

EFFECTS OF BEHAVIOUR REHEARSAL THERAPY IN MANAGING JUVENILE DELINQUENCY AMONG IN-SCHOOL ADOLESCENTS IN IKA SOUTH LOCAL GOVERNMENT AREA OF DELTA STATE

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ABSTRACT

The study examined the effects of Behavior Rehearsal Therapy in managing juvenile delinquency among in-school adolescents in Ika South Local Government Area of Delta State. This study adopted a pre-test-post-test control group true-experimental design. Two hypotheses were formulated to guide the study. The population consisted of 220 in-school adolescents in Ika South LGA, Delta State. Multi-stage random sampling was used to select 88 in-school adolescents. The participants were randomly assigned to experimental and control groups. Juvenile Delinquency Inventory was used to collect data for the study. The instrument was validated by three experts. Cronbach Alpha statistics was used to obtain a reliability coefficient of 0.81. The instrument was used to collect data for pre-test scores for both experimental and control group which was followed by a six weeks treatment of the experimental group while the control group was not treated, at the end of the treatment session, both experimental and control group were post-tested using the same instrument. The data collected were analyzed using paired sample t-test, LSD Post hoc multiple comparisons and Analysis of Covariance. The findings of the study showed that Behavior Rehearsal Therapy was effective in managing Juvenile Delinquency among in-school adolescents in Ika South Local Government Area, Delta State. Based on the findings, it was recommended that, School Counsellors should make use of Behavior Rehearsal Therapy when counselling in-school adolescents who has Delinquency behavior.

Keywords: Juvenile, Behavior Rehearsal Therapy, Delinquency and Effects

1.0 INTRODUCTION

Adolescence can be referred to as a transitional period in which some of the behavioral patterns can be formed, which can be positive or negative behaviors. Most times, during this stage, some adolescents may not be able to discern what acceptable behaviors is or not. One of the challenges that Nigeria, as a developing country is facing especially among in-school adolescents is traceable to Juvenile delinquency.

Delinquency refers to any act of habitual violation of principles and rules of a society, or deviating from accepted norms and values that binds the society, being committed by a juvenile. Juvenile Delinquency according to Rubin, (2020) is a behavior which is against the

law of a particular place, such as stealing, vandalisation of properties, and fighting; it is the departure of adolescents from the accepted norms, such as immoral or indecent conduct, immoral conduct around school, engagement in illegal occupation, association with vicious immoral persons, habitual truant from school, refuses to obey parent, or guardian, uses intoxicating liquors, smokes cigarettes around school premises, amongst others. Acts of juvenile delinquency can manifest into inappropriate behavior such as destruction of properties, stealing, fighting, robbery, kidnaping, rape, cultism and killings of which all these can be possible threats to human existence, development and adjustment.

Juvenile delinquency as an issue need to be addressed because the growth in the number of in-school adolescents getting involved in crimes continued to be unabated, with only minimal step to curtail or manage the behaviour, and due to lack of social services that has been ignored, if not up to the point of extinction. Consequently, there is therefore, the need to help in-school adolescent manage juvenile delinquency. Behavioural Rehearsal Therapy was used in this study to manage juvenile delinquency among in-school adolescents in Ika South LGA, Delta State.

Behavior Rehearsal Therapy was propounded by Bandura (1986), as a method to train new response patterns and a procedure to bring about attitudinal change and insights towards solving undesirable behaviors. Behavioral Rehearsal Therapy (BRT) is a therapeutic method of identifying undesirable behaviors and its modification. It is used to teach a client new ways of responding to specific life's situations, bringing out changes in adaptive behaviours and gaining insights in behavioral and developmental problems Davidson and John, (2020). Behavioural Rehearsal Therapy (BRT) state that once an undesirable behavior is identified and modified, the individuals' thoughts, values and feelings also changes. An investigation into juvenile delinquency behaviour among adolescents in Nigerian secondary school seems expedient to the researcher, at this point in time, as there is increasing occurrence over the intensification of threats to lives and properties, killings, kidnapping, internet fraud, cultism, alcohol and drug abuse, examination malpractices among others as perpetrated by in-school adolescents which has made the issue of peace and safety unpredictable as people these days live in fears, anxieties, under the influence of killings, fighting, shootings among others and these has continued to lead to national instability. The concern of this study therefore, is to examine the Effects of Behavioural Rehearsal Therapy in Managing Juvenile Delinquency among in-School Adolescents in Ika South Local Government Area of Delta State.

