Impact of Self-Instructional Therapy on Adolescents' Truancy in Secondary Schools in Oredo Local Government Area of Edo State

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Abstract. This study investigated the effect of self-instructional therapy in managing adolescents with truancy in secondary school students in Oredo local government area of Edo State using parental socioeconomic status as an intervening variable. To guide the study, three research questions were raised and formulated into two hypotheses which were tested at 0.05 level of significance. The study adopted a pre-test, post-test, non-equivalent control group and quasi experimental design. The population of the study was thirteen thousand and fifty-one (13,051) senior secondary school students from the fourteen (14) public secondary schools in Oredo local government area of Edo State. A sample size of two hundred (200) students made up of one hundred males and one hundred females were selected using balloting without replacement. The research instrument Students Level of Truancy Questionnaire (SLTQ) was used and a reliability coefficient of 0.64 was obtained using the Cronbach Alpha method. Data were analyzed using descriptive statistics of mean, standard deviation and t-test. The results revealed that students exposed to self - instructional therapy had a higher truancy mean score than those in the control group at posttest, students in the experimental group had a higher posttest truancy score than their pretest and parental socioeconomic status has no significant interaction on the truancy level among secondary school students in Oredo Local Government Area of Edo State. Based on the findings, it was therefore recommended among others, that counselling psychologists should train and retrain students to help them reduce truancy irrespective of their parental socioeconomic status, using self–instructional therapy.

Keywords: Self-instructional therapy, Truancy, Adolescents, Cronbach Alpha Statistical tool

1 INTRODUCTION

In recent times, there are unintentional, visible and invisible distortions, and aberrations in the character and pattern of classroom behaviour of some students which had left our schools unsafe for academic programs. They include stealing, violence, drug abuse, examination malpractice, sexual practice, alcohol, substance smoking, and truancy among others that may have dangerous consequences on the students' health, education and socialization (Olatunbosun, 2015). Truancy which is most prominent in public secondary schools, is increasingly posing problems to parents, teachers, school authority, the educational system and the society at large (Onoyase, 2017). It could be deliberate absence from school without prior knowledge of parents, guardians and the school authority but for which no reasonable or acceptable excuse is given but the personal initiation of the student concern. It is a delinquent antisocial act which includes absenteeism, lateness to school and class, leaving school before closing time, loitering, dodging lessons, among others (Martin, 2015). Some students are likely to have high rate of absenteeism, poor academic performance, adjustment problems, lack of interest in schools, poor attitude to school work and learning, among others as it is highly associated with rejection, neglect and unpleasant feelings.

Prior research has shown that truancy is a global problem facing nations with statistics of adolescents in Scotland, Australia, and South Africa as 30-33%%, 40%-60% and 42% respectively (Maxwell & Nwala, 2018). Studies have also shown that peer influence at school, age, parental socioeconomic status, among others, are strongly associated with truancy in schools (Egbochuku & Oliha, 2014). Parental socioeconomic status, which is the social class of an individual or group, is often measured as a combination of education, income and occupation. Olatunji & Badejo (2019) noted that parents with high and average socioeconomic status have greater abilities to provide necessary needs but may not be unable to pay proper attention to their children who may become truants due to their busy schedules. This is contrary to Adelabu et al. (2016) who reported that there was no significant relationship between socioeconomic status and truancy in secondary schools in Niger. Students from low parental socioeconomic status are likely to engage in truancy as a result of lack of basic requirements for their learning process such as payment of school fees, good uniforms, books, transportation fare, among others, as they cope by begging, stealing and engaging in odd jobs to get money during school hours (Ehindero, 2015 & Nyerere, 2012). Research has shown how teachers, school authorities and parents have employed various measures to reduce or eliminate school truancy but they seem not to have a lasting effect at the long run.

