SOME USEFUL AMELIORATIVE BEHAVIOUR MODIFICATION THERAPIES FOR FREQUENTLY OBSERVED ADOLESCENTS' MISDEMEANOR IN NIGERIA

DR. (MRS) A.I. Ojeme

Institute of Education, University of Benin, Benin City

ABSTRACT: The purpose of this paper was to analyse the misdemeanor or crises associated with adolescent period of life in a bid to proposing some useful behavioural intervention techniques that could be used to ameliorate these adolescent crises or misdemeanor. The frequently observed adolescent crises mentioned or listed include (1) Family violence, and societal violence such as rape, cultism, armed robbery, kidnapping, internet fraud, drug abuse, assassination, among others. In this regard, the professional counselling psychologist remains a key factor in the curbing or tackling of adolescents deviant behaviour. This paper, therefore has put forward some useful behaviour modification therapies which include (i) operant conditioning (ii) cognitive restructuring, (iii) Aversive conditioning (iv) the use of confrontation (v)systematic desensitization (vi) use of contingency contracting, (vii) use of token economy, among others. The paper, therefore, recommends that all persons involved in moulding adolescents behaviour should gain mastery of these appropriate techniques and use them effectively.

KEYWORDS: Ameliorative, Behaviour Modification, Therapies, Adolescent Misdemeanor

INTRODUCTION

As Nigeria's population is increasing and with the manifest rising poverty levels, so is the population of adolescents and youths, not only on the rise, but also observed increase in deviant behaviour among this age group, usually under 25 years of age.

There is an observed increase in social decadence and moral laxity by the adolescents and youths as well as increase in school dropout, crime rate such as kidnapping, cultism, armed robbery, terrorism, assassination and rape, among others. These have become well known challenging national issues that do not augur well for the development of the Nigerian society. In recent times, the Nigerian society has also witnessed continuous bloodshed or wanton killings and destruction of properties by Boko Haram. Kidnapping has also become a common phenomenon and victims are held to ransom. The issue of drug abuse by adolescents is still a burning issue, that cannot be swept under the carpet. Jimoh (2012) found out that there is a high rate of drug abuse among adolescents. She noted further that adolescents used hypose-diatives to cope with stress steaming from poverty, frustration and parental neglect.

Surely while the solution to adolescents' misdemeanor would require multisectoral and multidiscipling approach, it is to be expected that counselling psychologists would play a leading role. In deploying the role of counselling psychologists as an intervention strategy in tackling adolescent and youth deviant behaviour, it is conceivable that behaviour modification therapies, could be useful in curbing deviant behaviour. Professional counsellors, have been well trained to apply these therapeutic modalities to ameliorate the conditions with problematic adolescents and youths.

Print ISSN: ISSN 2054-6297, Online ISSN: ISSN 2054-6300

This paper is designed to examine some procedures to adopt in ameliorating adolescents and youths misdemeanor and reinforcing desirable behaviour as well as examine the usefulness of behaviour modification therapies in curbing adolescents' maladaptive behaviour.

In pursuit of the purpose of this paper, the following sub topics would be discussed.

- i. Background to adolescents crises / misdemeanor in Nigeria
- ii. Behavioural therapeutic modalities applicable to ameliorating identified adolescent misdemeanor

Background to adolescents crisis / misdemeanor in Nigeria

Adolescent is a period of one's life between ages 12 to 20 for early developers or 13 to 22 for late developers as the case may be. It is a period of transition from childhood to early adulthood. In this stage of life, the individual wants to achieve emotional and economic independence from his or her parents and wants to identify with his or her peers. This period is highly marked by crisis for the adolescent as he or she strives to acquire independency and his own identify. The adolescent attitudes, values and behaviour could be influenced positively or negatively by his peer group.

It is a period when adolescents resist their parents' authority. Odigie (2013) asserts that during this period, parents and their adolescent children experience a transition in their relationship, from one in which parents have unquestioned authority to one in which the adolescent is granted reasonable independence or autonomy to make important decisions. It is a difficult period for parents, who wished to guide and monitor the progress of their adolescent towards self actualization in life.

Odigie (2013), further noted that the adolescent period is marked with great emotional stress, when children detach emotionally from their parents and seek to make their own choices about their activities, diet, time schedule etc. There is increased sociability with peers and risk taking behaviour as the adolescents strive towards acquiring necessary skills for survival in adulthood. Adolescents are observed to be highly involved in drug abuse, which greatly affect educational performance. Aligning with this opinion, Olatunde (2001) posited that those with poor academic records are those who taken drugs as aids for studies towards examination.

Furthermore, she observed that drug use by adolescents could increase their self-confidence, heighten pleasure, cope with feelings of depression and inadequacy and to facilitate communication.