2.0 STATEMENT OF THE PROBLEM

Delinquency is an act that defies or diverges from cultural and legal norms. There are some salient delinquent acts especially among in-school adolescents which can violate any law or ordinance, such as immoral or indecent conduct around school premises, wandering in streets at night, using of vulgar languages in school, absents from school intentionally, smoking cigarettes around school premises, among others. In Nigeria, delinquency can be seen as a major social problem which can affect the whole society and constitutes a serious issue to academic achievement especially in Ika South LGA as there is hardly a day without a case of juvenile crimes being announced either in the national dailies or social media, including the alarming crime rate of cultism and cult related activities perpetrated even among in-school adolescents (Oladeji and Ayangunna, 2021).

The researcher from His experience as a Lecturer and as a Counsellor has observed that many schools are facing cases of violence, truancy, examination malpractice, stealing, cultism tendency, students fighting each other with weapons like cutlass, axe, bottles, sticks and many others. Also, some students have been found to use their mobile phone to defraud, cheat in exams, and end up wasting a lot of time they would have used in their studies. Through observation, many in- school adolescent are not interested in education or getting certificates to work, they want to get quick financial wealth by any fraudulent acts or means and this has become a source of fears, and concern, to the residents of Ika South LGA, Delta State. All these are juvenile delinquencies and could affect their academic performance, actualization of their potentials, future adjustment, personality characteristics and development. For the society, it can constitute a serious impediment because people now find it difficult to move about freely for fear of being kidnapped, raped, robbed or attacked. Also these in-school adolescents are the future of the nation tomorrow and according to Etifit, (2022) are at risk of going mad, thrown into prison or rehabilitation centers as a result of crime, drug abuse and other related offences; with these in view, who will be the future Biochemists, medical doctors, applied physicists and engineers and so on?

Given the increasing prevalence of juvenile delinquency especially among in-school adolescents, there is therefore the need to examine the effect of Behavioural Rehearsal Therapy (BRT), in managing juvenile delinquencies among in-school adolescents in Ika South LGA, Delta State. Therefore, could it be said that Behavioural Rehearsal Therapy (BRT), will be effective in managing juvenile delinquencies among in-school adolescents in Ika South LGA, Delta State? Studies within the reach of the researcher showed most of the previous interventions and studies centered on use of moral education that were not regarded as important academic aspect of education, corporal punishment, suspension, and implying knowledge and awareness of juvenile delinquency of which were on survey studies but, juvenile delinquency continued on the increase (Lohaman 2019 and Soetan 2021). Consequently, the study examined effect of Behavioural Rehearsal Therapy (BRT), in managing juvenile delinquency among in-school adolescents in Ika South LGA, Delta State.

2.1 Behavior Rehearsal Therapy and Juvenile Delinquency

Behaviour Rehearsal Therapy (BRT) is a behaviour therapy in which a client practices new behaviour in the consulting room, often aided by demonstrations and role playing by the therapist (Davidson, & John, 2020). It deals with behaviour observation, identification of undesirable behaviour and modification of undesirable behaviour. Behavioural Rehearsal Therapy is used primarily in helping the client to learn new ways of responding to specific life situations. This therapy was propounded by Bandura (1986) as a therapeutic method to train new response patterns, and as a procedure for bringing about attitude change and to provide client with insight into the developmental origin of his problems. Behaviour Rehearsal Therapy (BRT) state that once an undesirable behaviour is identified and modified, the individuals' thoughts, values and feelings also changes Keshu, (2019). Behaviour therapy deals with behaviour observation, identification of undesirable behaviour and modification of undesirable behaviour. This therapy has been found to be effective in managing maladaptive behaviour (Spence, 2018). Many researchers validate the effectiveness of Behavioural Rehearsal Therapy.

