

Addaiyan Journal of Arts, Humanities and Social Sciences

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(An international Publisher of Research & Academic Resources)

Journal Homepage: <https://aipublisher.org/projects/ajahss/>

ISSN: 2581-8783 (Online)

DOI: 10.36099/ajahss.3.9.4

Effect of Rational Emotive Behavioural Therapy (REBT) on Reduction of Restive Behaviour among Enrolled in Counselling, Psychology and Sociology Education (CPSE)**Dr. N. T. Egeni***, **Dr. Damian C. Ncheke¹**, **Dr. S. S. Umah²**, **Dr. Esther E. Enajedu³**, **Chisom, E. Egwim⁴**, **Dr. Temishi, M. Onwordi⁵**, **Ngozi Uzoagba⁶**, **Dr. Vera Victor-Aigbodion⁷**¹*Department of Educational Foundations, University of Nigeria, Nsukka*²*Department of Educational Foundations, University of Nigeria, Nsukka*³*Institute of Ecumenical Education, Thinker's Corner Enugu*⁴*School of Foundation/General Studies, Delta State School of Marine Technology, Burutu, Delta State.*⁵*Department of Educational Foundations, University of Nigeria, Nsukka*⁶*School of Foundation/General Studies, Delta State School of Marine Technology, Burutu, Delta State.*⁷*Department of Medical Library, College of Medicine, University of Nigeria, Enugu Campus*⁸*Department of Educational Foundations, University of Nigeria, Nsukka***Corresponding Author***

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Article History

Received: 11.09.2021

Accepted: 20.09.2021

Published: 25.09.2021



Abstract: The study investigated the effect of rational emotive behavioural therapy (REBT) on reduction of restive behaviour among undergraduate students. The need for the study came as a result of the increasing rate of restive behaviour of undergraduate students to which the researchers sought to find solutions. Pre-test-post-test randomized control trial experimental design was adopted by the researchers for the study. Sixty-four (54) counselling, psychology, and sociology education undergraduate students who were drawn through proportionate stratified random sampling technique constituted the sample for the study. The students were randomly assigned to experimental (29) and control (25) groups. Restive Assessment Scale for Students (RASS) and Reducing Restive Behaviour Scale (RRBS) were used for data collection. RASS and RRBS were properly validated by experts in test development and the internal consistency reliability indices of the items were estimated as 0.79 and 0.81 respectively using the

Cronbach Alpha method. Before the commencement of the testing and treatment package, the researchers assured the participants of confidentiality of interactions and personal information as they work together in self-disclosure. Thereafter, a pre-treatment assessment (pre-test) was conducted using the RASS and RRBS in order to collect baseline data (Time 1). After that, the experimental group was exposed to 90 minutes of the REBT programme twice a week for a period of 6-weeks. The treatment took place between September and November 2019. Post-test (Time 2) assessment was conducted 1 week after the last treatment session. Besides, a follow-up assessment was conducted after two months of the treatment (Time 3). Data collected were analyzed using repeated-measures analysis of variance. The findings of the study revealed that the efficacy of rational emotive behavioural therapy on the reduction of restive behaviour among counselling, psychology, and sociology education undergraduate students was significant at post-test and follow-up measures. One of the implications of the findings is that if

undergraduate students are not properly counselled, their restive behaviour will continue to increase. Based on the findings, it was recommended among others that Federal Government or relevant education authorities should provide enough guidance counsellors in the various institutions of higher learning who will assist in the counselling of the students on the dangers of restive behaviour using REBT.

Keywords: *Rational Emotive Behavioural Therapy, Restive Behaviour*

INTRODUCTION

The computer age world has brought so many distractions to society especially students in various institutions of learning. This phenomenon has made so many students especially those in higher institutions to develop behavioural problems in schools such as restive behaviour. This act of restive behaviour is inimical to human existence. Restive behaviour has assumed a global dimension among students in all the continents of the world. Mba (2013) posits that this common behavioural problem among students has led to series of crisis, disorderliness, and anarchy in most developed and developing countries including Nigeria. Behaviour that relates with restiveness could be regarded as restive behaviour. According to Chikuezi (2009), restiveness is a combination of actions or conducts that constituted or run contrary to accepted societal norms and standards. Farlex (2016) terms restiveness as the feeling of impatience, uneasiness induced by eternal coercion. In this present study, restiveness is actions and reactions of students towards persons, things, circumstances around them that run contrary to accepted rules, regulations, and general conduct in the school. Chime (2019) enumerated restive behaviours that run contrary to school norms and standards to include fighting, quarrelling, destruction of school property, bullying, violent protests, molesting of teachers, stealing, cultism, disrespect, noise-making, examination malpractice, smoking of Indian hemp, cigarettes among others. In the context of this study, it is presumptive that the foregoing behaviours are some of the restive behaviours undergraduate students exhibit and infringe on school rules, regulations and general conduct.

