

**EFFECTS OF SOLUTION-FOCUSED AND DIALECTICAL BEHAVIOUR
THERAPIES ON THE REDUCTION OF REBELLIOUS BEHAVIOUR AMONG
UNDERGRADUATES IN THE SOUTH-WEST, NIGERIA**

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MATRIC NO: 160121

**A Thesis in the Department of Counselling and Human Development Studies
Submitted to the Faculty of Education
In partial fulfillment of the requirements for the award of Degree of**

DOCTOR OF PHILOSOPHY

of the

UNIVERSITY OF IBADAN

2021

CERTIFICATION

I certify that this research work was carried out by Akin. Olumide Omitade (Matric. No:160121) in the Department of Counselling and Human Development Studies, Faculty of Education, University of Ibadan, Ibadan, Nigeria, under my supervision.

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DEDICATION

This research work is dedicated to my dearest mother, Late Matriarch Marian Oyenhun Omitade (Nee Afolabi) who was my first teacher in life. In her lifetime, she cherished education of her children. May her soul continue to rest in perfect peace.

ACKNOWLEDGEMENTS

First and foremost, I give praises and thanksgiving to God Almighty, the Giver of life, the Source of all wisdom, knowledge and understanding, who gave me strength and good health to pursue this programme to the end. His mercy, favour and grace really worked for me. Glory be to His name in Jesus name

My sincere appreciation also goes to my supervisor, Dr Adebukola Taiwo for his supervision, encouragement, guidance, understanding and immense contributions during the course of the programme. Thank you for your love; you are indeed a brother and friend. You will reach the peak of your career and eat the fruits of your labour in good health in Jesus name.

I also express my gratitude to all my lecturers in the Department of Counselling and Human Development Studies starting from the Head of Department, Professor Oyesoji Aremu, the immediate past Head of Department, Professor Chioma Asuzu, Professors C.B.U Uwakwe, Ajibola Falaye, David Adeyemo, Ayo Hamed, Adesoji Awoyemi, Rotimi Animashaun, the PhD Coordinator, Dr Adebayo O, Drs M.O. Ogundokun, A.A. Jimoh, A.O. Adeyemi, A.A. Owodunni, J.O. Fehintola, N.M. Ofole, A.O.Oyekola, S.A. Odedokun and O. Akinyemi for impacting my life and being great sources of inspirations and motivation to me. Sirs and Mas, I cannot thank you enough. God will reward you for your labour of love in Jesus name. I did not forget my late lecturers, Professor Jonathan Osiki, Drs Olanike Busari and Buchi Opara. May their souls rest in perfect peace.

My profound gratitude also goes to the authorities and management of the Federal Ministry of Education, Abuja who granted me permission to pursue this programme, the management and students of the universities used for this study. I appreciate God in the lives of the following; Deaconess Cecilia Taiye Olaniru, Professor Akeem Salawu, Dr Kola Akinbile, Dr Tosin Akanni, Prince Ayo Sanda, Rt Revd S.O. Omitade, Dr O. Sabina, Dr T. Oladunmoye, Bode Ojuolape, Abdulsamad Adegunle, Olajire Olanikanmi, colleagues and friends in the Department too numerous to mention for their love, care, support and assistance.

Finally, I owe my heartfelt gratitude and love to my ever supportive queen, my darling wife, Oluyinka Omolara and my wonderful loving children, Ijinle-Ife, Oluwadara, Oluwasemilogo and Iseoluwa for being my prayer warriors throughout the programme.

ABSTRACT

Rebellious behaviour is the disposition of individuals to resist or revolt against established authority. Extant literature show that students in Nigerian universities exhibit rebellious behaviour. Previous studies had concentrated more on psychosocial and environmental factors influencing rebellious behaviour than on interventions such as solution-focused and dialectical behaviour. This study, therefore, was carried out to investigate the effects of Solution-Focused Therapy (SFT) and Dialectical Behaviour Therapy (DBT) in the reduction of rebellious behaviour among undergraduates in the South-West, Nigeria. The moderating effects of emotional intelligence and peer pressure were also examined.

The study was anchored to Bandura Social Learning Theory, while the pretest-posttest control group quasi-experimental design with a 3x2x2 factorial matrix was adopted. The multistage sampling procedure was used. Three states (Oyo, Lagos and Osun) were randomly selected out of the six states in the South-West, Nigeria. The simple random sampling was used to select three federal universities (Obafemi Awolowo University, Ile-Ife, University of Ibadan, Ibadan and University of Lagos, Lagos) in the selected states. The students were screened with Rebellious Scale and those who fell within the range of 40 – 50 participated. The instruments used were Rebellious Behaviour ($\alpha = 0.88$), Emotional Intelligence ($\alpha = 0.73$) and Peer Pressure ($\alpha = 0.81$) scales. The participants in the schools were randomly assigned to SFT (21), DBT (24) and control (28) groups. The treatment lasted nine weeks. Data were analysed using Analysis of covariance and Bonferonni post-hoc test at 0.05 level of significance.

There was a significant main effect of treatment on rebellious behaviour among undergraduates ($F_{(2, 69)} = 359.32$; partial $\eta^2 = 0.91$). The participants in DBT displayed the lowest rebellious behaviour (27.86), followed by those in SFT (31.15) and control (58.13) groups. There was a significant main effect of treatment and emotional intelligence on rebellious behaviour ($F_{(1, 70)} = 4.19$; partial $\eta^2 = 0.06$). The participants with high emotional intelligence in DBT had a lower mean score (33.66) than those with low emotional intelligence (43.55) group. There was a significant main effect of treatment and peer pressure on rebellious behaviour ($F_{(1, 70)} = 6.11$; partial $\eta^2 = 0.8$). The participants with low peer pressure displayed lower mean score (39.17) than those with high peer pressure (46.74) group. There was a significant interaction effect of treatment and emotional intelligence on rebellious behaviour among undergraduates ($F_{(2, 66)} = 16.74$; partial $\eta^2 = 0.34$) in favour of participants with high emotional intelligence in the SFT group. There was a significant interaction effect of treatment and peer pressure on rebellious behaviour among undergraduates ($F_{(2, 66)} = 9.62$; partial $\eta^2 = 0.23$) in favour of the participants with low peer pressure. There was no significant interaction effect of emotional intelligence and peer pressure. The three-way interaction effect was not significant.

Dialectical behaviour, more than solution-focused, psychotherapy was effective in the reduction of rebellious behaviour among undergraduates in the South-West, Nigeria with emphasis on emotional intelligence and peer pressure. Counselling and Educational Psychologists and other helping professionals should utilise these interventions to reduce rebellious behaviour among undergraduates.

Keywords: Emotional intelligence, Solution-focused therapy, Dialectical behaviour therapy, Rebellious behaviour among undergraduates.

Word count: 495

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CHAPTER ONE

INTRODUCTION

1.1 Background to the Study

Rebellious behaviour among students is one of the problem behaviours that are common among adolescents and youths globally. It is a behaviour in which an individual refuses to obey rules or authority. Rebellious behaviour is a deliberate opposition or resistance against constituted authority. Newspapers, broadcast and social media report daily on rebellious behaviour of adolescents and youths at homes, within and outside school systems. Generally, adolescents and youths majority of who are students in Nigerian tertiary institutions, as part of their development into young adults will openly defy the advice and authority of their parents and other authority figures in the society. Youth have special capacities to see the imperfection of society; not burdened by financial and social responsibility. Young people would want to find their place in the adult world; where they belong in the greater scheme of things. Youths would want to explore things, but when not allowed to do so, they think of rebelling (Pickhardt, 2009).

Youths, between the age of 18 and 25 are in the ambiguous period where they have high levels of autonomy but not similar levels of responsibility (Steinberg and Silk, 2002). This is also corroborated by Arnett and Mohantey (2002) that students have more freedom than adults and relative freedom from parental and family control; from financial responsibility and from outside work combined. Due to this freedom, students often take risks which other segments of the population can seldom take without concern for consequences. Thus, the university undergraduates have time/chance to rebel against the authorities of their universities. These young adults are sometimes ruled by their feelings, confused and in most cases disturbed, an experience which could manifest itself in a rebellious way. Added to this, are the physical, psychological, emotional and cognitive changes that characterized the development of adolescents and youths at this stage. Attempt on the part of these young adults to deal with these changes creates

confusion, uncertainty and frustration. Consequently, they begin to misbehave, reject the legitimate goals and resent control of the university authorities.

Undergraduates desire to be treated as grown-up, where the adults listen to them, take their ideas into account, get them involved in decision making that affect their welfare and most important, allow them to act on their initiative. In cases where students feel underrepresented, misrepresented or not represented at all in all the formal decision making processes of university governance, the likelihood of student rebellion increase (Fatile and Adejuwon, 2011). When university management becomes unresponsive to the demands of students, being aloof and distant in their engagement, being detached from the sensitivities of the students and unsympathetic to the cause of students, they in return get angered and become rebellious. Examples of undergraduates rebellious behaviour include; pouring water on the University Vice Chancellor when the latter was passing through the corridor of the student hall of residence; throwing stones and pebbles on key officers in their institutions and male students going to female halls of residence at odd hour. At times, students engage in pen war against institutions' authorities through print and social media, criticizing and painting bad every step taken by the authorities. Most of the times, to make authorities feel their resentments, students embark on protests, demonstrations, boycott of classes and examinations, chanting war/struggle songs and dancing, barricades of entrances and exits to campuses, burn fire, mass rally, sit-ins, display of placards and rampage as form of rebellion against university management and authorities (Odu, 2013).

Violence and aggression often go hand in hand with rebellion. Whenever the institution authorities and management rise up to take action on these acts of rebellion of the students, the students become violent and destructive. Some of the measures or actions taken by authorities in most cases usually lead to escalation of violence on the campuses. Students become more rebellious and destructive especially when the institution authorities called and stationed law-enforcing agencies within university premises. The sight of the police by protesting students often ignites campus disturbances rather than reducing the likelihood of violence. Student rebellious behaviour has caused a lot of havoc to the education industry, students themselves and the larger society. It has

affected the learning quality, the integrity of students and the image of institutions of learning.

Student rebellion as a problem behaviour in Nigeria Universities has led to frequent confrontations between university authorities and students. As a result, there is incessant closure of campuses, which adversely leads to disruption of academic programmes and affects the completion of the curriculum in a given session. The aim of establishing these universities would not be adequately achieved under a violent and troubled situation always experienced during student rebellious activities. The situation would not provide conducive atmosphere for teaching and learning activities, implementation of university programmes and proper achievement of university set goals. Thus, the universities that are supposed to be fountains of learning are sometimes turned to citadels of hooliganism and rebellious acts by the students. Violence associated with these acts of rebellion has been an issue of concern for educational stakeholders in Nigeria. If this situation is not nip in the bud, it may be a canker to the nation's education systems and the entire fabric of the society.

Young people constitute the bulk of the educational and economic nucleus of any virile society. Some studies have been carried out in the past on the acts of rebellion among students in tertiary institutions of learning in Nigeria, such as Socio-economic status and substance use among young adults (Patrick, 2012); Drug abuse among youths (Abdulahi, 2009); Management of students' crisis in higher institutions of learning in Nigeria (Odu, 2013); Students' unrest in Nigerian universities (Aluede, Jimoh, Agwinede and Omoreige, 2005); causes of students' unrest and the basis of students power in Nigeria (Ahmad, 1998); Perceived causes and control of students' crisis in higher institutions in Lagos state (Akeusola, Viatonu and Asikha, 2012); Factors influencing students unrest in institutions of higher learning (Davies, Ekwere and Uyanga, (2015). All these studies were based on descriptive survey design. Beside, none of these researchers to the best of my knowledge have used Solution-Focused Therapy and or Dialectical Behaviour Therapy in their studies. Based on this gap in literature, this researcher therefore investigated the effects of Solution-Focused Therapy and Dialectical Behaviour Therapy in the reduction of rebellious behaviour among undergraduates in the South-West, Nigeria.

Presently, due to numerous student violent protests and incessant closures of Government-owned academic campuses, which prolonged the time required by students to complete their studies, prospective students are now seeking admissions into private universities. This rebellious behaviour among undergraduates in Nigeria can be reduced, if not totally eradicated and different psychological therapies can be employed. In this study, Solution Focused and Dialectical therapies were used as interventions.

Solution-Focused Therapy is an approach of psychotherapy based on solution-building rather than problem-solving. It explores current resources and future hopes rather than present problems and past causes. It has great value as a preliminary and often sufficient intervention, and can be used safely as an adjunct to other treatments. In problem-focused therapy, problems are conceptualized as repeated applications of ineffective solution attempts. It follows that in problem-focused therapy, "the solution is the problem." In contrast, solution-focused therapy developed an inverse of the problem/solution ascription by proposing that the problem has within it the seeds of a solution. From this came the central notion of 'exceptions', however serious, fixed or chronic the problem, there are always exceptions and these exceptions contain the seeds of the client's own solution (De Shazer and Berg, 1986).

Solution-Focused Therapy is an outcome-oriented, competence-based approach. Solution-Focused therapists help clients to achieve their preferred outcomes by facilitating the evocation of solutions. Solution focused practice emerged with the idea that solutions may rest within the individual and his or her social network. As postmodernism sparked questions about the superiority of the therapist's position and the idea of a universal truth, the therapeutic relationship began to transform - the client now recognised as the expert in his or her own life. This created a more collaborative approach to counselling (Bertolino and O'Hanlon, 2002) and established a context in which solution focused practice could flourish.

Solution-focused therapy was developed by Steve de Shazer and his colleagues at the Brief Family Therapy Centre in Milwaukee, Wisconsin, USA in 1980. It was influenced by the Mental Research Institute's problem-focused therapy (Fisch, Weakland, and Segal, 1982 cited in Saadatzaade and Khalili, 2012) in Palo Alto, California. De shazer and his team were also interested in determining the goals of

therapy so that the therapists and clients would know when it was time to end. The therapists found that the clearer a client was about his or her goals the more likely it was that the therapists achieved. Finding ways to elicit and describe future goals has since become a pillar of Solution-Focused Therapy (De shazer and Berg, 1994).

Solution-Focused Therapy (SFT) is a strength-based intervention that is founded in the belief that it is important to build on the resources and motivation of clients because they know best, problems facing them and are capable of generating solutions to solve these problems (Kim and Frankly, 2009). The effectiveness of SFT had been demonstrated among others in the management of academic stress and internet addiction among older adolescents (Busari, 2016): decreasing depression among teenage girls (Javanmiri, Kimiaee, and Hashem-Abadi, 2013): modifying problematic behaviours among the youths (Shin, 2009); reducing test and social anxiety among adolescents (Egbochuku and Igbineweka, 2014). Solution-Focused Therapy often proves very useful in crisis intervention. The available time does not usually lend itself to an elaborate diagnosis and, further to this, a client in crisis benefits from regaining confidence in their personal competences and a future-oriented approach. Saadatzaade and Khalili (2012) asserted that solution-focused counselling is an efficient and direct approach that emphasizes problem identification and solutions. Practitioners following a solution-focused approach focus on client skills and solutions rather than deficits and problems.

Some other psychotherapy interventions can be applied to reduce negative behaviours. Such psychotherapy that can be used for the reduction of rebellious behaviour is Dialectical Behaviour Therapy (DBT). DBT is a psychotherapeutic approach used to treat individuals with complex psychological disorders, particularly chronically suicidal individuals with borderline personality disorder (BPD). It is a type of talking therapy, which was originally developed in the late 1980s by an American psychologist named, Marsha Linehan. The main goals of this therapy are to teach people how to live in the moment, cope healthily with stress, regulate emotions and improve relationships with others (Michaela and Heidi, 2017). DBT has evolved into a sophisticated treatment, yet most of its concepts are quite straightforward. For example, DBT emphasizes an organized, systematic approach in which members of the treatment team share fundamental assumptions about therapy and clients. DBT considers suicidal

behaviour to be a form of maladaptive problem solving and uses well-researched cognitive-behavioral therapy (CBT) techniques to help clients solve life problems in more adaptive ways. It articulates a series of principles that effectively guide the therapists in responding to problematic behaviours. The effectiveness of DBT has been demonstrated among others in enhancing social competence of adolescents (Ogundayo, 2007); reduction of emotional stress among in-school adolescents (Alade, 2015).

DBT has some fundamental elements in common with other supportive treatment approaches (Heard and Linehan, 1994). Exquisite emotional sensitivity, proneness to emotional dysregulation, and a long history of failed attempts to change either this intense emotionality or the problem behaviours associated with it make supportive treatment elements important. All clients benefit from validation, but validation is essential for the success of change-oriented strategies with those who are particularly emotionally sensitive and prone to emotional dysregulation (Linehan, 1993). DBT validation strategies are meant not only to communicate empathic understanding but also to communicate the validity of the client's emotions, thoughts, and actions.

A dialectical worldview permeates DBT. A dialectical perspective holds that one cannot make sense of the parts without considering the whole; that the nature of reality is holistic even if it appears that one can talk meaningfully about an element or part independently. This has a number of implications. The therapists never have a "whole" perspective on a client, rather, therapists are like the blind wise men each touching a part of an elephant and each being certain that the whole is exactly like the part they are touching. An elephant is big and floppy"; "No, no, an elephant is long and round and thin"; "No, no, an elephant is solid like a wall." The therapist who interacts with the client in a one to-one supportive relationship sees incremental progress. The nurse whose sole contact consists of arguments declining requests for benzodiazepines, the crisis worker who sees the person over and over only at her worst, and the group leader who has to repair the damage of the person's sarcastic comments to another group member have alternative perspectives. Each perspective is true, but each is also partial.

DBT is also helpful in changing unhelpful behaviours, being a broad based cognitive behavioural treatment, but it differs from Cognitive Behaviour Therapy (CBT) in that it also focuses on accepting who you are at the same time. DBT places particular

importance on the relationship between the client and the therapist, and this relationship is used to actively motivate you to change. DBT is derived from a philosophical process called dialectics. Dialectics is based on the concept that everything is composed of opposites and that change occurs when one opposing force is stronger than the other, or in more academic terms—thesis, antithesis, and synthesis. Thus in DBT, the client and therapist are working to resolve the seeming contradiction between self-acceptance and change in order to bring about positive changes in the client. In a nutshell, ‘dialectics’ means trying to balance seemingly contradictory positions (Linehan, Comtois, Murray, Brown, Gallop, and Heard, 2006). For example, in DBT clients will work with therapist to find a good balance between: “Acceptance” –i.e. accepting oneself ; “Change” – i.e. making positive changes in one’s life. One might eventually come to feel that these goals are not as conflicting as they seem at first. For example, coming to understand and accept yourself, your experiences and your emotions, can then help you learn to deal with your feelings in a different way.

Emotions play an important role in how people think, behave, and seem to rule people’s daily lives. The emotions people feel each day can compel them to take action and influence the decisions they take about their lives, both large and small. People make decisions based on whether they are happy, angry, sad, bored or frustrated. Therefore, emotion could go a long way in determining whether a person will be violent and rebellious or not. For instance, an individual that has some level of control over his or her emotions has tendency to regulate violent or rebellious dispositions when situation arises. The ability to express and control one’s emotions is as essential as one’s ability to understand, interpret, and respond to the emotions of others. Psychologists refer to this ability as emotional intelligence. Hence, emotional intelligence is chosen as a moderating variable for this study.

Emotional intelligence is a way of recognizing, understanding and choosing how we think, feel and act. It shapes our interactions with others and our understanding of ourselves. It involves the ability to understand and manage emotions. Adeyemo (2017) stated that emotional intelligence is a rescue to building a peaceable school environment. Participants in this study with low emotional intelligence are likely to manifest rebellious behaviour than participants with high emotional intelligence, hence the reason for the

use of emotional intelligence as moderating variable. As a concept, emotional intelligence has found its way to different positive behavioural outcomes. It is an increasingly popular term of reference for an optimal psychological state within an individual and their interaction with their environment. This term is usually associated with author Daniel Goleman and his mid-1990 bestseller by the same name. Goleman promoted the idea of an 'EQ' (for emotional intelligence) as a prerequisite for effectively using one's intelligent quotient (IQ). In Goleman's understanding 'EQ' stands for the capacity for compassion, empathy, motivation, self-awareness, altruism, appropriate response to, and distinction between, pain and pleasure, and to bringing energy back into flow within an individual.

Apart from emotional intelligence, tendency to be peaceful can also be influenced by affiliation with peers and types of friend adolescents and youths move with. Therefore, peer pressure is another moderating variable chosen for this study. Peers are people who are part of the same social group. Peers are the kind of people who relate every day and provide critical information for each other. Peers may strongly determine preference in the way of dressing, speaking, using illicit substances, adopting and accepting violence and anti-social behaviours. This is what is called peer pressure. It is the influence that the peers can have on each other. Peer pressure is a feeling that one must do the same things as other people of one's age and social group in order to be liked or respected. School is a setting where interpersonal relations are promoted which are important for youngsters' personal and social development.

There is no conclusion on whether rebelliousness is more related to high or low peer pressure. Having realised that peers can make adolescents rebel against the wishes of parents and school authorities, peer influence or pressure is worth researched into. It is generally accepted that the most remarkable social phenomenon of adolescence is affiliation with peer groups. Peers increasingly play an important role during the adolescent period among the lives of young people. As adolescents make the transition to high school, peer networks increase, and peer affiliation becomes an important aspect of peer relations. Also during adolescence, close friends begin to surpass parents as adolescents' primary source of social support and contribute in important ways to

adolescents' self-esteem and well-being. Positive peer affiliation is essential to maintaining positive self-esteem.

When adolescents begin to behave differently, adults think that this is a child's desire to form their own sense of independence or teenage rebellion. However, autonomy and independence may not be synonymous. While autonomy is larger in scope and include an adolescent's capacity to think, feel, and act on his or her own; independence involves personal behaviour on issues (Ibeh, Unugo, and Orij, 2017). Adolescents mostly are likely to argue, press for advantage, and test of the limits that parents set for them. This is because though adolescents are not fully grown adults, but they want to be treated as one. It is this transition between childhood and adulthood alongside physical and social changes bringing about changes in cognition including information processing which in effect increases the conflict between parents and their adolescent children.

Researchers have done a lot of descriptive survey studies but few experimental studies on reducing problem behaviours among university students in Nigeria particularly rebellious behaviour using solution-focused therapy or and dialectical behaviour therapy. The problem of rebellious behaviour among university students in Nigeria is now rather alarming and jeopardizing the education system at tertiary level, making difficult the administration of universities across the country. It is against this background that the psychological management of rebellious behaviour in higher institutions of learning in Nigeria needs urgent attention. Based on these gaps in literature, this study sought an investigation of solution-focused therapy and dialectical behaviour therapy in reducing rebellious behaviour among undergraduates in the South-West, Nigeria.

1.2 Statement of the Problem

Rebellious behaviour in schools is ranked as a major problem among students at various levels of schooling in Nigeria. It is a concern to schools' administrators, parents and other educational stakeholders. The rate at which peaceful behaviour is lacking in Nigeria tertiary institutions of learning cannot be overestimated. Students engaged in

violent demonstrations, protests, unrests, hooliganism, vandalization of private and public structures, burning of tyres, houses and public places whenever there was little misunderstanding between them and management of their universities.

Most of the academic sessions, these campuses are usually under lock and key more than the time they open for academic activities. Standard has dropped and the intellectual capabilities of students that are supposed to be developed through learning activities in these institutions have been stepped down. Students spent valuable time meant for learning and research work outside campus due to incessant closure of these universities.

Huge financial resources of government to these institutions are being wasted in replacing and repairing of damaged infrastructures and burnt vehicles. Students who could have been more useful to themselves, their parents and the nation at large died sometime during the crises precipitated by student rebellious activities.

The rate of violent crimes such as such cultism, rape, homicide, burglar-office, home and store-breaking offences is now at alarming proportion in Nigeria universities. All these violent criminal activities have their resultant consequences on the academic and social progress of both the University communities and the general society. Students and lecturers are made to live under constant fear as there is a general state of insecurity and chaos.

University administrators, managers and government could not proffer solution to rebelliousness among students in Nigeria campuses. Recommendations made by several panels and commissions of enquiry on how to curb student rebellious activities did not bring solution. Previous literature on student rebellious behaviour concentrated on the causes, consequences and solutions. Despite all these measures taken over the years in curbing rebellious behaviour among undergraduates, the menace seems to increase. Moreover, the increase in intensity of the menace and the way it spreads from one institution to another in short period of time could be regarded as a bad signal to the challenged education system in Nigeria. Nigeria campuses as citadels of learning need peaceful and conducive rebellion-free environment. If this phenomenon is not nipped in the bud it may be very difficult to access quality education in Nigeria, in the foreseeable future, because the sector could become worse than other public sectors where violence

and instability of academic calendar, high level of indiscipline, bribery and corruption, loss of lives and destruction of properties appear to be the order of the day. Against this premise, this study is basically designed to find out the effectiveness of solution-focused therapy and dialectical behaviour therapy in reducing rebellious behaviour among undergraduates in the South-West, Nigeria.

1.3 Purpose of the Study

The main purpose of this study is to investigate the effects of solution-focused therapy and dialectical behaviour therapy in reducing rebellious behaviour among undergraduates in the South-West, Nigeria. Other purposes of the study are to:

- i find out the main effect of treatments on rebellious behaviour among undergraduates..
- ii find out the main effect of the emotional intelligence on rebellious behaviour of undergraduates.
- iii investigate the main effect of peer pressure on rebellious behaviour of undergraduates.
- iv ascertain the interaction effect of treatment and emotional intelligence on rebellious behaviour of undergraduates.
- v. find out the interaction effect of treatment and peer pressure on rebellious behaviour of undergraduates.
- vi investigate the interaction effect of emotional intelligence and peer pressure on rebellious behaviour of undergraduates.
- vii determine the interaction effect of emotional intelligence, peer pressure and treatment on rebellious behaviour of undergraduates.

1.4 Hypotheses

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

1. There is no significant main effect of treatment on rebellious behaviour among undergraduates.
2. There is no significant main effect of emotional intelligence on rebellious behaviour of undergraduate.

3. There is no significant main effect of peer pressure on rebellious behaviour of undergraduates.
4. There is no significant interaction effect of treatment and emotional intelligence on rebellious behaviour of undergraduates.
5. There is no significant interaction effect of treatment and peer pressure on rebellious behaviour of undergraduates.
6. There is no significant interaction effect of emotional intelligence and peer pressure on rebellious behaviour of undergraduates.
7. There is no significant three-way interaction effect of emotional intelligence, peer pressure and treatment on rebellious behaviour of undergraduates.

1.5 Significance of the Study

This study would be beneficial to undergraduates and by extension all students in Nigerian tertiary institutions who will be able to learn some peaceful methods of achieving their yearnings and aspirations rather than violent means. The findings of this study will illuminate students' understanding of peace and nonviolence and its relevance to students-management relationship. In addition to this, various authorities in higher institutions of learning in Nigeria would benefit immensely from this study in their quest to relate with students' representatives on the basis of their behavioural dispositions. It will enhance synergy between student representatives and authorities of tertiary educational institutions in Nigeria.

The findings of this study will be beneficial to the counselling psychology profession; it will avail professional counsellors the opportunity to adopt or adapt these suitable psychotherapies for the treatment of rebellious behaviour among students and other categories of clients.

Scholars in the area of peace and conflict studies will also benefit from this study by adopting Solution-Focused Therapy (SFT) and Dialectical Behaviour Therapy (DBT) as social and psychological interventions for improving peaceful and nonviolence behaviour in campuses among youths and larger society.

The findings of this study will also be beneficial to all stakeholders; the parents will be well informed and guided on how to handle developmental changes and behavioural dispositions of their adolescents and youths. The lecturers and university administrators will make use of the findings of this study by applying the principles of these psychological interventions (SFT and DBT) to control the excesses of undergraduates during rebellious activities in their campuses. This will further ensure peace and tranquillity and reduce the tendencies of rebelliousness among undergraduates within and outside the universities' environment.

This study will also contribute largely to the existing body of research especially in the area of rebellious behaviour, adolescent and youth counselling.

1.6 Scope of the Study

This study centred on investigating the effects of Solution-Focused Therapy and Dialectical Behaviour Therapy on the reduction of rebellious behaviour among undergraduates in the South-West, Nigeria. Participants for this study were undergraduates drawn from three (3) federal universities (Obafemi Awolowo University, Ile-Ife, University of Ibadan, Ibadan and University of Lagos, Lagos) in three (3) states (Lagos, Osun and Oyo states) in the South-West, Nigeria. The moderating effect of participants' emotional intelligence and peer pressure on rebellious behaviour was also evaluated.

1.7 Operational Definition of Terms

The following terms are defined as used in the study

Rebellious Behaviour: Undergraduates' disposition that shows resistance or opposition to the established authority of Nigerian universities.

Undergraduates: University students that are admitted and registered to run different bachelor degree programmes in different faculties of the universities in the South-West, Nigeria.

Solution-Focused Therapy: This is a goal-directed collaborative approach to psychotherapeutic change that is conducted through direct observation of clients'

responses to a series of precisely constructed questions to help university undergraduates' improvement in peaceful behaviour.

Dialectical Behaviour Therapy: This is a set of principles geared towards teaching peace education and training for university undergraduates so as to develop peaceful behaviour.

Emotional Intelligence: This is the undergraduates' capacity of creating positive outcomes in relationships with others and self, as well as adequate relationship with the immediate environment which will promote peaceful co-existence among significant others

Peer Pressure: This is the direct influence members of peer group have on undergraduates.

CHAPTER TWO

LITERATURE REVIEW AND FRAMEWORK

This chapter deals with review of literature both empirically and theoretically. The following sub-headings are discussed under this chapter.

2.1 Theoretical Background

- 2.1.1 Concept of Rebellious Behaviour
- 2.1.2 Rebellious Behaviour among Undergraduates
- 2.1.3 Solution-Focused Therapy
- 2.1.4 Dialectical Behaviour Therapy
- 2.1.5 Concept of Emotional Intelligence
- 2.1.6 Concept of Peer Pressure

2.2 Theoretical Framework

- 2.2.1 Bandura's Social Learning Theory
- 2.2.2 Reversal Theory and Rebelliousness
- 2.2.3 Kool's Psychological Model of Nonviolence
- 2.2.4 Psycho-Analytical Theory
- 2.2.5 Theory of Impulsiveness

2.3 Empirical Review

- 2.3.1 Solution-Focused Therapy and Rebellious Behaviour
- 2.3.2 Dialectical Behaviour Therapy and Rebellious Behaviour
- 2.3.3 Emotional Intelligence and Rebellious Behaviour
- 2.3.4 Rebellious Behaviour and Peer Pressure

2.5 Historical Perspective of Undergraduates' Rebellious Behaviour

2.6 Conceptual Model

2.1 Theoretical Background

2.1.1 Concept of Rebellious Behaviour

Rebellion, uprising, or insurrection is a refusal of obedience or order. It refers to the open resistance against the orders of an established authority. The term comes from the Latin verb, *rebello* "I renew war" (from *re-* ("again") + *bello* ("I wage war/I revolt")). The rebel is the individual that partakes in rebellion or rebellious activities, particularly when not satisfied with a status quo. Thus, the term rebellion also refers to the ensemble of rebels in a state of revolt. A rebellion originates from a sentiment of indignation and disapproval of a situation and then manifests itself by the refusal to submit or to obey the authority responsible for this situation. Rebellion can be individual or collective, peaceful (civil disobedience, civil resistance and nonviolent resistance) or violent (terrorism, sabotage and guerrilla warfare) (Christopher and Laura, 2015). In political terms, rebellion and revolt are often distinguished by their different aims. If rebellion generally seeks to evade and/or gain concessions from an oppressive power, a revolt seeks to overthrow and destroy that power, as well as its accompanying laws. The goal of rebellion is resistance while a revolt seeks a revolution as power shifts relative to the external adversary, or power shifts within a mixed coalition, or positions harden or soften on either side, an insurrection may seesaw between the two forms.

According to Paul and Anka (2002), rebellion is an act of violent and open resistance to an established government or ruler. It usually involves action in the form of violence. Resistance, on the other hand is comparatively passive by nature. It is a tacit refusal to comply with the rule or law that is issued by an authoritative figure. Resistance is born from unceasing oppression and is often the precursor to a rebellion. A rebel renounces resists and breaks free from the social code of conduct and norms through the use of force and also assumes a hostile attitude towards the authority demanding obedience. Critics like Samik (1997) and Chakraborty (2011) traced the root causes of rebellion as sparked by an individual's discontent with a corrupt and insensitive establishment. The individual or the group's discontent and dissatisfaction with the establishment give rise to resistance and protest against it. The seeds of resistance and rebellion are sown in history and the manner in which the oppressed became victims of various forms of exploitation. The multiple exploitative strategies used by the

oppressors on the oppressed also lead to protests. These can be traced back to the caste system, class discrimination and gender oppression.

The history of resistance and rebellion traces a parallel history of oppression. The roots of resistance and rebellion can be seen in the context of movements by social reformers. It is believed that protest movements in India began from the awareness spread by the social reformists in the last century. The privileged sections on the other hand, opposed to such laws as they saw this as a threat to their social status and prevailing customs through which the underprivileged groups were kept under their thumb. The marginalized believed that organized campaigns were the only way for them to get what is due to them as citizens of this country. This belief catalyzed by acts of regular exploitation caused them to resist oppression in many ways. Some of the protest movements that are relevant to study Mahasweta Devi's works would be discussed here. The most important of protest movements in relation to her works are the Dalit and Adivasis (Goodman, 2009).

Non-violence and silence as acts of resistance is seen in Gandhi's silent and nonviolent struggle for eradicating the evil customs of the Indian caste system. He opposed the differences that existed in the caste hierarchy and aimed to remove these disparities. The Indian freedom movement provided a platform for him to bring together members of various castes to join in the fight for independence and encouraged incorporation of Dalits as part of reformed Hinduism. He used the independence movement as a means and method to unite and eliminate the orthodox beliefs that exists among various castes and opposed the use of the term „untouchables“. Instead, he called them “Harijans” (God's people) (Raj, 2011). It was also an effort to bring women out of their kitchens and stressing on their education, awareness and social position. In 1935, before India gained independence, the British Government came up with a list of four hundred groups who were considered untouchables. The list also included many tribal groups that were accorded special privileges in order to overcome deprivation and discrimination who were termed as the Scheduled Castes and the Scheduled Tribes. Besides the social reform movements and political protest movements, there have also been other movements like Naxalite Movement, Women's Movements and various Tribal Rebel Movements (Raj, 2011).

2.1.2 Rebellious Behaviour among Undergraduates

Rebellion is naturally occurring in the youth as they grow up and get close to becoming matured (Parcon, 2011). The rebellion of a youth will not be lost in its stage of adolescents, but not all youths are equally rebellious. The youth would like to seek independent to find factors that might be visible for their own identities. Young people have rebelled because of a quest to separate themselves from their parents so as to develop their own personal identities (Pickhardt, 2009). The study of Gregoire (2014) shows reasons why youth rebelled namely: youth wants to seek independence from fighting against adults like their parents, teachers, and other people who control them; young men seek individualism since many young people are desperate to change themselves to see them acceptable (Justbequiet (2013).

This is acceptable or else it enters a sort of rebel youth according to (Pickhardt, 2009). It is called non-conformity or to rebel against society. The youths were introduced in different levels of human beings and become aware of the difference between them and their friends. According to Kaur (2013), teenage rebellion is due to their findings of their own, turmoil and pubertal frustrations. A rebel young man can be harmed by the whole family so the youths are seeking independence. Teenagers want to stay with their friends than their families. Young men want to have the power to make decisions for them. This leads them to become disobedient to their parent wishes and respond. Teenagers protest their parents and disobey their parents' requests. Perhaps many young people in the present age are interested in associating with their friends rather than their families because it is easier for them to say problems with their friends and most of their friends are experiencing the same problem that they encounter.

The rebellion of teenagers has major reasons. One of them is to be properly placed in the world of adults and seek where their usefulness can be felt. As part of adult development, people must develop their own identity from their parents or family and have the capacity for independent decision making. Youths can experiment with different roles, behaviours, and ideologies as part of their development process of an identity. Youth rebellion is known in psychology as a set of behavioural traits that are

beyond class, culture or race. In modern times, it is seen today that young people are different from all generations because of modern technology which enables young people to express their desires by posting social media such as Facebook and Twitter, but many young people do not think what they share in social media has many negative effects on young people. Sometimes teenager adopts the bad habits, contempt for power, and disrespect for parents (Crocetti and Tagliabue, 2015).

Meanwhile influences such as excessive exposure to explicit materials, strangulation or friendship, and spread of family issues such as divorce, addiction, and second family may lead to an increase rebellion of youth. Today's modern youth begins to rebel at an early age because of their early experience in adulthood. The teenager is preparing to separate or exclude from the family. Young men are in the process of building their values. Teenagers should start separating, and often rebellion gives them the energy to do so. A teenager believes that physical fight serves as a means of establishing his own character. In the mind of a teenager, the fight expresses independence and claims that he no longer needs parental guidance and often acts as a parental care test. Due to changes in the body, there can be confusion about whether teenagers really want to grow up. Hormonal changes cause dynamic behaviour through tears, sensitivity and sudden outbreaks of increased physical activity and are not appropriate. Having a relationship or liking to the opposite sex also begins and the youth also wants to be private (Añonuevo, 2015).

