

EFFECTS OF PSYCHO-SOCIAL THERAPY ON EMOTIONS OF PUPILS WITH TEMPER TANTRUM

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Abstract

This study investigated effects of Psycho-social Therapy (PST) on Emotions of Pupils with Temper Tantrum (PWTT). The specific objectives were to examine the extent to which PST can be used to change the feelings and comportment of PWTT before and after treatment; using quasi experimental design, research design (Pretest-Posttest, Control Group Design). The population of PWTT in the school under investigation was 11 while the sample used was 10. Emotional Scale was the instrument used to obtain data. The data were analysed using simple mean, frequencies, percentages and tables to answer the research questions. Analysis of Covariance was used to test the hypotheses at P-value < 0.05 level of significance. The results revealed that PST change the emotions of PWTT to a moderate extent. The study recommended that PST should be encouraged to change negative emotions of PWTT to positive emotions.

Keywords: Emotions, Feelings, Comportment, Psycho-social Therapy & Temper Tantrum

INTRODUCTION

Emotions are feelings, affect, likes or dislikes, otherwise state of mind. Ozoji (2005) averred that man is an emotional being with readymade emotions: feelings or sentiments which could be for or against a person, other persons or an object. This view point takes into cognizance the fact that emotion manifests after an evaluation of the person in question or the object at stake.

Emotion is a person's judgment and conclusion in relation to one individual or another, as often revealed by the person's view, philosophy and conduct or comportments, in other words: feelings (affect) and comportment. Barrett (2006) confirmed that emotion is a tri-element concept (three inter-related parts): opinions (thinking), feelings (moods) and comportment (conducts) towards other learners. Ozoji (2005) similarly puts it that emotion is a measured feeling (mood), disposition, position and the like; with regard to an individual say, PWTT. This evaluation can be favourable or unfavourable; positive or negative.

Emotional response is simply sensational-reaction in ones' comportments towards others especially fellow learners. Jikukka (2006) endorsed that emotional response in Pupils with Temper Tantrum (PWTT) is basically the sentiment of likes and dislikes. Barrett (2006) reviled that emotion like anger is a common sense that correspond to a range of mental events that emerged from interaction of some psychological ingredients. Emotions are mental content which correspond to common sense and mind state. Barrett further propounded the Conceptual Act Model, which has construct that can be divided into pleasant and unpleasant emotions; positive or negative emotions: feelings and comportments.

Pupils with Temper Tantrum often undergo developmental stage that is characterized with rage, distress, resentment and indignation. This stage of development as Mallum, Haggai and Ajeagbu (2004) affirmed is considered as a period that the individual encounters numerous problems in the areas of growth and development such as emotional, psychological, cultural, physical, mental, social and spiritual.

World Health Organisation (WHO, 2016) and American Academy of Pediatrics, (2015) stated that pupils within this primary school age range (8 – 11 years) are in a transitional stage full of emotionally, psychological, social and mental development difficulties; this stage is highly characterized by a number of emotional: bad feelings and ugly comportments which can be a cause of conflict on one hand or positive personality development on the other. Emotion is very important because it tells a lot about PWTT and as learners how Psycho-social Therapy (PST) can enhance or change their feelings and Comportment. Therefore, in this investigation, emotion was measured by performance on the scores of feelings and Comportment of PWTT.

Feelings are basically sensations, mood or frame of mind towards other pupils in any teaching and learning setting. The consequences of not being able to control temper and follow class proceedings, usually lead to PWTT living a poor quality school life that is full of emotional disorders such as depression, anxiety and even increasing mortality risk (Gopinath, Schneider, Hartley, Teber & McMahan, 2011). The researchers also feel that emotional or mood response disorders equally implied depressed feelings or having anxiety, normally experienced by PWTT who are unable to cope with learning tasks and so, are unable to experience peace, joy, happiness and harmony with self and others.

Comportment is conduct, way or style of life. Ogechi (2019) opined that comportment means to behave in a conduct comfortable to what is right and proper. Comportment is necessary for PWTT because it helps determine the way, conduct and harmony PWTT are in, or living with. Mallum, Haggai and Ajeagbu (2004) accentuated that good comportment is necessary for PWTT because it aids in times of temperament and indignation. PWTT are

counselled on how to comport selves by teaching acceptable comportments, sound conducts and daily living amongst others. Ekoja and Amail (2002) said that comportment is the conduct or way PWTT act and carry their selves. It is a personal bearing or conduct.