Psychologists have over the years through researches, employed counselling techniques and Self-Instructional Therapy (SIT) which is a cognitive-behavioural approach was adopted in this study. Self-Instructional therapy which was propounded by Meichebaum Donald in 1975, has the ability to make one discover learning gaps, cognitively plan and organize, adjust, pilot, regulate, reinforce and develop self-Independent learning patterns (memory aids, get help, ask for correction and peer-learning) without an influence prompting. He believed that Self-instructional training can effectively alter student's cognitive styles by speaking to themselves (self-statement) and guiding their behaviours rather than addressing irrational ideas. Anyamene et al. (2017) conducted an experimental study consisting of 40 truants aged 11 to 13 years old selected from JS1 and JS11 classes from Capital City School in Awka in Anambra state using individual counselling. The results indicated among others that individualized counselling techniques led to significant remediation of truancy in students. Koki (2022) investigated the psychological effects of behaviour therapy in controlling truancy in Government Day Junior Secondary Schools' Students in Yobe State using the quasi- experimental design. Results indicated that there is a significant effect of behavioural therapy in reduction of truant behaviour among the students. Olakojo and Adetoyose (2020) asserts that counselling techniques has been proved to have a high level of success in improving diverse truancy problems. They conducted an experimental study among students in Nigeria secondary schools utilizing Rational Emotive Behavioural Therapy (REBT) and Behaviour Modification using modelling, self–instructional training, reinforcement, cognitive restructuring and assertiveness training therapy in improving truant problems. The results revealed that BM subjects were significantly better than other subject. Maxwell & Nwala (2018) investigated the effects of counselling on truancy among senior secondary school students in Port Harcourt, Rivers State. The study reported that counselling has a significant effect on truancy, Truant students should be referred to counsellors for effective counselling and PHALGA should collaborate with the state government to ensure the employment of counsellors in all the secondary schools in her domain. It is on these premise that the researcher decided to investigate the impact of Self-Instructional Therapy in reducing truancy among secondary school students in Oredo Local Government Area of Edo State.

1.1 Statement of the Problem

The school system is faced with a number of challenges which could affect instruction, administration and overall performance of students. Truancy which is accompanied with a lot of maladaptive behaviours, is of great concern to teachers, parents, school administrators because it could adversely affect teaching, learning and may lead to school dropout especially among senior secondary school students. Subsequently, the increase in the number of truants,

have led to cases of teenage pregnancies, absenteeism, theft, juvenile delinquencies like fighting, cultism, yahooism, drug abuse, and others, among students in Oredo local government area is quite alarming. Researches has shown that this rate causes negative consequences on truant students and the educational system, hence, there is need to reduce adolescents' truancy through the use of counselling intervention. Therefore, the researcher decided to find out the impact of self-instructional therapy on reduction of adolescents' truancy in Oredo Local Government Area of Edo State.

1.2 Research Questions

The following research questions were raised to guide the study:

1. What percentage of secondary school students engage in truant behaviour?
2. Is there be a difference in the pre-test and post-test scores of truancy management among secondary school students exposed to Self-instructional Therapy?
3. Is there be a difference in the pre-test and post-test scores of truancy management among secondary school students exposed to Self-instructional Therapy and those in the control groups?
4. Is there be an interaction effect of treatment by parental socioeconomic status on truancy management among secondary school students in Oredo Local Government Area of Edo State?

1.3 Hypotheses

Research question one will be answered while two to four were hypothesized and tested at 0.05 alpha level of significance.

Ho$_1$: There is no significant difference in the pre-test and post-test scores of adolescents' truancy among secondary schools exposed to Self-Instructional Therapy.

Ho$_2$ There is no significant difference in the pre-test and post-test scores of adolescents' truancy among secondary schools exposed to Self-Instructional Therapy and the control group.

Ho$_3$ There is no significant interaction effect of treatment by parental socioeconomic status on the level of truancy management among secondary school students.

1.4 Purpose of the Study

The purpose of this study was to examine the impact of Self-Instructional Therapy in managing adolescents' truancy among secondary schools in Oredo Local Government Area, Edo state.

2 MATERIALS AND METHODS

The research design was a pre-test, post–test non-equivalent control group, quasi experimental design. The design is considered most appropriate as they were not randomized but studied in their intact class. The study consists of one independent variable (Self Instructional); one intervening variable (socioeconomic status) of three levels (low, average and high) and the dependent variable was adolescents' truancy.

2.1 Population of the Study

The target population for this study was thirteen thousand and fifty-one (13,051) Senior Secondary School Students comprising males and females in the fourteen public senior secondary schools in Oredo Local Government Area of Edo State, Nigeria (Source; State Ministry of Education).

2.2 Sample and Sampling Technique

The sample for this study consisted of 135 students identified with truancy at pre-test in the two schools randomly selected in Oredo Local Government Area of Edo State from the fourteen (14) public senior secondary schools. These two schools were selected using simple ballot sampling technique as the sample schools for the study, with the first school (school A) randomly assigned as the experimental group and the second school (school B) was the control group. School A was exposed to self- instructional therapy treatment and school B was exposed to placebo training.

2.3 Research Instrument

The research instrument for data collection for this study was a standardized questionnaire, adapted from Ehindero (2015) titled: Students Level of Truancy Scale (SLTS). The instrument consists of two sessions (A and B). Section A of the instrument consists of the respondent's demographic information which includes parents' socioeconomic status and sex of student. While section B consists of a twenty (20) item on truancy on a five-point Likert scale of Strongly Agree, Agree, Not sure, Disagree and Strongly Disagree that was used to elicit responses on students' personal perception and involvement about truancy.