Having a private life can help young people control or decide on them. Young people want to explore things, but they are not allowed to do so and therefore they are thinking of rebelling. If parents do not know how to discipline their children, there will be a problem. Most parents or teachers are extremely stubborn to young people. Young ones feel that parents do not even give the right to leave or demand the opinion of the youth. Parents are in position so young people will obey and respect them. But when the youth is strangled, they can think of rebellion. Doing the rules should only be part of the youth's participation or agreement. This enables them to be responsible for making their decisions or actions. If this happens, it will prevent the rebellion of youth. However, giving punishment for dishonest behaviour is only appropriate (Gregoire, 2014).

2.1.3 Solution-Focused Therapy

Solution-Focused Therapy (SFT) is an approach to enabling people to build change in their lives in the shortest possible time. It believes that change comes from two principle sources: from encouraging people to describe their preferred future that is what their lives will be like should the therapy be successful and from detailing the skills and resources they have already demonstrated that is those instances of success in the present and the past. From these descriptions, clients are able to make adjustments to what they do in their lives (Ratner, George and Iveson, 2012). SFT is a method for talking with clients. It holds the view that the way clients talk about their lives, the words and the language they use, can help them to make useful changes, and therefore SFT is a language for clients literally talking themselves out of their problems (Ratner et al, 2012). It is a time-sensitive approach to exploring with clients how they would like their lives to be as a result of the therapy, and examining the skills and resources they have for getting there. It is not about the therapist assessing the type of problem the client has and or providing the solution to the client's problem. It has to come from the client.

Solution-Focused Therapy (SFT) is a therapeutic orientation that has been utilized with youth in a school setting. SFT is described as a celebration of the client through acknowledgement, positivity, and collaboration. It is guided by progress monitoring tools to assess behavioural change over the course of treatment. It is also driven by the idea that the client is viewed as the "expert" and ultimately directs the therapeutic process. According to Bond, Woods, Humphrey, Symes, and Green (2013), Solution-focused therapy (SFT) is increasingly used in schools due to its flexibility, brevity, and efficacy. Having a theoretically sound, effective and efficient clinical intervention model is critical to successful school counselling programmes, so identifying these models is imperative. These models have a future orientation and work towards solutions rather than a past orientation that explores prior events.

SFT has also been influenced by research in positive psychology, which suggests that emphasizing client strengths and competencies promotes positive outcomes, and by counselling outcome research that indicates that clients improve most significantly during the first few sessions (Whiston and Quinby, 2009). Key components of the SFT models include goal-setting, finding what is working or where there are exceptions to a

problem, scaling, identifying client and family resources, eliciting client solutions, and soliciting client commitment to agreed-upon goals. This model is particularly well-suited to work in schools due to the high caseloads of most school counsellors and the related need to respond to a variety of student situations efficiently and promptly. SFT's positive focus and strength-based approach align with school counselling programme models and educational outcomes. Solution-focused therapy (SFT) is a strengths-based intervention that is founded in the belief that it is important to build on the resources and motivation of clients because they know their problems the best and are capable of generating solutions to solve their own problems (Kim and Franklin, 2009).

Solution-focused brief therapy was developed in the 1980s by Steve de Shazer and Insoo Kim Berg of the Brief Family Therapy Center in Milwaukee, Wisconsin. Both were social workers, among their other skills, and had met at the Mental Research Institute (MRI) in Palo Alto in California. After marriage, the couple moved to Milwaukee, planning to form 'The MRI of the Midwest'. They continued their research in their clinic, modifying existing brief therapies by using feedback from clients about successful outcomes. This process led to the gradual removal of many of the usual elements of psychotherapy because nothing was retained that did not show specific benefits for client outcomes. Consequently, there are a number of differences between solution-focused therapy and traditional psychotherapy. The central assumptions are that the client will choose the goals for therapy and that the clients themselves have resources, which they will use in making changes. For Steve de Shazer, the essence of psychotherapy is that the client is helped, and therefore that change occurs in their situation. Following on his Mental Research Institute experience, de Shazer realised that any change is likely to be beneficial. The only thing one can be sure of changing is oneself. The first interview in solution-focused therapy is the most important. For many clients this is when the majority of the work is done. Unlike other psychotherapies, the treatment process begins at once. A detailed history is not essential for solution-focused work.

The Research Committee of the Solution-Focused Therapy Association developed a treatment manual in order to help standardize the implementation of SFT by practitioners and increase treatment fidelity of the model. The committee identified three

general ingredients of SFT namely: use of conversations centred on clients' concerns; conversations focused on co-constructing new meanings around client concerns and use of specific techniques to help clients co-construct a vision of a preferred future and drawing upon past success and strengths to help resolve issues (Kim and Franklin, 2009). Previous articles by systematic qualitative review also further categorized SFT by the following techniques and core components:

The Miracle Question: The miracle question is a unique question created by Insoo Kim Berg and Steve de Shazer in the 1980s (Berg 1994, de Shazer 1988). It is not simply a question, but a tool used to facilitate clients thinking about future possibilities when their problem is solved (Berg and de Shazer 2007). It requires a great deal of imagination and is distinctive in requiring clients to envision their life without their presenting problem. This question helps clients to define their goals and illuminate solutions. The miracle question transforms the patient's attention from the presenting problem to a problem that is solved (Pichot and Smock 2009). This question allows patients the freedom to think beyond the problems that seem insurmountable and allows them to identify resources that they may not remember or recognize when their minds are clouded by the problem. The miracle question is in essence a question that helps patients clarify their goals. The miracle question is a technique that counsellors can use to assist clients to think 'outside the square' concerning new possibilities and outcomes for the future.

Exception Questions: Having created a detailed miracle picture, the counsellor has started to gain some understanding of what the client hopes to achieve and the counsellor and client can begin to work towards these solutions. This is achieved through highlighting exceptions in a client's life that are counter to the problem. This helps empower clients to seek solutions. Exception questions provide clients with the opportunity to identify times when things have been different for them.

Scaling Questions: Scaling questions invite clients to perceive their problem on a continuum. Scaling questions ask clients to rate their priorities, goals, satisfaction, problems, coping strategies, successes, motivation for change, safety, confidence, treatment progress, and hope on a numerical scale from 1–10. These questions have great versatility and can be used to assess the client's perception of almost anything.

They are an essential solution-focused tool that helps to measure myriad client issues, and they can be asked from a multitude of perspectives.

Scaling questions can also help defuse intense emotion in a conversation. They can dramatically lessen the affective tone of emotionally charged issues. Solution-focused scaling questions are constructed in such a way that the number 10 highlights a positive aspect, such as satisfaction, the problem being solved, progress in treatment, or confidence in ability. Scaling questions are not used to measure the extent of the problem, but rather the scope of the solution. One of the biggest goals of a solution-focused therapist is to help patients stay focused on moving forward toward their goals. Scaling questions are fundamental to accomplishing this objective.

Presupposing change: When clients are focused on changing the negative aspects (or problems) in their lives, positive changes can often be overlooked, minimized or discounted due to the ongoing presence of the problem. The solution focused approach challenges counsellors to be attentive to positive changes (however small) that occur in their clients' lives. Questions that presuppose change can be useful in assisting clients to recognise such changes.

Currently, these core components remain important techniques for change in SFT and are an integral part of doing SFT as identified by the main developers of the model and the Research Committee of the SFT Association. A detailed explanation of these specific SFT components and techniques was done by De Jong and Berg (2008). SFT is a strength-based approach, emphasizing the resources that people possess and how these can be applied to a positive change process. SFT focuses on strengths and 'life without the problem' rather than a detailed analysis of problem dimensions. As a flexible approach, SFT has been enthusiastically received and applied across a range of contexts and client groups, including school and family settings, with professionals and community members, both in groups and as individuals (Corcoran and Pillai, 2009; Kelly, Kim and Franklin, 2008). Recent published reviews of studies of SFT effectiveness with children and families have suggested its effectiveness in improving children's behaviour and academic results. It is acknowledged, however, that the evidence base is insufficiently robust and comprehensive (Corcoran and Pillai, 2009; Gingerich and Eisingart, 2000; Kim and Franklin, 2009).

Specifically speaking, SFT does not adopt any formal theory of change but primarily depends on a set of key elements and techniques which may result in facilitating improvements in a relatively short period of time as a consequence of being employed either individually or in groups. These key elements are numerous such as: the therapist taking a non-expert, not knowing stance, the emphasis on using the clients own language, the value of making changes slowly, a faith in people's abilities and resources, and a recognition that the solutions which enable clients to achieve their goals do not necessarily directly relate directly to the problems client describe, to name but a few (Proudlock and Wellman, 2011). Put simply, the task is merely getting them to use the actual abilities. It is a solution-oriented perspective rather than problem-oriented one. To the end of increasing motivation and expectation, solution-focused therapy, like strategic therapy, emphasizes short-term treatment between 5 to 10 sessions.

TENETS OF SFT

Steve de Shazer and his colleagues offered some tenets to point out the differences between SFT and other problem-focused approaches, as well as to demonstrate how these tenets can be followed in session (de Shazer and Berg, 2007). SFT is not theoretically based but instead is based on practicality. These tenets are key to solution-focused therapy.

- **If It Is Not Broken, Don't Fix It**

This tenet is crucial and perhaps the single most important tenet underlying this approach. If the client is not reporting something as a problem, then they have already fixed it or are currently fixing it, making any therapeutic interventions irrelevant.

- **If Something Is Found to Be Working, Do More of It**

Central in practicing from an SF perspective is the belief that all people who come to counselling are already doing something to resolve the problem (or at least preventing the problem from getting worse). According to de Shazer et al. (2007), this tenet amplifies the hands-off perspective of this approach. If a client is already doing something that is effective, then the task is for the therapist to get out of the way and

encourage the client to do more of that behaviour. The task is to be tenacious about seeking to locate these things and respectful in inviting the client to do more of these things.

- **If Something Is Found Not to Be Working, Do Something Different**

There is a human tendency to repeat a solution that has not worked in the past. This is true for therapists and clients alike. As therapists, we often justify the repetition by thinking, “Maybe the client isn’t ready for change, but this is what needs to happen.” This tenet highlights the fact that a solution is not a solution unless it works; if something does not work it must not be a solution (de Shazer et al., 2007). Many approaches in therapy believe that if something does not work it must be the client’s fault, but in SFT, if the task developed in session is not effective for the client, then a different solution is developed.

- **Small Steps Can Lead to Big Changes**

Recognizing that small steps lead to big changes is one of the most important tenets of SFT. SFT is a minimalist and systemic approach; the task for the therapist is to understand that all that is required is for the client to do one small thing differently in order to solve the problem (de Shazer, 1985). The belief is that that one different behaviour will escalate into other changes, until the problem no longer exists.

- **The Solution Is Not Necessarily Related to the Problem**

In SFT, there is limited or even no time spent examining the situation that led someone into counselling, oftentimes the solution is not related to the problem. Instead, the solution is related to the client’s desired future. In this way SFT therapists work backwards as the client’s real life is carefully examined, searching for the presence of this desired future (de Shazer et al., 2007).

- **The Language for Solution Development Is Different From Language Needed to Describe a Problem**

In SFT, one cannot solve a problem with the same thinking that created it and the language must be different as well.

- **No Problem Happens All of the Time; There Are Always Exceptions**

This tenet builds on the previous one. One of the most important aspects of the SFT approach is the search for exceptions and the utilization of exceptions once found. The exceptions are often small and may occur outside a person's awareness of the problem, but once located and amplified, can grow and become more powerful. Also, these times lead to the discovery of hidden talents that can, and often do, lead toward solutions.

- **The Future Is Creatable**

This is the optimistic part of SFT. When people are not viewed as trapped, but instead are seen as stuck and possessing all of the tools they will need one day in the future to become unstuck, the future is seen as a hopeful place (de Shazer et al., 2007).

According to Hamza (2015), the Solution-focused therapists believe that psychological precepts such as diagnosis and resistance exist only in the minds of therapists, and therefore, the very act of diagnosing becomes a problem. Rather than engage in the traditional act of identifying and thus reinforcing behaviours exhibited by the clients when the problem did not exist, solution-focused therapists work collaboratively with clients to negotiate achievable goals, and therapy is oriented toward the future, not the past or even the present. Clients maintain their problems because they are unable to discern episodes in which the adverse behaviours are not presenting. Identifying these exceptions enables clients to repeat the positive behaviours and take control of their problems. The problems are then deconstructed and resolved through a solution-focused conversation between therapist and clients. The therapist infers that clients have the ability to solve their own problems with only a slight shift in how they behave or the way they view problems (Hamza, 2015).

Moreover, SFT's main importance is to teach the client how to set goals, make changes, and measure the results of successful changes. The strategy will be as follows: clients will then be prepared for a discussion in future sessions about the actions that could have been taken and how actions and changes are making a difference in the personal lives of the clients; as a result the therapist to feel free to ask the difference question. As changes happen in the life of the client, the SFT therapist will make use of the difference question by inquiring on the impact of these

changes. The difference question provides a discussion that affords the client and therapist to see the changes taking place in the life of the client.

Beauchemin (2015) argued that the Solution-Focused Therapy (SFT) approach differs from traditional wellness-based interventions that utilize a psycho-educational approach, instead focusing on participant conceptualizations of wellness, identification of strengths, and building solutions. A post-modern approach to counselling, SFT adheres to tenets of social constructivist theory (Crockett and Prosek, 2013). In contrast to modernistic perspectives on human behaviour, SFT focuses on the identification and exploration of what brings beneficial, positive changes in treatment (Lee, 2013). SFT supports the belief that “solutions to problems are not objective ‘realities’ but rather individually constructed” (Lee, 2013). As SFT conceptualizes problems as existing in the past, the approach focuses on the present and future rather than on past experiences.

The general assumptions of SFT as defined in the Treatment Manual for Working with Individuals by the Solution-Focused Therapy Association (Bavelas, De Jong, Korman, and Jordan 2013) include

- The therapeutic focus should be on the client’s desired future rather than on past problems or current conflicts.
- Clients are encouraged to increase the frequency of current useful behaviours.
- It is based on solution-building rather than problem-solving.
- No problem happens all the time. There are exceptions, that is, times when the problem could have happened but didn’t, that can be used by the client and therapist to co-construct solutions.
- Therapist helps clients find alternatives to current undesired patterns of behaviour, cognition, and interaction that are within the clients’ repertoire or can be co-constructed by therapists and clients as such.
- Differing from skill building and behaviour therapy interventions, the model assumes that solution behaviours already exist for clients.
- Clients’ solutions are not necessarily directly related to any identified problem by either the client or the therapist.
- The conversational skills required of the therapist to invite the client to build solutions are different from those needed to diagnose and treat client problems.

SFT differs significantly from other therapeutic approaches. Among the characteristics that distinguish SFT from other therapeutic approaches are: a lack of diagnosing pathology, a focus on what is right rather than what is wrong, and not assuming that what is behind the client's words is more significant than what is being said (McKergow and Korman, 2009). Language plays a critical role in SFT therapist-client interactions. SFT therapists ask questions to introduce new possibilities and co-construct new meanings, which can actively shape a new version of the client's life (Jordan, Froerer, and Bavelas, 2013). Clinically significant language differences from other modalities have been explored using microanalyses of expert sessions. Results have indicated that SFT sessions were significantly higher in positive content and lower in negative content when compared to Cognitive Behavioural Therapy (CBT) (Jordan et al., 2013). SFT formulations also preserved a significantly higher proportion of clients' exact words and added fewer therapist interpretations than did CBT or Motivational Interviewing (MI) (Korman, Bavelas, and De Jong, 2013).

2.1.4 Dialectical Behaviour Therapy (DBT)

Dialectical behaviour therapy (DBT) evolved from Marsha Linehan's efforts to create a treatment for multi-problematic, suicidal women. Linehan (1993) combed through the literature on efficacious psychosocial treatments for other disorders, such as anxiety disorders, depression, and other emotion-related difficulties, and assembled a package of evidence-based, cognitive-behavioural interventions that directly targeted suicidal behaviour. Initially, these interventions were so focused on changing cognitions and behaviours that many patients felt criticized, misunderstood, and invalidated, and consequently dropped out of treatment altogether. Through an interplay of science and practice, clinical experiences with multi-problematic, suicidal patients sparked further research and treatment development. Most notably, Linehan (1993) weaved into the treatment interventions designed to convey acceptance of the patient and to help the patient accept herself, her emotions, thoughts, the world, and others.

As such, DBT came to rest on a foundation of dialectical philosophy, whereby therapists strive to continually balance and synthesize acceptance and change-oriented strategies. Ultimately, this work culminated in a comprehensive, evidence-based,

cognitive-behavioural treatment for borderline personality disorder (BPD). The standard DBT treatment package consists of weekly individual therapy sessions (approximately 1 hour), a weekly group skills training session (approximately 1.5–2.5 hours), and a therapist consultation team meeting (approximately 1–2 hours). At present, eight published, well-controlled, randomized, clinical trials (RCTs) have demonstrated that DBT is an efficacious and specific² treatment for BPD and related problems.

Dialectical Behaviour Therapy (DBT) is an evidence-based, cognitive-behavioural treatment. DBT was developed by Marsha Linehan (1993) out of the University of Washington. DBT was developed for the treatment of adult women with borderline personality disorder (BPD) who have a history of suicidal ideation attempts, urges to self-harm and self-mutilate. The purpose of this literature review is to provide (a) an overview of DBT, (b) research indicating the efficacy of DBT, (c) cross-cultural client populations, and (d) recent developments and innovations. DBT is based on the theory that problems develop from the interaction of biological factors, a person's physiological makeup, and environmental factors which together makes emotion management difficult. Furthermore, the dialectics of DBT include acceptance and change (Linehan, 1993). The patient and the therapist need to accept reality while maintaining a conscious commitment towards change (Pemble and Leong, 2016).

DBT is a comprehensive programme of treatment consisting of individual therapy, group therapy, and a therapist consultation team. In this way, DBT is a programme of treatment, rather than a single treatment method conducted by a practitioner in isolation. Often, clinicians are interested in applying DBT but find the prospect of implementing such a comprehensive treatment to be daunting. In this case, it is important to remember that the most critical element of any DBT programme has to do with whether it addresses five key functions of treatment. Although the standard package of DBT has the most empirical support, different settings and circumstances may necessitate innovative and creative applications of DBT. In all cases, however, it is critical that any adaptation of DBT fulfills the following five functions:

- Enhancing capabilities: With DBT the assumption is that clients with BPD either lack or need to improve several important life skills, including those that involve:: regulating emotions (emotion regulation skills); paying attention to the

experience of the present moment and regulating attention (mindfulness skills); effectively navigating interpersonal situations (interpersonal effectiveness), and tolerating distress and surviving crises without making situations worse (distress tolerance skills). As such, improving skills constitutes one of the key functions of DBT. This function usually is accomplished through a weekly skills group session, consisting of approximately 4 to 10 individuals and involving didactics, active practice, discussion of new skills, as well as homework assignments to help patients practice skills between sessions (Linehan 1993).

- **Generalizing capabilities:** If the skills learned in therapy sessions do not transfer to clients' daily lives, then it would be difficult to say that therapy was successful. As a result, a second critical function of DBT involves generalizing treatment gains to the patient's natural environment. This function is accomplished in skills training by providing homework assignments to practice skills and troubleshooting regarding how to improve upon skills practice. In individual therapy sessions, therapists help patients apply new skills in their daily lives and often have clients practice or apply skillful behaviours in session. In addition, the therapist is available by phone between sessions to help the client apply skills when they are most needed (e.g., in a crisis) (Linehan 1993).
- **Improving motivation and reducing dysfunctional behaviour:** A third function of DBT involves improving clients' motivation to change and reducing behaviours inconsistent with a life worth living. This function primarily is accomplished in individual therapy. Each week, the therapist has the client complete a self-monitoring form (called a "diary card") on which he or she tracks various treatment targets (e.g., self-harm, suicide attempts, emotional misery). The therapist uses this diary card to prioritize session time, giving behaviours that threaten the client's life (e.g., suicidal or self injurious behaviours) highest priority, followed by behaviours that interfere with therapy (e.g., absence, lateness, non-collaborative behaviour), and behaviours that interfere with the client's quality of life (e.g., severe problems in living, unemployment).

After prioritizing the behavioural targets for a given session, the therapist helps the client figure out what led up to the behaviour(s) in question and the

consequences that may be reinforcing or maintaining the behaviour(s). The therapist also helps the client find ways to apply skillful, effective behaviour, solve problems in life, or regulate emotions. In terms of enhancing motivation, the therapist actively works to get the client to commit to behaviour change, using a variety of “commitment” strategies (Linehan, 1993).

- Enhancing and maintaining therapist capabilities and motivation: Another important function of DBT involves maintaining the motivation and skills of the therapists who treat clients with BPD. Although helping multi-problematic BPD clients can be stimulating and rewarding, these clients also engage in a potent mix of behaviours that can tax the coping resources, competencies and resolve of their treatment providers (i.e. suicide attempts, repeated suicidal crises, behaviours that interfere with therapy). As a result, one essential ingredient of an effective treatment for BPD clients is a system of providing support, validation, continued training and skill-building, feedback, and encouragement to therapists.

To address this function, standard DBT includes a therapist consultation-team meeting, for which DBT therapists meet once per week for approximately 1 hour or two. The team helps therapists’ problem-solve ways to implement effective treatment in the face of specific clinical challenges (e.g., a suicidal patient, a patient who misses sessions). In addition, the team encourages therapists to maintain a compassionate, nonjudgmental orientation toward their patients; monitors and helps reduce therapist burnout; provides support and encouragement; and sometimes employs structured training/didactics on specific therapeutic skills (Linehan 1993).

- Structuring the environment: A fourth important function of DBT involves therapist normally has the patient modify his or her environment, but at times, may take an active role in changing patients’ environments for them (e.g., if the environment is overwhelming or too powerful for the client to have a reasonable degree of influence).

The Biosocial theory and emphasizing emotions in treatment

In addition to serving the five functions mentioned previously, DBT is anchored in a theory of BPD that prompts clinicians to focus on emotions and emotion regulation in treatment. According to the biosocial theory of BPD, persons with BPD are born with a biologically hard-wired temperament or disposition toward emotion vulnerability (Linehan, 1993). Emotion vulnerability consists of a relatively low threshold for responding to emotional stimuli, intense emotional responses, and difficulty returning to a baseline level of emotional arousal. Without very skillful and effective parenting or child-rearing, the child has difficulty learning how to cope with such intense emotional reactions. The central environmental factor consists of a rearing environment that invalidates the child's emotional responses by ignoring, dismissing, or punishing them, or by oversimplifying the ease of coping/problem solving. The invalidating environment transacts with the child's disposition toward emotion vulnerability, thus increasing the risk of developing BPD. As a result, the child is left bereft of the skills needed to regulate emotions, often is afraid of his or her emotions (i.e., "emotion phobic"), and may resort to quickly executable, self-destructive ways to cope with emotions (e.g., deliberate self-harm) (Chapman, Gratz, and Brown, 2006).

Based on the conceptualization of BPD as a disorder of emotion dysregulation, DBT is an emotion-focused treatment. One of the primary goals of DBT is to improve patients' quality of life by reducing structuring the environment in a manner that reinforces effective behaviour/progress and does not reinforce maladaptive or problematic behaviour. Often, this involves structuring the treatment in a manner that most effectively promotes progress. Typically, in DBT, the individual therapist is the primary therapist and is "in charge" of the treatment team. He or she makes sure that all of the elements of effective treatment are in place, and that all of these functions are met.

Linehan (1993) states, that DBT must meet five critical functions. The therapy must (a) enhance and maintain the client's motivation and engagement to change, (b) enhance the client's capabilities, (c) generalize new capabilities to various environments, (d) enhance therapist's capabilities and motivation, and (e) structure the environment that is most conducive for change. DBT is a skills based therapy (Linehan, 1993). DBT is broken into five subgroups or modules including, core mindfulness, emotion regulation,

distress tolerance, interpersonal effectiveness, and problem solving (Linehan, 1993). Each module is skill specific. For example, the distress tolerance module includes the skill, acronym ACCEPTS

The “ACCEPTS” skill is an acronym, which targets to distract individuals from emotional distress. The acronym is a helpful way for the client to remember the skills. The “A” stands for activities, like playing a board game or basketball. The “C” stands for comparisons. In comparisons, the person compares themselves with others and how they might react in similar situations. The “C” stands for contributing. A person who can do something for someone else, for example is more likely to be able to distract from emotional suffering. The “E” stands for emotion. With this skill, the person acts opposite to whatever emotion is distressing. For example, if the person is angry, then smile. The “P” means pushing away from the problem. The “T” stands for thoughts and the ability to monitor and control one’s own thoughts. The “S” stands for sensations. One can distract from emotional suffering by holding a piece of ice, for example. DBT has been generalized into many different settings to treat various disorders and problem behaviours (Braun, 2005). No longer is DBT specific to adult women with BPD. In recent time, DBT is used to treat bulimia, emotion dysregulation, drug dependence, suicidal adolescents, sex offenders, victims of sexual abuse and attention deficit hyperactive disorder (ADHD) (Robins, 2000).

DBT has been empirically evaluated in several randomized controlled trials (RCTs) as a treatment for women who meet criteria for BPD, both by Linehan and her colleagues. Overall, the clinical outcome data support the efficacy of DBT as a treatment for women with BPD, warranting its designation as “empirically supported” by the clinical psychology division of the American Psychological Association. In fact, more than a decade after publication of the initial RCT (Robbins and Chapman, 2004), it remains to date the only outpatient psychotherapy with demonstrated efficacy for this population. It also has been adapted for and evaluated in several other populations, and increasingly is being disseminated to and practiced by front-line clinicians.

DBT therapists use the conceptualisation derived from behavioural analyses to develop comprehensive solution analyses. DBT employs standard cognitive behavioural problem-solving procedures, albeit with some novel twists (Linehan, Swales and Heard,

1993), to decrease problematic behaviours and increase the acquisition, strengthening and generalisation of new more skilful behaviours. The therapist both assists the client to acquire new behaviours but also analyzes and solves motivational factors that interfere with the utilisation of new behaviours. In developing solution analyses, DBT therapists use four sets of change procedures from the cognitive-behavioural canon: skills training, exposure, contingency management and cognitive modification. During the process of repeated behavioural and solution analyses, DBT therapists determine which of these four procedures will deliver maximum benefit to the client in stopping problematic behaviours and shaping new more functional behaviours.

If the therapist identifies that the client has a skills deficit, for example, the client does not know how to be appropriately assertive, then the therapist will teach the client relevant skills. If the client does possess the relevant skills but unwarranted emotion or dysfunctional cognitions inhibit the client from using them, the therapist will use exposure and cognitive modification respectively to ameliorate the difficulty. For example, a client may have assertion skills but not use them because they experience overwhelming anxiety or think 'I'm a bad person for asking for what I want'. The therapist in this circumstance may teach anxiety management techniques, cognitive restructuring of the judgement that asking for what you want is 'bad' combined with exposure to making appropriate requests. If the skillful behaviour is too low in the response hierarchy, then the therapist will use contingency management procedures. For example, the client may know how to ask for what they want but both past and current environments punish such requests (Linehan et al, 1993).

In this circumstance, the therapist encourages and reinforces the client asking for what they want, helps the client find environments that reinforce requests for help and coaches the client in how to manage environments that punish requests for help. DBT therapists generate, evaluate and implement comprehensive solution analyses using the full range of procedures to problematic responses in the behavioural analysis. For example, in the situation of the client experiencing increased suicidal ideation on getting ready for bed described above, the therapist employed several procedures. To decrease the classically conditioned increases in suicidal ideation and guilt occurring on preparing for bed, the therapist conducted imaginal exposure to the bed-time sequence in session.

For the client to experience non-reinforced exposure during this intervention, the therapist first rehearsed the client in some of the mindfulness skills that the client had learnt in skills group. A more detailed analysis of the bed-time routine revealed that the client tended to recall past distressing events and to anticipate an increase in suicidal thinking as she prepared for bed. The therapist encouraged the client to remain very mindful of the present moment by describing, in detail, her current actions in preparing for bed and to simply notice intrusive thoughts about the past or worry thoughts about the future, if they occurred, before refocusing on the present (Linehan et al, 1993).

During the exposure, the therapist remained alert to the client becoming unmindful and coached her on refocusing on the present. Following exposure during sessions, the client practised remaining more mindful at home when preparing for bed. When the client began to use these new skills at home in the evening, she called her therapist for additional coaching in the application of the skills in vivo. To address the functional consequences of the behaviour, therapist and client focussed on solutions both to decrease guilt and suicidal ideation and to increase a sense of 'doing what was right'. Cognitive restructuring of thoughts of self-blame for the abuse proved effective in reducing guilt. To decrease the suicidal ideation and to increase her sense of 'doing the right thing', the client reminded herself of the negative consequences to herself and her family of self-harm and reviewed her DBT skills manual to identify a skill to utilise during the current crisis. As she practised the chosen skills she repeated to herself, 'Now I really am doing what's best for me and my family'.

Effectiveness of dialectical behaviour therapy for treatment of these disorders have been proved by Katz, Cox, Gunasekara, and Miller (2004), Koons, Robins, Tweed, Lynch, Gonzalez, and Morse (2001), Bohus, Peterson, Stiglmayr, Haff, and Limberger. (2000 and 2004), Pasiieczny and Connor (2001) in the field of BPDs and Mcquillan, Nicastro, Guenot, Girard, Lisser, and Ferrero (2005). Miller, Rathus, and Linehan (2007) regarding people with suicide tendencies and Mckay (2007) regarding patients who committed violent crimes. In addition, surveys of effectiveness of dialectical behaviour therapy in attenuating impulsive behaviours among women suffering from BPD showed no significant improvement, although trivial improvements were observed. Many works

have shown that dialectical behaviour therapy is effective in treating impulsive behaviour by Soler, Pascual, and Tiana (2009) and Mcquillan (2005).

2.1.5 Concept of Emotional Intelligence

The origins of the concept of Emotional Intelligence dated back to Darwin's work on the importance of emotional expression to survival and successful adaptation. In the 1900 even though traditional definitions of intelligence emphasized cognitive aspects such as memory and problem -solving, several influential researchers in the intelligence field of study had begun to recognize the importance of non-cognitive aspects. For instance, as early as 1920, R. K. Thorndike used the term social intelligence to describe the skill of understanding and managing other people (Hein, 2005). The work of Howard Gardner in 1983, introduced the idea of multiple intelligence which included both interpersonal intelligence (i.e. the capacity to understand intentions, motivations and desires of other people) and intrapersonal intelligence (i.e. the capacity to understand oneself, to appreciate one's feelings, fears and motivations). In this regard, the traditional types of intelligence such as Intelligence Quotient (IQ) fail to fully explain cognitive ability.

In 1985, Payne, wrote a doctoral dissertation which included the term emotional intelligence. This seems to be the first academic use of the terms "emotional intelligence". Then in 1990, the work of two academic journal articles Mayer, (of New Hampshire) and Salovey (Yale) were trying to develop a way of scientifically measuring the difference between people's ability in the area of emotions. As a result of the growing acknowledgment by professionals of the importance and relevance of emotions to work outcomes, the research on the topic continued to gain wide concurrency.

In 1995, Goleman's book came out under the true emotional Intelligence, the book made it to the cover of Time Magazine in the USA and it became an international best seller for a whole year. In 1998, Goleman published a book called "Working with Emotional Intelligence" in that book he widened the definition of emotional intelligence to consist of 25 skills, abilities and competences. Thereafter, articles on Emotional Intelligence began to appear with increasing frequency across a wide range of academic and popular outlets as well as many definitions and claims began to dominate academy.

According to Ioannidou and Konstantikak (2008) emotional intelligence is defined as the ability to control someone's wishes and to delay their fulfillment, to regulate others' mood, to isolate feeling from thinking, to place you into another's shoes and to hope. Also, it includes a range of skills such as self-control, persistence, zeal and ability to motivate others. According to Goleman (1998), emotional intelligence involves the following elements: self-awareness, empathy, handling relationships, managing feelings, motivation. There is no magic number for the multiplicity of human talent, but you can sort these capabilities in five key areas:

- **Knowing one's feelings:** Conscience, recognising an emotion the moment it is created, is the cornerstone of emotional intelligence. The ability to understand and appreciate one's emotions is the key to psychological in-sight and self understanding. While the inability to see one's real feelings, leaves one at one's mercy (Maheshwari and Tripath, 2013).
- **Controlling one's emotions:** To manipulate and control one's emotions so as to be appropriate at any time is an ability built on conscience. People lacking this ability are always fighting feelings of depression, while those who are distinguished for it can overcome setbacks and disappointments of life more quickly (Maheshwari and Tripath, 2013).
- **Exploration of incentives:** Control of emotions so as to serve an objective is essential to focus attention, to find incentives, to self- possession and to creativity. Emotional self control seems to be behind any kind of achievement. People who have this ability tend to be much more productive and effective (Maheshwari and Tripath, 2013).
- **Recognition of other person's emotions:** Empathy, an ability that has its basis in emotional awareness, is a fundamental «human skill». Empathetic people are more amenable to silence social signals indicating what other people may want or need. This makes them better in professions related to community outreach, teaching, sales and administration (Maheshwari and Tripath, 2013).
- **Handling relations.** The art of interpersonal relations is to a large extent, the skill of handling other's feelings. These are skills leading to popularity, leadership acumen and interpersonal success (Maheshwari and Tripath, 2013).

The concept of emotional intelligence came out of the term emotion, which implies a feeling with its distinctive thoughts, psychological and biological states, and ranges of propensities to act. So it may be an agitation or disturbance of mind, passion, any vehement but definitely related to the person's mental state. There can be a number of emotions like anger, sadness, fear, enjoyment, surprise, love disgust, and shame etc. A manager's ability to balance the emotions with the reason to maximize long-term happiness i.e. capacity of effectively recognizing and managing one's own emotions and those of others may be termed as emotional awareness or emotional management skills. In the words of Goleman (1998) emotional intelligence is "the ability to motivate oneself and persist in the face of frustration; to control impulse and delay gratification; to regulate one's moods and keep distress from swamping the ability to think; to empathize and to hope". In fact the concept of emotional intelligence is an umbrella term that captures a broad collection of individual skills and dispositions, usually referred to as soft skills or inter or intra personal skills that are outside the traditional areas of general intelligence and technical or professional skills (Maheshwari and Tripath, 2013).

The latest researches in neurobiology have brought out that human beings operate from two minds i.e. the rational mind and the primitive mind, which is purely the emotional mind. The rational mind is centred in the neo-cortex, the outer part of the brain and allows human beings to plan, learn, remember, love, care and also to make moral and ethical distinctions. On the contrary the emotional mind is the source of basic emotions like anger, sadness, fear, lust, surprise, disgust, etc and help the individuals in attaining emotional competence. Emotional competency is the learned capability that leads to outstanding performance in life. This means that emotional intelligence actually contributes to rational thought. It is now believed that one's feelings take precedence over one's thoughts in making decision, because a rational mind takes longer to register and respond than the emotional mind. In this kind of emotional reaction, there is an extended appraisal of the situation, both thoughts and cognition play a key role determining what the emotion be aroused (Maheshwari and Tripath, 2013).

The ability of an individual to monitor one's own and other's feeling and emotions, to discriminate among them and to use the available information in steering

one's own as well as other's behaviour has attained much significance even in the information age. A growing body of research on the human brain proves that, for better or worse, leader's mood affects the emotions of the people around them. The reason for that lies in what scientists call the open loop nature of the brain limbic system, our emotional centre. A closed loop system is self-regulating, whereas an open loop system depends on external source to manage itself. Humans' limbic system's open-loop design lets other people change one's very physiology and hence, our emotions. In organisations mood starts at the top and tends to move the fastest because everyone watches the boss/leader, and the subordinates take their emotional cues from him. Thus the entire phenomenon creates a strong link between emotional intelligence and leadership effectiveness irrespective of the leadership style or leadership frame of the leader, which have been described in the ensuing section (Lyubomirsky, King, and Diener, 2011).

People who have largely those skills usually stand out in terms of smooth interaction with others and always distinguish in social scene. In the early '90s, Howard Gardner with his work on "multiple intelligence" gave another dimension. The theory of Reuven Baron on emotional intelligence followed and introduced the term EQ as opposed to IQ. Emotional intelligence, according to Reuven, is related to those abilities of individuals to understand themselves and others, easily adapt to changes and demands of the environment and to manage emotions. They were followed by Mayer, Salovey in 1990, and Goleman in 1995. It is true that the various psychometric tests to measure emotional intelligence are new in the field of psychometrics, and the measurement of such complex factors is a quite difficult and arduous work, and sometimes leading to undesired results. Researches investigating the relationship between emotional intelligence and school performance suggested a moderate positive correlation between these two factors. School will have to breathe in students the ability to achieve to feel happy, to provide activities full of life. The above concerns everyone without any distinction between moderate or excellent students. It is considered that today's educational system has focused all its efforts in achieving cognitive goals. Without any attempt to ignore or underestimate the importance of these goals, it should be noted that this unilateral approach is often against, mental health, internal balance and peace for all people involved.