Ogechi (2019) thought that comportment is the consistent harmony between beliefs, values, ones' way of life and utterances. Ogechi further alleged that it is the way you act and carry yourself. Either or not, PWTT carry their selves in a very proud way or conducts. According to Liberante (2012) comportment is seen as a major problem among PWTT; they lack the knowledge and way to behave in an orderly conduct that is devoid of temper tantrum. PWTT do not seem to care or have interest about activities of daily living. Bala (2004) held that daily living skills are essential for the upkeep of PWTT. These daily living skills especially the ones having some elements of PST, would help improve such pupils' temper tantrum tendencies and general wellbeing. Psycho-social therapy (PST) is both a counselling and treatment for emotional disorders through the use of psychological techniques designed by the counsellor to help PWTT to be encouraged in terms of conflicts and crisis with self and others in the society. Dakwak (2018) believed that psycho-social therapy gives insight into problems being faced or encountered and gives the goals of getting out of such problems or concerns. These goals are to help PWTT arrive at a solution otherwise answers; that is, PST helps PWTT to be independent, self-directing, able to function optimally in the society in which he/she found him/her self, and also to bring changes in behaviours leading to improved social functioning and personal growth.

According to Landsberger, Diaz, Spring, Stewards and Sculley (2014), psycho-social therapy helps PWTT, for the reason that these PWTT are emotionally and physically devastated and therefore need

rehabilitation/therapy. The pupils' sense of industry can be revitalized when teachers are sensitive and committed towards helping them to be responsible and gain confidence in learning and achievement. Landsberger and et al, further averred that psycho-social therapy enhances psycho-social support, emotional and well-being of PWTT and cultural connectedness.

The psycho-social therapy (PST) in this investigation, is an intervention that takes into cognizant several key areas which are related to behavioural, emotional, psychological and social issues and the possible supports of PWTT. The researchers feel that this PST is a systematic inquiry that arises from the introduction of dynamic interaction; it is a process that continues throughout the treatment period and is characterized by the circularity of cause effect. In this research, the researchers identified the PWTT, took stock of the resources that are available for dealing with or handling emotions, temper tantrum and behaviours of PWTT; in addition considered the ways in which those emotions/behaviours might be solved from an educated hypothesis, social psychoanalyses and intra/interpersonal psychotherapies.

Pupils with Temper Tantrum are learners with anger outburst or rage paroxysm and as a result, are faced with hitches that obstruct concentration and reception during teaching and learning processes. Okwuderi (2012) averred that PWTT are those learners who are living with undesirable emotions or inappropriate social behaviours. Such pupils do not learn gracefully because of the temper tantrum which usually obstruct learning and regular life.

Ojile (2010) held that many PWTT who are with emotional problems, lack early PST which is ideal for edification and personal development; once PST is not provided by well-trained therapists or teachers, it is not possible to change bad emotions of PWTT to become excellent emotions:

comportments and feelings or affect. The researchers established the PWTT traits in the samples by working closely with the classroom teachers to identify pupils that had constantly displayed traits such as: negative behaviours/fighting, negative mannerisms such as rebellious/incontrollable, anger outburst or rage paroxysm and the like.

PWTT often drop out of schools and habitually end up as urchins, rogues or street boys and girls. The end products of PWTT to a nation is always devastating, demoralizing and distressing, yet the problem has not received the needed attention it deserves especially in Nigeria. Nothing is being said about PWTT in the different governments Nigeria had ever had. There are no statements, policies and the like; "we just go on as if the problem does not exist, but it does exist" (Obani, 2006 & Okwuderi, 2012).

Other problems are, can PST be used to: Change the emotions of PWTT to emotions of peace and tranquility? Change emotional disorders of tantrum, rage and outburst of PWTT to that of affect, joy and peace with self and others? Enhance the attitude of emotional trauma, fear of humiliation and discrimination experienced by PWTT?

The aim of this investigation is to examine effects of PST on emotions of PWTT. The specific objectives are to:

1. examine the extent to which PST can be used to change the feelings of PWTT.
2. determine the extent to which PST can be used to change the comportment of PWTT.

Research Questions

1. To what extent can PST change the feelings of PWTT?
2. What is the extent to which PST can be used to improve Comportment of PWTT?

