-efficacy beliefs is to help him improve his physical and emotional state. Every individuals has the capabilities to alter his/her own thinking and feelings enhance self-efficacy beliefs can in turn, powerfully influence the psychological status of the individual (Bandura, 1997). By being aggressive the adolescents tend to raise negative emotional state which may be detrimental to their overall being and total developmental process. It is, therefore, necessary that the adolescents are exposed to the rudiment in self-efficacy procedures in order to become positively motivated and well adjusted member of the society.

Despite the increasing problem associated with aggressive behaviour in Nigeria little empirical work has been done concerning it. Nwokwule (1988) used cognitive behavioural techniques in managing adolescents aggressive behavioural problem. The technique used included: cognitive self instruction, contingency management, social cognitive skills training, and interpersonal problem solving. There was improvement in the level of aggressive behaviour among those in the treatment than those in the control group. The time lag between the periods Nwokwule carried out his research work and now is more than twenty years. A repeat or similar research effort may be necessary considering the increasing rate of violence and aggression in the contemporary society. This necessitated the research effort to find out whether there will be any significant difference in the reduction of aggressive behaviour among adolescents exposed to self-efficacy skills training and those in the control group.

Statement of Hypotheses
The following hypotheses were tested at 0.05 level of significant
1. There is no significant deference in the reduction of aggressive behaviour among respondents in the treatment and those in the control groups.
2. There is no significant difference in the reduction of aggressive behaviour among respondents in the treatment (Self-efficacy) and control groups based on gender.

Research Design
This study adopted a two (2) by two (2) quasi experimental designs as indicated in Table 1

<table>
<thead>
<tr>
<th>Treatment strategy level</th>
<th>GENDER LEVEL B</th>
<th>Male B₁</th>
<th>Female B₂</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experimental group self-efficacy skills training A₁</td>
<td>A₁B₁</td>
<td>A₁B₂</td>
<td>n = 13</td>
<td>n = 13</td>
</tr>
<tr>
<td>Control Group A₂</td>
<td>A₂B₁</td>
<td>A₂B₂</td>
<td>n = 13</td>
<td>n = 13</td>
</tr>
<tr>
<td>Total</td>
<td>26</td>
<td>26</td>
<td>52</td>
<td></td>
</tr>
</tbody>
</table>

Instrumentation
The instrument used for this study was designed to assess the level of aggressive behaviour among adolescents.
It is known as Aggressive Behaviour Assessment Scale Questionnaire (ABASQ) an adapted instrument. The researcher adapted some items from Aggressive Scale: A Self-Report measure of Aggressive Behaviour for Young Adolescents by Orpians&Frankowski, (2001), while some other items were adapted from “the overt aggression scale for objective rating of verbal & physical aggression by Yudofsky, Silver, Jackson, Endicott & Williams (1986).

The Aggressive Behaviour Assessment Scale Questionnaire (ABASQ) consists of two sections the biographical data where participants were required to provide information on age, gender, class, level, family type and home situation. The second section consists of 30 items subdivided into two groups physical aggression and verbal aggression. These items were generated to assess adolescent aggressive behavioural pattern. This ranges from the display of aggression at home either to siblings or parents, through the neighbourhood to the school environment. To establish the co-efficient of stability of the instrument a test retest measure was adopted. A correlation 0.75 was established when twenty aggressive adolescents were tested over a period of two weeks. The rating of – Very Much True of Me – 4, Generally True of Me – 3, Rarely True of Me – 2, and Never True of Me – 1 was adopted for the instrument used.

Treatment Procedure

The procedure for data collection for the study was divided into three stages or phases namely:

1. Pre-treatment phase
2. Treatment Phase
3. Post-treatment phase

At the outset of the research programme permission of both the schools used and participants were sought. The researchers interacted with the principals of schools used about the nature of the programme, the benefits of the programme to the students that participated in the programme, benefits to the school authority, community in particular and the country in general. The researcher solicited for the support of teachers, school counsellors and students for effective implementation of the programme.

Treatment phase – The treatment was spread within eight weeks. The researcher relied on the following outline for the treatment group.