2.3.1 Validity of the Instrument

The adapted instrument for the study was re-validated by three experts from the field of Measurement and Evaluation. Corrections made were incorporated into the final copy and validity was established.

2.3.2 Reliability of the Instrument

The Cronbach Alpha Statistical tool was used to determine the consistency of the test items and a coefficient value of 0.64 was obtained. This value is considered adequate for the instrument and thus, considered high for the measure of internal consistency.

2.4 Treatment Procedure

This researcher began the treatment by adopting three stages; the pre-test, treatment and post-test procedures. The first stage was the pre-testing of participants in the sampled schools. The second stage was the treatment of the experimental group using the counselling therapy (Self-Instructional Therapy) and the control group using placebo (truancy management) for six weeks. The third stage was the post-testing of subjects in the experimental and control groups after the treatment sessions. The instrument (SLTS) was used for both the pre-test and post-test while the results were recorded.

2.5 Method of Data Analysis

The scoring of the data collected were as follows: positive worded items in the instrument were scored 5, 4,3,2,1 on the scale while negative worded items were scored 1,2,3,4.5 respectively. With thirty (30) items on the scale, it was scored over 150 (5 x 30), and respondents were categorized by the researcher as follows; O – 45 points = non-truants, 45 points and above = truants. Research question one was answered using simple percentage while research questions two, three and four were hypothesized, as hypotheses one, two and three. The hypotheses were tested using independent sample t-test to determine if there is a significant difference between the adolescents' truancy before and after treatment, between the experimental and control groups and between levels of parental socioeconomic status in the experimental group.

3. RESULTS

The analysis of the data generated from the respondents through the Students Level of Truancy Scale (SLTS) was presented and the result was used to test the hypotheses raised for the study as shown below:

Research Questions one: What percentage of secondary school students engaged in truant behaviour?

Table 1: Showing percentage description of the level of truancy among secondary school students.

S/N	Truancy	Pre-Test		Post-Test	
		Frequency	Percent (%)	Frequency	Percent (%)
1	Truant	135	67.5	86	43
2	Non-Truant	65	32.5	114	57
	Total	200	100	200	100

From the table 1, it can be observed that at pre-test a total of 135 (67.5%) exhibited the trait while 65 (32.5%) did not, but those that exhibited truancy were the majority. However, at post-test 86 (43%) were considered as engaged in truant behaviours while 114 (57%) were not, hence the majority were considered not to engaged in truancy behaviour.

Testing of Hypotheses

Hypothesis Ho1: There is no significant difference in the pre-test and post-test scores of adolescents' truancy level exposed to Self-Instructional Therapy.

Table 2: Showing the independent sample t-test statistics of difference of the Mean of Pre-Test and Post-Test Scores of Truancy in the Experimental Group

Truancy	N	Mean	Std. Dev.	Mean Diff.	t-value	df	p-value (Sig-2 tailed)	Remarks
Pre-testpreP pre-test	100	51.31	10.99	10.09	7.454	199	.0001	Significant
Post-test	100	41.22	7.07					

Table 2 shows that the difference in the pre-test and post-test scores in truancy level among secondary school students exposed to Self-Instructional Therapy. From the table at pre-test (Mean = 51.31; Std. Dev. = 10.99) while at post-test (Mean = 41.22; Std. Dev. = 7.07). Also in the table, the t-value is = 7.454, Degree of Freedom (df) = 99. The t-value is significant at alpha level of .05 because the p-value is less than alpha value; therefore, the null hypothesis is hereby rejected. In favour of the alternate hypothesis, that there is a significant difference in their mean scores at pre-test and post-test. In favour of the post-test scores, since a lower score is desired.

Ho2: There is no significant difference between the pre-test and post-test scores of adolescents' truancy level of the Self-Instructional Therapy and the Control Group.

Table 3: Descriptive statistics of students' pre-test and post-test scores of adolescents' truancy level of the experimental and control groups

Group	Mean	Std. Dev.	N	Mean	Std. Dev.	N
	Pre-test			**Post-test**		
Experimental	51.31	10.99	100	41.22	7.07	100
Control	57.63	11.49	100	56.76	9.30	100

Table 3 Shows the descriptive Statistics of students' pre-test and post-test scores on adolescents' truancy level. From the table at pre-test in the Experimental Group, (N=100, Mean=51.31 Std. dev. =10.99) and control Group, (N=100, Mean=57.63 Std. dev.= 11.49). While at post-test

experimental Group, (N= 100, Mean= 41.22, Std. dev.= 7.07) and Control Group, (N= 100, Mean=56.67, Std. dev.=9.30).