Hypotheses

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

1. There is no significant statistical mean difference in feelings of PWTT in experimental and control groups following treatment in psychosocial therapy.
2. There is no significant difference between the comportment mean scores of PWTT in experimental and control groups before and after treatment.

This study is anchored considerably on Festinger's Theory of Cognitive Dissonance developed in 1957. This theory states that human's attitude and principally comportment, feelings (affect) or behaviour can be changed through manipulations such as: treatment or therapy. This theory involves a programme that contains analysis of comportments, feelings (affects) and behaviours of pupils; the programme gives room for encouraging logical attitude, consistent good feelings, decent comportments and rational emotions. Festinger's theory is related to this study based on the fact that it involves giving of counsel, suggestions, persuasions, psychotherapy and the like. To extinct every form of temper tantrum, the counsellor or therapist engages the PWTT in cognitive good reasoning following explanations and counselling; this would help the PWTT to do away with unreasonable and irrational comportments, feelings or emotions.

The implication of this theory to this current work is that when pupils' feelings, comportments and the like; are manipulated or trained through PST, the PWTT would alter their attitudes by themselves. The theory is specifically relevant to decision-making and problem-solving in the acceptance or rejection of indecent emotions by PWTT. This cognitive dissonance theory predicts that affects (feelings) and comportments would remain

"in synch" (and vice versa). If the comportments and feelings of PWTT change, then presumably their emotions would also change. Similarly, if a pupil's emotion changes, the pupil would in all probability change his/her comportment and feelings to match the new emotion.

The researchers believed that to change feelings and comportments that are undesirable and damaging, the PWTT must learn the right issues (feelings and comportments), then speak out against poor comportments and bad feelings; which often come inform of emotional trauma, anxiety, depression, fear and the like. To do otherwise would have been to create conflict or dissonance, which is lack of harmony in the PWTTs' minds. Those bases are the relationship between Festinger's Theory of Cognitive Dissonance and the current investigation.

The findings of the study will benefit PWTT who exhibit unfounded emotions to develop interest in good behaviours, right comportments and decent feelings which would eventually enhance their emotions, academic performances and would not suffer the emotional problems that go with bad feelings, unfounded comportments and general life failures. The findings of the study will benefit PWTTs' self-concept. They will no longer live with bad mood and ugly emotions. The findings of the study will provide data and information on the effect of PST on PWTT. This would provide the process of changing the emotions and eventually enhancing academic performances amongst PWTT for the benefit of others in the society.

The population of the research was eleven (11) PWTT in the school under study; this was determined by using the classroom teachers and parents/guardians of the pupils who assented through a consent form. This population was found to be suitable for this study because it represents the same characteristics of PWTT in terms of comportments and feelings issues used in

this study. The sample size of this study comprised of ten (10) primary four (4) PWTT that show low emotions. Out of the said ten (10) PWTT: 5 were assigned to the experimental group and exposed to PST tasks while the other 5 were assigned to the control group but were not exposed to PST tasks.

Emotions Scale was the instrument validated by two experts and used to obtain data in this research. This validation was made to ensure that the instruments measure what they are intended to measure. These experts were drawn from the University of Jos and from the departments of Special Education and Rehabilitation Sciences and Educational Foundation (Test-and-Measurement). To ensure that, the contents of the instrument are appropriate and valid for use with the sample understudy, and these independent different judges guided the researcher in making revision of the items for high content validity. The validity and reliability coefficient indexes of Emotions Scale were computed and determined to be 0.712 and 0.722 respectively.

Therefore, the researchers believed that the result of this study provided useful evidences. Emotions Scale (ES) was basically divided into Sections A. and B., Section A. was the Bio-data of the respondents and Section B. has fifteen items

via which the respondents responded to. Those are list of items that sought to collect the feelings and comporments of the respondents.

Respondents' responses were collected at pre-test and post-test. Feelings were measured with eight items on the Emotions Scale, the items were 1, 3, 5, 7, 9, 11, 13 and 15. Comporment were measured with seven items on the Emotions Scale, the items were 2, 4, 6, 8, 10, 12 and 14.

At both pre-test and post-test, respondents were instructed to tick (√) items from the items (options) that best expressed their minds on the Emotions Scale. The scale used for scoring each of the items on feelings and comporments at pre-test and post-test was the five points Likert Scale rated: Strongly Agreed (SA = 5 points), Agreed (A = 4 points), Undecided (U = 3 points), Disagreed (D = 2 points) and Strongly Disagreed (SD = 1 point).