Experimental Group – Self – Efficacy Skills Training. There were eight sessions of one hour per week for eight weeks.

Session 1: Week 1 General orientation to the training and the pre-test administration
Session 2: Week 2 Explanation of the basic concept of aggression in school and society
Session 3: Week 3 Identification of different aggressive situations in school and society
Session 4: Week 4 Causes of aggression in school and community
Session 5: Week 5 Combating aggression through practical strategies of self-efficacy.
Session 6: Week 6 The advantage of non-aggressive life to oneself, others and society, through the use of self-efficacy skills training procedures.
Session 7: Week 7 Application and internalization of treatment gains/post evaluation tests.
Session 8: Week 8 Follow-up

Group Two: Control group
The group members met in another school entirely

Session 1: Week 1 General orientation, goal setting and distribution into the group
Session 2: Week 2 Pretest administration and random selection and screening into the control group.
Session 3: Week 3 How to study effectively
Session 4: Week 4 Developing effective study habit/skill
Session 5: Week 5 Administration of Study Habit Inventory (SHI)
Session 6: Week 6 Analysis and interpretation (SHI) that was administered
Session 7: Week 7 Counselling implication arising from test interpreted and review of previous week work
Session 8: Week 8 Review of session 3 – 6 and administration of post-test questionnaire Administration of programme Evaluation questionnaire

Post-treatment phase – At the end of the experimental treatment the participants filled and completed the Programme Evaluation Questionnaire to assess their reaction and perception of the programme package.

Analysis of Data: The data obtained from this study were analyzed to determine the effects of independent variable (self-efficacy skills training) on the dependent variable (reduction in aggressive behaviour among adolescents). Using Analysis of covariance (ANCOVA). The results are presented according to the hypotheses which guided the study.
Results and Discussion

To test the hypotheses stated two statistical analyses were carried out and he results are presented in Tables 2, 3 and 4.

Table 2: Means (X and Y) of participants’ Aggressive behaviour scored based on experimental level, rows and gender Level columns.

<table>
<thead>
<tr>
<th>EXPERIMENTAL LEVELS</th>
<th>Male</th>
<th>Male</th>
<th>Female</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-efficacy Skills training A₁</td>
<td>N 13</td>
<td>X – X</td>
<td>Y – X</td>
<td>Post-test 41.2</td>
</tr>
<tr>
<td>CONTROL A₂</td>
<td>13</td>
<td>94</td>
<td>78.8</td>
<td>13</td>
</tr>
</tbody>
</table>

From table 2, the unadjusted X and Y and unadjusted Y-X’s of the experimented groups (A₁ & A₂) are presented. There was a tremendous reduction in the level of aggressive behaviour among respondents in the treatment group A₁. This is revealed by the observation of pre-test mean of (86.8 for males and 84.1 for females) and post-test means of (41.2 for males and 54.2 for females) in group A₁ against the pre-test means of (94 and 94.8 for males and females) and post-test means of (78.8 for males and 83.6 for females) in group (A₂) of the control group.

From the mean scores of the pre-test and post, it can be concluded that self-efficacy training played crucial role in reducing aggressive behaviour among respondents that participated in the treatment packages.

The ANCOVA that follows clearly describes the level of significance between experimental groups (A₁ and A₂) as regards reduction in the adolescents’ aggressive behaviour.

Table 3: ANCOVA Table showing Pre and Post Treatment comparison of Adolescents’ Aggressive Behaviour based on Gender.

<table>
<thead>
<tr>
<th>Source</th>
<th>DF</th>
<th>Sum of square</th>
<th>Mean square</th>
<th>Cal F</th>
<th>Critical F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Row</td>
<td>1</td>
<td>19224.54</td>
<td>19224.54</td>
<td>140.9*</td>
<td>4.0</td>
</tr>
<tr>
<td>Column</td>
<td>1</td>
<td>3342.70</td>
<td>3342.70</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interaction</td>
<td>1</td>
<td>376.46</td>
<td>376.46</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Within</td>
<td>51</td>
<td>22567.23</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Significant p<0.05

The result on Table 3 shows that a significant difference existed between the scores of participants who were exposed to self-efficacy skills training and those in the control group in respect of reduction in their aggressive behaviour. This is shown in the result as a significant F-value (F(1, 51) – 140.9;p<0.05) was found. There was no interaction between those in the treatment group and gender.