Anyamene, et al (2019), examined the effect of Behavioural Rehearsal Therapy in reducing aggressive behaviours among secondary school students in Gombe State. A sample of 81 students were selected through purposive sampling technique, the instrument was validated with reliability coefficient of 0.80. The finding revealed that behaviour rehearsal therapy was efficacious. It was then suggested that it can be used in modifying delinquent behaviours. In another study carried out by Hershey and MacDavison (2022), they investigated the effects of Behavioral Rehearsal Therapy and Systematic Desensitization Technique in reducing conduct disorder among Chicago University students in United State of America. The result revealed that Behavioural Rehearsal Therapy and systematic desensitization technique significantly managed conduct disorder among Chicago University students more than Systematic Desensitization Technique.

Egbochuku and Obodo (2019) carried out a study on Efficacy of Behavioural Rehearsal Technique in managing Panic Disorder among in-school adolescents in Ibadan Metropolis. The study was a quasi-experimental design with one independent variables. The result showed that BRT was effective in managing Panic Disorder. Elendu (2021) investigated the effects of Behavioural Rehearsal Therapy in reducing truancy behaviour among males and females secondary school students in Isikwate. The finding showed that Behavioural Rehearsal Therapy was very effective in the reduction of truancy behaviour among the students. Catherine (2019) examined the effect of Behavioural Rehearsal Therapy in reducing aggressive behaviour among secondary school adolescents in South-South Zone, Nigeria. The sessions lasted for 8 weeks. Quasi- experimental research design of pre-test, posttest and control group was used. The population consisted 245 aggressive students and 81 students were sampled using purposive sampling technique. Instrument used for data collection was Buss-Pery Aggressive Questionnaire (BPAQ) developed (1992), with reliability of 0.80. Data collected were analyze using (ANOVA).The finding of the study revealed that Behavioural Rehearsal Therapy was effective in reducing aggressive behaviours and so, therapists can adopt it in counseling and modifying other antisocial behaviours so, it can be recommended for practicing counselors in handling cases like cultism, fighting and exam malpractices. Despite numerous efforts made by previous researchers in finding lasting solution to the problem of juvenile delinquency, the problems still poses a great challenge to counsellors and other professionals hence the need to examine the effects of Behavioural Rehearsal Therapy on the management of juvenile delinquency among in-school adolescents.

2.2 Aims and Objectives

1. To determine the differences in the pre-test and post-test juvenile delinquency scores of in-school adolescents exposed to BRT treatment
2. To find out if there is difference in the pre-test and post-test juvenile delinquency scores of in-school adolescents exposed to BRT treatment and those in the Control group

2.3 Hypotheses

1. There is no significant difference in the pre-test and post-test of Juvenile Delinquency mean score among in-school adolescents exposed to Behaviour Rehearsal Therapy.
2. There is no significant difference in the pre-test and post-test of Juvenile Delinquency mean score among in-school adolescents exposed to Behaviour Rehearsal Therapy and those in the Control Group.

3.0 METHODOLOGY

The study adopted a Quasi-experimental design using pre-test post-test, non-equivalent control group. Two (2) hypotheses were formulated to guide the study. The target population consisted of all two hundred and twenty (220) in-school adolescents in Ika South Local Government Area, Delta State. Multi-stage random sampling technique was adopted and used to select 88 in-school adolescents in Ika South Local Government Area, Delta State who are juvenile delinquent. The participants were randomly assigned to experimental and control groups. The instrument used for pre-test and post-test was a questionnaire titled; Juvenile Delinquency Inventory (JDI). The content validity of the instrument was ascertained by three experts. Cronbach Alpha statistics was used to obtain a reliability coefficient of 0.81. The instrument was used to collect data for pre-test scores for both experimental and control group which was followed by a six weeks treatment of the experimental group while the control group was not treated, at the end of the treatment session, both experimental and control group were post-tested using the same instrument and the questionnaire was retrieved immediately from the respondents. The data collected were analyzed using inferential statistics of paired sample t-test, Fisher's LSD Post hoc multiple comparisons and Analysis of Covariance (ANCOVA).