The two research questions were answered using simple mean, frequencies, and percentages. The two hypotheses were tested using Analysis of Covariance (ANCOVA) at P-value < 0.05 level of significance.

Research Results

Research Question One: To what extent can PST change the feelings of PWTT?

Table 1: Extent to which PST changed the feelings of PWTT

Extent	Experimental Group		Control Group	
	Pre-Test	Post-Test	Pre-Test	Post-Test
Low (1-6)	5(100)	0	5(100)	4(80.00)
Moderate(7-9)	0	4(80.00)	0	1(20.00)
High (10-15)	0	1(20.00)	0	0
TOTAL	5(100)	5(100)	5(100)	5(100)

Note: Percentages in parenthesis (%) Maximum score is 15marks

Table 1 shows the extent to which Psycho-social Therapy (PST) can improve feelings of Pupils with Temper Tantrum (PWTT). Before intervention, both PWTT in experimental and control groups had low

scores. After intervention, PWTT in the experimental group had 80% moderate and 20% high marks, while the PWTT in control group had 80% low and 20% moderate

scores. This implies that PST improve feelings of PWTT to a moderate extent.

Research Question Two

What is the extent to which PST can be used to improve Compartment of PWTT?

Table 2: Extent to which PST can be used to improve Compartment of PWTT

Extent	Experimental Group		Control Group	
	Pre-Test	Post-Test	Pre-Test	Post-Test
Low (1-6)	5(100)	0	5(100)	4(80.00)
Moderate(7-9)	0	4(80.00)	0	1(20.00)
High (10-15)	0	1(20.00)	0	0
TOTAL	5(100)	5(100)	5(100)	5(100)

Note: Percentages in parenthesis (%) Maximum score is 15marks

Table 4 shows the extent to which PST can improve compartment of PWTT. Before intervention, both PWTT in experimental and control groups had low scores. After intervention, PWTT in the experimental group had 80% moderate and 20% high marks, while the PWTT in control group 80% had low and 20% moderate scores. This implies that PST improve

compartment of PWTT to a moderate extent.

Hypothesis One

There is no significant statistical mean difference in feelings of PWTT in experimental and control groups following treatment in psychosocial therapy.

Table 3: Analysis of Covariance (ANCOVA) of feelings mean scores of PWTT in Experimental and Control Groups before and after Treatment

Source	Type III Sum of Squares	df	Mean Square	F	Sig.	Partial Eta Squared
Corrected Model	53.188 ^a	3	17.729	15.746	.000	.724
Intercept	664.006	1	664.006	589.742	.000	.970
GROUP	10.188	1	10.188	9.048	.008	.335
TEST	34.091	1	34.091	30.278	.000	.627
GROUP * TEST	12.273	1	12.273	10.900	.004	.377
Error	20.267	18	1.126			
Total	728.000	22				
Corrected Total	73.455	21				

a. R Squared = .724 (Adjusted R Squared = .678)

PRE-TEST	4.2000	.83666
POST-TEST	8.2000	1.30384
Total	6.2000	2.34758
PRE-TEST	4.3333	.81650
POST-TEST	5.3333	1.21106
Total	4.8333	1.11464

Table 3 shows the Analysis of Covariance (ANCOVA) of feelings mean scores of PWTT in Experimental and Control Groups before and after Treatment. PWTT in the experimental group had a Pretest mean and standard deviation scores of 4.20 ± 0.84 , and a post-test mean scores of 8.20 ± 1.30 . PWTT in control group had a Pretest mean and standard deviation scores of 4.33 ± 0.82 , and a post-test mean scores of 5.33 ± 1.21 . Groups results show $F_{1, 18} = 9.05$ and a p-value of 0.008. Since the p-value is less than

0.05; the researchers rejected the null hypothesis and accepted the alternative hypothesis. It was then taken that there is a significant difference between feelings mean scores of PWTT in experimental and control groups before and after treatment.

Hypothesis Two

There is no significant difference between the comporment mean scores of PWTT in experimental and control groups before and after treatment.