The concept of emotional intelligence has enjoyed great popularity in recent years. Many studies deal with the development of emotional intelligence in adults and children (Lyubomirsky, King, and Diener, 2011). Emotional intelligence is a person's ability to understand his feelings, to listen to others and to feel them, and to express his emotions in a productive manner (Goleman, 1998). Emotional intelligence is a new concept symbolized by the abbreviation EQ (Emotional Intelligence Quotient). It includes skills such as being able to control the impulse, to curb the impatience, to properly regulate mood and to prevent the frustration, to stifle the ability to think, to have empathy and hope (Lyubomirsky, King, and Diener, 2011). EQ may be equally and sometimes more powerful than Intelligent Quotient (IQ). They are not two conflicting but rather two distinct capabilities. Many people connect spirit with emotional insight. Academic intelligence doesn't have relation with emotions and feelings. The most intelligent persons could be drowned into an ocean of un-disciplined impulses and unbridled passions.

It is believed that emotional intelligence can be learned. This is why it is important for children to exercise those skills. In this process the role of parents and educators is very important (Joseph and Newman, 2010). Modern school and today's educational system, as a structure, usually do not promote emotional intelligence. Traditional school, with its integrated educational systems, targets primarily the students' mental development and focuses on providing the necessary knowledge and competencies. This educational approach neglects the development and training of social skills and communication through which an empirical system can be achieved including: recognising and handling emotions, communication and empathy, and social and emotional development of children as parallel educational objectives equal merit with their academic progress. Emotional training and education are skills that form emotional intelligence as part of all emotional interactions between children-their family and school, namely perception, expression and control of emotions, self control, empathy, quality communication, conflict resolution process, demanding attitude, personal responsibility, conscience and self-acceptance. Emotional education within the family in particular, is positively affecting children's emotional intelligence and mental health. The first area of socialization that promotes children's' emotional intelligence is family and in

particular their parents. Emotional education requires learning new skills from adults (parents, teachers), to be able to 'educate' children in social and emotional skills (Gee, Marshall and King, 2010).

2.1.6 Concept of Peer Pressure

Peers are a group of people of the same age, status or interests. Peers could include friends, classmates, team members or co-workers. Influence is the effect that a person or thing has on another. Influences can be positive or negative (Alberta Health Services, 2009). Peer Influence is defined as pressure, planned or unplanned, exerted by peers to influence personal behaviour (Glossary of Education, 2013). It is a peer or group of peers trying to persuade you to think or act in a certain way, or to make a particular decision (Alberta Health Services, 2009).

Peer pressure is the influence exerted by a peer group or an individual encouraging other individuals to change their attitudes, values or behaviours in order to conform to group norms (Treynor, 2009). Social groups affected include membership groups in which individuals are formally members and in which membership is not clearly defined. Among adults, it is considered a rare phenomenon, though with the increasing competition for resources and personal progress, adult peer pressure is an emerging area of interest. Peer pressure is not always a bad thing because peer groups can actually have a very positive influence on individual's behaviour. For some adults, a peer group can be a source of security, a learning opportunity and a source of encouragement among others. The difference between negative and positive peer pressure is the impact it has on the person. While most forms of influence do not necessarily feel comfortable for the person on the receiving end, the outcomes of the influence are likely to be mostly positive.

Positive peer pressure results in a person feeling better, healthier or happier. Negative peer pressure on the other hand, results in people feeling unhappy, unwell or uncomfortable. People give in to peer pressure because they want to be accepted and fit in a group. Conformity may create problems when peers influence each other to participate in deviant activities. Despite the risk, peer groups remain a very essential part of an individual because they have several benefits to an individual. Peer group is a safe

place to meet like-minded individuals, allows one to take positive risks and test out values and opinions of others, test out their strengths and limitations, feel safe and boost their self-confidence, explore new and positive things including music, other interesting activities, feel understood and accepted by others going through the same phase and improve their ability to make personal choices.

Peer pressure is the power or influence a social group exerts on an individual or individuals. It may be found in children that are toddlers. Children can mimick adults or if asked to do so take part in their actions. This type of influence can eventually affect the behaviour of such children in future. Again with the common practice of pre-schooling in most Nigerian homes and families today, children between 3 and 4 years would sometimes not do what parents have taught them to do but would instead do things to please their friends just because they like them. Due to their exposure to schooling so early, they become aware of manners of doing things and rules that are different from those of their parents or families. Then they may actually begin to demand to do some of the things parents had not allowed them to do. They may begin to cut boundaries or limits parents had set for them. Their peer group becomes more important to them as models.

Peer pressure becomes a disturbing and worrisome social problem as growing children take on their peer group as their role models. This is because they begin to act and develop the copycat syndrome (what Igbinovia 2003, identified as one of the causes of crime in Nigeria). As a result of this syndrome, a child would desire the same kind of toys, wear the same kind of clothes, eat the same kind of food, share eating habits, share favourite television programmes, share likes and dislikes, and even share bed times with peers. At this point, the parents start having difficulties exercising social control on the child because the values and opinions of their peers (age or friendship cliques) as far as he/she is concerned supercede those of the parents. Also because they want to look and act like the others. Imitation and experimentation have been identified as ways by which teens and adolescents learn anti-social and criminal behaviour (Ogbebor, 2012).

As children grow into teens, the symptoms of peer pressure become more problematic especially, where parental bonding is emotionally or otherwise lacking, or weak. More so, when there are difficulties and challenges at home and teenagers desire

to fit with their peers and be accepted by them. Depending on the strength of this desire, “teenagers” right thinking may be beclouded or dislodged”. In view of these traits, a teenager who is a part of a group that is involved in cultism, thieving, stealing, lying, drugs, examination malpractice or any of the vice of society, is most likely to participate in them.

Involvement with one's peers and the attraction of peer identification increase as children grow, develop and move into early adolescence. As the adolescents grow, rapid physical, emotional and social changes occur and they begin to resist parental guidance and start questioning adult standards. They find it more reassuring to fall back to their peers for advice because they feel that they understand themselves better. According to Anukam and Anukam (2006), peers are the school mates or colleagues with whom the student interacts on a day –to-day basis in his academic pursuit. They are his closest physical neighbour while on campus; they are bound to wield a tremendous influence over his or her life.

In a similar view, Burns and Darling (2002), state that a peer refers to anyone that one looks up to or who is an equal in age or ability to someone. A friend, someone in the school or community or even someone on a television programme could be a peer. Peers can be positive and supportive. They can help each other develop new skills, or stimulate interest in books, music or co-curricular activities. However, peers can also have a negative influence. One of the most striking features of adolescence is peer formation and peer pressure. It is also regarded as an emotional or mental force from people of the same social group (such as age, grade or status, political parties, trade union) to act or behave like themselves. The adolescent behaviour is greatly influenced by peer pressure. This influence is a reflection of the adolescent's desire to belong or to be accepted by his or her peers. Therefore, peer pressure can be regarded as an emotional feeling or force by people of the same social group in order to behave alike.

As people grow older, they are faced with some challenging decisions (Steinberg and Monahan, 2007). Some do not have a clear right or wrong answer. Other decisions involve serious moral questions. Making decisions is hard enough, and can be even harder when pressured by other people. People of the same age group, like classmates, or workmates are called peers. Your peers are the people with whom you identify and spend

time with. In adults, peers may be determined less by age and more by shared interests or professions. They heavily influence one's behaviour, and get one into doing something. Peer pressure occurs when an individual experiences implied or expressed persuasion to adopt similar values, beliefs, and goals, or to participate in the same activities as those in the peer group.

Peer pressure is something everyone has to deal with, even adults (Rubin, Bukowski, and Parker, 2009). Paying attention to own feelings and beliefs about what is right and wrong can help in knowing the right thing to do. Inner strength and self-confidence can help one to stand firm, walk away, and resist doing something when they know better. Therefore, peer pressure exists for all ages and no one is immune to peer influence. Peer pressure can be either expressed or implied. In expressed peer pressure, an individual is challenged directly to comply with existing norms. Studies show that peers are inclined to take risks they do not want to take because they believe the risky behaviour will increase their standing in the eyes of their peers and assure their acceptance in the group (Cotterell, 2007).

Implied peer pressure is more subtle and can be harder to combat. For example, a group of peers may make fun of the way another peer is dressed up, pressuring members of their group to dress only in one acceptable style. Often young people who look, dress, or act differently, or who have significant interests that differ from those of their age group become outcasts because of the pressure groups place on their members not to associate with anyone unlike themselves (Perkins, 2003). This can lead the rejected person to feel desperate and depressed. Adult peer pressure can be challenging when an individual is trying to fit in a certain group given the fact that resources are a key factor here. It is all about the social class of an individual in the society which is as a result of the socialization process that one was exposed to. Having good company is everyone's wish but that may not be the case once there is low self-esteem. In order to curb the challenge, adults begin to work on areas that will help them fit in a given peer group (Fishbein, 1996). By the time a person reaches the age of forty in a professional or managerial career, it is clear whether he or she will make it to the top of the field. If individuals have not reached their goals by this time, most adjust their level of

aspirations and in some cases start over in a new career. Many however are unable to recognize that they have unrealistic aspirations and thus suffer from considerable stress.

According to Santrock (2010), peers are the individuals who are about the same age or maturity level. Same-age peer interaction serves a unique role in culture of developed countries. One of the most important functions of the peer is to provide a source of information about the world outside the family. From the peer group, adolescents receive feedback about their abilities. Adolescents learn whether what they do is better than, as good as, or worse than what other adolescents do. Learning this at the home is difficult because siblings are usually older or younger, and sibling rivalry can cloud the accuracy of comparison (Rubin, Bukowski and Parker, 2009). Peers are the one with whom adolescents identify, learn, fight, discover new enterprises and learn about themselves. Through the years, peer group becomes more significant in adolescent's social development. Peers along are important aspects of well-being.

Understanding how important this influence in adolescent's behaviour and emotional health is crucial in developing accurate assessment and its appropriate intervention (Kerns, 2000). Participation in social and interpersonal relationships helps to provide the resources for successful coping with developmental tasks. Jackson (1993) stated that besides depending on personality characteristics adaptability to new requirements depends upon youngsters' interpersonal activities. Talking about Peer relations, positive relations are necessary for normal social development in adolescents. Social isolation, or the inability to be included in a social network, is linked with many different forms of problems and disorders, ranging from delinquency and problem drinking to depression.

Theorists like Jean Piaget (1932) and Harry Stack Sullivan (1953) stressed that it is through peer interaction that children and adolescents learn the symmetrical reciprocity mode of relationships (Santrock, 2010) Adolescents explore the principles of fairness and justice by working through disagreements with peers. They also learn observers of peers' interests and perspectives in order to smoothly integrate themselves into ongoing peer activities (Santrock, 2010). It is easier for adolescents to search for identity if they have peers support (Hilgards, 1996). Peer group is the testing grounds for new values and behaviours. Close peers help the adolescent work out his or her identity.

In order to accept this identity formation, the adolescent must feel accepted and liked by others. Additionally, the “status” of friends during adolescence provides a sense of reflective – self-esteem. Being in the “popular” groups in adolescence elevates self-esteem into young adult life (Schwartz, 2009).

2.2 Theoretical Framework

2.2.1 Bandura’s Social Learning Theory

Social learning theory is relevant to learning and unlearning of behaviour. Its relevance to the study of almost all types of human behaviour cannot be overemphasised. This explains why the theory is chosen. It is assumed that rebellious behaviour could emanate from environment, personality type and/or observation of other people’s behaviour. The theory can be used to explain causes, incidences and indicators of rebellious behaviour.

Bandura’s (1977) social learning theory lays emphasis on the importance of observing and modelling behaviours, attitudes and emotional reactions of others. Bandura (1977) noted that most human behaviours are learned, through observation and modelling. By observing others one forms an idea of how new behaviours are performed and on later occasions, this coded information serves as a guide for action. Social learning theory postulates that human behaviour comes in terms of continuous reciprocal interaction between cognitive, behavioural and environmental influences. Bandura remarked that aggression is learned through a process called behaviour modelling, that individuals do not actually inherit violent tendencies but they model them. In this theory Bandura argued that individuals especially children learn aggressive responses from observing others, either personally or through observing the media or environment. The theorist stated that many individuals believe that aggression would produce reinforcement. This reinforcement can be formulated into reduction of tension, gaining financial rewards or gaining the praise of others or building self esteem. Bandura highlighted that children can model the behaviour of parents or the behaviour of a delinquent who is able to motivate them in one way or the other. According to this view point delinquent children behave the way they do because they have not been guided

appropriately by the parents and other agents to imbibe the laid down rules and norms of the society and to translate them into behaviour.

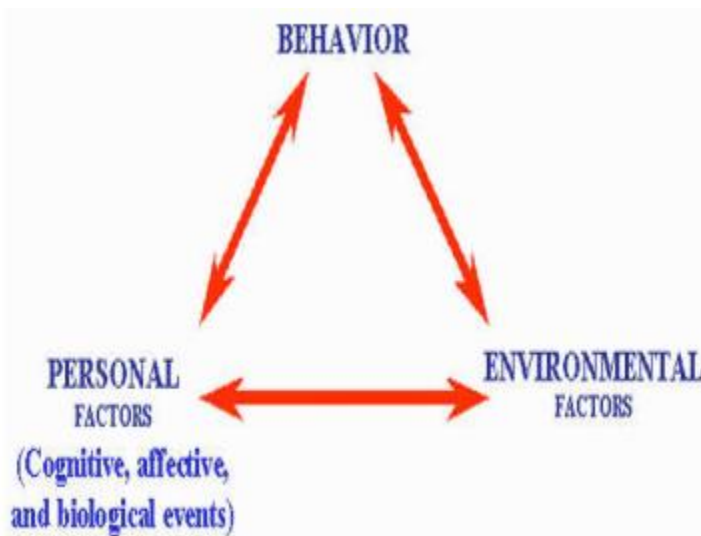
Social learning theory is basically an invention of Albert Bandura who gives the notion of reciprocal determinism. This idea states that an individual's observation, personality characteristics and socio-cultural settings also have a potential influence on his or her own behaviours. He presented three models to understand observational learning (i) Live Model (ii) Verbal Instruction, and (iii) Symbolic model. In his view, live model is the model of demonstration of person's desired behaviour; verbal instruction is a model of instruction for the certain behaviour; and symbolic model is about fictional characters which represents actions through media (Radio, television, literature) (Bandura, 1977).

Bandura (1977) puts more emphasis on individual's characteristics and environment as two reciprocal determinants and dominant factors for individual's behaviour in society. Otherwise, all these three factors influence each other and make one's personality. According to social learning theory (Akers and Silverman, 2004) model behaviour is outcome of following four factors: Attention; Retention (remembering what one observed); Reproduction (ability to produce the behaviour); Motivation (good reason) to adopt the specific behaviour. Two qualities shape an individual's behaviour: punishment (positive and negative) and reinforcement (positive and negative). This categorisation interprets that Social Learning and Clinical Psychology teaches that the effect of behaviour influences the motivation of individuals and group of people for some significant type of action or some specific behaviour.

This notion suggests that behaviour is not only influenced by psychological factors but environmental factors also have an influence upon the behaviours. Thus, it can be concluded that social learning theory is comprised of two aspects: (i) Behavioural Learning Aspect, and (ii) Cognitive Learning Aspect. The former one suggests that environment influences people's behaviour and motivates them for some specific behaviour while the latter assumes that psychological factors essentially influence one's behaviours (Griffin, 2008).

In 1941, an outfit of social learning theory was introduced by Miller and Dollard, called social cognitive theory, which attempts to explain that human beings make the

choices in view of their senses because of their logical tendencies (Miller and Dollard, 1941). The proposition of social learning was expanded and theorized by Canadian psychologist Albert Bandura (1962). It expounds interaction of people with their environment that is based on their own perceptions and interpretation. This interlink can be termed alternatively in these words that people make an internal (cognitive) perceptions of their external (social) environment and intent for a specific behaviour. This theory also explains the way as people maintain the certain kind of behaviour. Discussing environment cognitive theory refers to two factors social and physical environment. Physical environment includes all materialistic things, such as place, money, weather, food, while social environment consists of family members, friends, co-workers, and neighbours. This environment or situation helps to understand one's behaviour because the situation affects behaviour. This inter-linkage is depicted through the following model.



Source: Pajares (2002).

In view of this model the psychological experimental literature about violence and aggression suggest that there are internal and external factors (environment / situations) that can affect one's perceptions that cause provocations or intent (behaviour). It was proposed that theory of social cognition is relevant equally to terrorists and their organizations. She observes that the dealings of terrorists are centred on a prejudiced analysis of the world rather than impartial understanding. They sort out

the understanding and opinion of the social and political environment by means of the thinking and attitudes with reference to their experiences and memories (Randy, 2004).

2.2.2 Reversal Theory and Rebelliousness

This theory is relevant to this study because it examines the influence of emotion on human behaviour. The theory is very much related to the dependent measure of the study. It can be used to explain how individuals reverse between being rebellious and obedient in behavioural dispositions. Reversal Theory is a psychological theory focusing on motivation and emotion. Whereas many theories of personality focus on hard-wired preferences, Reversal Theory focuses instead on an individual's changeability and flexibility. Reversal Theory is organized into four "domains" or areas of focus; each has two opposing motivational states. You reverse between states as situations - and the meaning you attribute to them - change. Your emotions result from whether your motives are being fulfilled or not – if they are, good emotions result; if they are not, negative emotions emerge. The power of Reversal Theory lies in people's ability to recognize the need for a state reversal, and then to change their states (called reversals) to respond to their needs – and those of others.

Reversal theory is concerned primarily with how people experience motivation and how this influences their behaviour and experience (Apter, 1982). The theory suggests that people fluctuate between different motivational states, or "metamotivational modes", that are opposite to each other. Four main pairs of metamotivational modes are posited by reversal theory. The telic/paratelic modes involve the relationship between means and ends, wherein the telic state is more goal-directed, and the paratelic state is more oriented towards immediate enjoyment of a present activity. The negativistic/conformist model refers to opposing the rules or tacit requirements of one's present context, or going along with the rules. The mastery/sympathy modes concern exerting control over situations, people, or things, versus wanting sympathy, attention, or closeness.

Finally, the autic/alloic modes refer to directing one's attention and efforts towards oneself (autic) or toward other people (alloic). The autic and alloic modes are frequently considered in relation to other mode pairs, and in particular to the

mastery/sympathy modes. Thus, an individual who is in an autic mastery state will want to feel a personal sense of power and control, while someone in an alloic mastery state will want to experience a collective or vicarious sense of power and control, as in the case of identifying with a winning sports team (Apter, 2007; Apter, Mallows, and Williams, 1998). In application to this study, the construct of negativism dominance or "rebelliousness" is of particular interest, due to its presumed connection with adolescent risk-taking behaviour. Rebelliousness in reversal theory has been measured as negativism dominance based on the negativism and conformity subscales of large omnibus measures.

Reversal theory proposes that one state from each of the four pairs will be active at any given time. Switches will then occur from time to time from one state to the other within each of these pairs. The opposite states in a pair cannot function at the same time. Rather, they must alternate because they are incompatible with each other and represent opposite ways of seeing the world. More fundamentally, they embody opposite values.

2.2.3 Kool's Psychological Model of Nonviolence

The choice of this theory was based on its tenets of non-violence. If rebellious behaviour is to be properly reduced, nonviolence should become everyday behaviour for students at all levels. It is assumed that students need to imbibe nonviolence behaviour in their quest to negotiate with authority figures within and outside the school. It is based on this assumption and rationale that this theory was chosen. Kool (1993) outlined many important issues that ought to be considered when developing a theory of nonviolence. While acknowledging the early psychological work on peace Kool (2008) situates nonviolence within current psychological theory and concepts while incorporating the work of other authors. First, Kool (1993) differentiates acts of nonviolence from nonviolent acts. Acts of nonviolence are categorical in nature and substitute for violence. The use of these acts attempt to communicate that alternatives to violence are possible and can be used to avoid injury to one's opponent. Acts of nonviolence have a particular purpose: to resolve conflict in areas where aggression or violence might be a legitimate response. An act of nonviolence might be a consumer boycott, a march, or a demonstration.

Nonviolent acts are different in that these behaviours do not use violence and are normative patterns of behaviour. Kool uses caring for animals or nurturing children as examples of a nonviolent act. The author further noted that nonviolent acts are less salient because of the normative expectations that people should engage in them in everyday activities. Since these are the behaviours we associate with the actions of individuals in the helping professions, Kool believes the helping professions should work to make nonviolent acts more salient to demonstrate the futility of violence in society. He feels that the psychology of nonviolence should acknowledge the survival value of aggression. However, the long-term value of engaging in nonviolent acts should be emphasized and the situational cues that make it a more likely behaviour should be studied.

A second concept discussed by Kool (1993) in analyzing the psychology of nonviolence is moral development. Drawing upon the work of Piaget, Kohlberg, Gilligan, Erikson, and Rest, Kool makes a case that nonviolence has a moral dimension that includes both a justice perspective and a caring perspective. A person high on justice and low on caring is concerned about following rules like equity and equality; a person high on caring and low on justice exhibits supreme compassion. If someone is low on both justice and caring perspectives then what works in a particular instance is good. A person high on both justice and caring perspectives looks for and acts upon alternatives that are fair and compassionate ones.

The third component integrated into Kool's (1993) treatment of nonviolence is power or the capacity to influence the behaviour of others. While people use many different types of power, the power that Kool views as most relevant to nonviolence is integrative power. Integrative power derives from the trust and good will given to those who are in positions of power by their followers. Kool believes that when nonviolent individuals attempt to achieve social harmony via moral behaviour they obtain power that affects the con-science of the perpetrators of violence.

Kool (1993) outlines a three-dimensional model of nonviolence in which the dimensions are defined as aggression (high vs. low), moral concerns (high vs. low), and power (others vs. self). This model is represented in Fig. 2.1. He believes that a robust theory of nonviolence should study the cognitive components of the relation of

aggression to the concepts of morality and power. Within the model presented in Fig. 2.1, nonviolent individuals would be in the bottom right quadrant of the cube and would represent low levels of aggression along with high moral concerns and other-oriented power (Kool, 1993). To Kool the high moral concern is a Gestalt-like concept that includes being highly principled, caring, concerned about social justice, and also committed to utilitarian issues. While the placement of moral thought within Kool's model has face validity, several researchers have not observed a relationship between nonviolence and moral reasoning Kool (2008) describes nonviolent individuals as those who utilize integrative power in their relationships and conflicts.

Kool's Model of Nonviolence

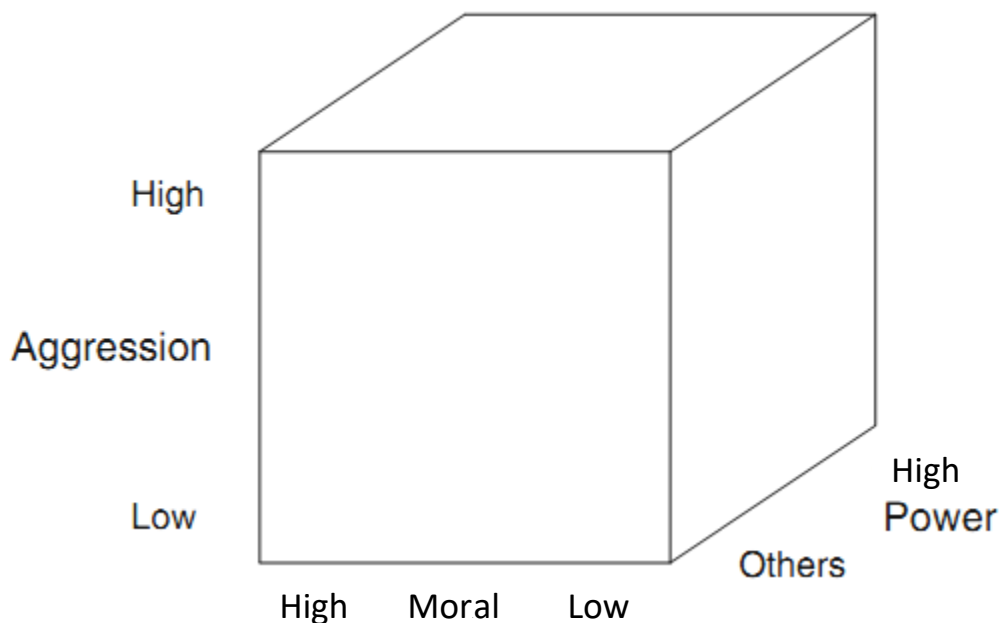


Figure 2.1 Kool's model of nonviolence. Reprinted from Kool (1993) by permission of the Rowman and Littlefield Publishing Group

From the model, nonviolence behaviour is divided into three dimensions; aggression, moral concerns and power. Each of the three dimensions is divided into high and low. The three dimensions explain the factors that either promote or reduce nonviolence behaviour. The level at which each of the dimension works in an individual

determines the magnitude of nonviolence in such individual. From the figure, a person that is nonviolent would be found at the bottom right quadrant of the cube and this represents low level of aggression.

2.2.4 Psychoanalytic theory

Drawing from the assumptions of Sigmund Freud, childhood experiences have prominent influence on behavioural dispositions in adulthood. It is based on this that the Psychoanalytic theory was chosen for a theoretical review in this study. The theory offers detail explanation for the causes of aggression especially in adulthood.

Sigmund Freud theorized that the developmental stages of infancy and early childhood chart human lives in ways that are difficult to change (Encyclopaedia of Psychology, 2005). Freud's psychoanalytic theory demonstrates the idea that aggression is an innate personality characteristic common to all humans and that behaviour is motivated by sexual drives. According to the Freudians, criminal behaviour results from various dysfunctions. This includes faulty ego (in which the individual has problem with learning from experience, coping with frustration and insecurity and assessing social reality). Faulty or inadequate superego (in which the individual does not feel remorse or wrong doing), deviant superego (where the individual has failed to internalize conventional standards of conduct and sees nothing bad in his behaviour) and undeveloped or restraining Id (in which the individual allows free outlets for aggressive and sexual drives instead of restraining it by the ego or superego). These imbalances may lead to development of criminal behaviour (conduct disorder) or mental illness (Osinowo, 2005).

Freud believed that most adult neuroses could be attributed to a fixation developed during one of these stages of early life. The psychosexual stages of development are: Oral, Anal, Phallic, Latency and Genital. According to Freud, there is a crisis which must be worked through at each stage. If the crisis is not properly worked out, the person could become fixated at that stage of development (Woolfolk, 2010). Fixations are seen in adulthood as child-like approaches to gratifying the basic impulses of the Id.

At the oral stage for instance, a child could either be orally aggressive (chewing gum and the ends of pencils, etc) or orally passive (expressed in smoking, eating, kissing, or oral sexual practices). Oral stage fixation might result in a passive, gullible, immature, manipulative personality. In Anal stage, fixation at either anal retentive (Obsessively organized, or excessively neat) or anal expulsive (reckless, careless, defiant, disorganized) has its repercussion. The consequences of psychological fixation across the other three psychosexual stages are: Frigidity, aggression, impotence, sexual unfulfillment, unsatisfactory relationships, high or low self esteem, over-ambitious. Adolescent behavioural/conduct disorder (aggression, hostility, early sexual activity, disorderliness, rebelliousness or defiance, among others) can evolve from fixation at any of the psychosexual stages of development.

Defense mechanisms are psychological strategies in psychoanalytic theory which reveals the role on the unconscious mind to manipulate, deny, or even distort reality. Healthy persons normally use different defenses throughout life (Altruism, anticipation, humour, sublimation, thought suppression, introjection, and identification). An ego defense mechanism becomes pathological only when its persistent use leads to maladaptive behaviour such that the physical and or mental health of the individual is adversely affected. Displacement and Rationalization (making excuses) are examples of defense mechanism that can be found in the adolescent with conduct disorder.

Displacement is the shift of sexual or aggressive impulses to a more acceptable or less threatening target; redirecting of emotion to a safer outlet; separation of emotion from its real object and redirection of the intense emotion toward someone or something that is less offensive or threatening in order to avoid dealing directly with what is frightening or threatening. An adolescent that experiences frequent abuse physical or otherwise from parent or caregiver may express such behaviour to his mate or junior colleague and this act will be tagged conduct disorder after consistent repetition.

2.2.5 Impulsiveness Theories

Impulsiveness is very common among youths and adolescents. Based on this understanding, a theory of impulsiveness can provide an exhaustive explanation on rebellious behaviour especially among students.

James Wilson and Richard Herrnstein (1985) proposed an important criminological theory focusing on impulsiveness and offending, which incorporated propositions from several other psychological theories. This theory suggested that people differ in their underlying criminal tendencies, and that whether a person chooses to commit a crime in any situation depends on whether the expected benefits of offending are considered outweighing the expected costs. Hence, there is a focus on cognitive (thinking and decision-making) processes.

The benefits of offending, including material gain, peer approval, and sexual gratification, tend to be contemporaneous with the crime. In contrast, many of the costs of offending, such as the risk of being caught and punished, and the possible loss of reputation or employment, are uncertain and long-delayed. Other costs, such as pangs of conscience (or guilt), disapproval by onlookers, and retaliation by the victim, are more immediate. As with many other psychological theories, Wilson and Herrnstein (1985) emphasized the importance of the conscience as an internal inhibitor of offending, suggesting that it was built up in a social learning process according to whether parents reinforced or punished childhood transgressions.

The key individual difference factor in the Wilson-Herrnstein theory is the extent to which people's behaviour is influenced by immediate as opposed to delayed consequences. They suggested that individuals varied in their ability to think about or plan for the future, and that this factor was linked to intelligence. The major determinant of offending was a person's impulsiveness. More impulsive people were less influenced by the likelihood of future consequences and hence were more likely to commit crimes.

In many respects, Gottfredson and Hirschi's (1990) theory is similar to the Wilson-Herrnstein theory and typical of psychological explanations of crime because it emphasizes individual and family factors as well as continuity and stability of underlying criminal tendencies. Despite their sociological training, Gottfredson and Hirschi castigated criminological theorists for ignoring the fact that people differed in underlying

criminal propensities and that these differences appeared early in life and remained stable over much of the life course. They called the key individual difference factor in their theory "low self-control," which referred to the extent to which individuals were vulnerable to the temptations of the moment. People with low self-control were impulsive, took risks, had low cognitive and academic skills, were self-centred, had low empathy, and lived for the present rather than the future. Hence, such people found it hard to defer gratification and their decisions to offend were insufficiently influenced by the possible future painful consequences of offending. Gottfredson and Hirschi (1990) also argued that between-individual differences in self-control were present early in life (by ages six to eight), were remarkably stable over time, and were essentially caused by differences in parental child-rearing practices.

Impulsiveness is the most crucial personality dimension that predicts offending. Unfortunately, there are a bewildering number of constructs referring to a poor ability to control behaviour. These include impulsiveness, hyperactivity, restlessness, clumsiness, not considering consequences before acting, a poor ability to plan ahead, short time horizons, low self-control, sensation-seeking, risk-taking, and a poor ability to delay gratification. In the longitudinal study of over four hundred London males, three groups of boys all tended to become offenders later in life: (1) boys nominated by teachers as lacking in concentration or exhibiting restlessness; (2) boys nominated by parents, peers, or teachers as the most daring or risk-taking; and (3) boys who were the most impulsive on psychomotor tests at ages eight to ten. Later self-report measures of impulsiveness were also related to offending. Daring, poor concentration, and restlessness all predicted both official convictions and self-reported delinquency, and daring was consistently one of the best independent predictors (Farrington, 1992).

The most extensive research on different measures of impulsiveness was carried out in another longitudinal study of males (the Pittsburgh Youth Study) by Jennifer White and her colleagues. The measures that were most strongly related to self-reported delinquency at ages ten and thirteen were teacher-rated impulsiveness (e.g., "acts without thinking"), self-reported impulsivity, self-reported under-control (e.g., "unable to delay gratification"), motor restlessness (from videotaped observations), and psychomotor impulsivity. Generally, the verbal behaviour rating tests produced stronger

relationships with offending than the psychomotor performance tests, suggesting that cognitive impulsiveness (based on thinking processes) was more relevant than behavioural impulsiveness (based on test performance). Future time perception and delay of gratification tests were less strongly related to self-reported delinquency.

There have been many theories put forward to explain the link between impulsiveness and offending. One of the most popular theories suggests that impulsiveness reflects deficits in the executive functions of the brain, located in the frontal lobes (Moffitt). Persons with these neuropsychological deficits will tend to commit offenses because they have poor control over their behaviour, a poor ability to consider the possible consequences of their acts, and a tendency to focus on immediate gratification. There may also be an indirect link between neuropsychological deficits and offending that is mediated by hyperactivity and inattention in school and the resulting school failure. A related theory suggests that low cortical arousal produces impulsive and sensation-seeking behaviour.

2.3 Empirical Review

2.3.1 Solution-Focused Therapy and Rebellious Behaviour

Busari (2016) investigated effects of Solution - Focused Social Interest programme (SFSI) on academic stress and internet addiction among some selected older adolescents from The Polytechnic, Ibadan. Findings showed that there existed statistical significant main effect of treatment as evident in the post-test score of the participants. Moreover, the result revealed that there was a significant interaction effect of Solution focused treatment of age on independent variables. The implication of the findings indicated that Solution - Focused Social Interest programme was an effective therapy for the management of academic stress and internet addiction among older adolescents.

Javanmiri, Kimiaee and Abadi (2013) investigated the effect of solution-focused approach in decreasing depression among teenage girls. The researchers employed a quasi-experimental design in which pretest-posttest design with a control group has been used. The population was all teenage girls in Sahneh; 20 girls were drawn from the population through stratified random sampling and then randomly assigned to two groups: one experimental and one control. Data were collected through Beck's

depression questionnaire (BDI). Dependent variable was solution-focused therapy in which experimental group was provided with 8-hour group counselling (8 sessions which took one hour). In the meantime, control group was provided with irrelevant teachings (teaching study skills) to eliminate the effect of subjects. After the sessions were wound up, BDI questionnaire was administered again among both groups. One month later, the posttest and then BDI questionnaire were conducted. After that, t test and covariance were used to analyze the findings. The results showed that solution-focused group counselling is effective in decreasing depression among teenage girls and its significance level is at $\alpha = 0/01$. In addition, the findings obtained through posttest indicated how stable the effect of therapy is. In other words, solution-focused group counselling has significantly led to decreasing depression in teenage girls.

Shin (2009) tested the efficiency of SFT with Korean youth probationers with the aim of investigating interventional methods for helping Korean youth probationers reduce their aggressiveness and increase their social adjustment. As well as finding that the SFT approach was especially favourable for dealing with involuntary populations, Shin (2009) found that this approach was effective in decreasing aggressiveness and in increasing social readjustment abilities in the experimental group. Group members were also able to enhance their participation motivation and achievement motivation, allowing participants to successfully change their problematic behaviours.

In additional study, Froerer, Smock and Seedall (2009) looked at how Solution-Focussed Therapy (SFT) can effectively aid those diagnosed with HIV/AIDS to combat the obstacles they encounter. The authors reported that SFT helped individuals to utilize existing competences and resources and mobilize personal resources to cope more effectively with their illness. Two studies have reported outcomes of solution focused group therapy with individuals on long-term sick leave and reported SFT to be more effective than control conditions.

Thorslund (2007) reported that the treatment group returned to work at a significantly higher rate than waiting list controls, worked more days and maintained their improved psychological health after completion of treatment. Similarly, Nystuen and Hagen (2006) reported on effects of treatment for employees on long-term sick leave due to mental health problems or

musculoskeletal pain, finding that Solution-Focussed Group Therapy was superior to 'treatment as usual' in improving the psychological health of employees who attended at least 50 per cent of scheduled sessions.

Linton, Bischof and McDonnell (2005) applied solution-orientated group therapy to individuals who have displayed assaultive behaviour reporting that the collaborative nature of solution orientated treatment had a very positive impact on treatment. Focusing on past exceptions and client strengths and resources in the early stages of group therapy helped group cohesiveness and increased participation in the group process, allowing group members to take an active part in establishing treatment goals. SFT has also been reported to be effective in the treatment of level 1 substance abusers in the US. Smock, Trepper, Wetchler, McCollum, Ray, and Pierce (2008) compared SFT with a traditional problem focused treatment for substance abuse and found those in the SFT improved significantly on both the Beck depression inventory and the Outcome Questionnaire compared to controls receiving a standard psycho-educational intervention.

Two reviews of controlled outcome studies of SFT were undertaken in 2000 and 2009 respectively. Each of these reviews noted the methodological limitations of the studies examined, but there was a consistent finding for the efficacy of SFT (Gingerich and Eisengart 2000; with Corcoran and Pillai (2009) reporting about 50 percent of the studies reviewed can be seen to show improvement over alternative conditions or no-treatment control. Three randomised control studies were also located pertaining to the effectiveness of SFT. Unfortunately, many of the included studies on solution focused interventions were focused on group or individual interventions and did not specifically examine the effectiveness of Solution Focused Therapy within the domain of couples or relationship counselling. An overwhelming number of the studies identified were American and no Australian studies pertaining to SFT were found.

LaFountain and Gardner (1996) have one of the most cited papers on the effectiveness of SFT in groups. This article reported promising outcomes in the use of SFT in groups of children and adolescents in assisting clients to obtain their goals. In the study at least 91 per cent of students demonstrated progress towards their goal and 81 per cent of the students achieved their goals at a moderate to very high level. The

authors also reported a significant effect on reducing counsellor burnout rates when they utilized a solution focused approach. Further research has described positive effects of SFT. Lange (2001) used SFT in groups with incarcerated fathers and found that a solution focused approach provided the flexibility needed in such a setting to allow the group to define a unique set of therapeutic goals as well as incorporating an element of skills teaching.