Restive behaviour may have an effect on students' personality traits and their learning. Oruwari (2006) pointed out that restive behaviour affects the self-actualization and self-efficacy, self-control, distractibility, impulsiveness, and organizational behaviour of the students. Different experts have found a number of problems associated with restive behaviour, example, low achievement of students and their increased physical and psychological problems (Ronald and Seymour, 2007), anxiety (Jambawal, 2012; Sitaram, 2015), irregularity, confusion, and irresponsibility (Kruase, 2015).

Different factors appear to contribute towards restive behaviour among university students particularly, lack of guidance and encouragement, inappropriate time management skills, emotional stress, social problems, overconfidence among others. Igbo and Akpa (2013) stated that irrational behaviours of the students may develop in them restive behaviour tenancy which leads to low achievers.

According to Ngwokabuenui (2015), restive behaviour appears as an attitude or behavioural trait usually associated with inappropriate learning techniques, low achievement, deceptive excuses, anxiety and emotional stress, irrational thinking, low self-efficacy, and lower self-control. Chime (2019) and Danesy (2011) stated that students exhibit restive behaviour when they are unable to set the pace of their learning to meet high-performance expectations within a due course of time. Restive behaviour appears to make

university students copy or imitate the behaviour of militants in the area which they display in the school undetected. Such behaviours include being hostile to teachers, destruction of school property, aggressiveness, bullying, molestation, fighting, stealing, protest, assault, secret cult activities, general disobedience to school rules and regulations among others. It seems a common practice that university students put off their academic work and engage in hostility, violence, kidnapping, robbery, brigandry, wanton destruction of lives and property leading to a phenomenon called restive behaviour.

Restive behaviour is commonly used to denote actions and reactions of students towards persons, things, circumstances around them that run contrary to acceptable rules, regulations and general conduct in the school. Danesy (2011) blamed restiveness in the school system on youthful exuberance, imitation of militant activities observed by the students, watching violent video films, poverty, and the inability of schools to organize counselling programmes for students. Restive behaviour adversely impacts on students' personality, their learning and achievement almost at all levels of studies and in all subjects. Ngwokabuenui (2015) concluded that high-level restive behaviour makes students unable to regulate and organize themselves to achieve goals causing them depression, anxiety, and stress. It is not a gender-restricted or gender-based trait rather works across the gender and affects both the sexes (Ngwoke, 2004). Hgbbo and Ekpa (2013) found an equal level of restive behaviour among male and female students with a significant effect on their achievement in the subject of English Language. Psychological effects of restive behaviour include emotional instability and mental stress (Nwachukwu, 2008). Sahara (2013) found the relationship between restive behaviour tendency and academic stress among students; and an increase in self-control decreased the restive behaviour.

Research indicates that restive behaviour is a global issue that constitutes civil disobedience, violence, crime, disorderliness, and destruction of lives and property by youths. (Bokus & Longbab, 2002; Okala, 2004). Uriah, Egbezor, and Ololube (2014) opine that various forms of challenges and apprehensions impact on modern nations economically, socially, and politically leading to deviant and anti-social behaviours among undergraduate students is regarded as restive behaviour. Furthermore, research reveals that the habits of restive behaviour can negatively affect students' academic positions, life quality, and performance (Chime, 2004). Restive behaviour affects academic performance negatively (Danesy, 2011) and is also related to increased stress (Kruase, 2015), depression, and anxiety (Okeke, 2016). According to Okala (2004), most people link restive behaviour with violence, deviant and anti-social behaviours; an act that violates social expectation and elicits social disapproval.