Table 4: t-test comparison of the post treatment of male and female respondents’ scores in the two groups of self-efficacy skills and control.

<table>
<thead>
<tr>
<th>Gender</th>
<th>N</th>
<th>X</th>
<th>SD</th>
<th>df</th>
<th>t cal</th>
<th>t critical</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male respondents’ in the two groups</td>
<td>26</td>
<td>15.2</td>
<td>33.47</td>
<td>51</td>
<td>0.28</td>
<td>2.12</td>
</tr>
<tr>
<td>Female respondents’ in the groups</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 4 indicates that there is no significant difference between the post treatment of male and female respondents in the two groups of self-efficacy training and the control groups. The males had a higher mean rating than the females but this is not significant at 0.05 alpha level. The calculated t value of 0.28 is lesser than the critical t-value of 2.12 at 0.05 alpha level significance. Since the calculated t of 0.28 is lesser than the critical value of (2.12), the null hypothesis was accepted. This means that there is no significant difference in the reduction of aggressive behaviour between male and female adolescents in the two groups of SEST and control.

DISCUSSION

From the above results it can be concluded that self-efficacy skills training was effective in reducing aggressive behaviour among in-school adolescents. The hypothesis was therefore rejected. The hypothesis states that there is no significant difference in the reduction of aggressive behaviour among students exposed to self-efficacy skills training and those in the control group. The results in Tables 2 and 3 indicate that there is significant difference in the reduction of aggressive behaviour between the treatment and control groups. The post-test mean scores for those in the self-efficacy training group are lower than those respondents in the control group. The
difference could be attributed to the effect of treatment to which the control group was not exposed. The result of this hypothesis supported the findings by other researchers who had used self-efficacy procedures to improve academic ability, career choice, goal setting and better social performance among different groups of people. Adeyemo (1996) found that high self-efficacy subjects show evidence of better vocational maturity than the low self-efficacy in the intervention condition. Philips and Guly (1997) asserted that self-efficacy leads to higher-set goals and higher performance at work or school. Olweus, Limber &Michalic (1998) used social development programme that uses behavioral techniques in the classroom to prevent bully. Incidence of bullying was reduced by a half within two years using both behavioral-social cognitive intervention strategies.

The second hypothesis that stated that there is no significant difference between male and female respondents in the reduction of aggressive based on the self-efficacy skill training and control. This was accepted that gender did not play any significant effect in the reduction of aggression. The findings of this research work was at variance with the findings of Sharp & Smith (1991) in a study of British primary and secondary school who found that boys were bullied more than girls. And that boys were more likely to use physical bullying and verbal threats. In contrast, girls used social and verbal means including spreading rumours about other students and excluding students from peer groups (Boulton& Underwood 1992, Sharp & Smith 1991).

**CONCLUSION**

It can then be concluded from the results in this study that self-efficacy skills training is a potent intervention strategy for the reduction of aggressive behaviour among in school adolescents. The findings from this study have implication for counselling among adolescents. There is need for counselling psychologists to identify early those with aggressive tendencies, so that they can be given adequate counselling packages to alleviate their problems. Since there is likelihood of continuity of aggressive behaviour from childhood to adolescents and even adulthood, strong scientifically base intervention packages like self-efficacy skills training could be put in place to reduce the traits.

Secondly self-efficacy procedure should be incorporated into the school programme. This should be handled by able and qualified guidance counsellor. Since self-efficacy training can help people develop positive attitude to undertake a particular programme of action or task. If an aggressive adolescent is able to develop good perception concerning a given task, such individual will likely put all his/her effort and mind into it in order to succeed. This skill may not only be useful for aggressive adolescents only, but it could also be used for those with other behavioural problem like hooliganism, truancy, bullying and other deficit behavioural problems.

**REFERENCES**


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