The literature search also discovered two studies that used SFT in a couples group. Zimmerman, Prest and Wetzel (1997) reported an empirical study that showed the couples in the SFT treatment group improved significantly with respect to overall affectional expression and satisfaction. Nelson and Kelly (2001) in a similar study showed improvements of at least 70 per cent in overall satisfaction scores with 80 per cent reporting progress towards their goals. Gingerich and Eisengart (2000) reviewed fifteen controlled outcome studies of Solution Focused Therapy (SFT) to examine the effectiveness of this approach to therapy. To be included in this review, a study had to employ an experimental design, measure client functioning, and assess treatment outcomes. The study also had to use interventions identified by the authors as being solution focused, meaning the intervention had to include at least one of seven SFBT components, which differentiate it from traditional therapeutic interventions. Although fifteen studies were reviewed, only five were considered well-controlled. The five well-controlled studies showed SFBT as providing a significant benefit. Additionally, although no firm conclusions could be drawn about the remaining ten studies because of their methodological problems, these studies also showed the effectiveness of SFT. While the researchers could make no definitive statement regarding the overall efficacy of SFT, Gingerich and Eisengart concluded that these studies support the idea that SFT can be beneficial to clients.

Gingerich and Eisengart (2000) did note that one of the limitations of the literature was the lack of standardization regarding the implementation of SFT. The authors noted that, of the studies reviewed; only two contained all seven components of SFT. Five of the studies contained four or fewer components. It seems the statement that SFT can be beneficial to clients can be accurately made only if it can be determined what components of SFT are actually being delivered.

Ratner, George, and Iveson (2012) described using a solution-focused approach as being useful with working with ethnic minority clients. She indicated that SFT conveys respect for cultural differences through its dominant values of client self-determination and the belief that people possess the strengths and resources to resolve their own problems. The author points to the aspects of SFT, such as therapist and client working as collaborators toward a mutual goal, and its focus on behaviours and perceptions rather than feelings as being particularly useful in work with minority clients. The author further states that these aspects afford the client respect for their particular lifestyle and are sensitive to the client's culture (Ratner, George, and Iveson, 2012). Antle, Barbee, Christensen, and Sullivan, (2009) offer promising results with a larger sample; however, SFT was used in combination with other approaches. The authors do not provide any detail about the relative contribution of the SFT element within their framework or account for why their approach was unsuccessful in some cases.

Rasheed and Ogundokun (2017) investigated the effect of Solution Focused Therapy on Mathematics performance of some selected senior secondary school students. The finding indicated that the participant exposed to Solution Focused Therapy showed a significant improvement in their mathematics performance than those in control group. Also, it was found that mathematics anxiety when not properly managed has a significant negative effect on mathematics performance of students. It is recommended that Solution Focused Therapy should be used by the counselling psychologists to intensify their effort to make use of the intervention in their strategies for counselling.

Mcgarry and Mcnicholas (2008) studied the effect of two methods, solutions-focused and normal treatment in children and youth in mental health sectors. Client satisfaction was high in both groups and both methods responded until the third month, but after the third month, only the solution-focused method proved beneficial. Mireau and Inch (2009) also examined the effects of the solution-focused method on the mental health of people who were anticipating the use of mental health services. Participants in this test reported progress.

Agbakwuru, and Kennedy, (2017) carried out a study on the effects of solution – focused therapy (SFT) on preferred choice of tertiary education among students in Rivers State, Nigeria. It was found that SFT had significant effect on preferred choice of tertiary education among SS3 students in Rivers State. Dysfunctional preferred choice improved to a healthy preferred choice of tertiary education with statistical proofs. Multiple studies have examined the effectiveness of SFBT on a variety of outcome variables. The evidence base for SFT is strengthened by several outcome reviews and analyses. Reviews by Gingerich and Eisengart (2000), Gingerich and Peterson (2012), Kim (2008), and Corcoran and Pillai (2009) support the positive benefits of SFT. Among the findings is strong evidence related to length of treatment, indicating that SFT may be more cost-effective than other therapeutic approaches.

However, consistent among the reviews are concerns related to the rigor of SFT studies, demonstrating a need for additional randomized controlled trials in the literature. Evidence supports the effectiveness of SFT across a variety of populations. Within an adult population, SFBT has been shown to be effective in helping clients with a range of symptoms and behaviours (Gingerich and Peterson, 2012) including depressive symptoms, medication compliance, abstinence from alcohol (Spilsbury, 2012), post-traumatic stress (Bannick, 2008), and parenting skills SFT has demonstrated effectiveness across populations that include couples college students (Ng, Parikh, and Guo, 2012; Sari and Yayci, 2013; Sundstrom, 1993), individuals with intellectual disabilities (Roeden, Bannick, Maaskant, and Curfs, 2009), and groups. Research also demonstrates the effectiveness of SFT with children and adolescents. For example, outcome literature related to school populations demonstrates the positive effects of SFT on behavioural and academic problems (Kim and Franklin, 2009), improved listening comprehension, reading fluency, perceptions of general intelligence, and attitudes toward school and teachers. Daki and Savage (2010) examined the effectiveness of a short-term (five session) solution-focused intervention on academic, motivational, and socio-emotional functioning. Results demonstrate improved listening comprehension, reading fluency, motivation, and perceptions of intelligence, as well as improvement in attitudes to school and teachers, and a decrease in anxiety.

SFT has also been utilized in a health-related context, with challenges related to weight management and diet (Dolan, 1997), and in work with athletes (Hoigaard and Johansen, 2004). Valve, Lehtinen-Jacks, Eriksson, Lehtinen, Lindfors, Saha, Rimpela, and Angle (2013) examined the effectiveness of a SFT health-related intervention designed for female adolescents and young adults. The SFT intervention focused on healthy physical activity, diet, and sleeping behaviours, while encouraging clients to set and achieve goals, and acknowledge and build on their own strengths. Findings included improvements in physical activity, meal regularity and sleeping patterns.

Given the specific skills and techniques that distinguish SFT from other therapeutic modalities, guidelines for skill-building and implementation are critical. This is addressed in part through a number of books and practice manuals that provide specific guidelines and techniques (De Jong and Berg, 2013; Greene and Lee, 2011). Additionally, there are a number of books that apply the SFT approach with specific challenges including alcohol abuse, adjustment disorders, eating disorders, and stress (O'Connell, 2001). There are also books that demonstrate the use of SFT with specific populations such as domestic violence offenders.

The Munro Review of Child Protection (Munro, 2011) explains evidence-based practice within social work as integrating best available evidence with the social worker's own understanding of the child and family's circumstances and their values and preferences. There are some descriptions of the use of SFT in the context of child protection work (Dudley Metropolitan Borough Council, 2006; Turnell, 2006). It is possible that, on the basis of a thorough knowledge and understanding of a particular child and family, a social worker may consider SFT to be potentially useful in some cases where, in spite of the likelihood of significant harm to the child through other factors, the parent shows competencies that may be utilised to impinge upon, or change, the problem behaviour.

2.3.2 Dialectical Behaviour Therapy and Rebellious Behaviour

Nelson-Gray, Keane, Hurst, Mitchell, Warburton, Chok, and Cobb (2006) applied DBT to a group of participants diagnosed with Oppositional Defiant Disorder (ODD) where, after receiving skills training, a reduction in emotional symptomatology

occurred. Participants only received training in emotional self-regulation skills, not the full DBT intervention (Linehan, 1993). These were participants who did not exhibit psychiatric comorbidity, parasuicidal behaviours or aggressive behaviour toward their parents.

The effectiveness of DBT has been assessed in two major trials. The first (Linehan, Heard and Armstrong, 1991) compared the effectiveness of DBT relative to treatment as usual (TAU). The second (Linehan et al, 1993) examined the effectiveness of DBT skills training when added to standard community psychotherapy. In the first randomised controlled trial, there were three main goals: Firstly, to reduce the frequency of parasuicidal behaviours. This is clearly of importance because of the distressing nature of the behaviour but also because of the increased risk of completed suicide in this group (Stone, 1987). Secondly, to reduce behaviours that interfere with the progress of therapy ('therapy interfering behaviours'), as the attrition rate from therapy in borderline women with a history of parasuicidal behaviours is high. Finally, to reduce behaviours that interferes with the patients' quality of life. In this study, this latter goal was interpreted more specifically as a reduction in in-patient psychiatric days, which is hypothesised to interfere with the patient's quality of life.

Participants all met DSM-III-R criteria for BPD, and were matched for number of lifetime parasuicide episodes, number of lifetime admissions to hospital, age and anticipated good or poor prognosis. There were 22 patients in each group. The experimental group received standard DBT as outlined above. The experience of the patients in the treatment as usual group was variable; some received regular individual psychotherapy, others dropped out of individual therapy whilst continuing to have access to in-patient and day-patient services. All participants were assessed on number of parasuicidal episodes and a range of questionnaire measures of mood. Patients were blindly assessed at pre-treatment, 4, 8 and 12 months and followed up at 6 and 12 months post-treatment. Measures of treatment compliance and other treatment delivered (e.g. in-patient psychiatric days) were also taken. At pre-treatment there were no significant differences on any of the measures between the control and experimental groups including demographic criteria. With regard to the first aim of the trial (i.e. the reduction of suicidal behaviour), during the year of treatment patients in the control group engaged

in more parasuicidal acts than DBT patients at all time points. The medical risk for parasuicidal acts was higher in the control group than in the DBT group.

Clients in the DBT group were more likely to start therapy and were more likely to remain in therapy than those in the control group. The one year attrition rate in the DBT group was 16.7% compared to 50% for those in the control group who commenced the year with a new therapist. The DBT patients reported more individual and group therapy treatment hours per week than the TAU group, which reflects the intensive nature of DBT treatment. However, the control patients reported more day treatment hours per week.

DBT is thought to be the most promising treatment for BPD (Van Den Bosch, Koeter, Stijnen, Verheul, Van Den Brink, 2005). Hayes, Masuda, Bissett, Luoma, and Guerrero (2004), state that DBT has a small but growing body of supporting research. Hayes, Masuda, Bissett, Luoma, and Guerrero (2004) believe that the efficacy of DBT appears proportionate to the strength that their originators ascribe. According to Dingfelder (2004), evidence appears to back DBT for the treatment of BPD. Verheul, Van Den Bosch, Koeter, De Ridder, Stijnen, Van Den Brink, (2003) examined the effectiveness of DBT with 58 women with BPD. The participants were either assigned to DBT or treatment as usual (a weekly session with a psychotherapist).

After seven months of therapy, the participants who received DBT substantially reduced suicide attempts, self mutilating and self damaging behaviours than those who received treatment as usual. Additionally, the participants who received DBT were more likely to stay in therapy. Linehan, Tutek, Heard, and Armstrong (1994) studied interpersonal outcomes of cognitive behavioural treatment for chronically suicidal borderline patients. Twenty-six female patients with borderline personality disorder were assigned to either DBT or a treatment-as-usual comparison condition. The participants who completed DBT had significantly better scores on measures of anger, interviewer-rated global social adjustment and the Global Assessment Scale than those of treatment-as-usual. These participants also tended to rate themselves better on overall social adjustment. These results indicate that DBT shows potential as a psychosocial intervention for improving interpersonal functioning among patients with BPD.

Two randomized trials indicated that DBT is more effective than treatment as usual in treatment of BPD and treatment of BPD with co-morbid diagnosis of substance abuse (Linehan, Armstrong, Suarez, Allmon and Heard, 1991; Linehan, Schmidt, Dimeff, Craft, Kanter and Comtois, 1999). Linehan, et al. (1999) studied DBT for drug dependent, suicidal women with BPD. Twenty-eight participants were divided into two groups, DBT and treatment-as-usual. The 12 participants receiving DBT receive individual psychotherapy, skills coaching, and skills training groups. Those who received treatment as usual, were referred to mental health counsellors and community programmes, or continued with their own psychotherapist. Results indicate improvements in those who participated in DBT. Drop-out-rate of DBT participants were 36% and 73% in treatment as usual. Additionally, DBT participants showed significant improvements in social and global adjustment at 16 month follow ups. Urine analysis indicates a reduction in substance abuse among DBT participants. These results suggest that DBT is an effective treatment for drug dependent, suicidal women with BPD.

Telch, Agras, and Linehan (2001) studied the effectiveness of DBT for binge eating disorder. Forty-four women with binge eating disorder (BED) were randomly assigned to DBT or wait-list control condition. The participants were administered the eating disorder examination in addition to measures of affect regulation, mood, and weight at baseline and post-treatments. DBT participants showed significant improvement on measures of binge eating and eating pathology. Additionally, 89% of DBT participants had stopped binge eating all together by the end of treatment. The results for this study were not significant. Safer, Telch, and Agras (2001) studied the effectiveness of DBT for bulimia nervosa. Thirty-one participants were randomly assigned to 20 weeks of DBT or 20 weeks of a wait-list comparison control group. Emotion regulation skills were taught to DBT participants. An intent-to treat analysis showed a highly significant decreased in bulimia associated behaviours when treated DBT. However, secondary measures resulted with no significant group differences.

Lynch, Morse, Mendelson, and Robins (2003) piloted a randomized study on the effectiveness of DBT for depressed older adults. Lynch et al (2003) augmented medication with group psychotherapy of depressed older adults and assessed for benefits. Thirty-four chronically depressed individuals were randomly assigned to one of

three groups; antidepressant medication plus clinical management group, medication alone group, or with DBT skills training and medication group. The mean self-rated depression scores significantly decreased in the medication plus DBT group. Additionally, on interviewer-rated depression, 71% of medication plus DBT participants were in remission at post-treatment, in contrast to 47% of medication only participants. The six month follow up showed a significant difference with a 75% of medication plus DBT participants in remission, as opposed to 31% of medication only participants. Medication plus DBT was the only group that showed significant improvements from pre- to post treatments. Overall, however results were not significant.

Trupin, Stewart, Beach, Boesky (2002) studied the effectiveness of a DBT as a programme for incarcerated female juvenile offenders. Participants were from Echo Glen Children's Centre, a detention centre for adjudicated youth. Two mental health cottages implemented DBT techniques. A third cottage, a control group did not use DBT techniques. Problem behaviours and staff punitive responses were compared before and after the intervention period. Results from the two female mental health cottages indicated that compared to the previous year, resident problem behaviours and staff punitive responses decreased. No change was observed in the third cottage. The efficacy of DBT in female mental health cottages as a program had mixed results. Results may have been influenced by the lack of training that staff received and prior youth behaviour problems.

2.3.3 Emotional Intelligence and Rebellious Behaviour

Kelly and Kaminskienė (2016) conducted a study on the importance of emotional intelligence and its influence on mediation and negotiation. The authors found that emotions play a very important role in the search for dispute resolution, but very often are neither understood nor effectively addressed by the parties to the dispute, also not properly controlled and managed by the professionals that are helping the parties to reach peaceful dispute resolution. The effective negotiator or mediator must take into account not only the economic, political and physical aspects of the process, but also the emotional tenor of themselves as well as that of all of the parties.

Argyle and Lu (1990) reported that positive emotionality is associated with sociability. Whereas persistent negative affect keeps others at bay (Furr and Funder, 1998). In a study by Lopes, Salovey, and Straus (2003), college students scoring higher on the managing emotions subscale of the MSCEIT reported less conflict and antagonism in their relationship with a close friend as well as more companionship, affection, and support in their relationship with a parent. These associations remained significant after controlling for Big Five personality traits. There is converging evidence from other lines of research that emotional competencies are associated with social adaptation. A large number of studies with children suggest that the capacity to decode, understand, and regulate emotions is associated with social and emotional adaptation (Eisenberg, Fabes, Guthrie, and Reiser, 2000; Halberstadt, Denham, and Dunsmore, 2001). Evaluations of school-based interventions emphasizing the development of emotional competencies also suggest that emotional learning contributes to social and academic adjustment (Greenberg, Kusché, Cook, and Quamma, 1995).

Goleman (1998) reported that leaders high in emotional intelligence are key to organizational success and leaders must have the capacity to sense employee's feelings at their work environment, to intervene when problems arise, to manage their own emotions in order to gain the trust of employees and to understand the political and social conventions within an organization (Goleman, 2001). A leader has the capacity to impact organization performance by setting a particular work climate. Research by (Hay/McBer, 2000) has found that the most effective leaders integrate four or more of the six styles regularly, substituting one for another more appropriate style depending on the leadership situation. This has been found to be the case in studies of insurance companies, where leaders were adept at all four of the positive styles of leadership and at schools where heads of schools who used four or more of the leadership styles experiences superior performance among students compared to comparison schools. Performance was poorest in those schools where only one style or two of leadership were used.

Studies have demonstrated that leaders who consistently out perform their peers not only have the technical skills required, but more importantly, have mastered most of the aspects of Emotional Intelligence. In the Harvard Business Review landmark article

‘What Makes a Leader?’ Goleman (1998) states that the five components of Emotional Intelligence at Work are: Self-Awareness, Self-Regulation (or Management), Motivation, Empathy (Social Awareness), and Social Skills (Relationship Management). There is growing evidence that the range of abilities that constitute what is now commonly known as emotional intelligence plays a key role in determining success, both in one’s personal life and in the workplace. Research by Mayer, Salovey, and Caruso (2002) has uncovered links between specific elements of emotional intelligence and specific behaviours associated with leadership effectiveness and ineffectiveness.

Research findings suggest that people with high levels of EQ engage less in deviant behaviours (Eisenberg, 2000; Petrides, Frederickson and Furnham, 2004) than those with low EQ. Negative emotional reactions have been shown to predict a wide array of undesirable outcomes such as tension, turnover, decreased productivity, and even workplace violence (Bagozzi, 2003). Conversely, positive emotional reactions have been linked to numerous desirable outcomes such as increased productivity and job satisfaction. Mayer, Caruso, and Salovey (1999) argue that high levels of EQ can promote effective coping by decreasing the extent to which individuals ruminate on negative events, by promoting emotional disclosure, and by increasing individuals’ proclivity to seek social support after negative events occur. Similarly, Jordan, Ashkanasy, Härtel, and Hooper (2002) suggest that people with high EQ tend to deal with their negative emotional reactions in ways that promote a productive result. The essence of their argument is that people high on EQ are able to cope with stressful events and, therefore, have less extreme emotional reactions to such events.

There is growing evidence that a record number of executives are derailing from their careers (Rosete, 2007). Literature hints that emotional intelligence may offer some insights into success and failure of leaders (Goleman, 1998). This is highlighted by the fact that there is an increasing interest in research to explore whether emotional intelligence makes someone a better leader (Higgs, 2003). Literature suggests that feelings and emotions play an important role in human behaviour. They influence judgements, memory and reasoning, among others.

Increasingly, it is accepted that feelings also take on a more central role in the leadership process than what was previously considered (George, 2000; Goleman, 1998).

Goleman(1998) highlights that studies have shown effective leaders to use more emotional intelligence competencies than other people in leadership positions. Ogunyemi (2007) concurs and adds that especially those leaders whose job demands a high social interaction, need effective emotional intelligence.

Goleman, Boyatzis, and McKee 2002) supported that up to 79% of leadership success in the USA is a direct consequence of a high emotional intelligence. It appears that leaders 'level of emotional intelligence has an effect on their behaviour, which makes them either more or less successful leaders. Stein and Book (2000), in research covering thousands of participants in more than 30 professions, found that 47-56% of success in a person's working- and private life can be accounted to the level of emotional intelligence of that person. They furthermore found that certain emotional competencies had a higher relevance than others in the occupational context, and that different jobs required different emotional intelligence competencies. The research revealed furthermore, that emotional competencies are required for leadership positions differ across various professions (Stein and Book, 2000). According to Goleman et al. (2002), emotional intelligence is an important part of being an effective leader, especially in the team context, and George (2000) highlights the role of the leader to diffuse conflict constructively which promotes trust and cooperation among team members in this regard.

Leadership is an emotion laden-process, for leaders as well as followers, and according to Ferguson and Kelley (2005) research has proven that higher levels of emotional intelligence make teams more effective and productive, create more resilience during changing times and add to an improved retention of talent in the organization. Goleman (2002) identified fifteen different emotional intelligence competencies, which are allocated to four domains. They allude to the fact that while all good leaders possessed some excellent emotional competencies, very effective leaders generally possess numerous emotional competencies and traits, but there is no one single formula that guarantees leadership success.

Peña-Sarrionandia and Garaigordobil (2015) reported that studies examining the relationship between aggressive behaviour and EQ are scarce (Ingles, Torregrosa, García-Fernández, Martínez-Monteagudo, Estévez, and Delgado, 2014). Still, these

studies show that emotional attention is positively related to anger, and that greater clarity and emotion repair are related to lower trait/state anger, lower internal expression of anger, and higher anger control (Salguero and Iruarrizaga, 2006). In addition, people with a high emotional clarity better understand the emotions they are feeling, their causes, and consequences. Finally, people with high EQ resolve conflicts more constructively (Zeidner and Kloda, 2013) and display less aggressive behaviour (García-Sancho, Salguero, and Fernández-Berrocal 2014). Thus, adolescents with more emotional skills present fewer negative emotions related to the expression of aggressive behaviour, such as anger and hostility (Extremera and Fernández-Berrocal, 2013). Recent studies have shown that programmes to improve EQ (Qualter, Whiteley, Hutchinson, and Pope, 2007; Di Fabio and Kenny, 2011) also increase positive leadership (Muñoz de Morales and Bisquerra, 2013) and decrease aggressiveness and anger (Castillo, Salguero, Fernández-Berrocal, and Balluerka, 2013). Regarding socio-emotional intervention programmes, it has been confirmed that such programs improve self-control of behaviour (Choque-Larrauri and Chirinos-Cáceres, 2009), assertive behaviours (Melero and Palomera, 2011), personal and social problem-solving (Maurer, Brackett and Plain 2004), the ability to analyze one's feelings (Garaigordobil, 2008), and reduce aggressiveness (Frey, Nolen, Edstrom, and Hirschsteinb 2005).

The results of other studies point in the same direction. Swearer, Wang, Berry, and Myers (2014) consider that to reduce bullying, interventions must address psychological, cognitive, and social factors. In fact, bullying prevention and intervention programmes should teach students skills to promote effective problem-solving strategies. Cognitions supporting bullying and beliefs about positive versus negative consequences affect the likelihood of adolescents becoming bullies. Thus, interventions focusing on cognitive and social functioning are important to break the cycle of bullying involvement. Jones, Doces, Swearer, and Collier (2012) also confirm that effective bullying prevention programmes should consider implementing social-emotional learning programmes, which teach youth skills such as emotion management, communication skills, empathy, problem solving so on.

Mayer and Salovey (1997) found that people have unique levels of emotional knowledge underlying their emotional abilities, developed in childhood depending on

parental support and formed continually throughout life by environmental circumstances. For example, children of parents who suppress emotions or vent feelings poorly often misunderstand when and how to express emotions. Subsequently, their emotional knowledge develops slowly and their understanding and use of emotional abilities is limited, leading to wide variations of adulthood EI. As a skilled orator stirs an audience, a person's ability to process and use emotional information can strongly affect interactions and interpersonal influence. Homburg, Wieseke, and Bornemann (2009) reported that empathetic understanding increases sales professionals' accuracy in meeting customer needs. Unfortunately, scarce research has identified specific emotional abilities that can help understand and determine how to interpret emotions and use them in marketing exchanges to enhance performance (Palmatier, Robert, Rajiv, Dant, and Dhruv Grewal. 2009).

Bennett, Bendersky, and Lewis (2005), in a study of the recognition of facial expression, found that parental warmth is positively related to children's emotion knowledge. Parental warmth has also been found to be linked to children's emotion understanding (Alegre and Bens on, 2007; Dunn and Brown, 1994; Steele, Steele, Croft, and Fonagy, 1999). And a big group of studies investigating parental expression of and reactions to children's expression of emotions have found consistent relations between parental warmth and emotion regulation (Eisenberg, Cumberland, and Spinard, 1998; Eisenberg, and Fabes, 1998; Eisenberg, Fabes, Guthrie, and Reiser, 2000; Eisenberg et al., 1991; Eisenberg et al., 1999). Finally, in a study of early adolescents, Alegre and Perez (2009) found a positive correlation between parental warmth as reported by the early adolescents and the early adolescents' emotional intelligence.

2.3.4 Peer Pressure and Rebellious Behaviour

Tome, de Matos (2012) reported that the role of peers was found to be relevant to the risk behaviours, violence, well-being, health and feelings about school, directly and indirectly. Influence, whether positive or negative, is associated with the type of behaviours adopted by friends. As a result, friends that have a higher involvement in risk

behaviours have a higher probability in influencing negatively their peers; whilst friends that have more protective behaviours and more easiness in communicating, strengthened by friendships with quality have higher probability of influencing positively their peers.

Gardner and Steinberg (2005) carried out an experimental study titled “Peer Influence on Risk Taking, Risk Preference, and Risky Decision Making in Adolescence and Adulthood”. In this study, 306 individuals in 3 age groups (in years) namely: adolescents (13–16), youths (18–22), and adults (24 and older) all completed two questionnaire measures assessing risk preference and risky decision making, and one behavioural task measuring risk taking. Analyses indicated that (a) risk taking and risky decision making decreased with age; (b) participants took more risks, focused more on the benefits than the costs of risky behaviour, and made riskier decisions when in peer groups than alone; and (c) peer effects on risk taking and risky decision making were stronger among adolescents and youths than adults. These findings support the idea that adolescents are more inclined toward risky behaviour and risky decision making than adults and that peer influence plays an important role in explaining risky behaviour during adolescence (Gardner and Steinberg, 2005).

Bellemare, Lepage and Shearer (2009) conducted a study to present the stimulating conditions at work place. The main variables were peer pressure, incentives and gender. The major finding was that very high and very low level of peer pressure can significantly decrease the productivity of workers. Tope (2011) investigated the influence of peer group on adolescent’s academic performance. The sample of the study was 150 randomly selected students from four secondary schools. The findings were the peer group could either positively or negatively influence the academic performance in school. Tope recommended that parents and teachers may provide adequate guidance to adolescents to help them understand how the friends can positively or negatively influence their academic performance.

Research findings up to now seem to support the model of family and peer influence presuming that a negative, conflictual parent–adolescent relationship contributes to adolescents’ problem behaviour directly as well as indirectly through deviant peer groups. In another research Haynie (2002) find out that “adolescents get their self-esteem from the group they are belonging to and they cannot imagine

themselves outside the gathering”. Without a group or friends, one has low self-esteem and they are powerless. They see friends or peers as vital component in their life without which they cannot live. Now the one go where the peers go if they are good in studies have healthy competition everyone in the group will be academically good and a high achiever but if they are indulged in negative activities then it’s difficult for one to prevent him not to involve in it. So they will be low achievers.

Carman and Zhang (2008) carried a study on “classroom peer effects and academic achievement”. The sample of the research was 7th to 9th grade students of China. During the study the peer and teachers remain the same for three years. The peer effect on the achievement of Mathematics, China and English was observed. The linear in mean model was used to control the individual and teacher interaction by test fixed effects. The findings were the significant positive peer effect on the mathematics test score and positive but not significant effect on Chinese test score and no effect on English test score. Taylor and Wong (1996) reported that gender difference exists in the perception of peer. Study further indicated that the adolescents who have a high level of conformity to unconventional peer behaviour tend to have lower GPA than those who have lower level of conformity. The boys’ grades are more strongly affected by peer orientation than girls. The male peers who exhibits negative behaviour has lower utility for school.

Rai, Stanton, and Wu (2003) also found a positive influence associated with parental monitoring, namely protection against substance use and sexual behaviours, but not condom use. On the other hand, the peer group was found to influence all risk behaviours assessed by the authors. The youngsters that had the perception of the involvement of peers in certain behaviours were more involved in similar behaviours; the same was found for those that presented a problematic relationship with their parents. Literature seems to suggest that the peer group has an important role throughout adolescence; nevertheless it may influence negatively adolescents’ risk behaviours, by enhancing their involvement in such actions. On the other hand, parents have a protective role in the same behaviours, generally associated with good communication and parental monitoring.

In accordance with the Sullivan–Piaget thesis, peers also play a more dominant role than parents in influencing adolescent problematic behaviours, such as delinquency and marijuana use and sexual behaviour (Debarun, 2003). Some other findings on peer groups' influence on erotic Internet use are mixed. For example, Lam and Chan (2007) found peer influence to be strongly positively correlated with online pornography use. On the other hand, both loneliness (Yoder, *et al.*, 2005) and a lack of attachment to friends and parents (Davies, 2007) predict greater online erotic involvement. These two findings possibly indicate that close friendships satisfy intimacy needs.

Furlong, Whipple, Jean, Simental, Seliz and Puthuna (2003), in a related study expressed that students' perceptions of connectedness to peers seems to impact significantly on school achievement. They examined the influence of peers on school engagement from three perspectives. Firstly, socio-emotional factors such as the quality of peer relationship, social competence and socially responsive behaviours impact on academic success. In another dimension, Skues, Cunningham and Pokharel (2005), found that students who were bullied by their peer at school tended to report lower levels of self-esteem, feel less connected to peers, teachers and schools were less motivated to perform well at school.

Research reports have it that adolescents have a moderate to strong influence impact on their peers risk behaviour (Jaccard, Blanton, and Dodge, 2005). Adolescents are susceptible to peer influence in that it has been observed that they are more likely to engage in risk taking in groups than alone. Adolescents, with their limited degree of self-reliance, which interferes with their ability to act independently of the influence of their peers, may be more easily swayed towards engaging in risky behaviour. Impulse control or sensation seeking by adolescents also plays an important role in the degree to which they might engage in risk taking behaviour. The results of a study that examined risk taking and decision making supported the idea that adolescents are more inclined than those of other age groups to engage in risky behaviour and make risky decisions, and that peer influence plays an important role in explaining such behaviour during adolescence (Gardner, and Steinberg, 2005).

A study involving 1,969 adolescents showed that a friend's cigarette smoking, alcohol drinking, and drug use activities, significantly predicts an adolescent's risk

activities over a one-year period. Adolescents tend to affiliate and develop friendships with peers who shares common attitudes and characteristics contributing to homogeneity of peer group. A study has reported that school-aged children with smoking parents were less likely to consider that smoking is harmful to health (67.7%), and had more peers who smoked (30.3%) (Simons-Morton, 2007)

Peer influence is also one of the top reasons given by adolescents for why someone of their age would pick up smoking. Adolescents do offer cigarettes to their peers and that smoking is typically initiated in the context of peer groups. Cigarette offer by peers was a common reason given by adolescents for their picking up of their first cigarette (43.3%). Adolescents also tend to pick up their cigarettes when they wanted acceptance from friends (36%) (Tang and Loke, 2012). A study has reported that adolescents who have a smoking peer are four times more likely to smoke than those who do not (Loke, and Wong, 2010). It was concluded that peers may also play a crucial role in the development of adolescents by influencing how they interpret information on risk behaviors and shaping their normative beliefs. A study found that having a friend who discourages a teen from engaging in particular types of behavior may also protect adolescents from engaging in risky activities (Loke, and Mak, 2013).

Public health professionals are increasingly recognizing the key role that families and peers play in a range of social and behavioral problems affecting young adolescents. To address youth problems in the community, such as substance use, preventative action must be taken—for example, looking into adolescent perceptions of the family process and the peers that surround them, and identifying the issues that put adolescents in a vulnerable position (Loke and Mak, 2013).

2.4 Historical Perspectives of Undergraduates' Rebellious Behaviour

Rebellious behaviour among undergraduates has been an issue of great concern since the beginning of higher education in Nigeria, with creation of Yaba College of Technology, Lagos (Wokocha, 1997) and the University of Ibadan, Nigeria (Alimba, 2008). Generally, majority of students in tertiary institutions are young men and women, best described as youths, and constitute the most vibrant and resourceful group in society. Youths are fragile, restless and sensitive to stimulus and can be easily influenced

positively or negatively. These characteristics make undergraduates to be vulnerable to rebelliousness when yearning for their interests and in their dealings with school management. Students behave in manners not generally approved by the authorities of their institutions whenever it occurred, cases of sexual harassment and victimization of the female students by male lecturers; injustice; high handedness of the authority and undemocratic system of administration in some matters affecting the welfare of students. Likewise, traumatic campus life and experience caused by inadequate hostel accommodations, overcrowded lecture halls and hostels usually fans ember of student rebellion against university authorities. Students studying under these dehumanizing conditions tend to lose sleep, lose concentration and as a result misbehave and revolt against university authorities (Fatile and Adejuwon, 2011).

In Nigerian universities, students are the worst victims of the bureaucratic set of administrative machinery and the autocratic ways of its head. The students live in an atmosphere of indifference and negligence. Indifference breeds anger and it becomes the habit of the neglected persons to behave irresponsibly because of their anger. The dissatisfaction generally goes on increasing among the students and when it assumes a dangerous dimension then the administration gets worried about it. Indeed, when the student is given a rough deal at any level, his ego is hurt and he harbours the wounds of mal-treatment with the desire to recall on the administration as and when the time is ripe for it. Thus unsympathetic, inconsiderate and rough handling of the student, at any level, sows in him somewhere deep the seeds of revolt.

The causes of rebellious behaviour among undergraduates in Nigeria among others include: lack of adequate communication between Universities authorities and the students, stringent administration of discipline and policies that adversely affected the students with particular reference to rustication of students, lack of inclusive administration, lack of confidence and trust in the Universities authorities by the student body due to broken promises, inadequate communication and information flow, feeling of alienation among the students, lukewarm attitudes of authorities and lack of interest in the welfare and affairs of the students (Davies, Ekwere and Uyanga, 2015).

Added to the above points is the idea of democracy with its emphasis on the rights and freedom of the individuals; the “generation gap” in ideas, beliefs and values

about the nature of man, life and society. There is a wide difference of opinion in these matters between the two generations, the young and the old; the high level of sophistication of young men and women compared with that of the old generation; the influence of the media which carry regular reports about students power against authority; bad leadership of Nigerian politicians, the failure of the adults, both in society and at the academic campuses to set standards of good behaviours for young men and women to follow; the failure of many homes to provide basic and essential moral training in the upbringing of the children and the failure of parents to set good examples; peer influence and the failure in communication between young men and women insisting on their rights and the university authorities who tend to see the issues involved simply from the “official” point of view (Oyetubo and Olaiya, 2009).

Over the years, student rebelliousness that initially started as peaceful demonstrations against university management and authorities rapidly transformed into violent confrontations with the law enforcing agents and the destruction of property reaching unprecedented levels with serious injuries and deaths being reported. The prevalent cases of student rebellious behaviour abound since 1960 till date, each with varying outcomes. In 1971 at the University of Ibadan, Ibadan students had confrontation with the Police during campus crisis, a student, Kunle Adepeju, a second year undergraduate of Agricultural Economics, University, was killed with several other students left wounded and arrested by the Police and property worth thousands of naira destroyed. At the third anniversary of Adepeju’s death in 1974 at Ibadan, there was a clash between students and the Police. Students took hostage some military and police officers, many students were wounded, others were arrested and took to Force Headquarters, Lagos, private and public properties were damaged and destroyed.

In 1984, many Nigerian tertiary institutions’ students rebelled against their various institutions’ authorities over the introduction of tuition fees. The rebellious activities of students during this period led to the closure of university campuses for months, before the scrapping of the tuition fee. In 1986, in solidarity with the Ahmadu Bello University, Zaria students, the students across Nigerian Universities complained and rebelled against the high handedness of the Vice-Chancellor of Ahmadu Bello University, Zaria. The resultant effect of this rebellion was the loss of more than 32 lives,

vehicles were burnt, the closure of most Nigerian universities and expulsion of several students. In 1988, Nigerian university students resisted the Ibrahim Babangida military administration when the latter removed the subsidy from petroleum and allied products. The resistance escalated to nationwide protests among students of tertiary institutions, which led to the closure many universities for a period of six months. The year that followed (1989) saw the introduction of Structural Adjustment Programme (SAP), students also opposed against some of the clauses in the programme; the outcome of which led to closure of several higher institutions of learning for about six (6) months. Many students lost their lives during the protest because of open shooting by Police/Army. In 1992, students in tertiary institutions rebelled against the policy of Federal Military Government on deregulation of Nigerian currency and mounting hardship. This rebellion act of the students led to another nationwide protest. Several students died, properties damaged and destroyed, while several schools were closed for months.

In May 2017, University of Ibadan students rebelled against alleged insensitivity of the university management to the welfare of and other matters affecting the students. Students defiled the authority by taking to the streets of Ibadan in protest. The resultant effect was the shutdown of the university by the management for some weeks. In one of the student congresses after the closure of the University, the President of the students' union said that the University, which was shut by the authorities, would not begin examination until the identity cards that had been paid for are issued to students. In June 2017, students of Emmanuel Alayande College of Education, Oyo rebelled against the College administration's policies and insensitivity to the students' welfare. When the authority could not properly manage this rebellion, the students embarked on violent demonstration, making burn fire along major streets in Oyo town. In September 2, 2017, students of Federal College of Education Special, Oyo accused the College clinic staff of inefficiency and incompetency in handling the health matters of two of their mates, which led to the death of these two students. In protest, College clinic, vehicles and other buildings of the College were vandalised by students. On Monday, November 13, 2017, students of the Federal College of Agriculture, Moore plantation, Ibadan protested against the management of the institution. Students clashed with the Nigeria Police,

many students were wounded by police gunshots and public properties worth millions of naira were destroyed.