The tendency of restive behaviour can also lead to guilt, decreased confidence, and stress, eventually resulting in numerous crimes (Parrish, 2010). In addition, there is a correlation between high levels of restive behaviour and low levels of mental health (Uriah, Egbezor & Ololube, 2014). Bokus and Longbab (2013) posit that students who engage in restive behaviour experience negative consequences such as failing courses, extending periods of study, and terminating university education. The negative consequences of restive behaviour on academic performance and emotional and physical well-being reveal the need for intervention studies on this topic (Hgbbo & Ekpa, 2013). Such intervention includes rational emotive behavioural therapy (Leo, 2017).

Studies stress the importance of developing cognitive, emotional, affective, and behavioural skills to cope with restive behaviours (Chukuei, 2009; Chime, 2004). Gall; Gall and Borg (2007) addressed the affective aspect of restive behaviour in the form of feeling personal distress about an individual's inability to control himself. Chukuezi (2009) stated that many people who exhibited restive behaviours in cognitive, emotional/affective, and behavioural dimensions repeat these behaviour patterns at certain periods of their lives at different intervals and that this repetition is a restiveness bend. Danesy (2011) emphasized that the primary trigger of restive bends is an individual's ways of thinking which is the basis of rational emotive behavioural therapy.

Rational emotive behavioural therapy stated that people exhibits restive behaviour because of established ways of thinking and within this framework, REBT highlights the importance of replacing irrational beliefs with rational ones (Ellis, 1993). Numerous experimental studies have focused on the management of restive behaviour (Adaah, 2015; Ejoh, 2016; Enofa, 2017). According to Rozental and Carlbring (2013), the lack of effective intervention programmes have been emphasized in both local and international literature. Meanwhile, experimental studies in managing restive behaviours are new and quite limited in developed countries which include Turkey (kansmir, 2010; Ozer & Altun, 2011; Balks & Duru, 2012). In the Nigerian context, there is a dearth of empirical evidence on the efficacy of REBT in the management of restive behaviour among undergraduate students in Enugu State, Nigeria. From the foregoing, this research was necessitated to investigate how to use REBT programme in reducing and overcoming the widespread restive behaviour among undergraduate students which remains vital as long as it continues to have negative consequences for those students. In the REBT context, according to Ellis (1993), the rational tendencies are self-helping while the irrational tendencies are self-defeating and unhelpful. Rational emotive behavioural therapy is a therapy that is aimed to help an individual to reason properly and shun irrational thoughts (Leo, 2017). According to Ellis (1957), irrational thinking originated in the early illogical learnings that the individual is biologically disposed to and that which is acquired more specifically from parents and the culture. Because restive behaviour is connected to dysfunctional beliefs such as self-defeating, socially defeating and negative thinking, the use of rational emotive behavioural therapy (REBT) has been suggested as a remedy (Umah, 2015). Leo (2017) posits that in REBT, students who exhibit restive behaviours are taught to dispute their irrational thinking and beliefs and show the students that whenever unpleasant and unfortunate activating events occur in people's live, they have a choice of making themselves feel healthily and self-helping sorry, disappointed, frustrated or annoyed. Thus, this study assessed the effectiveness of a REBT-based programme in the reduction of undergraduate students' restive behaviours. The researchers, therefore, tested the hypotheses that there is a significant effect of Rational Emotive Behavioural Therapy on the reduction of restive behaviours of undergraduate students.

Methods

Design of the Study

The pre-test-post-test randomized control trial experimental design was adopted. Participants were randomized into experimental and control groups.

Participants

A total of 54 undergraduate students comprising male (n=29) and female (n=25) from sampled public universities in Enugu State Nigeria who met the inclusion criteria constituted participants for the study. G-power, version 3.1 gave 0.91 which is adequate sample size for this study (Faul, et al., 2007). Fifty-four (54) counselling, psychology and sociology education students who were drawn through proportionate stratified random sampling technique constituted the sample for the study. The students were stratified based on their area of disciplines (counselling, psychology, and sociology) from where the students were proportionately sampled (20 counselling students, 18 psychology students, and 16 sociology students). A total of 274 students showed interest and volunteered to participate in the intervention programme. All the 274 students who volunteered to participate in the study were screened for eligibility based on the eligibility criteria set by the researchers, including that: (1) the students must be undergraduate students in counselling, psychology, or sociology education; (2) students must have an element of restive behaviour. Volunteers who did not meet all the inclusion criteria were excluded. After that, the 54 undergraduate students who met all the inclusion criteria were randomly assigned to experimental and control groups conditions using a simple randomization procedure (participants were asked to pick 1 envelope containing pressure-sensitive paper labeled with either E-experimental group or C-control group) from a container. The students were randomly assigned to experimental (29) and control (25) groups as shown in Figure 1.