3.1 Treatment Procedure

The study was conducted as follows:

Stage 1: Pre-test Assessment

Stage 2: Treatment

Stage 3: Post-test Assessment

The first step was the pre-testing of participants in the experimental and control group. The stage two was the treatment of the experimental groups using Behavioral Rehearsal training therapy, while the control group will be the non-attention group. Stage three was the post-test assessment of the participants in the experimental and the control groups.

Stage 1: Pre-test Assessment

The researcher administered the instrument as the pre-test assessment on all the participants in the experimental and the control groups. This pretest formed the first part of the pre-treatment assessments. The purpose of this was to screen the participants in order to identify those eligible for the study and at the same time to obtain the pre-test scores. The data that was collected formed the baseline proforma with which the post-test scores were compared after which the post-test assessment was done.

Stage 2: Treatment Assessment

This is the experimental stage, which commenced a week after the pre-test assessment where the treatment packages were given to the participants. The treatment package was Behavioral Rehearsal training and Non-attention Control group. No treatment was given to the participants

in the Control group. Experimental group were treated using BRT. The treatment group met for six weeks. Each week run for two sessions for 45 minutes per session.

Stage 3: Post-test Assessment

At the end of the treatment session which lasted for six weeks, the two groups, the experimental and the control groups were post-tested by administering the same instrument used for the pre-test, after which their results was compared at the end of the treatment procedure.

4.0 RESULTS AND DISCUSSION

Hypothesis 1: There is no significant difference in the pre-test and post-test of Juvenile Delinquency mean score of in-school adolescents exposed to Behaviour Rehearsal Therapy.

Table 1: Paired Sample t-test of Pre-test and Post-test of Mean Scores on Management of Juvenile Delinquency among in-school adolescent in Ika South Exposed to BRT Treatment.

Test	N	Mean	Standard Deviation	T	Sig. (2-tailed)
Pre-test	44	137.40	31.35	7.521	.000
Post-test	44	99.87	17.82		

$\alpha = 0.05$

Table 1 shows a paired sample t-test of 7.521, testing at an alpha level of 0.05, with a p-value of .000. Since the p-value is less than an alpha level of 0.05, the null hypothesis which states that "There is no significant difference in the pre-test and post-test of in-school adolescents exposed to Behavioral Rehearsal Therapy." is rejected. Consequently, Behavioral Rehearsal Therapy is significantly effective in the management of Juvenile Delinquency among in-school adolescent in Ika South Local Government Area, Delta State.

Hypothesis 2: There is no significant difference in the pre-test and post-test of Juvenile Delinquency mean score of in-school adolescents exposed to Behavioral Rehearsal Therapy and those in the Control group.

Table 2: Paired sample t-test of Juvenile Delinquency scores of participants exposed to BRT and those in the Control group at Pretest

Treatment	N	Mean	Std.Deviation	t	Sig. (2-tailed)
Experimental	44	137.40	31.352	-8.077	.000
Control	44	125.925	19.499		

$\alpha = .05$

Table 2 shows a calculated t value of -8.077 and a p value .000 testing at an alpha level of .05, the p value is less than the alpha level, so, there is a significant difference in Juvenile

Delinquency mean scores of participants exposed to BRT and those in the Control group at pre-test. Hence the need to use pre-test scores as covariate.

Table 3: Mean and Standard Deviation in Juvenile Delinquency mean Scores of participants Exposed to BRT and those in the Control group at Post-test

Treatment Group	N	Mean	Std. Deviation
Experimental	44	103.75	19.095
Control	44	149.556	14.704

Table 3 shows the mean and standard deviation in shyness mean scores of participants exposed to BRT and those in the control group at post-test as 103.75 and 19.095 for the experimental group and 149.556 and 14.704 for the control group respectively.