Current realities in most of Nigerian institutions of higher learning show that educated youths who are supposed to be vanguards of social reforms, justice, fairplay, have turned to vandals posing danger to the peace and tranquillity of the society and nation at large. The intellectual capabilities of students that are supposed to be developed through the learning activities in these institutions have been lost or stepped down. The prestige, honour and excellence of Nigerian ivory towers are being eroded in the community of tertiary institutions and the national goals and objectives of these institutions as stated in the National Policy of Education are now being defeated due to all these rebellious activities of students. Students have turned to hooligans and rogues due to violent protests that usually occur between students and authorities of these institutions. Huge financial resources of Government and founders (in case of private and faith based ones) committed to these institutions are being wasted in the replacement and repair of damaged infrastructure and burnt vehicles.

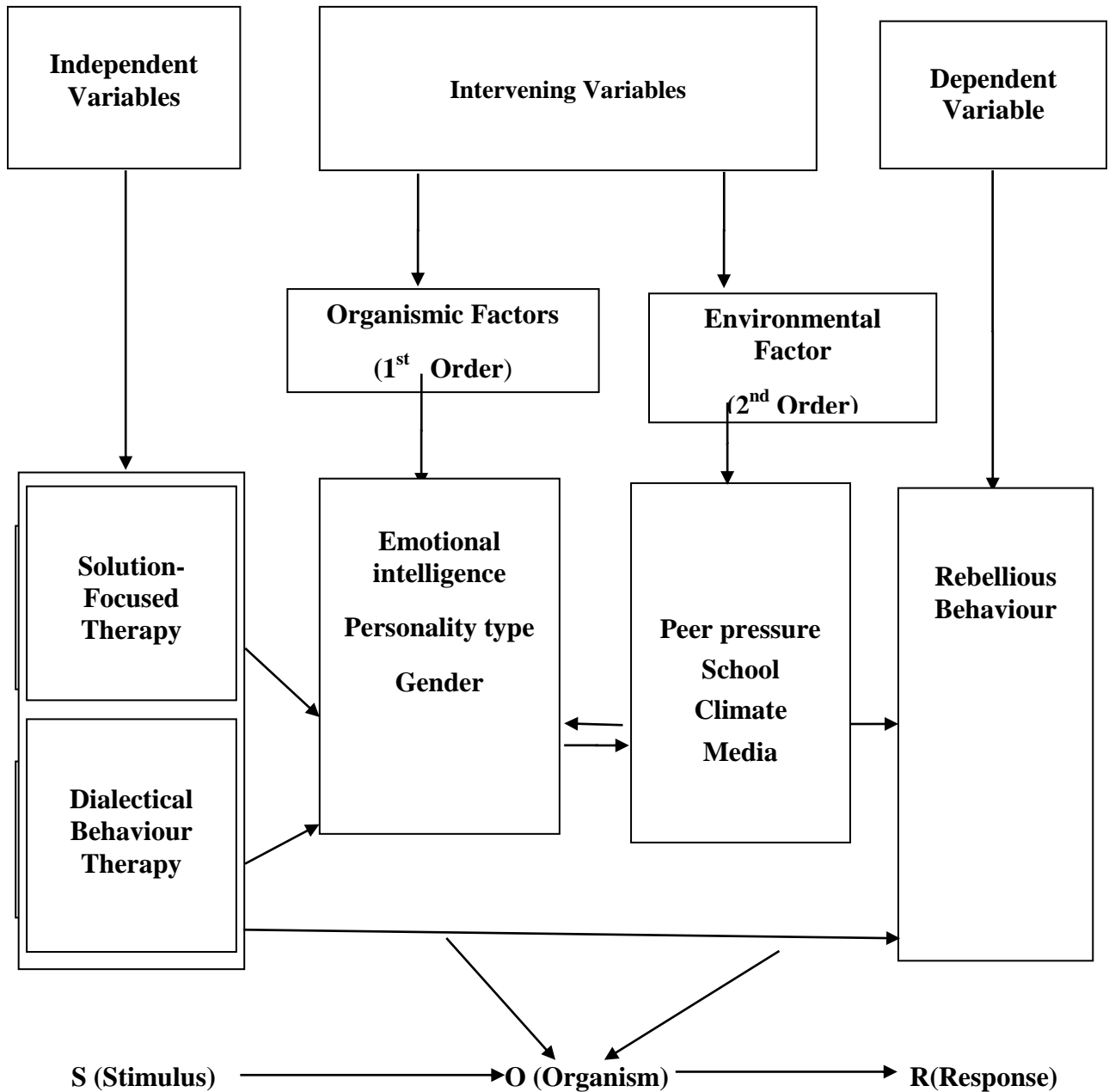
The way and manner by which students from tertiary institutions of learning in Nigeria carry out their agitations look worrisome and sometimes go out of hand and consequently lead to loss of lives and destruction of private and public properties. Student rebellious activities have therefore superseded other forms of conflicts in terms of frequency of occurrence, volatility and severe effects on the universities and the nation as a whole. There is therefore hardly any administration in the universities that had not witnessed one form of student rebelliousness or the other, whether such is internal or external. Tayo (2006) in his view also posited that there has been preponderance of student-related crises in the Nigerian university system, which is becoming worrisome to many stakeholders. According to him, this ugly development is so recurring that many are conditioned to think that crisis is an inevitable factor in university education system in Nigeria. In a period spanning 48 years (1971-2018), thirty-six (36) cases of student rebelliousness leading to loss of human lives and critical study time and damage to students' careers caused by suspension and expulsion were reported at both public and private universities in Nigeria (NISER and NBS Bulletins, 2018).

2.5 Conceptual Model

In this study a conceptual model was developed around the interventions with a view to reducing rebellious behaviour among undergraduates in the South-West, Nigeria. From the conceptual model, Solution-Focused Therapy (SFT) and Dialectical Behaviour Therapy (DBT) are the treatment packages used in the study. These packages are referred to as the independent variables in the conceptual model because they are the variables manipulated by the researcher in order to determine their effect on the dependent variable which is rebellious behaviour.

The intervening variables are of two kinds, the primary and the secondary. The primary intervening variables are the organismic or internal variables that are associated internally with the individual participants in the study. These include Emotional Intelligence, Personality type and Gender. The secondary intervening variables are environmental or external variables and they include Peer Pressure, School Climate and Media. However, according to literature, Emotional Intelligence (EI) and Peer Pressure (PP) stand out as the most related to rebellious behaviour. It is based on this premise that EI and PP were the only moderating variables considered in this study.

CONCEPTUAL MODEL



CHAPTER THREE

METHODOLOGY

This chapter focused on the explanation of how the study was carried out. This includes the description of the research design, the study population, the sample and sampling techniques, instrumentation, procedure for data collection, summary of activities in the experimental groups and method used for data analysis.

3.1 Design

The study adopted the pretest –posttest, control group, quasi-experimental design with a 3x2x2 factorial matrix. The first 3 implies Solution-Focused Therapy, Dialectical Behaviour Therapy and Control Group; the 2 indicates Peer Pressure which is at the levels of High and Low, while the last 2 means Emotional Intelligence which varies at two levels- High and Low.

Table 3.1: A 3x2x2 Factorial Matrix on rebellious behaviour among university undergraduates

Treatment	EMOTIONAL INTELLIGENCE (C)				Total
	HIGH (B ₁)		LOW (B ₂)		
	PEER PRESSURE (B)				
	HIGH (C ₁)	LOW (C ₂)	HIGH (C ₁)	LOW (C ₂)	
SFT (A ₁)	6	5	5	5	21
DBT (A ₂)	7	5	7	5	24
CONTROL (A ₃)	7	10	6	5	28

Key:

A₁= Solution-Focused Therapy; **A₂**- Dialectical Behaviour Therapy; **A₃**- Control Group

B₁- Peer Pressure (High), **B₂** Peer Pressure (Low)

C₁- High (EI), **C₂**- Low (EI)

3.2 Population

The population for the study comprised all undergraduates in the South-West, Nigeria. The South-West Nigeria comprises of six (6) states namely Lagos, Ekiti, Ogun, Ondo, Osun and Oyo states. There are six (6) Federal Universities in the South-West, Nigeria, which include Federal University of Agriculture, Abeokuta (FUNNAB), Federal University of Technology, Akure (FUTA), Obafemi Awolowo University, Ile-Ife (OAU), University of Ibadan, Ibadan (UI), University of Lagos, Lagos (UNILAG) and Federal University, Oye-Ekiti (FUOYE).

3.3 Sample and Sampling Techniques

The sum of ninety (90) participants was considered from the start of this study. As the training was ongoing the participants reduced to the sum of seventy-three (73) and this was used as sample for the study. The participants were selected through multistage sampling procedure and was done in four stages. Three states (Oyo, Lagos and Osun) were randomly selected out of the six states in the South-West, Nigeria. The simple random sampling was used to select three federal universities (Obafemi Awolowo University, Ile-Ife, University of Ibadan, Ibadan and University of Lagos, Lagos) in the selected states.

The second stage involved the selection of three faculties (Education, Art and Social Sciences) in each of the selected Universities.

The third stage involved the selection of three departments (Faculty of Education: Educational foundations, Educational Administration and Adult education. Faculty of Art: English language, Philosophy and communication and language art. Social Sciences: Economics, Psychology and Business Administration) in each of the selected faculties

In the stage four; after confirming the rebelliousness level of departmental association students' leaders through the screening procedure (those with high scores above the norm), a simple random sampling was used in selecting ninety (90) participants from the selected departments but the participants later dropped down to seventy-three (73). Fish-bow method was used (with 29 balls indicating "yes" and the remaining 5 balls indicating "no") at each of the selected universities. Two of the selected university were experimental (SFT; 30 participants & DBT; 30 participants) groups, while the third was control group (30 participants). During the training however, nine (9) participants

dropped at SFT, six (6) participants dropped at DBT and two (2) participants dropped at Control groups.

3.4 Criterion for Selection

The participants for the study should have the following criteria:

1. They should be admitted and registered students pursuing bachelor degree programmes in their various higher institutions of learning
2. The participants should have spent one semester or one full academic year in their universities.
3. They should have scored above 60% in the screening instrument administered.
4. The participants should have shown interest in participating in the treatment procedure without being forced.

3.5 Instrumentation

Questionnaire was used as method of data collection for the study. The questionnaire consists of three (3) sections, from section A to C. Section A contains information on rebellious behaviour scale, section B contains information on emotional intelligence scale and section C contains information on peer pressure scale. The questionnaire passed through pilot study in which the researcher re-validated the questionnaire by administering to 20 participants from Federal University of Technology Akure (FUTA). The instruments used are:

Rebellious Behaviour Scale

The scale was adapted from the rebellious scale by McDermott and Apter, (1987). The scale of 10 items measuring the rebellious behaviour among youths and adolescents. All the items on the rebellious scale were modified to suit the purpose of this study for Africa setting. The scale has a variety of items with different response scales and formats. The scale has response format ranging from “Always=5, Often=4, Sometimes=3, Rarely=2, and Never=1, using a five point Likert format. Two sample items are: (1). If people are unkind to you, do you feel you should be unkind too? (2). If someone corrects you, do you always yield to instruction? The original scale has 0.88 Cronbach Alpha

Coefficient. The current scale was subjected to reliability analysis through Cronbach Alpha and it yielded index value of 0.76.

Rebellious Behaviour Scale

The scale was adapted from the authoritarian- rebellious scale by Khon (1972), this was done by modifying the items to suit the purpose of this study for Africa settings. The original scale by Khon consists of 30 items measuring authoritarianism and rebelliousness among Canadian youths and adolescents. The adapted and modified scale contained 22 items used for this study. The original scale has 0.74 Cronbach Alpha Coefficient. All items were scored directly from 1-5, except items 11, 12, 13 that are scored from 5-1. Samples of items on the scale “obedience and respect for authority are the most important virtues students should learn”, “No principle is more noble than that of true obedience”. The current scale was subjected to reliability analysis through Cronbach Alpha and it yielded index value of 0.71. Face and content validity was done by the supervisor.

Emotional Intelligence Scale

This scale was employed to measure the emotional intelligence of the participants. Emotional intelligence is a moderating variable in this study. The emotional intelligence scale used for this study was adopted from the work of Schutte, Malouff, Hall, Haggerty, Cooper, Golden and Dornheim (1998) "Development and validation of a measure of emotional intelligence, Personality and Individual Differences". The scale is a veritable method of measuring general Emotional Intelligence (EI), using four sub-scales: emotion perception, utilizing emotions, managing self-relevant emotions, and managing others' emotions. The (Schutte Self-Report Emotional Intelligence) SSEIT was structured from the Emotional Intelligence model by Salovey and Mayer (1990). The SSEIT model is closely associated with EQ-I model of Emotional Intelligence. The instrument consists of 33 items that measure appraising emotions in self and others, regulation of emotions in self-and others, utilization of emotions to solve problems. The scale has been found efficacious in studies carried out in Nigerian context (Adeyemo and Agokei, 2011; Salami, 2007). The scores range from 33 to 165. A score below 68 is low while a score from 69 to 110 is

moderate and above is high. Internal consistency of the scale was calculated using Cronbach Alpha method through test-retest. Samples of items on the scale are “I know when to speak about my personal problems to others”, “I find it hard to understand the non-verbal messages of other people”. The original scale was reported reliable with 0.85 reliability coefficient. The current researcher carried out a reliability analysis for the scale using Cronbach Alpha method. It yielded an index value of 0.73

Peer Pressure Scale

Peer pressure scale that was used in this study was adapted by modifying the items to suit the purpose of the study from Perception of Peer Pressure Scale (PPPS) as developed by Harter (1985). The scale was designed for this research to assess the degree to which peers influenced adolescents' behaviour. The scale is measured on a five-point scale. Samples of items on the scale include “My friends expect me to do things that my parents disagree with” ”My friends expect me to dress as they want” The original scale was found to be reliable as internal consistency indexed by Cronbach's alpha, was high, $\alpha = 0.90$. The current researcher carried out a reliability analysis for the scale using Cronbach Alpha method. It yielded an index value of 0.81.

3.6 Procedure for Data Collection

Letter of introduction was obtained from the Department of Counselling and Human Development Studies, Faculty of Education, University of Ibadan, Ibadan. The letter was presented to the Deans, Student Affairs of the three universities that were used for the research to obtain permission to carry out the research with their students. Research assistants were recruited, who are master degree holders in the Department of Counselling and Human Development Studies, Faculty of Education, University of Ibadan, Ibadan. The research assistants were enlightened on the importance of the study and the roles the research assistants are expected to play during the research a week prior to the commencement of the training. The researcher to avoid any mix-up and mistakes closely monitored the research assistants.

The researcher with the help of research assistant administered the questionnaires for the selected students and assured them of confidentiality. The three scales were administered during the prefield and post field sessions. The researcher administered the rebellious behaviour scale, which is tagged as revolutionary behaviour scale in order to measure the student sincerity. This enabled the researcher to ascertain the participants that have high level of rebelliousness that scored 60% and above.

The researcher tried to control some extraneous variables that might affect the results of the experiments by ensuring that proper randomization is observed in assigning the participants to the various treatment groups and control group. Some of the extraneous variables were invited and built into the conceptual model of the study.

3.7 Summary of the Treatment Packages

EXPERIMENTAL GROUP 1 (SOLUTION-FOCUSED THERAPY)

Session 1: General Orientation and Administration of Pre-test instrument

Session 2: The meaning of Rebellious Behaviour and Solution-Focused Therapy

Session 3: Negotiating the Starting Point and Setting of Goals

Session 4: Finding and Exploring the Participants' Exceptions in Rebellious Behaviour

Session 5: Finding and Exploring the Participants' Exceptions in Rebellious Behaviour (contd.)

Session 6: Finding and Exploring the Participants' Exceptions in Making Things go better

Session 7: Finding and Exploring the Participants' Exceptions in Making Things go better (contd.).

Session 8: Scaling the Participants' Progress on the Reduction of Rebellious Behaviour

Session 9: Overall Review, Post-Experiment Test Administration and Conclusion

EXPERIMENTAL GROUP 2- (DIALECTICAL BEHAVIOUR THERAPY)

Session 1: General Introduction and Administration of Instrument to obtain Pre-test scores.

Session 2: The Meaning of Rebellious Behaviour and Dialectical Behaviour Therapy

Session 3: Validation Process in Dialectical Behaviour Therapy

Session 4: Core Mindfulness Skills

Section 5: Core Mindfulness Skills (continued)

Session 6: Emotion Regulation Skills

Session 7: Distress Tolerance Skills

Session 8: Interpersonal Effectiveness Skills

Session 9: Overall review, Post-Experiment Test Administration and Conclusion.

THE CONTROL GROUP

Session 1: Administration of Pre-test instruments

Session 2: Fundamental principles of successful life

Session 3: Administration of post-test instrument

3.8 Data Analysis

The pretest-posttest data that were generated from the three groups were analyzed statistically using Analysis of co-variance (ANCOVA) and Bonferonni Post-hoc test, while all hypotheses were tested at 0.05 level of significance. Analysis of co-variance is considered to be suitable for this study because of its ability to determine the effect of the treatment packages on the experimental groups. The Bonferonni Post-hoc test was used to determine the directions of differences and significance identified.

CHAPTER FOUR
RESULTS AND DISCUSSIONS

In this chapter, the statistical results of this study and inferential explanations on the specific findings of the study with logical back up from previous findings by various scholars were interpreted and presented.

Section A: Demographics Characteristics of the Respondents

Table 4.1: Percentage Distribution of Respondents Demographics

Age (Birth)	Frequency	Percent (%)
Less than 21 years	3	4.1%
22-24 years	37	51%
25 years and above	33	44.9%
Gender	Frequency	Percent (%)
Male	32	44%
Female	41	56.3%
Tribe	Frequency	Percent (%)
Yoruba	34	35.5%
Igbo	57	59.3%
Others	5	5.2%
Groups	Frequency	Percent (%)
SFT	21	29%
DBT	24	33%
Control	28	38%

Source: field survey, 2020

A total of 73 respondents participated in the study, The result indicated in Table 4.1 above reveals that out of 73 participants that took part in the study, 37(51%) of them were between 22 and 24 years of age, 33(44.9%) of the respondents were between 25 years and above, while 3(4.1%) of the respondents were less than 21 years. This means that majority of the respondents in this study were between the age of 22 and 24 years. Also, Table 4.1 shows that out of 73 participants that took part in the study, 41(56.3%) of them were female while 32(44%) of them were male. The result implies that female undergraduates were more represented than male in the study.

Table 4.1 also reveals that 57(59.3%) of the respondents were from Igbo ethnic group, 34(35.5%) of them were Yorubas, while 5(5.2%) were from other ethnic groups. 38% of the participants were classified under the control group, 33% of them were categorized as DBT, while 29% of them were under SFT.

Results Presentation

4.1 Hypothesis One: There is no significant main effect of treatment on rebellious behaviour among undergraduates

To test the hypothesis that there is no significant main effect of treatments on rebellious behaviour among undergraduates, Analysis of Covariance (ANCOVA) was adopted to analyse the post-test scores of the participants on their rebellious behaviour using the pre-test scores as covariate to ascertain if the post experimental differences are statistically significant. The summary of the analysis is presented in Table 4.2.

Table 4.2: Analysis of Covariance summary showing the effects of treatments on rebellious behaviour among undergraduates

Source	Type III Sum of Squares	Df	Mean Square	F	Sig.	Partial Eta Squared
Corrected Model	15344.341 ^a	3	5114.780	252.949	.000	.917
Intercept	45.284	1	45.284	2.239	.139	.031
Pretest rebelliousness	329.374	1	329.374	16.289	.000	.191
Treatment	14531.245	2	7265.622	359.318	.000	.912
Error	1395.220	69	20.221			
Total	140933.000	73				
Corrected Total	16739.562	72				

R Squared = .917 (Adjusted R Squared = .913)

Table 4.2 reveals that there is a significant main effect of treatment on rebelliousness among undergraduates; $F_{(2,69)} = 359.318$, $p < 0.01$, $\eta^2 = .912$. Hence null hypothesis is rejected. Therefore, there is a significant difference in the rebellious behaviour among undergraduates based on treatment groups. Size of effect reveals that treatment accounted for 91.2% ($\eta^2 = 0.912$) change in undergraduates' rebellious behaviour; that is, the variance in treatment groups had large effect on rebellious behaviour among undergraduates. For further justification on the margin of difference between the treatment groups and the control groups, the pair-wise comparison using bonferonni was computed and the result is shown in table 4.3.

Table 4.3: Bonferonni Pair-wise Comparison showing the significant differences among various treatment groups and control group

(I) Treatment	(j) Treatment	Mean Difference (I-J)	Std. Error	Sig.^c
Control group (mean= 58.131)	Solution-focused therapy group	26.980*	1.289	.000
	Dialectical Behaviour therapy group	30.272*	1.263	.000
Solution-focused therapy (SFT) group (mean= 31.151)	Control group	-26.980*	1.289	.000
	Dialectical therapy group	3.293	1.376	.058
Dialectical Behaviour therapy (DBT) group (mean= 27.859)	Control group	-30.272*	1.263	.000
	Solution-focused therapy group	-3.293	1.376	.058

Table 4.3 reveals that after controlling for the effect of pre-rebelliousness, experimental group II (DBT) (mean= 27.859) displayed the lowest rebelliousness, followed by experimental group I (Solution focused therapy) (mean= 31.151) and control group (mean= 58.131). By implication, DBT is more potent in undergraduates' rebelliousness than solution focused therapy. The coefficient of determination (Adjusted R-squared =.913) overall indicates that the differences that exist in the group account for 91.3% in the variation of rebellious behaviour among undergraduates.

The above results indicated that there was significant main effect of treatments (Solution-Focused and Dialectical Behaviour Therapies) on rebellious behaviour among undergraduates. Therefore, there is a significant difference in the rebellious behaviour among undergraduates based on treatment groups. In other words, there was also significant difference in the mean scores of rebellious behaviour among the participants exposed to treatment when compared with the control group. The implication of this is that Solution-Focused and Dialectical Behaviour Therapies are effective in reducing rebellious behaviour among undergraduates. The findings can be justified bearing in mind the adopted psychotherapeutic interventions were aimed at changing or reducing the rebellious behaviour of the participants.

An evidence-based justification for this finding is that rebellious behaviour is a type of problem that might borne out of physical or sexual abuse, domestic violence, or exposure to violence in the community, and experiences that involve deprivation and social disadvantage, such as neglect, the absence or limited availability of a caregiver, poverty and insecure access to food. Based on this, a psychotherapy that is geared towards providing solutions to behavioural challenges tends to be effective. This is in congruence with the findings of this study. To further substantiate this, Bond (2013) reported that Solution- Focused Therapy is a promising intervention for schools and has been applied to improve academic and goal achievement; and to decrease truancy, classroom disruptions, and substance use.

Another justification for the finding is that behavioural disorders like rebellious behaviour has been interpreted as a complex set of emotional, cognitive and behavioural problems, which are characterised by lack of control and respect of the social and moral principles, and difficulties behaving in a desirable and socially acceptable manner (Michaela and Heidi, 2017). This behavioural problem has been frequently reported to have been addressed by counselling and psychotherapy. This finding is in tandem with the findings, of Javanmiri, Kimiaee and Abadi (2013) who reported that there was significant effect of solution-focused therapy in decreasing depression and violent behaviour among some teenagers. In the same vein, Rasheed and Ogundokun (2017) reported that Solution-Focused Therapy was effective in controlling performance behaviour of some selected senior secondary school students. This finding is also in consonance with the findings of Javanmiri, Kimiaee and Hashem (2012), Egbochuku and Igbineweka (2014) and Baijesh (2015) who made similar findings. While Javanmiri et al (2012) found SFBT group counselling effective in reducing symptoms of generalized anxiety as well as depression among teenage girls. Egbochuku and Igbineweka (2014) and Baijesh (2015) also made findings indicating the effectiveness of SFBT in reducing test anxiety and social anxiety among adolescents and students. Egbochuku and Igbineweka (2014) also reported that sex had no significant effect on the reduction of test anxiety of students using Solution-Focused Therapy.

In addition, Culpepper and Fried (2013) reported the effectiveness of dialectical behavioural therapy on the reduction of series of behavioural problems like conduct disorders occurring at different levels with varying severity, antisocial, aggressive, and other types of behaviour. Similarly, Stephen and Bailey (2013) found that there is experimental effect of dialectical behaviour therapy on behaviour disorder.

4.2 Hypothesis Two: There is no significant main effect of emotional intelligence on rebellious behaviour of undergraduates

To test the hypothesis that there is no significant main effect of emotional intelligence on rebellious behaviour of undergraduates, Analysis of Covariance (ANCOVA) was adopted to analyse the rebellious behaviour post-test scores of the participants using the pre-test scores as covariate to ascertain the level of rebelliousness

accounted for by levels of emotional intelligence. The summary of the analysis is presented in Table 4.4.

Table 4.4: Analysis of Covariance summary showing the effects of emotional intelligence on undergraduates' rebellious behaviour

Source	Type III Sum of Squares	Df	Mean Square	F	Sig.	Partial Eta Squared
Corrected Model	947.008 ^a	2	473.504	2.099	.130	.057
Intercept	34.693	1	34.693	.154	.696	.002
Pretest rebelliousness	133.911	1	133.911	.594	.444	.008
Emotional Intelligence	945.548	1	945.548	4.191	.044	.056
Error	15792.554	70	225.608			
Total	140933.000	73				
Corrected Total	16739.562	72				

Table 4.4 further shows that there is a significant main effect of emotional intelligence on rebellious behaviour of undergraduates; $F_{(1,70)} = 4.191$, $p < 0.05$, $\eta^2 = 0.056$. Hence, the null hypothesis is rejected. This implies that there is a significant difference in the rebellious behaviour of undergraduates based on their level of emotional intelligence. The table further reveals that undergraduates' level of emotional intelligence accounts for 5.6% change in their rebelliousness. To further clarify where the difference lies, a pair-wise comparison was computed using bonferonni, and the result is shown in table 4.5.

Table 4.5: Bonferonni Pair-wise Comparison showing the significant difference among levels of emotional intelligence

(I) emotional intelligence	(J) emotional intelligence	Mean Difference (I-J)	Std. Error	Sig.
Low emotional intelligence participant (mean=43.554)	high emotional intelligence participant	3.893	3.755	.044
high emotional intelligence participant (mean=39.661)	Low emotional intelligence participant	-3.893	3.755	.044

Table 4.5 reveals that after controlling for the effect of pretest rebellious behaviour, participants with high emotional intelligence (mean=39.661) had the lower rebellious behaviour than those with low emotional intelligence (mean= 43.554). By implication, higher emotional intelligence reduces the likelihood of rebellious behaviour among undergraduates.

The finding showed that there was a significant main effect of emotional intelligence on rebellious behaviour of undergraduates. This implies that there is a significant difference in the rebellious behaviour of undergraduates based on their levels of emotional intelligence. This is justified based on the understanding that an emotionally intelligent person would control and regulate his/her emotion such that it would not be injurious or rebellious to the existing social order. An emotionally intelligent individual may not involve in rebellious act or at least in a minimal way.

Emotions and behaviour are inseparable entities; one can barely be studied without the other. Being intelligent in emotion implies that one is able to manage and regulate one's behaviour in all contexts. An emotionally intelligent person tends to have ability to control his/her emotion in the face of aggression and anger. Thus, high level of intelligence signifies less aggression, less rebellion and less anger especially in contexts that are not suitable for anger.

Many researchers have emphasized on the role of emotion and emotional management in wellbeing and success; ever, some believe that 2/3 of capacities for successfulness is emotional capacities (Dattner, 2009) and 90 percent of successfulness in leadership is attributed to emotional intelligence capacity (Goleman, Boyatzis and McKee, 2002). In summary, emotional capacity is the best discriminating factor between ordinary and intelligent people (Goleman, 1998). From the above-mentioned studies, it can be deduced that recent studies have been focusing on the effects of emotional management on cognitive processing and that other studies have indicated the role of emotion and emotional management in approach to a problem and problem solving.

In accordance with the findings of this study, research on emotional intelligence and incidence of tobacco and alcohol use found that emotional intelligence accounts for a small portion of the variance in tobacco and alcohol use (Trinidad and Johnson, 2002). The results suggested that students with high emotional intelligence may be better

equipped to ward off peer pressure and have a greater ability to resist the use of tobacco and alcohol.

Kelly and Kaminskiene (2016) found that emotions play a very important role in the search for dispute resolution, but very often are neither understood nor effectively addressed by the parties to the dispute, also not properly controlled and managed by the professionals that are helping the parties to reach peaceful dispute resolution. Argyle and Lu (1990) also reported that positive emotionality is associated with sociability. Whereas persistent negative affect keeps others at bay.

4.3 Hypothesis Three: There is no significant main effect of peer pressure on rebellious behaviour of undergraduates.

To test the hypothesis that there is no significant main effect of peer pressure on rebellious behaviour of undergraduates, Analysis of Covariance (ANCOVA) was adopted to analyse the rebellious behaviour post-test scores of the participants using the pre-test scores as covariate to ascertain the level of rebelliousness accounted by levels of peer pressure. The summary of the analysis is presented in Table 4.6.

Table 4.6: Analysis of Covariance summary showing the effects of peer pressure on rebelliousness of undergraduates

Source	Type III Sum of Squares	Df	Mean Square	F	Sig.	Partial Eta Squared
Corrected Model	1529.512 ^a	2	764.756	3.520	.035	.091
Intercept	120.443	1	120.443	.554	.459	.008
Pretest Rebelliousness	716.415	1	716.415	3.297	.074	.045
Peer pressure	1328.183	1	1328.183	6.113	.016	.080
Error	15210.050	70	217.286			
Total	140933.000	73				
Corrected Total	16739.562	72				

R Squared = .091 (Adjusted R Squared = .065)

Table 4.6 further shows that there is a significant main effect of peer pressure on rebellious behaviour of undergraduates; $F_{(1,70)} = 6.113$, $p < 0.05$, $\eta^2 = 0.080$. Hence the null hypothesis is rejected. This implies that there is a significant difference in rebellious behaviour of undergraduates based on levels of peer pressure. The table further reveals that participants' peer pressure accounted for 8.0% change in their rebellious behaviour. To further clarify where the difference lies, a pair-wise comparison using bonferonni was computed. The result is shown in table 4.7.

Table 4.7: Bonferonni Pair-wise Comparison showing the significant difference in rebellious behavior of undergraduates based on the level of peer pressure.

(I) Peer pressure	(J) Peer Pressure	Mean Difference (I-J)	Std. Error	Sig.^c
High peer pressure participants (mean= 46.74)	Low peer pressure participants	-7.571	.170	.034
Low peer pressure participants (mean=39.17)	High peer pressure participants	7.571	.170	.034

Table 4.7 reveals that after controlling for the effect of pretest rebellious behaviour, participants with low peer pressure displayed lower (mean=39.17) rebelliousness than those with high peer pressure (mean= 46.74). By implication, low peer pressure participants have lower tendency to display rebellious behaviour than those with high peer pressure. The coefficient of determination (Adjusted R-squared = .913) reveals that the overall model explained 6.5% variation of rebellious behaviour of undergraduates.

The above hypothesis was rejected because it was found that there is a significant main effect of peer pressure on rebellious behaviour of undergraduates. This is justified because rebelliousness is contextually group behaviour. It is not exhibited in isolation. Man is a social being, thus largely influenced by the elements of his physical and social environments. Man always seeks social acceptance of significant others. In a quest to seek societal acceptance, human beings tend to influence and be influenced by other people in the society. This applies to adolescents and youths' behavioural dispositions. Peers compete favourably with parents and school in the socialization processes. There are peers both at home and in school, this attests to the strength of peer influence in the behavioural development of adolescents. Rebellious behaviour can only be successfully carried out with the help of others. This implies that peer pressure and cooperation are involved in the context of rebelliousness. Peer pressure has far-reaching implications on adolescents' overall social and cognitive development.

In agreement with the findings of this study, Tome, de Matos (2012) reported that the role of peers was found to be relevant to the risk behaviours, violence, well-being, health and feelings about school, directly and indirectly. Lam and Chan (2007) found peer influence to be strongly positively correlated with online pornography use. On the other hand, both loneliness (Yoder, 2005) and a lack of attachment to friends and parents (Davies, 2007) predict greater online erotic involvement. These two findings possibly indicate that close friendships satisfy intimacy needs.

Young people have rebelled because they want to separate themselves from their parents so that they can develop their own personal identities Pickhardt (2009). The study of Gregoire (2014) shows the following reasons why youth rebelled; (1) Youths

want to seek independence from fighting against adults like their parents, teachers, and other people who control them. (2) Youths seek individualism since many young people are desperate to change themselves to see them acceptable (Justbequiet, 2013). This is acceptable else or it enters a sort of rebel youth according to (Pickhardt, 2009). It is called non-conformity or to rebel against society. The youth were introduced in different levels of human beings and become aware why they are different from their friends According to Kaur (2013), teenage rebellion is due to their findings of their own, turmoil, and pubertal frustrations. A rebel young man can be harmed by the whole family so the youths are seeking independence. Teenagers want to stay with their friends than their families in order to have the power to make decisions for them. This leads the teenagers to become disobedient to their parent wishes and orders.

4.4 Hypothesis Four: There is no significant interaction effect of treatment and emotional intelligence on rebellious behaviour of undergraduates

To test the hypothesis that there is no significant interaction effect of treatment and emotional intelligence on rebellious behavior among undergraduates, Analysis of Covariance (ANCOVA) was adopted to analyse the rebellious behaviour post-test scores of the participants using the pre-test scores as covariate to ascertain the interaction effect of emotional intelligence and treatment on rebellious behaviour. The summary of the analysis is presented in Table 4.8.

Table 4.8: Analysis of Covariance summary showing the interaction effects of treatment and emotional intelligence on rebelliousness of undergraduates

Source	Type III Sum of Squares	Df	Mean Square	F	Sig.	Partial Eta Squared
Corrected Model	15898.480 ^a	6	2649.747	207.927	.000	.950
Intercept	8.235	1	8.235	.646	.424	.010
Pretest Rebellious	241.845	1	241.845	18.978	.000	.223
Treatment	14635.066	2	7317.533	574.210	.000	.946
Emotional Intelligence	42.399	1	42.399	3.327	.073	.048
Treatment * Emotional Intelligence	426.650	2	213.325	16.740	.000	.337
Error	841.082	66	12.744			
Total	140933.000	73				
Corrected Total	16739.562	72				

R Squared = .950 (Adjusted R Squared = .945)

Table 4.8 further shows that there is a significant interaction effect of treatment and emotional intelligence on rebellious behavior among undergraduates; $F_{(2,66)} = 16.740$, $p < 0.01$, $\eta^2 = 0.337$. Hence, the null hypothesis is rejected. This implies that emotional intelligence significantly moderated the effect of treatment on rebellious behaviour. The table further reveals that the effect of emotional intelligence on treatment accounted for 33.7% change in participants' rebellious behaviour; that is the interaction of treatment and emotional intelligence had large effect in the variation of participants' rebellious behaviour score. To further clarify where the difference lies, a pair-wise comparison using bonferonni was computed. The result is shown in table 4.9.

Table 4.9: Bonferonni Pair-wise Comparison showing interaction effect of treatment and emotional intelligence on rebellious behaviour among undergraduates

Treatment	Emotional Intelligence	Mean	Std. Error
Control group	High emotional intelligence participant	55.443 ^a	.843
	Low emotional intelligence participant	62.663 ^a	1.090
Solution-focused therapy (SFT) group	High emotional intelligence participant	29.639 ^a	1.278
	Low emotional intelligence participant	32.954 ^a	1.251
Dialectical Behaviour therapy (DBT) group	High emotional intelligence participant	30.643 ^a	1.176
	Low emotional intelligence participant	25.522 ^a	1.074

Table 4.9 reveals that after controlling for the effect of pretest rebellious behaviour, experimental group II (DBT) was more moderated by emotional intelligence than experimental group I (solution-focused therapy) and control group. Participants in experimental group II displayed varying level of rebellious behaviour based on the emotional intelligence. DBT intervention was more effective in reducing rebellious behaviour among participants with low emotional intelligence (mean=25.522) than those with high emotional intelligence (mean=30.64). While solution-focused therapy intervention was more effective in reducing the rebellious behaviour of participants with high emotional intelligence (mean=29.64) than those with low emotional intelligence (mean= 32.95). The coefficient of determination (Adjusted R-squared = .945) reveals that the overall model explained 94.5% variation of rebellious behaviour among undergraduates. To further understand the point of variance in the mean scores of rebellious behaviour among treatment groups a line graph representation is shown in figure 4.1.