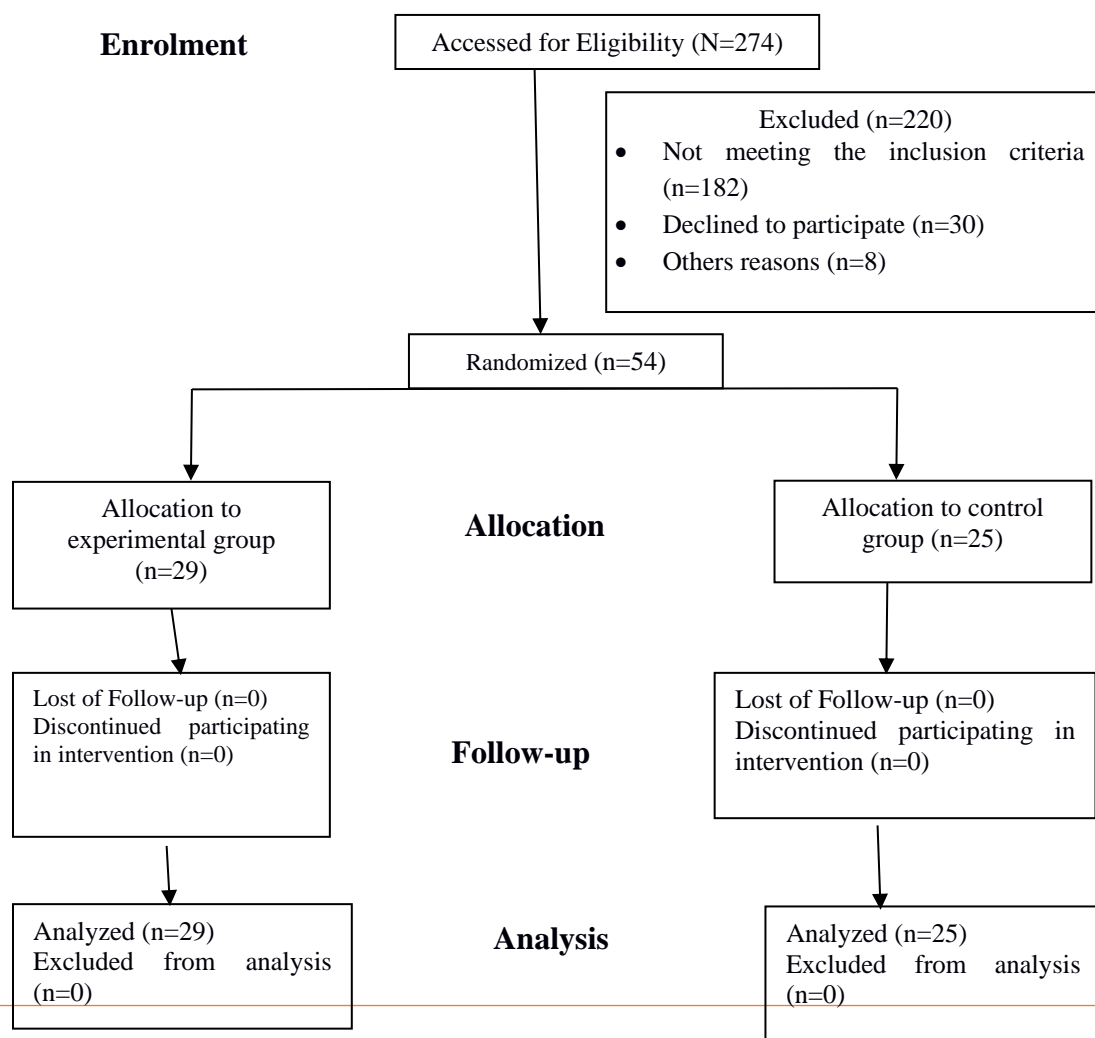


Fig. 1: Sampling Distribution for the Study**Measures****Demographic Questionnaire**

A demographic questionnaire was administered to the students (participants) in order to obtain their demographic characteristics such as gender, age, and location. Each of the participants was instructed to tick the appropriate demographic information that may be applicable to him or her.

Tale 1 shows that there is a significant difference in the number of male and female undergraduate students who participated in the study. The same results apply to the age, tribe, and religion of the participants.