Table 4: ANCOVA of Juvenile Delinquency scores of participants exposed to BRT and those in the Control group at Post-test

Source	Type III SS	df	MS	F	Sig.
Corrected Model	42812.179 ^a	2	21406.089	564.875	.000
Intercept	1038.438	1	1038.438	27.403	.000
Pretest	15454.498	1	15454.498	407.821	.000
Group	11647.478	1	11647.47	307.260	.000
Error	8829.597	233	37.895		
Total	292219.000	236			
Corrected Total	51641.775	235			

a. R Squared = .829 (adjusted R Squared = .828) $\alpha = .05$

Table 4 shows a calculated F value of 307.260 and a p value .000 testing at an alpha level of .05, the p value is less than the alpha level, so, the null hypotheses which states that “There is no significant difference in the pre-test and post-test of Juvenile Delinquency mean score of in-school adolescents exposed to Behavior Rehearsal Therapy and those in the Control group” is rejected. Consequently, there is a significant difference in post-test mean scores of participants exposed to BRT and those in the Control group. Hence the need for a post-hoc analysis.

Table 5: LSD Post-hoc Pairwise Comparison in Juvenile Delinquency Mean Scores of Participant Exposed to BRT and those in the Control group at Post-test

(I) Group	(J) Group	Mean Difference (I-J)	Std. Error	Sig. ^a
Experimental	Control	-45.806*	.862	.000

Control	Experimental	45.806*	.862	.000
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*. The mean difference is significant at the .05 level.

a. Adjustment for multiple comparisons: Least Significant Difference (equivalent to no adjustments).

Table 5 shows a mean difference of -45.806 and a p-value .000, since the mean difference is negative it shows that BRT is more effective in managing Juvenile Delinquency compared to the control group hence the results obtained from tables 2, 3 and 4 above, the hypothesis which states that there is no significant difference in the post-test of juvenile delinquency mean score of in-school adolescents exposed to Behavior Rehearsal Therapy and those in the Control group is rejected.

5.0 DISCUSSION OF THE FINDINGS

The first hypotheses which state that there is no significant difference in the pre-test and post-test of Juvenile Delinquency mean score of in-school adolescent exposed to Behaviour Rehearsal Therapy was rejected. Meaning that BRT was effective in managing Juvenile Delinquency among in-school adolescents exposed to BRT treatment. This finding is in collaboration with the study of Anyamene, et al (2019) which investigated the efficacy of BRT on the reduction of cultism tendency among tertiary institution students, the finding indicated that those in the treatment groups experienced a significant reduction in cultism tendency over the course of eight weeks treatment. This finding is also supported by the studies of Hershey and MacDavidson (2022) and Catherine (2019) that BRT led to significantly reduced symptoms of delinquencies among in-school adolescents, thus, BRT is effective in managing Juvenile delinquency among in-school adolescents.

The second hypothesis which predicted that there would be no significant difference between the experimental and control group was rejected based on the results. The difference between the treated groups and the control group is as a result of counselling that has taking place. This finding finds congruence with Elendu (2021) who found out that BRT could manage negative behaviour such as Juvenile Delinquency. This result agrees also with the study by Spence, (2018) that counselling therapy can manage crime tendency, anxiety and depression. The reason for this reduction of their delinquency behaviour by the therapy against the Control group may be as a result of the six weeks of treatment with BRT while the Control was not treated.

6.0 CONCLUSION

Based on the findings of this study, it is, therefore, concluded that Behaviour Rehearsal Therapy was effective in managing Juvenile Delinquency among in-school adolescents. This was significant from their pre-test and post-test mean scores.

6.1 Recommendation

1. School counsellors should make use of Behaviour Rehearsal Therapy when counselling in-school adolescents who are delinquents.

2. Researchers should take advantage of the data used in this study to serve as a reference for further research work to promote educational gains, as well as manage juvenile delinquency among in-school adolescents
3. It is recommended that the BRT treatment therapy be integrated into curriculum for trainee counsellors who should in turn sensitize teachers and students in their schools on the effectiveness of the treatment. This would go a long way to help manage Juvenile delinquency among in-school adolescents.

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