Table 4: Analysis of Covariance table of difference in the mean score of adolescents' truancy level

Source	Type III Sum of Squares	Df	Mean Square	F	Sig.
Corrected Model	13474.248[a]	2	6737.124	109.599	.000
Intercept	10551.642	1	10551.642	171.653	.000
Pretruancy	1399.668	1	1399.668	22.770	.000
Group	9134.572	1	9134.572	**148.600**	**.000**
Error	12109.732	197	61.471		
Total	505588.000	200			
Corrected Total	25583.980	199			

a. R Squared = .527 (Adjusted R Squared = .522)

For Table 4, the F-value of 148.600 the p-value is less the alpha level (p< 0.05). Hence, the null hypothesis is hereby rejected. This implies that there is a significant difference in the mean score in truancy level among secondary school students exposed to Self-Instructional Therapy and those in the Control Group. This is in favour of the Experimental Group, because they have a lower mean score at Post-test after controlling for differences at Pre-test.

Ho₃ There is no significant interaction effect of treatment by parental socioeconomic status on the level of truancy management among secondary school students

Table 5: Descriptive Statistics of treatment by SES on Students Truancy Engagement Level

Group	SES	Mean	Std. Deviation	N
	Low	50.50	14.85	02
Experimental	Moderate	41.03	6.86	91
	High	41.22	7.26	07
	Low	53.00	9.64	03
Control	Moderate	57.30	9.05	90
	High	51.43	11.64	07

From the table, the Experimental Group Low SES (N = 02, Mean=50.50, Std. dev. = 14.85), Moderate SES (N = 91, Mean= 41.03, Std. dev. = 6.86) and High SES (N = 07, Mean = 41.22 Std. dev. = 7.26) while in the Control Group Low SES (N=03, Mean=53.00, Std. dev. = 9.64), Moderate SES (N = 90, Mean= 57.30, Std. dev. = 9.05) and High SES (N=07, Mean= 51.43 Std. dev. = 11.64).

3.1 Discussion of Findings

The discussion of the results obtained in this study was organized according to the research questions and the hypotheses. The findings of this study reveals that there is a significant difference in the pre-test and post-test scores in truancy level among secondary school students exposed to Self-Instructional Therapy as addressed by hypothesis one. This may be as a result of the individual nature of the therapy and the tenets of SLTS which de-emphasized the challenge while paying attention to the solution. This finding is in agreement with Koki (2022) and Olakojo & Adetoyose (2020) whose study revealed that students exposed to self-instructional therapy have high level of truancy at pre-test compared to their post-test scores. Secondly, the findings of this study shows that there is a significant difference in the mean score in truancy level among secondary school students exposed to Self-Instructional Therapy and those in the Control Group. This could be an indication that the treatment given to the

experimental group which sensitized them on the effects of truancy and skills to overcome it, was effective. This finding is in alignment with the study of Maxwell and Nwala (2018) whose study revealed that students exposed to self-Instructional therapy shows high level of improvement of students with truancy than their counterparts in the Control group.

Finally, the finding of hypothesis three also revealed that there is no significant interaction effect by treatment on parental socio-economic status on students' truancy engagement level. This implies that the treatment affected all the students in the different socio-economic categories equally irrespective of the group (experimental or control). This finding is in agreement with the study of Adelabu et al. (2016) whose study revealed that there is no significant difference between parent's SES and truancy among secondary school students. He argued that students from families with both higher and a lower social-economic background likewise engage in absenteeism which most times result in school dropout. However, this finding is in disagreement with the study of Ehindero (2015) and Nyerere (2012) whose studies revealed that there is a significant association between parent's social-economic status and truancy.

4. CONCLUSION

Based on the findings of the study, counselling based on Self-Instructional Therapy was effective in reducing truancy among secondary school students in Oredo Local Government Area of Edo State. Also, students play truancy irrespective of their high, medium or low socioeconomic status and so truants can emerge from any family class, not peculiar to a particular socioeconomic background. Invariably, the level of truancy from any type of family can be treated using intentionally organized Self-Instructional counselling techniques. Counsellors and psychologists should embrace Self-Instructional Therapy as an effective counselling therapy for secondary school students. Counselling psychologists should train students on the use of self–instructional therapy since it is effective in managing students with truant behaviour. Government should employ sufficient guidance counsellors in all secondary schools to help them identify and manage students with truant behaviour. School administrators should include truancy management skills in their scheme of work in order to focus on a skill per term as they teach them.

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