Table 1: Demographic Characteristics of the Participants

Demographic Characteristics	REBT Group	No. Intervention Group	N(%)	X ²	P
Gender					
Male	12	10	22(45.66)		
Female	17	15	32(51.14)	4.12	.002
Age					
≤20	5	4	9(14.42)		
20-30	24	21	45(59.68)		
≥30	2	1	3(4.69)	32.56	.000
Tribe					
Igbo	17	15	32(47.61)		
Others	12	10	22(32.19)	10.05	.000
Religion					
Christian	24	21	45(32.82)		
Moslem	5	4	9(21.21)	6.08	.000

Restive Assessment Scale for Students (RASS)

The restive Assessment Scale for Students (RASS) developed by the researchers was used for data collection. RASS is a 20-item scale with five response options of Not AT All (1), Almost Never (2), Sometimes (3), Nearly Always (4), and Always (5), which was properly validated by three specialists in the area of test development. An example of item statement on RASS is “use of insulting words on teachers”. A minimum of 20 points and a maximum of 100 points can be earned on the scale, with higher scores indicating greater restive behaviours. However, the initial development of the RASS involved 33 items but after construct validation, the number of the items was reduced to 20. In order words, 13 items of RASS did not survive the construct validation. After that, the internal consistency reliability index of 0.79 was obtained using the Cronbach Alpha method for the 20 items of RASS that survived the construct validation. Besides, the test-re-test reliability of the RASS was established to be 0.84 using Pearson’s Product-Moment Correlation Coefficient. This was done by re-administering the RASS after the 2 weeks of the first administration.

Reducing Restive Behaviour Scale (RRBS)

Reducing Restive Behaviour Scale (RRBS) developed by the researchers is a 15-item scale with five response options of Not AT All (1), Almost Never (2), Sometimes (3), Nearly Always (4), and Always (5), with lowest and highest scores of 10 and 50 respectively. An example of an item statement on RRBS is “I respect my teachers and equally obey the rules and regulations of the school”. However, the initial development of the RRBS involved 23 items but after construct validation, the number of the items was reduced to 15. In order words, 8 items of RRBS did not survive the construct validation. After that, the internal consistency reliability index of 0.84 was obtained using the Cronbach Alpha method for the 15 items of RRBS that survived the construct validation. Besides, the test-re-test reliability of the RRBS was established to be 0.88 using Pearson’s Product-Moment Correlation Coefficient. This was done by re-administering the RRBS after the 2 weeks of the first administration.

Procedure

A demographic questionnaire was administered to the eligible participants to access their age, gender, and location as undergraduate students. In order to remove randomization bias, information from the demographic questionnaire were not made known to the person who randomized the participants to experimental and control conditions. Before the commencement of the testing and treatment package, the researchers assured the participants of confidentiality of interactions and personal information as they work together in self-disclosure. Thereafter, a pre-treatment assessment (pre-test) was conducted using the RASS and RRBS in order to collect baseline data (Time 1). After that, the experimental group was exposed to 90 minutes of the REBT programme twice a week for a period of 6 weeks. The treatment took place between September and November 2019. Post-test (Time 2) assessment was conducted 1 week after the last treatment session. However, a follow-up assessment was conducted after 2 months of the treatment (Time 3). Data collected from the experimental group at each evaluation were compared to that from the non-intervention control group.

Intervention Programme

The programme that was used in this study was designed by Hgbbo and Ekpa (2013) to reduce the experimental group’s ability to manage their restive behaviour and was based on Ellis’ Rational Emotive Behavioural Therapy. According to Hgbbo and Ekpa (2013), Ellis (1993) outlined ten fundamental principles of rational emotive behavioural therapy and these principles guided the development of eight, 90 minutes group education sessions; a general plan for the whole process was prepared as well as specific plans for each session. The experimental programme contents focused on rational thoughts, intermediate thoughts related to restive behaviour. During each of the treatment sessions, 30 minutes were spent on the rational thoughts while the remaining 60 minutes were spent on the intermediate thoughts or irrational beliefs and discussion sessions. In addition, based on cognitive, affective, and behavioural techniques were used together. The contents of the sessions were supported by purposive activities, visual materials (illustrations, diagrams among others), and homework.

Each session began with a summary of the previous session (except for the first session) followed by discussing the homework, explaining the current session's agenda, and warm-up activities. The sessions ended with summarizing, giving feedback and homework (except for the eighth session), and a closing activity.