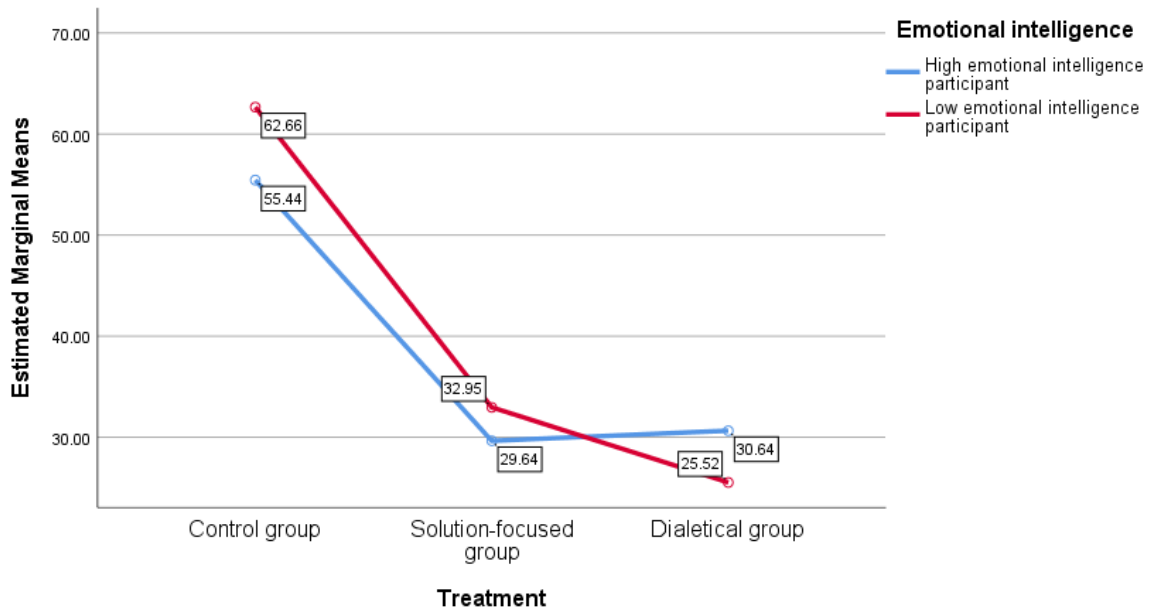


Figure 4.1: Line graph showing the interaction effect of treatment and emotional intelligence level.

The hypothesis above was rejected because the result indicated that there was a significant interaction effect of treatment and emotional intelligence on rebellious behaviour among undergraduates. Behaviour is always exhibited in the context of emotion; hence, cognitive and behaviour-based psychotherapies are capable of either reducing or increasing behaviour. An emotionally intelligent individual would be able to ward off the negative influence of peer pressure and rebellious behaviour. In concordance with the findings of this study, Mayer, Caruso, and Salovey (1999) reported that high level of emotional intelligence promotes effective coping by decreasing the extent to which individuals ruminate on negative events, by promoting emotional disclosure, and by increasing individuals' proclivity to seek social support after negative events occur. Also, Zeidner and Kloda (2013) found that people with a high emotional clarity better understand the emotions they are feeling, their causes, and consequences. In line with the findings of this study, people with high emotional intelligence resolve conflicts more constructively and display fewer aggressive behaviours (García-Sancho, 2014).

4.5 Hypothesis Five: There is no significant interaction effect of treatment and peer pressure on rebellious behaviour of undergraduates.

To test the hypothesis that there is no significant interaction effect of treatment and peer pressure on rebellious behavior of undergraduates, Analysis of Covariance (ANCOVA) was adopted to analyse the rebellious behaviour post-test scores of the participants using the pre-test scores as covariate to ascertain the interaction effect of peer pressure and treatment on rebellious behaviour.

Table 4.10: Analysis of Covariance summary showing the interaction effects of treatment and peer pressure on rebelliousness of undergraduates

Source	Type III Sum of Squares	Df	Mean Square	F	Sig.	Partial Eta Squared(η^2)
Corrected Model	15728.488 ^a	6	2621.415	171.119	.000	.940
Intercept	112.954	1	112.954	7.373	.008	.100
Pretest Rebellious behaviour	105.912	1	105.912	6.914	.011	.095
Treatment	9502.609	2	4751.305	310.152	.000	.904
Peer pressure	20.518	1	20.518	1.339	.251	.020
Treatment * Peer pressure	294.727	2	147.363	9.619	.000	.226
Error	1011.073	66	15.319			
Total	140933.000	73				
Corrected Total	16739.562	72				

R Squared = .940 (Adjusted R Squared = .934)

Table 4.10 further shows that there is a significant interaction effect of treatment and peer pressure on rebellious behaviour among undergraduates; $F_{(2,66)} = 9.619$, $p < 0.01$, $\eta^2 = 0.226$. Hence, the null hypothesis is rejected. This implies that peer pressure significantly moderated the effect of treatment on rebellious behaviour. The table further reveals that the effect of peer pressure on treatment accounted for 22.6% change in participants' rebellious behaviour; that is the interaction of treatment and peer pressure had large effect in the variation of participants rebellious behaviour score. To further clarify where the difference lies, a pair-wise comparison using bonferonni was computed. The result is shown in table 4.10a.

Table 4.10a: Bonferonni Pair-wise Comparison showing interaction effect of treatment and peer pressure on rebelliousness among undergraduates

Treatment	Peer Pressure	Mean	Std. Error
Control group	High peer pressure	59.991 ^a	.929
	Low peer pressure	55.528 ^a	1.130
Solution-focused therapy(SFT) group	High peer pressure	32.597 ^a	.999
	Low peer pressure	26.007 ^a	2.050
Dialectical Behaviour therapy (DBT) group	High peer pressure	26.992 ^a	.902
	Low peer pressure	33.462 ^a	2.300

Table 4.10a reveals that after controlling for the effect of pretest rebellious behaviour, experimental group II (DT) was more moderated by peer pressure than experimental group I (SFT) and control group. Participants in experimental group II displayed varying level of rebellious behaviour based on the peer pressure. DBT intervention was more effective in reducing rebellious behaviour among participants with high peer pressure (mean=26.992) than those with low peer pressure (mean=33.462). While SFT was more effective in reducing the rebellious behaviour of participants with those having low peer pressure (mean=26.007) than those with high peer pressure (mean= 32.597). The coefficient of determination (Adjusted R-squared = .934) reveals that the overall model explained 93.4% variation of rebellious behaviour among undergraduates. To further understand the point of variance in the mean scores of rebellious behaviour among treatment groups a line graph representation is shown in figure 4.2.

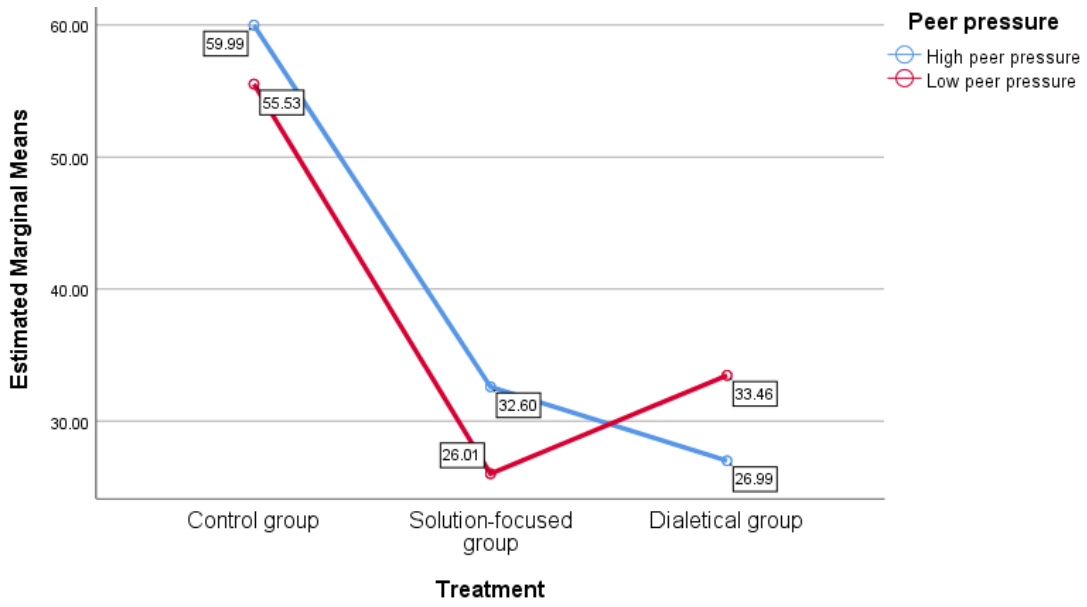


Figure 4.2: Line graph showing the interaction effect of treatment and peer pressure level.

The hypothesis above was rejected because there is a significant interaction effect of treatment and peer pressure on rebellious behaviour among undergraduates. This finding has its basis on the obvious moderating roles of peer pressure on the behavioural dispositions of individuals. Psychological intervention may be ineffective if the negative effect of peer pressure is not controlled. This implies that psychotherapies targeted at reducing rebellious behaviour would be more effective if peer pressure is controlled for and allowed to moderate.

In agreement with the findings of this study, Locke and Wong (2016) reported that adolescents who have a smoking peer are four times more likely to smoke than those who do not. It was also reported that peers play a crucial role in the development of adolescents by influencing how they interpret information on risk behaviours and shaping their normative beliefs. In the same vein, a study found that having a friend who discourages a teen from engaging in particular types of behaviour may also protect adolescents from engaging in risky activities (Loke, and Mak, 2013).

4.6 Hypothesis Six: There is no significant interaction effect of emotional intelligence and peer pressure on rebellious behaviour of undergraduates

To test the hypothesis “there is no significant interaction effect of emotional intelligence and peer pressure on rebellious behavior of undergraduates”, Analysis of Covariance (ANCOVA) was adopted to analyse the rebellious behaviour post-test scores of the participants using the pre-test scores as covariate to ascertain the interaction effect of emotional intelligence and peer pressure and treatment on rebellious behaviour.

Table 4.10b: Analysis of Covariance summary showing the interaction effects of emotional intelligence and peer pressure on rebelliousness among undergraduates

Source	Type III Sum of Squares	Df	Mean Square	F	Sig.	Partial Eta Squared(η^2)
Corrected Model	1533.142 ^a	3	511.047	2.319	.083	.092
Intercept	117.896	1	117.896	.535	.467	.008
Pretest Rebelliousness	1266.458	1	1266.458	5.747	.019	.077
Emotional intelligence	3.630	1	3.630	.016	.898	.000
Peer Pressure	586.134	1	586.134	2.660	.107	.037
Emotional intelligence * Peer pressure	40.220	2	20.11	1.669	.311	.020
Error	15206.420	69	220.383			
Total	140933.000	73				
Corrected Total	16739.562	72				

Table 4.10b further shows that there is no significant interaction effect of emotional intelligence and peer pressure on rebellious behaviour of undergraduates; $F_{(1,69)} = 1.669$, $p > 0.05$, $\eta^2 = 0.020$. Hence, the null hypothesis is not rejected. This implies that peer pressure did not significantly moderate the effect of emotional intelligence on rebellious behaviour of undergraduates.

Findings showed that there was no significant interaction effect of emotional intelligence and peer pressure on rebellious behaviour of undergraduates. The reason for this is that adolescents are becoming more independent of their parents and free from parental supervision than before. Due to desire for independence, adolescents get involved in anti-social behaviour just to prove they are matured. When a teenager is largely influenced by peer pressure, such teenager tends to be rebellious especially if the group is rebellious. No doubt, friends play a significant role in the lives of youths and adolescents. At this stage of their lives, peers' advice tend to replace that of parents and this is why some of them have serious disagreement with their school authority, parents or guardians.

In accordance with the findings of this study, Okafor and Nnoli (2010) reported that adolescents create a separate world for themselves using slangs, coded language, facial expression, body language which can only be understood by their peers. In the same vein, Onohwosafe (2013), opined that other risky behaviour of adolescents are poor eating habits, high level of anxiety, emotional and behavioural problems and stress disorder. Generally, the effects of negative peer pressure on adolescents may be numerous and these could include alienation from the family, disobedience and total disregard for the opinions and values of their parents and school authorities.

4.7 Hypothesis Seven: There is no significant three-way interaction effect of emotional intelligence, peer pressure and treatment on rebellious behaviour of undergraduates

To test the hypothesis that there is no significant three-way interaction effect of treatment, emotional intelligence and peer group on rebellious behaviour of undergraduates, Analysis of Covariance (ANCOVA) was adopted to analyse the rebellious behaviour post-test scores of the participants using the pre-test scores as covariate to ascertain the three-way interaction effect of treatment, emotional intelligence and peer pressure and treatment on rebellious behaviour.

Table 4.10c: Analysis of Covariance summary showing the interaction effects of treatment, emotional intelligence and peer pressure on rebelliousness among undergraduates

Source	Type III Sum of Squares	df	Mean Square	F	Sig.	
Corrected Model	15980.865 ^a	9	1775.652	147.445	.000	.955
Intercept	14.107	1	14.107	1.171	.283	.018
Pretest Rebelliousness	152.232	1	152.232	12.641	.001	.167
Treatment	11187.308	2	5593.654	464.481	.000	.936
Emotional intelligence	47.159	1	47.159	3.916	.052	.059
Peer Pressure	2.784	1	2.784	.231	.632	.004
Treatment * Emotional Intelligence	186.049	2	93.024	7.724	.001	.197
Treatment * Peer pressure	80.204	2	40.102	3.330	.042	.096
Emotional Intelligence * Peer pressure	40.220	2	20.11	1.669	.311	.000
Treatment * Emotional intelligence * Peer pressure	34.142	1	17.071	1.418	.231	.000
Error	758.696	63	12.043			
Total	140933.000	73				
Corrected Total	16739.562	72				

Table 4.10c further shows that there is no significant three-way interaction effect of treatment, emotional intelligence and pressure on rebellious behaviour of undergraduates; $F_{(1,63)} = 1.418$, $p > 0.05$, $\eta^2 = 0.038$. Hence, the null hypothesis is accepted. This implies that emotional intelligence and peer pressure could not significantly moderate the effect of treatment on rebellious behaviour of undergraduates.

The hypothesis was accepted because there was no significant three-way interaction effect of treatment, emotional intelligence and pressure on rebellious behaviour of undergraduates. This implies that the trio of emotional intelligence, peer pressure and the treatments did not interact to reduce rebellious behaviour among the participants. The finding is justified because the participants (undergraduates) might have not fully developed their emotional intelligence. In addition, undergraduates tend to follow the decisions of their peer groups. Another philosophy behind this finding is that emotions are causal variables of motivation, as they elicit states, forces and energies that trigger and guide behaviour. Thus, a motivational tension that is not informed by needs alone, but also by emotions, intention, goals and means to achieve them is therefore generated within the mental, emotional and physical plane.

In line with the finding of this study, Añonuevo (2015) reported that most teenagers do not follow rules to determine how far they can go. In addition, Pickhardt (2009) reported that students' rebellion can cause "high adrenaline" where an individual becomes nervous and can cause a headache. Signs are an individual's anxiety over the things he or she experiences every day. It often affects a young person to train the body because it is repeatedly remembered in the mind as it continues to repeat the event that causes violent, headaches and way fights by force.

CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMENDATIONS

This chapter contains summary, conclusion, implications of the study, contributions to knowledge and recommendations as well as limitations of the study and suggestions for further studies.

5.1 Summary

This study investigated the effect of Solution-Focused and Dialectical Behaviour Therapies on the reduction of rebellious behaviour among undergraduates in the South West, Nigeria. The research study was presented in five chapters focusing on general introduction, the Background to the study, Statement of the problem, Purpose of the study, Significance of the study, Scope of the study and finally the Operational definitions of terms as used in the study. Seven research hypotheses were formulated for the study and all were tested at 0.05 level of significance. Five (5) of these hypotheses were rejected while two (2) were accepted.

The study is anchored to Social Learning Theory of Bandura (1977). The theory assumed that rebellious behaviour could emanate from environment, personality type and or observation of other people's behaviour. The study adopted pretest-posttest control group quasi-experimental design with a 3x2x2 factorial matrix. Multistage sampling procedure was adopted in the selection of the participants and universities for the study. Analysis of co-variance (ANCOVA) was statistically used to analyse data while hypotheses were tested at 0.05 level of significance. The Bonferonni Post-hoc test was used to determine the directions of differences and significance identified.

5.2 Conclusion

This study examined the effect of solution-focused and dialectical behaviour therapies on the reduction of rebellious behaviour among undergraduates in the South West, Nigeria. The results of the analysis revealed that Solution-Focused and Dialectical Behaviour psychotherapies are effective in reducing rebellious behaviour. However, DBT

was more potent in reducing rebellious behaviour. The effects of the treatments were moderated by emotional intelligence and peer pressure. This implies that a proper application of the principles of these psychological interventions is capable of producing similar results.

Based on this study, even though rebelliousness is embedded in youths and adolescents, it can be controlled through well-coordinated psychotherapeutic interventions. The findings of this study clearly showed that rebellious behaviour can be reduced if not totally eradicated when appropriate psychotherapeutic interventions (SFT and DBT) are provided. It is also established in the study that SFT and DBT are effective in reducing rebellious behaviour among undergraduates. This will make the Educational and Counselling psychologists to make use of the interventions effectively and efficiently.

To the participants, the study has exposed the students to the training programmes, which have helped them imbibe peaceful and desirable behaviour. Another implication of this is that stakeholders in the helping profession would begin to understand the developmental needs and aspirations of youths/adolescents.

Having affirmed the effectiveness of the psychotherapies (SFT and DBT) on the reduction of rebellious behaviour among undergraduates, this study has become a springboard to other researchers in investigating correlates and dynamics of rebellious behaviour among undergraduates. The findings of this study have implications for the practice of counselling in tertiary institutions. Due to the shortness of the intervention in this study, counselling and educational psychologists and school counsellors may have to consolidate it by organizing frequent counselling sessions and constant follow up like training workshops and periodic orientation on rebelliousness and other anti-social behaviours. This would allow further assessment of the durability of the effects of the intervention.

5.3 Contributions to Knowledge

- Dialectical Behaviour Therapy (DBT) and Solution-Focused Therapy (SFT) are effective and efficient in reducing rebellious behaviour but DBT was more effective and efficient than other interventions.
- The major stakeholders in education sector will be aware of these interventions (DBT and SFT) and work towards better effective usage to foster peaceful behaviour and other desirable behaviour among students.
- The study affirmed that human are the product of their emotion and that emotional intelligence is as important as intelligent quotient in adolescent and youth development and that highly emotional intelligent undergraduates will exercise self-discipline and self constraint towards constituted authority thereby promoting peaceful coexistence in the university communities.
- The study discovered that peer pressure is not always about bad or negative things. That peer pressure if properly and positively channelled by the undergraduates, instead of using their energy negatively, can shapen their attitudes, values and behaviour thereby bringing out their innovative ingenuity and creativity.
- Findings in this study served as a source of reference for other researchers who may want to conduct the same or similar study in other parts of the country.
- In addition, the study has filled a research gap, which sought for the need to adopt psychological interventions to reduce or minimize the tendency to behave in rebellious manners. It has also added more to the existing literature and peovided empirical data to assist educational and counseling psychologists and other stakeholders in the education sector.

5.4 Limitations of the Study

The study used a randomized sample of undergraduates in only three states in the South West, Nigeria namely Lagos, Osun and Oyo states. This simply implies that other

states areas were not considered. The researcher was faced with the challenge of sustaining the participants for the period of the interventions. There was a little attrition rate among the participants. However, the limitations encountered in conducting the research notwithstanding, the findings of the study remain valid.

5.5 Suggestions for Further Studies

Study of this nature should be replicated in other states or geo-political zones of the country. Other moderating variables that are related to rebellious behaviour could be investigated through survey research methods. Mixed Qualitative methods could also be integrated concurrently into subsequent experimental studies that seek reduction of rebellious behaviour.

5.6 Recommendations

Based on the findings of this study, the following recommendations are made:

- It is recommended that Counselling and Educational psychologists should make concerted efforts with other related professional in adopting these therapies (SFT and DBT) when handling issues related with problem behaviour among students
- Emotional Intelligence should be introduced and taught as one of the general studies courses in tertiary institutions of learning.
- Students should be wise in joining peer groups in their institutions so as not to be negatively pressurized.
- Standard counselling centres should be set up across all educational institutions which would employ the services of professional, practising counselling and educational psychologists.
- There should be periodic dialogue between student body and school management so as to have rebellious-free academic environment
- There should be sensitization programmes in various campuses that will create awareness among students and encourage them to seek professional

help from counselling psychologists in a quest to ensure the attainment of their yearnings and aspirations.

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APPENDICES
UNIVERSITY OF IBADAN
FACULTY OF EDUCATION
DEPARTMENT OF COUNSELLING AND HUMAN DEVELOPMENT STUDIES

Dear Respondent,

The following questionnaires are designed for a research purpose. All information provided would be treated confidentially. Please, be honest as much as possible in your responses.

Kindly tick in the space provided, circle the appropriate response or fill in the gaps your responses to the following:

Name of Institution-----

Level-----

Sex----- Phone No-----

KEYS

5= Always; 4= Often; 3= Sometimes; 2= Rarely; 1= Never

Rebellious Behaviour Scale (Screening Scale)

S/N	ITEMS	ALWAYS	OFTEN	SOMETIMES	RARELY	NEVER
1	You have been treated badly by someone would you revenge?					
2	If people are unkind to you, do you feel you should be rebellious?					
3	A parking attendant tells you that you cannot park where you have just put the car, would you rebel?					
4	If you get yelled at by someone in authority, would you shout back?					

5	If you ask a person at a party to dance with you who says 'no' without offering any explanation, would you feel bad?					
6	When you are told that you are breaking a rule (for example 'No smoking'), do you accept it? Do you enjoy the thrill you get from being difficult and awkward?					
7	Do you find it exciting to do something shocking?					
8	If you are asked particularly NOT to do something, do you feel an urge to do it?					
9	Do you tease people unnecessarily just so as to have some fun at their expense?					
10	Do people often say that you are a difficult person?					

UNIVERSITY OF IBADAN
FACULTY OF EDUCATION

DEPARTMENT OF COUNSELLING AND HUMAN DEVELOPMENT STUDIES

Dear Respondent,

This questionnaire is designed to elicit information about the subject matter. You are implored to fill the questionnaire with sincerity and faithfulness. Your responses will be used for research purpose only and high level of confidentiality is guaranteed.

Section A

Personal Data

Sex: Male (); Female ()

Instruction: Please read carefully and respond as it applies to you as required below.

Use the following format as a guide. SD= Strongly Disagree; D= Disagree; U= Uncertain/Unsure; A=Agree; SA= Strongly Agree.

Section B: Rebellious Behaviour Scale

S/N	ITEMS	SD	D	U	A	SA
1	Obedience and respect for authority are the most important virtues students should learn.					
2	What we need least is an authority to tell us what to do or how to do it.					
3	Every person should have complete faith in some supernatural power whose decisions he obeys without question.					
4	People can be divided into two distinct classes, the weak and the strong.					
5	To be a decent human being, follow your conscience regardless of the law.					
6	No principle is more immoral than that of obedience.					
7	Familiarity breeds contempt.					
8	Nowadays, when so many different kinds of people move around and mix together so much, a person has to protect himself against catching an infection or disease from them.					
9	Students don't owe their parents a thing.					

10	Sex crimes like rape and child molesting reflect a sick society and we must change society rather than punish individual offenders.					
11	Obedience is the mother of success.					
12	Strong discipline builds moral character.					
13	Some day it will probably be shown that astrology can explain a lot of things.					
14	Peoples of different nationalities, social classes and races should mix together more.					
15	To know people well is to love them.					
16	Sex crimes, such as rape and attacks on children, deserve more than mere punishment: Such criminals ought to be publicly whipped or worse.					
17	I can be part of students protest to fight for our right.					
18	True morality only develops in a fully permissive environment.					
19	True obedience is a noble principle.					
20	The strong and the weak are not inherently different. They are merely the advantaged and the disadvantaged members of an unfair society.					
21	Obedience and respect for authority aren 't virtues and shouldn 't be taught in school or any where.					
22	A decent person is one that always stays within the law.					

Section C: Emotional Intelligence Scale

S/N	ITEMS	SD	D	U	A	SA
1	I know when to speak about my personal problems to others.					
2	When I am faced with obstacles, I remember times I faced similar obstacles and overcame.					
3	I expect I will do well on most things I try.					
4	Other people find it easy to confide in me.					
5	I find it hard to understand the non-verbal messages of other people.					
6	Some of the major events of my life have led me to re-evaluate what is important and not important.					
7	When my mood changes, I see new possibilities					
8	Emotions are one of the things that make my life worth living.					
9	I am aware of my emotions as I experience them.					
10	I expect good things to happen.					
11	I like to share my emotions with others.					
12	When I experience a positive emotion, I know how to make it last.					
13	I arrange events others enjoy.					
14	I seek out activities that make me happy					
15	I am aware of the non verbal messages I send to others.					
16	I present myself in a way that makes a good impression on others.					
17	When I am in a positive mood solving problems is easy for me.					
18	By looking at the facial expressions, I recognize the emotions people are experiencing					
19	I know my emotion change					

20	When I am in positive mood, I am able to come out with new ideas.					
21	I have control over my emotions.					
22	I easily recognize my emotion as I experienced them					
23	I motivate myself by imaging a good outcome to task I take on.					
24	I compliment others when they do something well.					
25	I am aware of the non-verbal messages other people send.					
26	When another person tells me about an important event in his/her life I almost feel as though I have experienced this event myself					
27	When I feel a change in emotions, I tend to come up with new ideas.					
28	When I am faced with a challenge, I give up because I believe I will fail					
29	I know what other people are feeling just by looking at them.					
30	I help other people feel better when they are down.					
31	I use good moods to help myself keep trying in the face of obstacle.					
32	I can tell how people are feeling by listening to the tone of their voice.					
33	It is difficult for me to understand why people feel the way they do					

Section D: Peer Pressure Scale

S/N	ITEMS	SD	D	A	SA
	My friends expect me to-----				
1	do things that my parents disagree with				
2	make fun of my peers and say mean things about them				
3	oppose my parents				
4	do not express any additional in classroom activities				
5	avoid hanging out with certain peers because they do it too				
6	evade active participation in class				
7	break an agreement with my parents because of them				
8	dress as they expect me to				
9	talk negatively about my parents				
10	change my physical appearance				
11	smoke cigarettes				
12	drink alcohol				
13	take part in school pranks				
14	not to hang out with unpopular peers				
15	go with them and steal something from a store				
16	to have sex				
17	skip classes at school when everyone else does it				
18	try drugs				
19	hang out with peers I don't like				
20	start dieting				
21	hurt myself				
22	change hairstyle				

TREATMENT PACKAGES

EXPERIMENTAL GROUP 1 (SOLUTION-FOCUSED THERAPY)

Session 1

Topic: General Orientation and Administration of Pre-test instrument

The purpose of this session is to give the participants pieces of information about the intervention they will be receiving, including an overview of the goals and procedures.

Objectives: At the end of the session, the researcher should be able to:

- Initiate and establish rapport with the participants.
- Administer the pre-test instruments.

Activity

Step 1: The researcher warmly welcomed the participants to the training session and gave them a brief introduction of himself and his research assistants.

Step 2: The researcher asked the participants to introduce themselves by way of creating rapport.

Step 3: Participants were informed that the training will run for nine (9) sessions of one (1) hour per session for a period of nine weeks.

Step 4: The researcher explained the rationale for the intervention and the benefit attached at the end of the programme.

Step 5: The researcher explained the rules guiding the conduct of the training and what is expected of the participants.

Step 6: The researcher administered the pre-test instrument to the participants.

Assignment

- The participants were given a take home work to identify different factors that can cause rebelliousness among undergraduates.

Closing Remarks

- The participants were commended for their cooperation and encouraged to do their homework.
- Participants were also reminded of the time and venue for the next session.

Session 2

Topic: The meaning of Rebellious Behaviour and Solution-Focused Therapy

Objectives: At the end of the session, the participants were able to

- Understand the concept of rebelliousness and rebellious behaviour
- Understand the meaning of Solution-Focused Therapy
- Identify the different therapeutic strategies of Solution-Focused Therapy

Activity

Step 1: The participants were warmly welcomed.

Step 2: The researcher reviewed the assignment with the participants.

Step 3: The researcher explained the meaning of rebelliousness and rebellious behaviour as thus: Rebelliousness is a behaviour in which an individual refuses to obey rules or authority. Rebellion is naturally occurring in the youth as they grow up and get close to becoming matured. Rebellious behaviour is a deliberate opposition or resistance against constituted authority. It is a global phenomenon among students at all level of education. As part of their development into young adults, adolescents and youths will openly defile the advice and authority of their parents and other figures of authority in the society. Besides this, youths have special capacities to see the imperfection of society and curiosity to explore things, but when not permitted to do so, they think of rebelling.

Step 4: The researcher also defined and explained to the participants the meaning of Solution-Focused Therapy as thus: Solution-focused therapy is an approach of psychotherapy developed by Steve de Shazer and his colleagues at the Brief Family Therapy Centre in Milwaukee, Wisconsin, United States of America in 1980. It is a psychotherapy based on solution building rather than problem solving. It is formulated on the assumption that the individual participant is an expert in treating and building solutions to his/her personal challenges. It believes that every individual possesses personal and social resources required to tackle those challenges, and that there are exceptions in the lives of the individual participants in which the problematic situations do not exist or that they have successfully identified, explored and mastered solutions to their challenges; implying that the solution or part of it is already occurring.

SFT is committed to finding realistic, workable solutions for clients as quickly as possible. The efficacy of this treatment has influenced its spread around the world and use in multiple contexts. Its model is based on the following assumptions:

- Change is constant and certain.
- Emphasis should be on what is changeable and possible.
- Clients must want to change.
- Clients are the experts in therapy and must develop their own goals.
- Clients already have the resources and strengths to solve their problems.
- The focus must be on the future.

Therefore, the only therapeutic activity in SFT is to create opportunities for the individual participants to rediscover those already existing resources and solutions by exploring things that work and by keeping them working for solutions through solution-based questioning and assignments.

Assignment

As a take home assignment, the participants were asked to write out what individual people understand by the term, Solution-Focused Therapy and its techniques

Closing Remarks

- The researcher commended the participants for their cooperation
- The participants were reminded to do their homework
- Participants were also intimated with the time and venue for the next session.

Session 3

Topic: Negotiating the Starting Point and Setting of Goals

Objective: At the end of this session, the participants were able to:

- Identify personal goals for peaceful behaviour.
- Define their goals to be peaceful and law abiding undergraduates.
- State their goals and expectations for attending the programme.

Activity

Step 1: The researcher warmly welcomed the participants to the second session of the training.

Step 2: The researcher also reviewed the previous topic with the participants and encouraged them to discuss the findings about the take homework.

Step 3: The researcher used purposeful questioning to assist the participants in identifying their goals for peaceful behaviour. He asked the following questions:

- i. What is peaceful behaviour to you?
- ii. What have you been thinking it should be?
- iii. What do you think are the reasons for being at peace with people?
- iv. What have you realized the benefits of peaceful behaviour should be?

Step 4: The researcher guided the participants in aligning their goals for peaceful behaviour with the general goal of being peaceful and law abiding undergraduates by asking the following questions:

- i. What has been your behavioural disposition to the activities of your University authority on issues affecting students generally and what do you expect from this interaction?
- ii. What do you hope to change by participating in this programme for the next couple of weeks?
- iii. How would you know if your expectations have been met?(Give some examples please)
- iv. What would other people such as students, lecturers and significant others see that would make you realize you have benefitted from this programme/intervention?

Assignment

As a take home assignment the participants were asked to find out the likely consequences of rebelliousness to their education.

Closing Remarks:

- The researcher commended the participants for their active participations and encouraged them to do their homework.

- The participants were reminded of the time and venue for the next session.

Session 4

Topic: Finding and Exploring the Participants' Exceptions in Rebellious Behaviour

Objectives: At the end of this session the participants should be able to know:

- Importance of living peaceably and be law abiding in any environment as undergraduates
- Mention ways by which undergraduates should relate and behave peaceably in their environments.

Activity

Step 1: The participants were warmly welcomed

Step 2: The researcher found out if all the participants were available and reminded them of the agreed rules and regulations.

Step 3: The researcher further introduced the topic and encouraged the group to discuss their findings about the take home assignment.

Step 4: The researcher identified the participants' stage of self change and realization of the need for this intervention by asking the following questions:

What do you think would happen if undergraduates should:

- i. Be at peace with one another?
- ii. Be at peace with their lecturers?
- iii. Be at peace and law abiding with the University authorities?

Step 5: The researcher also asked the participants to mention and explain ways by which they as undergraduates should relate:

- i. With fellow undergraduates.
- ii. With their lecturers
- iii. With the University management

Step 6: The researcher recapped the identified points/factors mentioned by the participants for clarification and emphasis and also encouraged the participants to note them for further reference.

Assignment

The participants were asked to find out, list and discuss reasons why students should be happy and greatly value being at peace with people and be law abiding at all time.

Closing Remarks

- The researcher commended the participants for their active participations and time
- The participants were reminded to their homework
- The participants were also reminded of the time and venue for the next session.

Session 5:

Topic: Finding and Exploring the Participants' Exceptions in Rebellious Behaviour (contd.)

Objective: At the end of this session, the participants should be able to:

- Identify things they will be doing differently as undergraduates that will promote peaceable behaviour and being law abiding
- Identify and explain previous successes and areas of strength

Activity

Step 1: The participants were warmly welcomed.

Step 2: The researcher reviewed with the participants the take home assignment and provided accurate responses to their questions.

Step 3: The researcher helped the participants to identify and explore their current social behaviour and previous successes and areas of strength by brainstorming on the following questions:

- i. Suppose one night, while you were sleeping there was a miracle and all your rebellious tendencies had disappeared. Waking up in the morning, how would you know that miracle has happened?
- ii. As the miracle happened, what would you be doing differently especially:
 - a) As an undergraduate in your University?
 - b) With other undergraduates in your campus?
 - c) With your lecturers in the campus?
 - d) With other administrative staff in the campus?
 - e) With the University management/authority?

- i. Had there been times in the past that you had desirable behaviour with and among the significant figures mentioned above?
- ii. What are the experiences like?
- iii. What are the things that brought about these desirable behaviours and you now think resemble this miracle that just happened and that could help you do things differently from now on:
 - a) As an undergraduate?
 - b) With other undergraduates in the campus?
 - c) With the lecturers and administrative staff in the campus?
 - d) With the University management/authority?

Step 4: The researcher recapped the identified factors for attention, clarification and emphasis and provided the participants with compliments about their strengths, successful endeavours, and exception behaviours and encouraged them to note them for future and practical application.

Assignment

As a take home assignment, the participants were asked to write out in their word what can reinforce positively and negatively desirable behaviours among undergraduates.

Closing Remarks:

- The researcher commended the participants for their cooperation.
- The participants were reminded to do their homework.
- The participants were intimated with the time and venue for the next session.

Session 6

Topic: Finding and Exploring the Participants' Exceptions in Making Things go better

Objective: At the end of this session, the participants should be able to:

- Identify strategies to make things go better in their relationship with people
- State ways to handle any problematic situations

Activity

Step 1: The participants were welcomed warmly to the fifth session of the intervention.

Step 2: The researcher reviewed the take home assignment by asking the group members to discuss their findings on positive and negative reinforcement of desirable behaviour.

Step 3: The researcher guided the participants in building strategies to think about how things should be done during problematic situations by encouraging them to brainstorm on the following questions: When things do not go well with you

- i. How do you spend your time?
- ii. What do you do with your body?
- iii. What do you say to people?
- iv. What are the things you will do differently if the situation is not there?

Step 4: The researcher recapped all the identified factors stated by the participants for attention, clarification and emphasis and encouraged the participants to note them for future reference and practical application.

Assignment

As a take home assignment, the participants were asked to write in their own word some strategies they can personally use to change negative situation to positive situation.

Closing Remarks:

- The researcher commended the participants for their active participation and encouraged them to take note of all what they have learnt and explore them as opportunity arises.
- Participants were reminded to do their homework.
- The participants were also intimated with the time and venue for the next session.

Session 7

Topic: Finding and Exploring the Participants' Exceptions in Making Things go better (contd.).

Objective: At the end of this session, the participants were able to:

- Identify the feelings that prompted their problem behaviour
- Know the ways to change their perception of things.

Activity

Step 1: The participants were warmly welcomed to the sixth session of the intervention.

Step 2: The researcher reviewed with the participants their take home assignment on strategies to adopt in changing their negative behaviour.

Step 3: The researcher guided the participants on building strategies to control their feelings by encouraging them to brainstorm on the following questions: Your feelings tell you that you need to do something.

- i. Can you think of a feeling that used to get you into trouble?
- ii. What feeling do you want to stop that is getting you into trouble?
- iii. Can you think of information that that feeling used to give/tell you?
- iv. Does the feeling suggest what you should do that would help things go better?

Step 4: The researcher recapped all the points mentioned by the participants and encouraged them to note them for future reference and personal application.

Assignment

As a take home assignment, the participants were asked to observe when they get home their feelings towards other people in their environment and keep their findings till next meeting.

Closing Remarks:

- The researcher commended the participants for their active participation and encouraged them to take note of all what they have learnt and explore them as opportunity arises.
- The participants were reminded to do their homework.
- The participants were intimated with the time and venue for the next session

Session 8

Topic: Scaling the Participants' Progress on the Reduction of Rebellious Behaviour

Objectives: At the end of this session, the participants should be able to:

- Determine and discuss the progress they have made in the reduction of rebellious behaviour.
- Identify and discuss specific ways to improve on the progress made.

Activity

Step 1: The participants were warmly welcomed to the seventh session of the intervention.

Step 2: The researcher reviewed with the participants their findings about the given homework.

Step 3: The researcher assessed the participants' current level of progress towards their goal(s) by asking the following:

- i. On a scale of 1 to 10, where 1 represents where you were before we started this intervention and 10 represents desirable, cordial and peaceful dispositions and relationships with your colleagues in the campus and other significant figures, on which number would you put yourself today?
- ii. What were you doing that made you to reach and maintain your current level?
- iii. What more can you do to move you a number or more ahead?
- iv. Where do you think your colleagues, lecturers and significant others in the campus would rate your progress?
- v. Why would they make such rating?