Table 4: Analysis of Covariance (ANCOVA) of Comporment mean scores of PWTT in Experimental and Control Groups before and after Treatment

Source	Type III Sum of Squares	df	Mean Square	F	Sig.	Partial Eta Squared
Corrected Model	79.321 ^a	3	26.440	15.794	.000	.725
Intercept	692.388	1	692.388	413.595	.000	.958
GROUP	20.388	1	20.388	12.179	.003	.404
TEST	40.752	1	40.752	24.343	.000	.575
GROUP * TEST	23.297	1	23.297	13.916	.002	.436
Error	30.133	18	1.674			
Total	786.000	22				
Corrected Total	109.455	21				

a. R Squared = .725 (Adjusted R Squared = .679)

Table 4 shows the Analysis of Covariance (ANCOVA) of Comporment mean scores of PWTT in Experimental and Control Groups before and after Treatment. Groups results show $F_{1, 18} = 12.18$ and a p-value of 0.003. Since the p-value is less than 0.05. Therefore, the researchers rejected the null hypothesis and accepted the alternative hypothesis. It was then taken that there is a significant statistical difference between the comporment mean scores of PWTT in experimental and control groups before and after treatment.

DISCUSSION

This study aimed to investigate the Effects of Psycho-social Therapy (PST) on emotions of Pupils with Temper Tantrum (PWTT). Research Question One in Table 1 shows the extent to which PST improved feelings of PWTT. Before intervention, both PWTT in experimental and control groups had low feelings scores. After intervention, majority of PWTT in the experimental group had moderate scores of feelings, while the PWTT in control groups still had low scores of feelings (at post-tests). Hypothesis One in Table 3 shows the Analysis of Covariance (ANCOVA) of feelings mean scores of PWTT in

Experimental and Control Groups before and after treatment: the p-value was less than 0.05. Therefore, the researchers rejected the null hypothesis and accepted the alternative hypothesis. This implies that PST improved feelings of PWTT to a moderate extent. This finding agrees with Okwuderi (2012) which accentuated that PST can change bad emotions of PWTT to become excellent pupils, with decent feelings or affect (emotions), and Gopinath, Schneider, Hartley, Teber and McMahan (2011) which states that PST enhances or changes the feelings of PWTT to a moderate extent.

Research Question Two in Table 2 shows the extent to which PST improved comportment of PWTT. Before intervention, both PWTT in experimental and control groups had low scores of comportment. But after intervention, majority of PWTT in the experimental group had moderate comportment scores. The PWTT in control group which had low comportment still maintained low comportment at post-test. Hypothesis Two in Table 4 shows the Analysis of Covariance (ANCOVA) of Comportment mean scores of PWTT in Experimental and Control Groups before and after Treatment. The p-value was less than 0.05, therefore, the researchers rejected the null hypothesis and accepted the alternative hypothesis. There is a significant difference between the Comportment mean scores of PWTT in experimental and control groups before and after treatment. This implies that PST improved comportment of PWTT to a moderate extent. This also agreed with the findings of Okwuderi (2012) which opined that early PST is ideal for edification and personal development; once such therapy is provided by well-trained therapists or teachers, it can change bad comportments (bad emotions) to become excellent ones. Therefore, stakeholders can rely upon PST to change the emotions of PWTT to a moderate extent.

SUMMARY

This study investigated the Effects of Psycho-social Therapy on emotions of Pupils with Temper Tantrum. The specific objectives were to: examine the extent to which PST can be used to change the feelings and comportment of PWTT. Emotions Scale was used to obtain data. Results indicated that PST improve feelings and comportment of PWTT to a moderate extent. In a null shell, PST changes low feelings and low comportment of PWTT to a moderate extent.

CONCLUSION

Results emanating from this study indicated that Psycho-social Therapy (PST) changed the Emotions of Pupils with Temper Tantrum (PWTT) in the study area. PST simply rehabilitated pupils with bad feelings and poor comportments (changed emotions of PWTT).

RECOMMENDATIONS

From the findings of this study, the following recommendations are made:

1. Psychologists, Special educators, Rehabilitation scientists, Counsellors, security experts, should carryout campaigns through conferences, seminars, workshops and symposiums on the fact that Psycho-social Therapy (PST) changed bad feelings and poor comportment (emotions) of PWTT.
2. Government should sponsor awareness programmes through Televisions and Radios on treatment strategies such as in PST to boost good emotions amongst PWTT, and to largely educate parents and guidance on PWTT.

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