The general outlines of the sessions and brief information are provided below:

- To help students become familiar with the basic tenets of REBT-based psycho-educational programme and determine their personal goals.
- To ensure that students were informed about rational emotive behavioural therapy.
- To assist students in recognizing their restive behaviours and restive bends as well as help them to adjust by understanding the relationship between the action desired and continuity.
- To help students gain awareness of the consequences of fighting is expulsion.
- To help students realize the habits that were preventing permanent learning and to help them understand the reasons for success rather than failure.
- To help students realize a strong possible long-term influence on the self-esteem of permanently avoiding unpleasant behaviours.
- To help students realize their habits related to only putting forth the effort to pass courses and to help them gain skills for permanent learning.
- To help students realize possible false rational thoughts that can occur during examination.
- To help students to increase their cognitive awareness related to obeying school rules and regulations.
- To help students develop skills for breathing, relaxation, and safe place techniques in cases of extreme stress.

The manual as adopted from Hgbbo and Ekpa (2013) was written in English and can be accessed from <http://www.researchgate.net/journal.Effects-of-Rational-Emotive-Behavioural-Therapy-on-adjustment-of-restive-behaviour-of-University-students>.

Data Analysis

The Effect of Rational Emotive Behavioural Therapy on the reduction of restive behaviours among undergraduate students in public universities in Enugu State, Nigeria was established statistically using repeated measures analysis of variance (ANOVA). Partial Eta squared and adjusted R^2 values were used to report the effect size of the intervention on the dependent measure. The assumption of the sphericity of the test statistic was tested using the Mauchly test of sphericity which was not significant (Mauchly $W=0.768$, $P=.647$); implying that the assumption was not violated. Thus, the variance of the differences between all combinations of the related measures is equal. The analysis was done using Statistical Package for Social Sciences Version 8.0.

Table 2: Repeated Analysis of Variance for the effect of Rational Emotive Behavioural Therapy on the reduction of restive behaviour among undergraduate students

	Time	Measures	Group	Mean (SD)	F	P	n ²	ΔR^2	95%CI
1	Pre-treatment	RASS	Experimental	82.20(6.54)					
			Control	84.15(5.04)	.131	.811	.004	.008	0.01,1.76
2	Pre-treatment	RRBS	Experimental	42.52(10.23)					
		RASS	Control	41.92(11.51)	.451	.651	.006	.010	0.24,1.99
3	Pre-treatment	RASS	Experimental	20.52(2.43)					
			Control	73.42(9.21)	868.131	.000	.821	.880	802.31,901.14
		RRBS	Experimental	15.94(3.52)					
		RASS	Control	41.70(6.52)	107.521	.000	.687	.751	100.43,120.71
RRBS	Experimental	20.60(3.01)							
	Control	72.10(8.21)	712.421	.000	.801	.816	810.31,694.32		
RRBS	Experimental	15.02(1.52)							
Control	40.96(1.52)	120.663	.000	.792	.806	109.55,146.72			

RASS = Restive Assessment Scale for Students

RRBS = Reducing Restive Behaviour Scale

Mean = (SD), Mean = (Standard Deviation), P= Probability value, CI = confidence interval, n² = effect size, ΔR^2 = adjusted R²

Table 3: Test of within-subjects effects for the intervention group

Source	Type III Sum of Squares	DF	Mean Square	F Sig.	Sig.	Partial Eta Square
Measure: RRBS						
Time						
Sphericity Assured	94.325	2	47.722	11.624	.000	.780
Greenhouse-Geisser	94.325	1.962	48.641	11.624	.000	.780
Huguh-Feldt	94.325	2.000	47.721	11.624	.000	.780
Lower-bound	94.325	1.000	95.445	11.624	.000	.780