Step 4: The researcher commented on the participants' responses and successes and encouraged them to explore more ways by which they can improve on their levels of progress to build model solutions.

Assignment

As a take home assignment, the participants were asked to write out in their own word what they are willing to do between the end of this session and the next meeting to move them closer to their goal- solution behaviour.

Closing Remarks

- The researcher commended the participants for their time and active participations and encouraged them to take note of all what they have learnt and explore them as opportunity arises.
- Participants were reminded to do their homework.
- The researcher intimated the participants with the time and venue for the next session.

Session 9

Topic: Overall Review, Post-Experiment Test Administration and Conclusion

Objectives: At the end of the session, the participants should be able to:

- Summarize their experience based on what they have learnt and benefitted since the commencement of the intervention.
- Respond to the post-test instruments.

Activity

Step 1: The participants were warmly welcomed and the home work was reviewed together with the researcher.

Step 2: This was an interactive session between the researcher and the participants to ascertain the effect of the therapeutic programme. The activities of the previous sessions were reviewed and revised to be sure that the participants attained positive experience through the intervention.

Step 3: The researcher with the help of his research assistants administered the post-test instruments on the participants.

Step 4: The researcher gave token gift to every participant in appreciation of their participation in the training and thanked them for their cooperation throughout the period of the training.

Closing Remarks

- The researcher commended the participants for their unrelenting cooperation.
- The participants were encouraged to utilize effectively the skills they have acquired through the intervention programme.
- The participants were allowed to give feedbacks on the training sessions.

EXPERIMENTAL GROUP 2- (DIALECTICAL BEHAVIOUR THERAPY)

Session 1

Topic: General Introduction and Administration of Instrument to obtain Pre-test scores.

The purpose of this session is to orientate the participants of the training, to introduce the therapy to the participants and to administer pre-test instrument.

Objectives: At the end of the session, the researcher should be able to:

- Initiate and establish rapport with the participants
- Administer the pre-test instrument.

- Introduce the participants to Dialectical Behaviour Therapy

Activity

Step 1. The researcher warmly welcomed the participants to the training session and gave a brief introduction of himself and his research assistants

Step 2. The researcher asked the participants to introduce themselves by way of creating rapport.

Step 3. Participants were informed that the training would be 9 sessions of one hour per session.

Step 4. The researcher explained the reasons for the programme and the benefits attached at the end of the programme.

Step 5. The researcher also explained the rules guiding the conduct of the programme and what is expected of the participants.

Step 6. The researcher administered the pre-test instrument to the participants.

Assignment

The participants were given take home assignment: to identify positive and negative behaviours among university students.

Closing Remarks

- The participants were commended for their cooperation and were encouraged to do their take home assignment.
- Participants were also reminded of the time and venue for the next session.

Session 2

Topic: The Meaning of Rebellious Behaviour and Dialectical Behaviour Therapy

Objective: At the end of the session, the participants should be able to:

- Understand the concept of rebelliousness.
- Understand the meaning of Dialectical Behaviour Therapy
- Identify and know different strategies and skills of Dialectical Behaviour

Therapy

Activity

Step 1. The participants were warmly welcomed.

Step 2: The researcher reviewed the assignment with the participants.

Step 3: The researcher explained the meaning of Dialectical Behaviour Therapy to the participants in relation to rebelliousness as thus:

Rebelliousness is a behavior in which an individual refuses to obey rules or authority. It is a global phenomenon among students at all level of education. As part of their development into young adults, adolescents and youths will openly defile the advice and authority of their parents and other figures of authority in the society. Besides this, youths have special capacities to see the imperfection of society and curiosity to explore things, but when not permitted to do so, they think of rebelling.

Dialectical Behaviour Therapy (DBT) is a type of talking therapy which was originally developed by a American psychologist named Marsha Linehan for the treatment of chronically suicidal individuals diagnosed with borderline personality disorder (BPD). With time DBT is found to be also effective for wide range of other disorders, problems, emotion control, regulation or management. Dialectical means open-minded thinking. It means that two ideas can both be true at the same time. In other words, there is always more than one TRUE way to see a situation and more than one TRUE opinion, idea, thought or dream. All people have something unique, different and worthy to teach us and that all points of view have both TRUE and FALSE within them. Dialectic is a method of examing and discussing ideas in order to find the truth; in which two opposing ideas are compared in order to find a solution that includes them both, for example: you are right and the other person is right; you can take care of yourself and you need help and support from others. Being dialectical therefore means:

- finding a way to validate the other person's point of view
- expanding your way of seeing things
- being more flexible and approachable
- avoiding assumptions and blaming

Dialectical Behaviour Therapy is a skills based therapy and the overall goal of DBT skills training is to learn skills for changing unwanted behaviours, emotions, thinking and events that cause or that can cause misery or distress.

Assignment

As a take home assignment, participants were asked to write out what people understand by the term Dialectical, Dialectic, Dialectical Behaviour Therapy and its skills.

Closing Remarks:

- The researcher commended the participants for their cooperation
- The participants were reminded to do their take home assignment
- Participants were also intimated with the time and venue for their next session

Session 3

Topic: Validation Process in Dialectical Behaviour Therapy

Objective: At the end of this session, the participants should be able to:

- State the validation process in Dialectical Behaviour Therapy in relation with rebellious behaviour.

Activity

Step 1: The participants were warmly welcomed.

Step 2: The researcher reviewed with the participants the take home assignment.

Step 3: The researcher also explained the process of validation in DBT as follows: Validation in DBT means telling someone that what they feel, think, believe and experience is real, logical and understandable. Self-validation is when you are able to quietly reassure yourself that what you feel inside is real, is important and makes sense. Emotions, thoughts and sensations are all experiences that we sometimes doubt in ourselves. We may look around us and try to guess what other people in the same situation feel, or what others EXPECT us to feel. This happens because we have been told at some point that we should not trust what our inner experience tells us. We actually trust other people MORE than ourselves.

Sometimes when we self-invalidate, we spend a lot of time and energy trying to prove to others and ourselves that our experience is real, and makes sense. This often results in conflict or crisis. In DBT, we are learning to validate others because:

- It helps our relationships go better
- It calms intense situations so that we can problem solve.

We learn to self-validate because:

- It quiets defensive or fearful emotions so we can problem solve
- It allows us to let go of the pain and exhaustion that constant self-justification and self-doubt requires.

In conclusion, Validation improves the quality of our lives. Validation does not mean that you agree or approve of behaviour. In fact, validation is non-judgmental, its strategies include;

- Focus on the inherent worth of the person, whether it is yourself or someone else
- Observe: Listen carefully to what is said with words, expression, and body. Intently listen, be one-mindful in the moment
- Describe: Non judgmentally state the facts of the situation
- State the unstated: Note the presence of feelings, beliefs and so on, that have not been voiced
- Find what is true or valid about the experience and note this.

Assignment

The participants were given a take home assignment to identify master the strategies of validation process.

Closing Remarks:

- The researcher commended the participants for their time and efforts.
- The participants were reminded to do their homework.
- The participants were reminded of the time and venue for the next session

Session 4

Topic: Core Mindfulness Skills

Objective: At the end of the session, the participants should be able::

- To learn and understand what mindfulness is.
- Explain and discuss some Core Mindfulness skills.

Activity

Step 1: The participants were warmly welcomed.

Step 2: The researcher did review the take home assignment with the participants.

Step 3: The researcher did explain that Mindfulness skills are central to DBT. The core mindfulness skills are the first skills taught, and they underpin and support all of the other DBT Skills. Mindfulness is the act of consciously focusing the mind in the present moment without judgment and attachment to the moment. It is the practice of taking control of your attention and thoughts. It improves one's ability to be less immediately

reactive to everyday situations. It gives one a chance to take whatever time is needed before you react. It is the intentional process of observing, describing and participating in reality non-judgmentally. Mindfulness if practiced often and diligently can improve one's skills of seeing the difference between facts and images and thoughts about images..

Mindfulness skills are the specific behaviours that, put together, make up mindfulness. Mindfulness practice is the intentional practice of mindfulness and mindfulness skills. It can be practiced at anytime, anywhere, while doing anything. It is intentionally paying attention to the moment, without judging it or holding on to it. Mindfulness everyday is a way of living. It is a way of living with our eyes wide open. It is very difficult to accept reality with our eyes closed. If we want to accept what is happening to us, we have to know what is happening to us. We have to open up our eyes and look. Mindfulness as a practice is the practice of directing our attention to only one thing and that one thing is the moment we are alive. The very moment we are in..

Mindfulness skills will help us to focus attention on our personal moment, noticing both what is going on within ourselves and what is going on outside of ourselves and become and stay focused or centred. Mindfulness skills are sub divided into: "State of Mind" Skills, "What" Skills and "How" Skills.

"States of Mind" Skills: In DBT, three primary states of mind are presented: 'Reasonable Mind', "Emotion Mind", and "Wise Mind". A person is in reasonable mind when he or she is approaching knowledge intellectually; is thinking rationally and logically; attends only to empirical facts; and ignores emotion, empathy, love, or hate in favor of being planful, practical, and "cool" in approaching problems. Decisions and actions are controlled by logic. The person is in emotion mind when thinking and behaviour are controlled primarily by current emotional states. In emotion mind, cognitions are "hot"; reasonable, logical thinking is difficult; facts are amplified or distorted to be congruent with current affect; and the energy of behaviour is also congruent with the current emotional state. Wise mind is the synthesis of emotion mind and reasonable mind; it also goes beyond them: Wise mind adds intuitive knowing to emotional experiencing and logical analysis. Mindfulness skills are the vehicles for balancing emotion mind and reasonable mind to achieve wise mind and wise action.

Reasonable Mind is the extreme of reason. It is reason that is not balanced by emotions and values. It is the part of you that plans and evaluates things logically. When completely in reasonable mind, you are ruled by facts, reason, logic, and pragmatics. Emotions, such as love, guilt, or grief, are irrelevant. Reason can be very beneficial. Without it, people could not build homes, roads, or cities; they could not follow instructions; they could not solve logical problems, do science, or run meetings. Reason is the part of you that plans and evaluates things logically. It is your cool part. But, again, when you are completely in reasonable mind, you are ruled by facts, reason, logic, and pragmatics. Values and feelings are not important. Reasonable mind is cold and dismissive of emotions, needs, desires, and passion. This can often create problems. It is hard to make and keep friends if you are only in reasonable mind. Relationships require emotional responses and sensitivity to others' emotions. When you ignore your own emotions and treat other people's emotions as unimportant, it is hard to maintain relationships. This is true about relationships in multiple settings—in families, with friends, and in work environments.

Emotion Mind is your state of mind when your emotions are in control and are not balanced by reason. Emotions control your thinking and your behaviour. When you are completely in emotion mind, you are ruled by your moods, feelings and urge to do or say things. Facts, reason and logic are not important. Factors that make us all vulnerable to emotion mind include (1) illness; (2) sleep deprivation/ tiredness; (3) drugs or alcohol; (4) hunger, bloating, overeating, or poor nutrition; (5) environmental stress (too many demands); and (6) environmental threats. Emotions, even when intense, can be very beneficial. Intense love fills history books as the motivation for relationships. Intense love (or intense hate) has fueled wars that in turn have transformed cultures (e.g., fighting to stop oppression and murders as in the battle against the Nazis). Intense devotion or desire motivates staying with very hard tasks or sacrificing oneself for others (e.g., mothers running through fires for their children). A certain amount of intense emotion is desirable. Many people, particularly those with emotional problems, have more intense emotions than most. Some people are the “dramatic” folks of the world and will always be so.

People with intense emotions are often passionate about people, causes, beliefs, and the like. There are times when emotion mind is the cause of great feats of courage or compassion—when if reason were there at all, a person would not overcome great danger or act on great love. Problems occur when emotions are ineffective and control us. Emotions are ineffective when the results are positive in the short term but highly negative in the long term, or when the emotional experience itself does not fit the facts of our lives and is very painful, or when it leads to other painful states and events (e.g., anxiety and depression can be painful in themselves). Sometimes people become so emotional that they shut down and act like automatons. They may dissociate and appear very, very calm. Or they may isolate themselves, staying very quiet. They appear cool, deliberate, and reasonable, but their behavior is really under the control of overwhelming emotions that they would experience if they let go and relaxed. This is emotion mind; emotions are in control. At other times, of course, emotion mind looks, thinks, talks, and acts in very extreme ways. Reasonable mind and Emotion mind are states of mind that get in the way of wise mind. Often what interferes with accessing our own wisdom is our state of mind at the time.

Wise Mind is the inner wisdom that each person has. It is the mindfulness practice of accessing this inner wisdom. When we access our inner wisdom, we can say that we are in wise mind. Inner wisdom includes the ability to identify and use skillful means for attaining valued ends. It can also be defined as the ability to access and then apply knowledge, experience and common sense to the situation at hand. For some people, accessing and applying their own inner wisdom are easy. For others, it is very hard. But everyone has the capacity for wisdom. Everyone has wise mind, even if they cannot access it at a particular point. Wise mind is the integration of opposites: emotion mind and reasonable mind. You cannot overcome emotion mind with reasonable mind. Nor can you create emotions with reasonableness. You must go within and bring the two together. Everyone has wise mind; some people simply have never experienced it. Also, no one is in wise mind all the time. People sometimes experience wise mind as a particular point in the body. This can be the center of the body (the belly), or in the center of the head, or between the eyes. Sometimes a person can find it by following the breath in and out. It is where a person knows something to be true or valid. It is where the

person knows something in a centered way. Wise mind is like intuition—or, perhaps, intuition is part of wise mind. It is a kind of knowing that is more than reasoning and more than what is observed directly. It has qualities of direct experience; immediate knowing; understanding the meaning, significance, or truth of an event without having to analyze it intellectually and feelings of deepening coherence. In wise mind, you are free from conflict, making wise action almost effortless (even when it is difficult beyond words). Wise mind has a certain peace. For example, you are with your brother/sister in a boat on the river. You know how to swim, but your brother/sister does not, and he/she falls into the water. You immediately jump into the river to save him/her, even though the water is freezing. Or you are determined to pass a difficult university course or get a good evaluation at work. You have an assignment that will take up a lot of your time, and you would really like to just sit home and relax. But you think about the consequences of failing and know you will work on it. Wisdom, wise mind, or wise knowing depends upon integration of all ways of knowing: knowing by observing, knowing by analyzing logically, knowing by what we experience in our bodies (kinetic and sensory experience), knowing by what we do, and knowing by intuition.

Assignment

The participants were given a take home assignment: Outline 3 points each of the states of mind of man as enumerated in DBT.

Closing Remarks:

- The researcher commended the participants for their cooperation.
- The participants were reminded to do their take home assignment.
- Participants were also reminded of the time and venue for the next session.

Section 5

Topic: Core Mindfulness Skills (continued)

Objectives: At the end of this session, the participants should be able to:

- Explain the meaning of “What” Skills and its components
- Explain the meaning of “How” Skills and its components

Activity

Step 1: The participants were warmly welcomed.

Step 2: The researcher did review the take home assignment with the participants.

Step 3: The researcher explained “What Skills and “How Skills” as: There are three mindfulness “what” skills and three mindfulness “how” skills. “What” skills are what we do when practicing mindfulness, and “how” skills are how we do it. The three “what” skills are observing, describing, and participating. Each “what” skill is a distinct activity. Like walking, riding a bike, or swimming, the “what” skills are three separate activities. Thus “what” skills are practiced one at a time: We are either observing, or describing what has been observed, or participating in the moment. This is in contrast to the “how” skills (nonjudgmentally, one-mindfully, and effectively), which can be applied all at once.

Observing is like walking across a room full of furniture with your eyes open instead of closed. You can walk across the room either way. However, you will be more effective with your eyes open. If you don’t like the furniture in the room, you might want to close your eyes, but ultimately it’s not very effective. You keep running into the furniture. We all walk through life with our eyes closed sometimes, but opening our eyes and actually observing what’s there can be very helpful. The good thing about observing is that it brings us into contact with the real, factual, present moment. That’s where we all actually live—in the here and now. We can’t experience the past; we can’t experience the future; and if we’re living in the past or the future, we’re not really living. Observing is all about learning to feel fully alive in the here and now. In observing, you notice what you are experiencing through your eyes, ears, nose, skin, and tongue. You observe the world outside yourself through your five senses: seeing, hearing, smelling, tasting, and touching. You also observe the world inside yourself through sensing your thoughts, emotions, and internal bodily sensations. What you sense depends on where you focus your attention. Ultimately, you will want to be able to observe events occurring within your mind and body (i.e., thoughts, sensations, emotions, images) and events occurring outside your body.

Observing your thoughts can sometimes be very difficult. This is because your thoughts about events may often seem to you like facts instead of thoughts. Many people

have never really tried to just sit back and watch their thoughts. When you observe your own mind, you will see that your thoughts (and also your emotions and bodily sensations) never stop following one another. From morning till night, there is an uninterrupted flow of events inside your mind; you might notice thoughts, emotions, and other bodily sensations. As you watch, these will come and go like clouds in the sky. This is what thoughts and feelings do inside the mind when just observed—they come and go. Mindful observing can be thought of as paying attention to present experiences on purpose. To observe, you simply step back, be alert, and notice. When you observe, it is the only thing you are doing, nothing else. Do not react, do not label, do not describe; just notice the experience. When you observe, you pay attention to direct physical sensation. When you can control your attention, you can control your mind.

Describing is the second of the three mindfulness “What” skills; it is putting into words what is observed. Describing develops the ability to sort out and discriminate observations from mental concepts and thoughts about what we observe. Confusing mental concepts of events with events themselves (e.g., responding to thoughts and concepts as if they are facts) can lead to unnecessary emotional distress and confusion. For example, when you find out that your nephew stole money, your mind might immediately describe that as ‘My nephew is going to end up going to jail,’ and that description causes emotional distress. Describing is putting words on experiences. Describing follows observing; it is labeling what is observed. True describing involves just sticking with the facts. For example, if I am looking at a painting, the words “landscape,” “green,” “yellow,” and “brush strokes” might come to mind. That would be an example of describing. It’s simply applying basic descriptors to what is there.

Participating, the third mindfulness “what” skill, is entering wholly into an activity. It is entering wholly and with awareness into life itself, nonjudgmentally, in the present moment. Participating is the ultimate goal of mindfulness. The state of “flow” is widely considered an optimal experience—incompatible with boredom, and associated with intense enjoyment and a sense of control. It is a critical characteristic of “peak experience.” For example, being fully immersed in an activity like skiing or running, can give one a sense of maximum well-being or a sense of ecstasy. When we “become what we are doing,” there is a merging of action and awareness, so that we are no longer

aware of ourselves as separate from what we are doing. When we become what we are doing, we are no longer aware of ourselves as separate from what we are doing or from our environment. We lose awareness of the separation of ourselves and everything else. We forget ourselves, and thus forget ourselves as outside or inside. In a state of flow, there is an effortlessness of action. We are absorbed in what we are doing, in what is happening. We are aware of a sense of movement, speed, and ease. Life and what we are doing become like a dance. Even great effort seems effortless. When we become what we are doing, we do not miss our own lives. We also do not miss being part of the lives of others. Compassion and love, toward ourselves or others, requires our presence. To be experts in any task, we must practice and “overlearn” that task. Expertise in any activity requires mindful awareness of the task without the distractions of thinking about ourselves, others, or even the task. A person who thinks about running while running loses the race. In great acting, an actor becomes the role. A great dancer becomes the dance. In the Olympics, gymnasts let their bodies do the work.

Participating is like walking across the street. You step back from participating in an activity when you are making errors or do not know how to do something. When you are participating, you are very aware, but you are not actively focusing your attention on yourself and analyzing the details of what you are doing. At times you must step back, slow down, and pay attention to what you are doing. In particular, when you notice there is a problem in your life, you need to step back and actively observe and describe both the problem situation and your responses to it. You can then figure out what’s wrong, learn the skills needed to solve the problem, and return to participating. For example, you can only play the piano really well if you participate in the act of piano playing— that is, if you play fully. If you have learned an incorrect technique, you may want to learn the correct version. To do so, you have to step back and observe and describe what you are doing wrong, then practice the correct way over and over until you are skilled. You can then stop observing and participate again.

Mindfulness “How” skills are about how we observe, describe and participate. There are three “how” skills: acting nonjudgmentally, one-mindfully and effectively. Nonjudgmentalness is letting go of evaluating and judging reality. It is aimed to let go of judgments that evaluate as good and bad, and to keep judgments that discriminate and

see consequences. Nonjudgmentalness is describing reality as “what is,” without adding evaluations of “good” and “bad” or the like to it. Negative judgmentalness creates conflict and can damage relationships with people we care for. Very few of us like people who are judgmental of us. Judging others might get people to change temporarily, but more often it leads people to avoid or retaliate against those who judge them badly. In nonjudgmentalness, you view and describe reality as “what is.” Let go of evaluating people, their behaviour, and events as good or bad. For example, let go of saying that a person or the person’s behavior is either “bad” or “good.”; let go of saying that a person or characteristic is “worthless” or “worthwhile.”; let go of calling oneself a “bad person” or a “good person.” The goal here is to take a nonjudgmental stance when observing, describing, and participating. Judging is any labeling or evaluating of something as good or bad, as valuable or not, as worthwhile or worthless. Letting go of such labeling is being nonjudgmental.

Nonjudgmentalness involves letting go of the word “should.” That is, it means letting go of being persons who define how the world should be, and letting go of demands on reality to be what we want it to be simply because we want it to be that way. When being nonjudgmental, we let go of saying and thinking that things should be different than they are. We also let go of saying that we ourselves should be different than we are. Nonjudgmentalness involves replacing “should” with describing how we feel or what we desire: “I want things to be different,” “I want to be different than I am,” or “I hope you will do this for me.” An alternative is to replace “should” with “This is caused”: “Everything is as it should be, given the causes of the universe.” Being nonjudgmental means that everything is what it is, and that everything is caused. Rather than judging something as good or bad, it is more useful to describe the facts and then try to understand the causes. When things happen that are destructive, that we do not like, or that do not fit our values, we have a better chance of stopping or changing them if we try to understand and then change the causes. Yelling “Bad!” doesn’t stop that many things. Even if we believe that there is an “evil force” or a “devil” in the world, understanding how it works and why it does what it does when it acts is a more effective strategy for getting change.

Acting one-mindfully, the second of the three mindfulness “how” skills, consists of focusing attention on the present moment and bringing the whole person to bear on one task or activity. One-mindfulness means, for “just this moment,” being present to our lives and what we are doing. Like nonjudgmentalness, living one-mindfully is central to all mindfulness teaching and contemplative practices. It is central to both psychological and spiritual traditions of mindfulness. It also means doing one thing at a time, with awareness. It is focusing attention on only one activity or thing at a time, bringing the whole person to bear on this thing or activity. Being present to our own experiences is the opposite of avoiding or trying to suppress our present experiences. It is allowing ourselves to be aware of our current experiences—our feelings, our sensations, our thoughts, our movements and actions. The next step is to actively focus and maintain awareness of what we are experiencing now, what is happening now, and what we are doing now. This involves letting go of thoughts of both the past and the future. We spend much of our time living in the past (which is over), living in the future (which is not here yet), or responding to our concepts and ideas of what reality is rather than what it actually is. Thus a primary aim of one-mindfulness is to maintain awareness of the moment we are in. For example, you are in a meeting and very bored. Rather than sitting and thinking about all the things you would rather be doing, throw yourself into listening. Focus on the present. This can stop you from being miserable.” Doing only one thing at a time is the opposite of how people usually like to operate. Most of us think that if we do several things at once, we will accomplish more; this is not true. The trick is to have our minds completely on what we are doing at the moment. This refers to both mental and physical activities. For example, you have five dishes to wash, but you can only wash one at a time. However, this does not mean that we cannot switch from one thing to another and back. Focusing on one thing in the moment does not mean that we cannot do complex tasks requiring many sequential activities. But it does mean that whatever we do, we should attend fully to it. Thus the essence of the idea is acting with undivided attention. The opposites are mindlessness (i.e., automatic behaviours without awareness) and distracted behaviour (i.e., doing one thing while thinking about or attending to another)

Acting effectively, the third of the three mindfulness “how” skills, is doing what works and using skillful means. It is doing what works to achieve our goals. The goal here is to focus on doing what works, rather than what is “right” versus “wrong” or “fair” versus “unfair.” Generally, it is the opposite of “cutting off your nose to spite your face.” Acting effectively means using skillful means to achieve our goals. Without the skill to use effective means, it is difficult to reach our goals, reduce suffering, or increase happiness. Being right or proving a point may feel good for the moment, but in the long term, getting what we want in life is more satisfying. For example, yelling at the reservation clerk who says you do not have a reservation for a hotel room (when you know you called and made one) may make you feel good in the moment, but actually getting a hotel room (which may require skillful means) would be likely to make you feel even better.

Doing what works (what is effective) requires, first, knowing what our goal or objective in a particular situation is. Being effective requires knowing and reacting to the actual situation, not to what we think the situation should be. For example, a person wants to get a raise at work, but thinks the supervisor should know without being told that a raise is deserved, and so the person refuses to ask for it. In this case, the person is putting being right over achieving the goal of getting a raise. Effectiveness requires knowing what will and what won’t work to achieve our goals. Much of the time, we know what is and is not effective if we are calm and can think about our options. At other times, however, being effective means asking for help or asking for instructions in what to do. For example, if you want people to remember your birthday, you can call to remind them beforehand, rather than letting them forget. Effectiveness also involves “playing by the rules” when this is needed to achieve a goal. Playing by the rules is most important in situations where we are in a low-power position and what we want is important. For example, being an out-patient in a state hospital is a situation in which playing by the rules is vitally necessary. Staff members make the rules about when a patient gets privileges. Right or wrong, they have the power, not the patients.

Assignment

As a take home assignment, the participants were asked to outline few things in their own words three areas each of “What” and “How” skills.

Closing Remarks:

- The researcher appreciated the participants for the cool-headedness and cooperation
- The participants were reminded to do their take home assignment
- The participants were also intimated with the time and venue of the next session.

Session 6

Topic: Emotion Regulation Skills

Objectives: At the end of this session the following should be attained:

- The participants should be able to list different types of emotion.
- The participants should be able to explain the benefits of emotion regulation to reduction of rebellious behaviour

Activity

Step 1: The participants were warmly welcomed and the researcher reviewed take home assignment of the previous session with them.

Step 2: The researcher explained emotion regulation skills as follows: Difficulties in regulating painful emotions are central to the behavioural difficulties of many individuals. Dysfunctional behaviours, including suicidal behaviours, substance use disorders, overeating, emotion suppression, overcontrol, and interpersonal mayhem, are often behavioral solutions to intolerably painful emotions. The overall goal of emotion regulation is to reduce emotional suffering. The goal is not to get rid of emotions. Some individuals will always be more emotional than others. Emotion regulation is the ability to control or influence which emotions you have, when you have them, and how you experience and express them. Regulating emotions can be automatic as well as consciously controlled. Emotions are out of control or ‘dysregulated’ when you are unable, despite your best efforts, to change which emotions you have, when you have them, or how you experience or express them. Before you can regulate your own emotions, you need to understand them.

You can do this by learning to do two things:

- Identify your own emotion: The simple act of naming your emotions can help you regulate your own emotions.
- Understand what emotions can do for you: It can be very hard to change emotions when you do not understand where they come from or why they are there.

Once you understand your own emotions, you can learn how to cut down on the frequency of the ones you don't want. You can do this in several ways. Though you cannot stop all painful emotions, you can make changes in your environment and in your life to reduce how often negative emotions occur. In and of themselves, emotions are not good or bad. They just are. Evaluating our emotions as either good or bad is rarely helpful. Thinking that an emotion is "bad" does not get rid of it. It may lead us to try to suppress the emotion. Suppressing emotions is a temporary solution that causes greater problems in the long run. Emotions may be comfortable or uncomfortable, wanted or unwanted, excruciatingly painful or ecstatically pleasurable. Judging emotions as "bad" can make painful emotions even more painful. Emotion regulation strategies are for emotions that are not effective in helping you achieve your own goals in life. Emotions are effective when certain things are true:

- Acting on the emotion is in your own self-interest.,,
- Expressing the emotion will get you closer to your own goals
- .Expressing your emotion will influence others in ways that will help you
- Your emotion is sending you a message you need to listen to

Emotion regulation will help you decrease your vulnerability to emotion mind. It won't take away your emotions, but it will help you balance emotion mind with reasonable mind to get to wise mind. And it will also increase emotional resilience—in other words, your ability to bounce back and cope with difficult events and emotions. Emotion regulation will enable you to decrease your emotional suffering. Specifically, you'll learn to do these things:

- „Reduce suffering when painful emotions overcome you.
- „Manage extreme emotions so you don't make things worse.

Knowledge is power. It is difficult for people to manage their emotions when they do not understand how emotions work. There are reasons why humans (and other

mammals) have emotions. The purpose of regulating emotions is not to get rid of them. We need them for survival. There are three major functions of emotions:

- „To motivate action.
- „To communicate to others.
- „To communicate to ourselves.

Knowing what emotions do for us can help us figure out how to regulate them, and also how to appreciate them even when they are painful or difficult. Regulating emotions is like regulating temperature. We want to be able to raise the intensity of emotions when needed (like making a room warmer), and to decrease the intensity of emotions when needed (like making a room cooler). Factors that can make it very difficult to get our emotions under control include these:

- **Biology:** Biological factors can make emotion regulation harder. Some babies are born more emotionally sensitive than others, and they may remain that way as children and adults. Emotional intensity also differs across people. High emotional sensitivity and intensity can get in the way of learning emotion regulation strategies and of using already learned strategies.
- **Lack of Skill:** When you have skill deficits, you actually don't know how to change or regulate your emotions and emotion-related actions. You also may not know how to get yourself regulated enough to even want to lower the intensity of your emotions.
- **Reinforcement of Emotional Behaviours:** When the functions of certain emotions are reinforced in a particular situation, it can be extremely difficult to change these emotions. For example, if every time you are angry, people give you what you want, it will be very, very difficult for you to learn how to regulate your anger. Getting what you want when you are angry can reinforce angry outbursts.
- **Moodiness:** Regulating emotions takes a lot of effort and energy. It also takes willingness. Moodiness and lack of energy can interfere with your willingness to do the work emotion regulation takes. You may have the capability, but it may be interfered with by your current mood.

Understanding each of these factors can be critical for troubleshooting emotions. Emotions are complex, full-system responses. Changing any part of the system can

change the entire response. Once you know all the parts of the emotion system, you can decide where to try to change it first. Learning to observe, describe, and name your emotions can help you regulate your emotions.

Meanwhile to change unwanted emotions, we must first check the facts. Sometimes this is all that is needed. When the emotion does not fit the facts, we need to practice acting opposite to our emotion. When the emotion fits the facts and the situation is the problem, we need to do problem solving. Changing beliefs and assumptions about a situation to fit the facts can help you change your emotional reactions to it. This requires that you first check out the facts. Checking the facts is a basic strategy in cognitive therapy as well as in many other forms of therapy. When emotions do not fit the facts and knowing the facts does not change your emotion, then acting opposite to your emotions will change your emotional reactions. This is similar to the old adage ‘If you fall off a horse, get right back on it.’ When your emotions fit the facts of the situation and you want to change your emotions, then the situation is the problem. Solving problems will reduce the frequency of negative emotions. Doing what is needed to change emotional responses can be very difficult. It requires effort, willingness, and an ability to determine what is in one’s own best interest. We often react to our thoughts and interpretations of an event rather than to the facts of the event. Changing our beliefs, assumptions, and interpretations of events to fit the facts can change our emotional reactions. It is much more difficult to change an emotion when you don’t know what emotion or set of emotions you are actually feeling. Facts about a situation might fit one emotion but not another. Often we add to what we observe and then react to what we have added, rather than to what we observed. We jump to a conclusion and then act on that. When emotions do not fit the facts of a situation, or do not lead to effective behavior, acting opposite to these emotions will change the emotions if this is done repeatedly and all the way. Opposite action is acting opposite to the emotional urge to do or say something.

Opposite action is an effective way to change or reduce unwanted emotions when your emotion does not fit the facts. The old adage “If you fall off a horse, gets back on it,” is an example of acting opposite to fear’s urge to avoid the horse. When an emotion is justified by the situation, avoiding or changing the situation may be the best way to

change one's emotion. When an unwanted emotion fits the facts, the facts are the problem, and you need problem solving. In addition, the ability to solve problems is a basic skill that everyone needs in order to build a life worth living. It is one of the core skills necessary for improving emotion regulation or solving emotional problems. Before starting problem solving, you have to recognize that there is indeed a problem to be solved. It is important not only to know when to use opposite action and when to use problem solving, but also to have a clear idea of how these two skills differ in actual practice. You must note that for each emotion, the first solution is acting on the emotion if that is reasonable. This is followed by solutions aimed at changing the situations, followed by avoiding the situation, and then (when reasonable) changing thoughts about the situation.

Reducing vulnerability to emotion mind is another skill needed under emotion regulation. Emotional distress and anguish can be reduced by decreasing factors that make us vulnerable to negative emotions and moods. The skills here are about how to build your life so that you become less sensitive and vulnerable to painful emotions. All of us have times when we are more vulnerable to painful emotions than at other times. When we are vulnerable, we can be much more sensitive to events that prompt painful emotions. Some people lead lives that make them vulnerable to painful emotions almost all the time. Accumulating positive events in your life, and practicing the other skills you will learn here, will help increase your resilience. You can remember this set of skills with the term "ABC PLEASE"

„“A” is for Accumulate positive emotions. When you accumulate positive experiences, events, and valued behavior patterns, you build a wall between you and the sea of emotional dyscontrol.

„“B” is for Build mastery, which means doing things that make you feel competent and effective. This is a line of defense against helplessness and hopelessness.

„“C” is for Cope ahead of time with emotional situations. Before you get into an emotional situation, rehearse a plan so that you are prepared to cope with the situation skillfully.

„“PLEASE” stands for a set of skills that will help you take care of your mind by taking care of your body.

Most people who feel painful emotions do so for good reasons. It is usually (but not always) the events in life that cause unhappiness. Increasing positive events now can accumulate into a happier life. First, positive events not only increase positive emotions, but decrease sadness and other negative emotions. In fact, they are so important that they are important components of two of the most effective behavioral interventions for major depression, cognitive therapy¹⁰⁵ and behavioral activation. We all need positive events in our lives. However, each person needs different things to be happy, and the same person can have different needs at different times. It is hard to be happy without a life experienced as “worth living.” Building such a life requires attention to one’s own values and life priorities over the long term. This can take time, patience, and persistence. It is hard to be happy without a life worth living. This is a fundamental tenet of DBT. Of course, all lives are worth living in reality. No life is not worth living. However what is important is that you experience your life as worth living—one that is satisfying, and one that brings happiness. If positive events do not occur in your life very often, you may need to make changes in your life so that positive events will occur more often. Accumulating events that build a life worth living is like saving pennies in a piggy bank. Two things are important here. First, you need to go into Wise Mind to find and describe your most important values. Second, you may need to push yourself to overcome fear, regret, shame, guilt, and hopelessness in identifying the values you want to pursue in your life.

Feeling competent and adequately prepared for difficult situations reduces vulnerability to emotion mind and increases skillful behaviour. Mastery is doing things that make you feel competent, self-confident, in control, and capable of mastering things. Human babies have a natural tendency to increase mastery. This tendency can be lost over time, however, if efforts to increase mastery are not reinforced. You must do at least one thing each day to build a sense of accomplishment. Do something difficult, but possible. Lives of failure are lives where expectations are too high. An out-of-balance body increases vulnerability to negative emotions and emotion mind. Taking care of one’s body increases emotional resilience. The mnemonic PLEASE covers treating Physical illness, balanced Eating, avoiding mood-Altering substances, balanced Sleep,

and Exercise. If you use the PLEASE skills to take care of your body, your emotional resilience will increase.

The term PLEASE stands for the following:

Treat Physical Illness: Being sick lowers your resistance to negative emotions. The healthier you can become, the better able you will be to regulate your emotions. Many individuals fear going to a physician or do not have the behavioral regulation to get themselves to doctor appointments. Others do not have the self-regulation to take prescribed medications.

Balance Eating: Try to eat the amounts and kinds of foods that help you feel good—not too much or too little. Both eating too much and excessive dieting can increase your vulnerability to emotion mind. When and how often you eat and your daily eating routine can be especially important for some individuals, such as those diagnosed with bipolar disorder. Stay away from food that makes you feel overly emotional.

Avoid Mood-Altering Substance: Alcohol and drugs, like certain foods, can lower resistance to negative emotions. Stay off illicit drugs. Use alcohol in moderation, if at all.

Balance Sleep: Try to get the amount of sleep that helps you feel good—not too much or too little, usually between 7 and 9 hours. Keep to a consistent sleep schedule, especially if you are having difficulty sleeping.

Get Exercise: Aerobic exercise, done consistently, is an antidepressant. In addition, a regular exercise schedule can build mastery. Do some sort of exercise 5 to 7 days per week. Try to build up to 20 minutes of exercise each time.