Schematic Representation of the Method and Materials

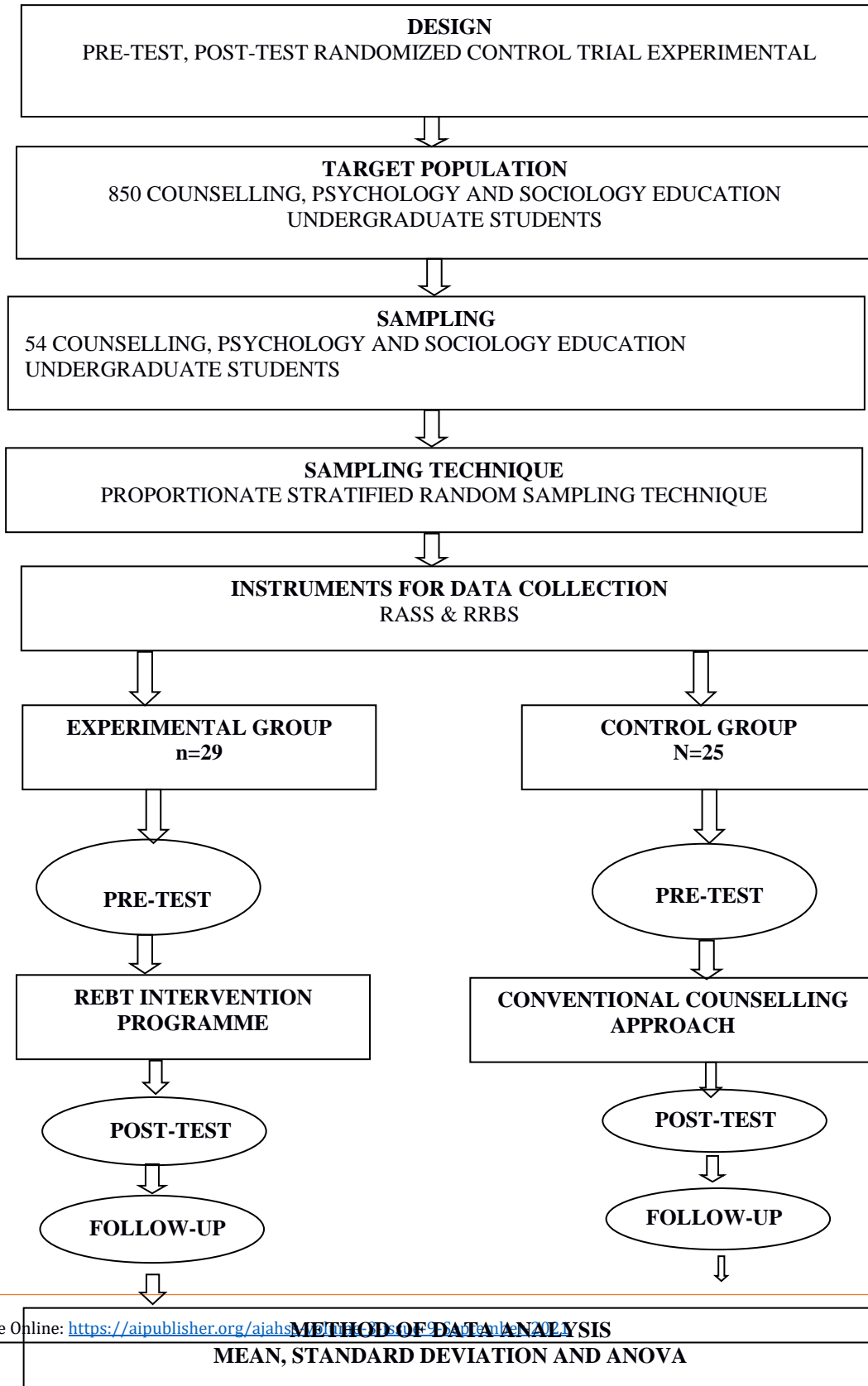


Table 4: Post hoc test for the significant effect of time

(I) Time	(J) Time	Mean difference (I-J)	Std. error	Sig.
Pre-treatment	Post-treatment	62.551	.008	.000
	Follow-up	62.125	.007	.000
Post-treatment	Pre-treatment	-62.551	.008	.000
	Follow-up	-.434	.008	.000
Follow-up	Pre-treatment	-62.125	.007	.000
	Post-treatment	.435	.008	.000

Results

Table 2 reveals that there was no significant difference between the experimental and control groups in initial reducing restive behaviour among counselling, psychology, and sociology education undergraduate students as measured by RASS, $F(1,63)=0.131$, $P=.811$, $n^2=0.004$, $\Delta R^2=.008$. At the post-treatment and follow-up measures, the efficacies of rational emotive behavioural therapy on the reduction of restive behaviour among counselling, psychology, sociology education undergraduate students were significant, $F(1,63)=868.131$, $P=.000$, $n^2=.821$, $\Delta R^2=.880$ and $F(1,63)=712.421$, $P=.000$, $n^2=.802$, $\Delta R^2=.816$.

Similarly, using RRBS as a measure, there was no significant difference in the initial reducing restive behaviour of the participants, $F(1,63)=0.451$, $P=.651$, $n^2=.006$, $\Delta R^2=.010$. At the post-treatment and follow-up measures, the efficacies of rational emotive behavioural therapy on the reduction of restive behaviour among counselling, psychology, and sociology education undergraduate students were significant, $F(1,63)=107.521$, $P=.000$, $n^2=.687$, $\Delta R^2=.751$ and $F(1,63)=120.663$, $P=.000$, $n^2=.792$, $\Delta R^2=.806$.

Table 3 revealed that the mean restive behaviour scores of the intervention group were significantly different at pre-treatment, post-treatment and follow-up measures, $F(2,33)=47.722$, $P<0.05$, $n^2=.780$.

Table 4 gives us the significance level for differences between the individual time points. It shows that there were significant differences in reducing restive behaviours of the undergraduate between post-treatment and pre-treatment ($P=0.000$) and between pre-treatment and follow-up ($P=0.000$). This implies that the restive behaviours of the undergraduates drastically reduced after the intervention programme.

Discussion of the Results

The findings of the study revealed that at the post-treatment and follow-up measures, the efficacy of rational emotive behavioural therapy on the reduction of restive behaviours among counselling, psychology, and sociology education undergraduate students, was significant. These findings has shown the superiority nature of the REBT over the conventional counselling approach in the reduction of maladaptive behaviours among the students of higher learning. The students who were counselled on the dangers of restive behaviours using REBT were optimally motivated during the intervention sessions and that led to the drastic reduction in their restive behaviour after the intervention and even at the follow-up measures. This finding is similar to the findings of Hgbbo and Ekpa (2013) whose findings indicated that university students' restive behaviour scores decreased and that the decline was still observed on a

retention test after the students participated in a programme based on REBT, which aimed at reducing their restive behaviours. According to Hgbbo and Ekpa (2013), there was no significant change in the control group's scores, which indicated that the applied programme was effective and that the decline in the experimental group's restive behaviour scores occurred as a result of the group. In support of these findings are the findings of Emir (2010); Ozer and Altun (2011); Balks and Duru (2012); Adaah (2005); Ejoh (2016); Enofa (2017). Rational emotive behavioural therapy is a therapy that is aimed to help an individual to reason properly and shun irrational thoughts (Leo, 2017). Researchers have focused on the cognitive restructuring technique to address restive behaviours (Kagan, 2010; Uzun, 2013). Umah (2015) demonstrated that student's restive behaviour decreased following a rational emotive behavioural programme. Leo (2017) found out that in rational emotive behavioural therapy, students who exhibit restive behaviours are taught to dispute their irrational thinking and beliefs. Researchers also stress the importance of developing cognitive, emotional, affective, and behavioural skills to cope with restive behaviours (Chukuezi, 2009; Chime, 2004). Numerous experimental studies have focused on the management of restive behaviour (Adaah, 2015; Ejoh, 2016 and Enofa, 2017). The above findings validated the efficacy of REBT intervention for reducing restive behaviours among education undergraduate students in public universities in Enugu State, Nigeria. The implication of these findings is that if undergraduate students are not properly counselled, their restive behaviours will continue to increase.

Strength of the Study

This study no doubt explored an area that addresses the contemporary problems among students in Nigerian universities. The intervention is considered timely given the potential impacts of restive behaviour on students' academic achievement in universities. The intervention successfully validated the effectiveness of REBT in reducing restive behaviours among undergraduate students using a randomized control trial. The use of experimental and control groups enabled the researchers to compare both within-group factors and between-group factors.

Limitations

Like other empirical-based studies, this present study has some limiting factors. First, the researchers did not give treatment to the participants in waitlisted control group immediately. Secondly, we did not take into account of the clinical and psychological characteristics of the participants. With these limitations, the generalizability of the findings should be done with care. However, future studies should explore how to take care of participants in the waitlist control group immediately and also take care of the clinical and psychological characteristics of the participants.

Conclusion

Based on the aforementioned findings of the study, the researchers concluded that REBT is efficacious in the reduction of restive behaviours among undergraduate education students in public universities.

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