At times, the intensity of negative emotions can be so high that special skills are necessary to manage them. This brings us to the next skill in emotion regulation: Managing extreme emotion. Suppressing emotion increases suffering. Mindfulness of current emotions is the path to emotional freedom. Sometimes emotional arousal is so high that you can't use any skills, particularly if the skills are complicated or take any thought on your part. Mindfulness of current emotions means observing, describing, and "allowing" emotions without judging them or trying to inhibit them, block them, or distract from them. By exposing yourself to emotions, but not necessarily acting on them, you will find that they are not so catastrophic. You will stop being so afraid of them. Once you are less afraid, the fear, panic, and anger that you feel in response to

your own emotions will dissipate. Over time and with practice, you will gradually feel more and more free, less controlled by your emotions. Letting go of controlling emotions is a path to freedom. Many people believe that they have to control their emotions at all times. When you believe this, it is easy to become controlled by your own rules about emotions. You lose your freedom to be and feel as you do. Other people believe that they simply cannot bear painful emotions—that they will fall into the abyss or they will die if they do not control their emotions. This is the road to losing freedom. Wisdom and freedom require the ability to allow the natural flow of emotions to come and go, experiencing emotions but not being controlled by emotions. Always having to prevent or suppress emotions is a form of being controlled by emotions. Accepting painful emotions eliminates the suffering, leaving only the pain. At times, acceptance even reduces the pain. Fighting emotions ensures that they stay.

Knowing one's own skills breakdown point is important. You are at your skills breakdown point when your emotional distress is very high—so extreme that you go into overload. You are completely caught in emotion mind. You can't focus on anything but the emotion itself. "You are emotionally overwhelmed." "Your mind is shutting down. Your brain stops processing information". Knowing at what point emotional distress interferes with your own coping and problem solving can be very important. In these times of crisis, special skills may be needed. When you are not in a crisis situation, think back on previous emotional episodes, and figure out how emotionally distressed you were when you 'hit the wall' and simply could not use your emotion regulation skills. This is your skills breakdown point. "At what level of distress were you when you couldn't focus your mind on anything but the emotion, couldn't solve problems, or couldn't use any other complicated skills? Think back." "Check the facts. Do you really 'fall apart' at this level of arousal? Check to be sure the problem is not that although you could use skills, you just don't want to because they seem too hard. If you really do want to use skills but just can't figure out how to do it at this level, then this is indeed your personal skills breakdown point. When you reach this point, try and do the following;

- Change your body temperature by putting cold water on your face, or by having a warm bath or foot soak.

- „Do intense aerobic exercise for 20 minutes or more.
- „Do paced breathing.
- „Focus on your body to tense and then relax muscles, one group at a time.
- „Shift your attention: Move your mind away from what is distressing you.
- „Focus your mind on something else—anything else
- **„Leave the situation completely**

„At times the most useful thing to do, even with very extreme emotions, is to just ‘sit’ with them. Sooner or later they always go down. It may be difficult, but it can keep you out of trouble for now.

Assignment

- Participants were given take home work to identify some of their personal emotions and how they can apply the skills taught in this session.

Closing Remarks

- The researcher commended the participants for their cooperation.
- The participants were reminded to their take home work
- The participants were notified of the time and venue for the next session.

Session 7

Topic: Distress Tolerance Skills

Objectives: At the end of this session, the participants should be able to:

- Explain the meaning of Distress Tolerance and its relevance to reducing rebellious behaviour
- Outline and explain each of the crisis survival strategies

Activity

Step 1: Participants were warmly welcomed by the researcher.

Step 2: The researcher reviewed with the participants the previous session take home work.

Step 3: The researcher also explained distress tolerance skills as follows: Pain and distress are parts of life; they cannot be entirely avoided or removed. Distress tolerance skills constitute a natural progression from mindfulness skills. They have to do with the ability to accept, in a nonevaluative and nonjudgmental fashion, both oneself and the

current situation. Essentially, distress tolerance is the ability to perceive one's environment without putting demands on it to be different; to experience one's current emotional state without attempting to change it; and to observe one's own thoughts and action patterns without attempting to stop or control them. The distress tolerance behaviours targeted in DBT skills training are concerned with tolerating and surviving crisis and with accepting life as it is in the moment. Distress tolerance skills are crisis survival strategies for getting through painful situations without making them worse. They are short-term solutions to painful situations. Their purpose is to make a painful situation more tolerable, so that it is possible to refrain from impulsive actions that can make the situation worse. They are ways of surviving and doing well in crisis situations without resorting to behaviours that will make the situation worse. They are needed when we can't immediately change a situation for the better, or when we can't sort out our feelings well enough to know what changes we want or how to make them.

Life in its totality is not all crisis. Living life as if it is always a crisis perpetuates the experience of crises, and create more crises. Acceptance of reality of life as it is in the moment is the way to turn suffering that cannot be tolerated into pain that can be tolerated. At some point, therefore, we all have to experience and accept the lives that we have in front of us (so to speak). This is ultimately the only way to build a life worth living. There are six groups of distress tolerance skills. Each is a series of methods for short-circuiting or coping with overwhelming negative emotions and almost intolerable situations.

- „The STOP skill, for stopping oneself from engaging in impulsive behaviour.
- „Pros and cons.
- „TIP skills, for changing your body chemistry.
- „Distracting.
- „Self-soothing.
- „Improving the moment.

The STOP skill helps individuals refrain from acting impulsively on their emotions and making a difficult situation worse. The skill does that by helping an individual resist acting on the first impulse to act (Stop); Take a step back and detach from the situation; Observe to gather information about what is going on; and then Proceed mindfully (by

evaluating the most effective option to take, given the goals, and finally following that option).

The STOP skill consists of the following sequence of steps:

1. **Stop:** When you feel your emotions are about to take control, stop! Don't react. Don't move a muscle! Just freeze. Freezing for a moment helps prevent you from doing what your emotion wants you to do—to act without thinking. Stay in control. Remember, you are the boss of your emotions. For instance, if someone says something that provokes your anger (like calling you names or cursing at you), you might have the urge to attack this person physically or verbally. That, however, might not be in your best interest. Doing that might result in getting hurt, being jailed, or being fined. So stop, freeze, and don't act on your impulse to attack.

2. **Take a Step Back:** When you are faced with a difficult situation, it may be hard to think about how to deal with it on the spot. Give yourself some time to calm down and think. Take a step back (in your mind and/or physically) from the situation. Get unstuck from what is going on. Take a deep breath. Continue breathing deeply as long as you need to do this (to reduce extreme emotion mind quickly) until you are back in control. Do not let your emotion control what you do. Remember that you are not your emotion. Do not let it put you over the edge. For example, you are crossing the street and don't notice a car approaching. The driver stops the car, gets out, starts cursing at you, and physically pushes you. Your urge is to punch him in the face; however, you know that would escalate the situation and get you in trouble. So you first stop and then literally take a step back to avoid confrontation.

3. **Observe:** Observe what is happening around you and within you, who is involved, and what other people are doing or saying. To make effective choices, it is important not to jump to conclusions. Instead, gather the relevant facts so as to understand what is going on and what the available options are. Use your mindfulness skills of observing and nonjudgmentalness.

4. **Proceed Mindfully:** Ask yourself, 'What do I want from this situation? What are my goals? What choice might make this situation better or worse?' Ask your wise mind how to deal with this problem. Being mindful is the opposite of being impulsive and acting without thinking. When you are calm, stay in control, and have some information

about what is going on, you are better prepared to deal with the situation effectively, without making it worse. For example, you get home really late from work, due to a flat tire. Your partner starts yelling at you, accusing you of cheating on her, and calling you names. You get really angry, and your first impulse is to yell and call her names back. However, you want to deal with this skillfully. So you stop and then take a step back from your partner. You observe that your partner appears drunk, and that there are a lot of empty bottles of beer in the kitchen. You know that when she is drunk, there's no point arguing, and she's likely to apologize in the morning. So you proceed mindfully by explaining the flat tire, pacifying your partner, and going to bed. You postpone a discussion till the next morning.

Pros and Cons skill consists of thinking about positive and negative aspects of both acting and not acting on crisis behaviour urges. The eventual goal of using pros and cons is for the person to see that accepting reality and tolerating distress lead to better outcomes than do rejecting reality and refusing to tolerate distress. When you have to make a decision between two or more options, and want to examine their advantages and disadvantages, pros and cons can be very important in helping you make a wise choice. All of us use pros and cons some of the time, even if only implicitly, to make decisions. For instance, a friend keeps me waiting at a restaurant before showing up an hour late. While waiting, I am reviewing in my mind all the pros for just leaving and standing him up, and all the pros for yelling at him when he finally does arrive. In fact, I rehearse in my mind all the reasons I should tell him I am never going to a restaurant with him again. However, I then remember that this is a good friend and that if I get really mad or refuse to eat out with him again, it will be a big loss for me. I start reviewing the pros of tolerating the distress and not yelling at him, even if he is late without much of a reason. Doing pros and cons involves writing down the positive and negative consequences of tolerating distress by resisting impulsive behaviors, as well as the positive and negative consequences of not tolerating distress by engaging in impulsive behaviours.

TIP Skills are rapid ways to reduce emotion arousal. There are four TIP skills: tipping the Temperature of your face with cold water,

Intense aerobic exercise, Paced breathing, and Paired muscle relaxation. (Note that there are two P skills, though there is only one P in TIP.) Each skill has the effect of

rapidly changing your biological response patterns, and thereby causing a reduction in your emotional arousal. The first TIP skill is tipping the Temperature of your face with cold water or cold packs on the face, while holding your breath. This induces the human dive reflex, which in turn sets off the parasympathetic system and reduces physiological and emotional arousal very quickly. The second TIP skill is to engage in Intense aerobic exercise of any kind for at least 20 minutes. Intense exercise (of any kind) for 20–30 minutes or so can have a rapid effect on mood, decreasing negative mood and ruminative thoughts and increasing positive affect after exercising. State anxiety decreases significantly if you get your heart rate to 70% of the maximum for your age. Increases in positive emotions are associated with getting your heart rate up to 55–70% of maximum heart rate for your age, but the increases are maintained for a significantly longer time following exercise when you get your heart rate to 70% intensity. A major characteristic of emotions is that they organize the body for action. Anger organizes the body to attack or defend; fear organizes the body to run, and so on. When the body is highly aroused, it can be difficult to inhibit emotional action even if the action is dysfunctional. Intense exercise, in these situations, can re-regulate the body to a less emotional state. The third TIP skill is Paced breathing. This refers to slowing down the pace of inhaling and exhaling (to an average of five to six breath cycles per minute) and breathing deeply from the abdomen. Breathing out should be slower than breathing in (e.g., 4 seconds in and 8 seconds out). Paired muscle relaxation, the fourth TIP skill, is the pairing of muscles relaxing with breathing out. Paired muscle relaxation is a variation on progressive muscle relaxation, which is widely used across many behavioral therapies for anxiety disorders. The strategy is to tense muscle groups, noticing the sensation of tension while breathing in, and then relax them by letting go of the tension, noticing the sensations as the muscle tension gradually goes down. The goal is to increase awareness of both tension and relaxation.

Distracting with Wise Mind ACCEPTS methods work by reducing contact with whatever set off the distress or its most painful aspects. Distracting from painful emotion or distress means turning one's attention to something else. There are seven sets of distracting skills. The sentence "Wise mind ACCEPTS" is a useful way to remember these skills.

1. **Activity:** Engaging in activities that are neutral or opposite to negative emotions and crisis behaviours can work to reduce impulsive urges and distress in a number of ways. They distract attention and fill short-term memory with non-crisis- oriented thoughts, images, and sensations. They affect physiological responses and emotional expressive behaviors directly. They can reduce the emotional pain that often drives the crisis behaviours. Treatments that focus on behavioural activation, for example, are very effective in reducing depression.
2. **Contributing:** Contributing to somebody else's well-being refocuses attention from oneself to others and what one can do for them. Participating fully in the experience of helping someone else can make people completely forget their own problems for a while. For some individuals, contributing also increases a sense of meaning in life, thereby improving the moment. For others, it enhances self-respect.
3. **Comparisons:** Making comparisons also refocuses attention from oneself to others, but in a different way. In this case, the situations of others—those coping in the same way or less well, or the less fortunate in general—are used to recast one's own situation in a more positive light. Alternatively, one can focus on past problems that are no longer occurring, and compare the present moment to this past difficult time. For instance, watch soap operas or other TV shows where people have problems worse than yours.
4. **Emotions:** Generating different emotions distracts from the current situation and negative emotion. This strategy interferes with the current mood state. This technique requires first figuring out the current emotion, so that activities for generating a different one can be sought. For instance, read an emotional book (such as a thriller). Then, after you put the book down, think back to the story in the book and experience that emotion. However, don't read something that will make you feel worse than you already feel, or that will cue crisis behaviours. What is needed is an activity that will reliably set off an emotion different from the one that is generating so much pain
5. **Pushing Away:** .Pushing away from a painful situation can be done by leaving it physically or by blocking it from one's mind. Leaving the situation decreases contact with its emotional cues. Blocking is a somewhat conscious effort to inhibit thoughts, images, and urges associated with negative emotions. One form of blocking is to

repeatedly put off destructive behaviors for brief periods of time. Blocking is a bit like riding a bicycle; people only understand it when they do it. Most individuals seem able to do this and will usually know what you mean as soon as you mention the technique. It is perhaps related to the ability to dissociate or depersonalize. It should not be the first technique tried, but can be useful in an emergency. The secret is not to overuse it. For example, build up an imaginary wall between yourself and others

6. **Thoughts:** Distracting with other thoughts fills short-term memory, so that thoughts activated by the negative emotion do not continue to reactivate the emotion. For example, you are at a funeral and no one is crying, and you feel that at any minute you are going to burst out sobbing, which you don't want to do. Distract yourself by counting something at the funeral, for instance, bricks on the wall, people in the pews, or words that are said by the speakers.

7. **Sensations:** Intense, different sensations can focus attention on something other than the emotional distress, its source, or its crisis urges. Holding ice cubes, in particular, can be very helpful. Other ideas for eliciting sensations are tasting lemon wedges, and intensely sour candy, or putting on headphones and listening to fast, upbeat music.

Self-soothing skill is doing things that feel pleasant, comforting, and provide relief from stress or pain. It makes it much easier to pass the time without making things worse. Self-soothing is being comforting, nurturing, peacemaking, gentle, and mindfully kind to oneself. Self-soothing activities reduce vulnerability to emotion mind and to acting impulsively and they reduce the sense of deprivation that is often a precursor to feelings of vulnerability. They help people tolerate pain and distress without making things worse. A way to remember the skills for self-soothing is to think of soothing the five senses of .Vision, Hearing, Smell, Taste and Touch.

Improving the Moment as a skill in distress tolerance is an idiosyncratic series of strategies that can be helpful in improving the quality of the present moment, making it easier to survive a crisis without making it worse. Improving the moment is replacing immediate negative events with more positive ones by making the moment more positive and easier to tolerate. Some strategies involve changing appraisals of oneself (encouragement) or the situation (creating meaning in the situation, imagining changes in the situation). Some involve changing body responses to events (relaxing). Prayer and

focusing on one thing in the moment have to do with acceptance and letting go. Improving the moment is particularly useful when you are feeling overwhelmed in a stressful situation that may be long-lasting, or when distracting activities and self-soothing are not working. A way to remember these skills is the word IMPROVE: Imagery, Meaning,

Prayer, Relaxing actions, One thing in the moment, Vacation, Encouragement.

1. **Imagery:** Mental visualization—imagery—can be used to distract, soothe, bolster courage and confidence, and make future rewards more salient. Using imagery, you can create a situation different from the actual one; in this sense, it is like leaving the current situation. With imagery, however, you can be sure that the place you go to is safe and secure. Going to an imaginary safe place or room within yourself can be very helpful during flashbacks. For this strategy to be useful, however, you have to practice it enough times when you are not in a crisis to get it firmly down as a skill. Imagery can also be used to cope more effectively with crises. Practicing effective coping in imagination can actually increase one’s chances of coping effectively in real life. It can be helpful first to write out a script outlining how one would cope effectively with a crisis without making it worse, and then practice it in imagination. For instance, imagine yourself tolerating a very painful emotion or powerful urge to do something destructive by visualizing yourself flying away into the clouds, looking down on the pain and intense urges.

2. **Meaning:** Finding or creating meaning helps many people in crises. This is similar to the dialectical strategy of making lemonade out of lemons.

3. **Prayer:** The essence of prayer is the complete opening of oneself to the moment. This practice is very similar to the notion of radical acceptance, discussed later in this module. Note that the suggested prayer is not one of begging to have the suffering or crisis taken away. Nor is it a “Why me?” prayer.

4. **Relaxing Actions:** Relaxing actions as part of improving the moment are different from paired muscle relaxation as taught in the TIP skills. In paired relaxation, the emphasis is on directly modifying how the body is reacting to stress. In relaxing actions, the emphasis is on widening activities to include a wider variety of relaxing

things to do. The key here is to select activities that ordinarily have the effect of calming you down. When you are relaxed, it is usually far easier to resist temptations to engage in crisis behaviours. Being relaxed gives you time to think and review your pros and cons.

5. **One Thing in the Moment:** “One thing in the moment” is another way of describing “one-mindfully,” the second mindfulness “how” skill. Although it can be very difficult to do, focusing on one thing in the moment can be very helpful in the middle of a crisis; it can provide time to settle down. The secret of this skill is to remember that the only pain one has to survive is “just this moment.” We all often suffer much more than is required by calling to mind past suffering and ruminating about future suffering we may have to endure, but in reality, there is only “just this moment.”

6. **Vacation:** Taking a ‘vacation from adulthood’ is coping by retreating into yourself or allowing yourself to be taken care of for the moment. Everyone needs a vacation from adulthood once in a while. The trick is to take it in a way that does not harm you, and also to make sure the vacation is brief. It should only last from a few moments to no longer than a day. When you have responsibilities, taking a vacation depends on getting someone else to take over your duties for a while. The idea is similar to the notion of taking a time out to regroup.

7. **Encouragement:** Encouragement is cheerleading yourself and rethinking situations. The idea is to talk to yourself as you would talk to someone you care about who is in a crisis—or to talk to yourself as you would like someone else to talk to you. You are in a relationship with yourself, so to increase well-being; you have to say more positive and encouraging things than negatives and put-downs. The idea here is to rethink situations when you start telling yourself they are hopeless, that they would not ever end, or that you cannot do what is needed.

Assignment

The participants were given take homework: enumerate five things gained in this session.

Closing Remarks:

- The researcher commended the participants for their time and cooperation.
- The participants were reminded to do their take home assignment.

- Participants were also reminded of the time and venue for the next session.

Session 8

Topic: Interpersonal Effectiveness Skills

Objectives: At the end of this session, the participants should be able to:

- Explain the meaning of Interpersonal Effectiveness skills and its relevance to reducing rebellious behaviour.
- Outline and explain each of the Interpersonal Effectiveness skills.

Activity

Step 1. The participants were warmly welcomed by the researcher.

Step 2. The researcher reviewed with the participants the previous session take home work.

Step 3. The researcher also explained Interpersonal Effectiveness skills to the participants as follows: Interpersonal Effectiveness skills are the basic assertiveness skills necessary to achieve objectives, maintain relationships, and enhance self-respect. They are objectives, relationship and self-respect effectiveness skills. Objectives effectiveness refers to attaining your objective or specific goal in a particular situation. The objective is ordinarily the reason for the interaction in the first place. The term DEAR MAN is a way to remember these skills. This stands for ‘Describe, Express, Assert, Reinforce, (stay) Mindful, Appear confident, Negotiate.’”

i. Describe the Situation: When necessary, you begin by briefly describing the situation you are reacting to. This is to ensure that the other person is oriented to the events leading to the request, refusal, opinion or point of view. If the other person is not in agreement on the basic facts of the situation it gives you a fair warning that the assertions might not be well received or successful.

ii. Express Clearly: Express clearly how you feel or what you believe about the situation. Don’t expect the other person to read your mind or know how you feel. For instance, give a brief rationale for a request or for saying no. By doing this you are making it easier for the person to figure out what you really want from the interaction.

iii. Assert Wishes: The third DEAR MAN skill is to ask for what you want. Say no clearly. Don’t expect people to know what you want them to do if you don’t tell them.

Don't beat around the bush, never really asking or saying no. Don't tell them what they should do. Be clear, concise, and assertive.

iv. Reinforce: The fourth DEAR MAN skill is to reinforce the other person. That is, identify something positive or rewarding that would happen for the other person if he or she gives the response you want. This can involve taking time to consider the other person's perspective and motivation, and drawing connections between what you are asking for and what the person wants or needs.

v. (Stay) Mindful: The next DEAR MAN skill is to stay mindful of your objectives in the situation. Maintain your position and avoid being distracted onto another topic.

vi. Appear Confident: Use a confident voice tone, and display a confident physical manner and posture, with appropriate eye contact. Such a manner conveys to both the other person and yourself that you are efficacious and deserves respect for what you want.

vii. Negotiate: The final DEAR MAN skill is negotiation. You must be willing to give to get; offer and ask for alternative solutions to the problem. You must reduce your request and maintain your No, but offer to do something else or solve the problem another way.

Step 4: The researcher further explained to the participants what relationship effectiveness is as thus: Relationship Effectiveness refers to improving or maintaining a good relationship with the other person in an interaction, while at the same time trying to obtain your objective. The skills are aimed at maintaining or improving our relationship with another person, while we try to get what we want in the interaction. The term GIVE is a way to remember these skills. This stands for (be) Gentle, (act) Interested, Validate, and (use an) Easy manner.

i. (Be) Gentle: Being gentle means being nice and respectful in your approach. People tend to respond to gentleness more than they do to harshness. Gentleness specifically means four things: no attacks, no threats, no judging, and no disrespect.

ii. (Act) Interested: The second GIVE skill is to be interested in the other person. Listen to the other person's point of view, opinion, reasons for saying no, or reasons for making a request of you. Don't interrupt or try to talk over the other person. Don't mind-read thoughts or intentions without checking them out. Don't assume that your ideas

about what is going on inside the other's mind are correct, especially if you think the other person is being intentionally hostile, hurtful, rejecting, or simply uncaring. If you have a concern about what the other person is thinking or is motivated by, gently ask, and listen to the answer. Be sensitive to the other person's desire to have the discussion at a later time, if that's what the person wants. You must be patient.

iii. Validate: The third GIVE skill is validation. This means communicating that the other person's feelings, thoughts, and actions are understandable to you, given his or her past or current situation.

iv. (Use an) Easy Manner: The final GIVE skill is an easy manner. That is, try to be light-hearted. Use a little humour. Smile. Ease the other person along. Be political.

Step 5: The researcher continued by explaining to the participants what self-respect effectiveness is as thus: Self-respect Effectiveness refers to acting in a manner that maintains or increases your self-respect after an interpersonal interaction. How you go about attempting to obtain your objectives requires self-respect effectiveness skills. These skills help us to keep or improve our self-respect, while at the same time we try to get what we want in an interaction. The term FAST is a way to remember these skills. This stands for (be) Fair, (no) Apologies, Stick to values, (be) Truthful.

i. (Be) Fair: The first FAST skill is to be fair to yourself and the other person in your attempts to get what you want. It is hard to like yourself over the long haul if you consistently take advantage of other people. You may get what you want, but at the risk of your ability to respect yourself. Validate your own feelings and wishes as well as the other person's. It is also hard to respect yourself if you are always giving in to others' wishes and never sticking up for your own wishes or beliefs.

ii. (No) Apologies: The next FAST skill is not to over apologize. When apologies are warranted, of course, they are appropriate. But no apologizing for being alive, for making a request, for having an opinion, or for disagreeing. Apologies imply that you are wrong—that you are the one making a mistake. This can reduce your sense of mastery over time. Apology is good but excessive apologies can reduce both relationship and self-respect effectiveness.

iii. Stick to Values: The third FAST skill is to stick to your own values. Avoid selling out your values or integrity to get your objective or to keep a person liking you. Be clear

on what, in your opinion, is the moral or valued way of thinking and acting, and hold on to your position.

iv. (Be) Truthful: The final FAST skill is to be truthful. Don't lie, act helpless when you are not, or exaggerate. A pattern of dishonesty over time erodes your self-respect. Even though one instance may not hurt, or may even occasionally be necessary, dishonesty as your usual mode of getting what you want will be harmful over the long run. Acting helpless is the opposite of building mastery.

Assignment

As a take home assignment, participants were asked to identify some of the skills learnt in this session, which they have already.

Closing Remarks:

- The researcher commended the participants for their time and cooperation.
- The participants were reminded to do their take home assignment.
- Participants were also notified of the time and venue for the next session.

Session 9

Topic: Overall review, Post-Experiment Test Administration and Conclusion.

Objectives: At the end of this session, the participants should be able to

- Summarise their experiences based on what individuals have benefited from the various skills individuals have learnt about since the commencement of the training.
- Respond to the post-test instruments

Activity

Step 1: The participants were warmly welcomed and the home work was received together with the researcher.

Step 2: There was an interactive session between the researcher and the participants to ascertain the effect of the therapeutic programme. Activities of the previous sessions were role-played to be sure individuals have attained positive experience via the intervention.

Step 3: The researcher administered the post-test instruments on the participants. The researcher also thanked the participants for their cooperation and gave a token gift to each one of them in appreciation of their participation in the training programme.

Closing Remarks

- The researcher commended the participants for their unrelenting support and cooperation. He then received feedback on how beneficial the training is to them.
- The participants were encouraged to utilize effectively the skills acquired via the intervention programme.

THE CONTROL GROUP

Session 1

Topic: Administration of Pre-test instruments

Objective: To administer pre-test instruments to the participants.

Activity

Step 1: The researcher assembled all the participants for an interactive session and welcomed them to the programme.

Step 2: The researcher introduced himself to the group and explained to the participants that the programme is mainly for research purpose and that their cooperation is highly needed.

Step 3: The pre-test instruments were administered on the participants by the researcher

Closing Remarks

- The researcher commended the participants for their time and efforts.
- The participants were reminded of the time and venue of the next session.

Session 2

Topic: Fundamental principles of successful life

Objective: The participants should be able to understand and explain the principles of successful life

Activity

Step 1: The participants were warmly welcomed and the researcher introduced the topic “fundamental principles of successful life”

Success does not just happen; it has to be created. In addition, nobody just becomes great; but deliberate steps must be taken by positive thinking people in order to break out of mediocrity. Success is not a myth. It however has principles which when followed, can convert a failure into a celebrity. There is no price for failure. If you want to fail; just do nothing and you will experience failure without measure. However, if you must succeed, you must do something. You must take steps. You must act. You must be audacious. Somebody said, successful people do daily what unsuccessful people do only occasionally. That is to say, successful people do consistently what unsuccessful people fail to do consistently –if at all, they do it. Note, what you do consistently determines what you become perpetually. Your success has to be made to happen. Success has principles or keys and when you take hold of the keys that unlock the doors of success, there is no stopping you.

1. The Principle of GOOD THINKING

If anything good must come out of you, you must be given to good thinking. In the world of manufacturing for example, there are different kinds of products. Some products are more outstanding than others are. However, every outstanding product is a result of good thinking, -by the manufacturer(s). Similarly, if you must become successful in whatever you do, you must not only be a thinker, you must be given to “good thinking”. The depth of your thinking determines the level of your success. The more you think well, the more you succeed. The less you think well, the less you succeed. Show me a great thinker and I will show you a man bound to have an accomplished life.

All around the world, people are frustrated with their lives and the way things are going; but they hardly devote time to thinking. And even those that dare to think often think on negative things; -probably about how things will not work out or about the current situations and crisis they are faced with. Very few actually engage in “good thinking”. Many people will just not sit and think. So they run around in circles and get stuck in frustration. You need to control your mind and be focused on the things you want to achieve. If you are not making progress in your life, then it’s time to sit down and analyze why. Strategize how to move from where you are to where you should be. The deeper you think the higher you go. The less you think, the less you grow. It’s a law.

THINKINERS GENERATE IDEAS. Mediocrity can be turned around into resounding success just by getting ideas and working with them. Recently, I have seen how ideas born in a garage have turned out into multi-million dollar ventures and companies. However, it is only those given to good thinking that can be inspired with great ideas.

Many years ago, it was really difficult travelling around the world, especially over the seas. Those that eventually moved across continents spent so many days and even months on the oceans. Then two brothers came up with an idea. They probably thought; if we can create a machine that could fly over the seas; people would cross continents in record time. They thought so deep and their productive thoughts gave birth to the airplane technology we all enjoy today.

There are so many graduates in Nigeria today who are struggling so badly. However, very few of them are given to deep thinking. When you keep waiting ...and waiting for a job you may never get one. All you need do is to sit down and think about what to do to create a financial future for yourself. Opportunities are everywhere. You just need to recognize them and think deeply; about what to do with them. Abraham Lincoln said “we can complain because rose bushes have thorns or rejoice because thorn bushes have roses.” If you must change your level, you must see things differently. You are a product of the type or nature of your thinking. Your ultimate destiny is shaped by the depth of your thoughts. Friend, it’s time to wake up. Stop running up and down. Settle down and draw the course of your future. It is good thinking that yields good products. Permit me to repeat that slogan from the Toyota advert - “Good Thinking, Good Product”.

2. The Principle of WISE PLANNING

Intentions are not enough to grant you your heart desires. You are not successful because you have intentions. Everybody has intentions including beggars on the streets. Only those who sit down to plan would eventually have success. If you have intentions to do things that will get you into great heights, you must sit down first and “count the cost.....” Too many people even pray and forget about planning. Prayer without planning is playing without knowing. When you have a big idea to do something great and you don’t sit down to strategize how to go about it, your idea may never grow bigger than the

brain cell that conceived it in your head. You have to strategize the way to accomplish your intentions. That is what makes you a wise man. It is not enough to know what you want to do, you've got to know how (the way) to do it and that's what dubs you a prudent man or woman. The reason why many people die poor is because during the course of their lives, they tackle events only when they unfold. Many times, people are not ready for mere eventualities, let alone planning for their own future. You don't allow events to take you unawares. You have to be prepared at every point in time. Adults always said to us while we were growing that; "examinations of life have no time-table." You have to plan ahead. You've got to sit down and count the cost. Many people will head nowhere in life because they live a disorderly life. Friend, you've got to order the course of your life. Put every step and every stage in order. That's what will grant you speed and accomplishment in life.

If you have a dream of owning a big business or organization, you must go and learn how to manage and increase money. You must be ready to attend some leadership training. You have to read some books about people who have succeeded in business. You have to pass through several stages to get there. You have to order your way into that dream. You cannot become a medical doctor before you attend a medical school. That would be out of order. You have to go through medical school before you become a medical doctor. You cannot become a lawyer before you attend law school. It is the other way round. You must first go through law school before you become a lawyer. Everything must be done decently and in order. You have to pay attention to the order of your life and that is where planning comes in. Planning helps you to put every stage of your life in order. It helps you to prioritize properly for posterity. Planning helps you to get rid of confusion. The reason why many people get easily confused at cross roads is because they haven't sat down to draw up the order and the course through which their intentions should be accomplished. This is very important!

Finally, you must know that you need divine help to plan properly. You are nothing without the hand of God. He's the Supreme Being. Many people make informed decision and still fail in life. It's not enough to make informed decisions. You need "inspired" decisions. Inspiration comes from God. You can be informed and fail, but you cannot be inspired and fail. You need divine direction from God.

3. The Principle of ACTION

Life, like athletic race, is quite an adventure. There is a prize at the end of it. However, only those that will dare to stay on the track for that long, and perhaps to the end, will obtain the prize.

Life is a race and you are not designed by God to be a spectator in this race. You were not made to stay out there and cheer up those in the race. God's intention for you is that you will be a participant in the race. The implication of that is; you have a chance of obtaining the prize. Don't settle for less; you're not meant to be left out. There is no partiality with God as long as you play your part. Planning without action would make a dreamer frustrated. Many have dreams, a few have gone ahead to create plans for accomplishing those dreams, and a few yet have gone the extra mile of taking action. You may be a graduate wearing nice coat, but if you don't act on your dreams and plans, you are not different from a beggar. You must not die a camouflage.

4. The Principle of UNDYING PASSION

Passion is the fuel of destiny. It is often said that where there is no vision, the people perish; but then where there is no passion, the vision perishes. Without passion, destiny is left to mere chances. Passion is the propeller of destiny. Passion is what drives an individual for fulfillment. Passion is the fire that burns within you for accomplishment. To lack passion is to be a walking-dead man. No matter how colourful your destiny is by potential, when passion is absent, frustration becomes the result. What you don't love cannot last in your hands. Similarly, if you are not driven toward your vision through passion, it can never come into fruition. You can't change what you are comfortable with; therefore, you cannot break out of where you are into where you should be until you are driven by something on your inside.

Passion is not finding something to live for; passion is finding something to die for. Passion is pursuing your vision with everything inside you. Passion means refusing to look back in spite of the potential horrors you may face trying to fulfill your purpose. Passion is moving "Onward" despising your fears and aggressively approaching your destiny. Passion is indeed the fuel of destiny.

Try to find what burns in your heart, what moves you, what stirs you up, what makes your heart to jump. That's probably passion and is the key that will unlock your destiny. When you have found it, pursue it tirelessly, vigorously, earnestly and relentlessly.

How to Fuel Your Passion

- Keep an eye on your goals: The truth is, the more you keep an eye on your goals for life; the more you develop the zest to accomplish them. If you take your eyes off your aspirations, you'll lose the passion for pursuit. Maintaining focus is the key to increasing your passion. When you start trying to be like other people, you will get distracted and lose the zeal to pursue your own vision. It doesn't matter what your aspirations are; you need to get zealous about them if you want to accomplish any of them. It's not enough to have a vision. You also need an inner drive to bring your vision into reality. It is pursuit that makes vision real and it is passion that provides the energy for pursuit.
- Avoid Competition: We all have different assignments, therefore there is no need competing with anyone. Focus on your unique goals and aspirations to get them fulfilled. Everybody's future is unique to him or her. We may share ideas but we are heading different directions so we must get rid of envy and focus on achieving our own goals. Envy is an enemy of passion. Envy only promotes strife, but focus fuels passion and passion fuels pursuit and pursuit fuels accomplishment. So, instead of getting bothered over other people's progress, fix your eyes on your own dreams and channel all your energy towards them. You can fuel your own passion through focus.

5. The Principle of PATIENCE

Your future is in an unseen realm. It belongs to the realm of hope. You are not there yet, so you must wait patiently until the time of its fulfillment. If you want to be successful in life, you must learn the virtue of patience. After you have created your plans, drawn out your goals and taken the necessary actions you must take to have a fulfilled life, you must wait for when each vision gets accomplished. Every vision has an appointed time. It is good to play your part ahead of the time, but you must wait for the

time. One very big reason why people make a mess of their lives today is because of impatience. Many graduates today have picked up guns and are on the highways robbing. They just can't wait until they make it. Some of them lose their lives in the process. Many young girls are into prostitution right now. They believe things will never work out, so if they are ever going to survive they must exchange their bodies for money. They end up facing grave consequences later-on in their lives. Most of the auto accidents you see or hear about on highways today happen simply because drivers have become too impatient. Often times we hear observers here in Nigeria say things like "It was dangerous overtaking that caused the accident". What makes drivers to overtake dangerously? – Impatience! They just can't wait for the right time to overtake.

That is how it is with life. Many people on their way to destiny crash-land because of their impatience. Have you not seen or heard about bright young people who got into jail just because they got involved in internet frauds. The truth is, at the heart of every act of misconduct on anyone's path to greatness is impatience. Watch it because it kills faster than cancer.

What do you do when you have done all you should do? My answer is Wait! Patience is what to do when you have done all you should do. Simply put, purpose must pass through a process before it comes into fruition -and process takes time. That is why impatient people never accomplish their goals. They just can't wait for the right time. They get out of way to do things they should not do. They want what we often call 'quick success'.

6. The Principle of the FLOWING RIVER

You must realize that just as success comes; it can be taken away from you if you don't know how to maintain it. You have to know how to keep bringing success and being successful. Many become successful but never remain successful because they don't understand the principle of the "flowing river". We know that the reason why river water (or some river water) remains ever fresh is because it flows. It's not stagnant. Stagnant water smells. It spoils. Many people's success has become a smelly success because it does not flow. You have to allow your success flow otherwise you will soon turn it into a failure. In other words, learn to give back if you want the streams of success

to keep flowing in your life. When you let go, you create room for more to come in. Those who don't give back, never grow up in accomplishments. You are not rich because you have several millions in your account. You become rich when your million start to affect other people's lives positively. It's all about impacting lives with your wealth. It's often said; "if you eat alone, you will die alone". If you want to increase, you have to scatter first. You have to give. You have to be a blessing to others around you. Stingy people never get to the heights. If they manage to get there, they soon start crumbling. Most of the foundations we see and hear about around the world today are owed by people who understand this principle. They know within themselves that "if I must get richer, I must keep reaching out to others". That's what the principle of the flowing river is all about. Start cultivating the habit of blessing others even in your low estate. That's what will take you to the high estates of life. Start thinking beyond yourself and start thinking about others. Start affecting lives. Start influencing others. Start reaching out. That is the key to sustainable blessing.

Session 3

Topic: Administration of post-test instrument

Objective: Administration of post-test instrument to obtain post-test scores.

Activity

Step 1: The researcher appreciated the participants for their dedication and cooperation from the beginning of the exercise.

Step 2: The post-test instruments were administered and the participants were encouraged to fill the instruments appropriately in order to get the post-test scores.

Step 3: The researcher further commended the participants for their time and efforts and a token gift was given to each person to show appreciation and thanked them for their understanding and cooperation.

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Kindly assist him/her in any way you can.

Thank you.

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