There are other adolescents' crisis, that call for counselling intervention, the adolescents with attitudinal and behavioural problems such as exhibition of violence in the family and Society. Nigeria has witnessed heightened crisis, ranging from violence against young girls such as rape, rioting and looting citizens, killing, kidnapping or hostage taking, extortion of money from innocent citizens prostitution, internet rat, assassination, robbery and even bloodshed by members of a sect known as Boko Haram / Niger Delta militants. These are lawless activities that do not conform with societal norms. It is observed that a significant proportion of the perpetrators falls within the age group of the adolescents. It is in the light of this that this paper proposes the application of behavioural therapeutic modalities of counselling as viable intervention strategies to ameliorate adolescent crisis. Appropriate counselling at an

Published by European Centre for Research Training and Development UK (www.eajournals.org) early stage of adolescent misdemeanor could help in curbing or ameliorating these social vices.

Behavioural therapeutic modalities

The following behaviour modification techniques which are aimed at reinforcing adaptive behaviour in adolescents in the teaching and learning situation would be analysis.

- i. Operant conditioning
- ii. Cognitive restructuring
- iii. Aversive conditioning
- iv. Confrontation
- v. Systematic desensitization
- vi. Use of punishment
- vii. Use of contingency contracting
- viii. Use of token economy
- ix. Use of modeling, shaping, role playing and instruction

Operant Conditioning:

Thorndike (1874-1949), and skinner (1904-1992), are psychologists associated with operant conditioning. Thorndike established the basis while Skinner developed and popularized the concept of operant conditioning. Skinner believed that psychology should only study observable and measurable behaviour. He was primarily interested in changing behaviour through conditioning. From his lab experiments, he discovered that positive reinforcer help shape the desired behaviour. He therefore, developed the concept of operant conditioning, which involves the extinction of maladaptive behaviour and the reinforcement of adaptive behaviour. Operant conditioning techniques involve the use of positive and negative reinforcement to shape desired behaviour at least temporarily.

The use of operant conditioning techniques can be applied by the counsellor or therapist in handling adolescents' maladaptive behaviour. The therapist or counsellor, while applying positive reinforcement in operant conditioning must wait for the client to hit upon the correct response. Thereafter, the therapist will involve the use of verbal approving comments, such as paying rapt attention to what the client is saying, head-nodding, smiling and making other commendatory gesture as ways of encouraging constructive responses. It has been observed that the more often (within a given time period) a person rewards another person's behaviour, the more often the other person will behave in that manner. The above can be illustrated with a teaching-learning-situation, for example the more a teacher nods and agrees with what a particular students is saying, the greater the possibility that the student will continue to say things in that class, because such behaviour is rewarding.

Another basic technique in operant conditioning is the use of negative reinforcement to bring about desirable behaviour in adolescents. A negative reinforcer is a stimulus, the removal of which increases the strength of a response (Momoh, 1999).

Cognitive Restructuring:

Cognitive restructuring or cognitive techniques could be referred to as the process of knowing. It is designed to assist students understand themselves and their environments. Understanding themselves and their environments would enable students act appropriately in

problem situations. Teachers and counsellors could use this technique to curb adolescents problems by helping them to develop concept of values and desirable behaviour. Adolescents could make informed decisions when they understand their values and aspirations.

Aversive Conditioning

This is simply a technique, which involves the use of pain and discomfort to eliminate specific patterns of behaviour which the client wants to unlearn. Pain and discomfort are associated with undesirable behaviour to be unlearned. According to Morris (1982), this type of behaviour therapy has been used successfully to treat alcoholism, obesity and smoking. An example of aversive conditioning technique is provided by Morris (1982). He treated alcoholics by giving them a drug that produces extreme nausea when mixed with alcohol in the stomach. The people were instructed and encouraged to drink and each time they did, they became violently sick. Soon they felt sick just seeing a bottle of whiskey. Aversive conditioning could be successfully use to treat alcoholism and drugs addict in adolescents.

Confrontation

This technique is designed to make a client know his/her behaviour as perceived by others, which is quite different from how he/she views himself/herself. This method of behaviour modification therapy would enable the client to view himself/herself as viewed by others. The Counsellor, in handing adolescent's problem with this technique must first of all, ensure that the adolescent is in a prepared mood for the confrontation, in order to avoid hostile reactions from the adolescent. In essence, care needs to be taken by the counseller in applying this technique.

Systematic Desensitization:

Achenbach (1982), pioneered a procedure for reducing sever anxiety and phobic behaviour. This procedure is called systematic desensitization, which is a method for gradually reducing irrational fear. This technique according to Achenbach (1982) basically involves three procedural steps:

- (i) Training in deep muscle relaxation.
- (ii) Construction of a hierarchy of scene revolving around the feared situation, with each scene becoming progressively more anxiety-arousing, than the previous, and
- (iii) Paring of the imaginary visualized scenes with the state of relaxation. The goal of the therapist as stated by Egbochuku (2010) is to involve the client in relaxing, while actually confronting the anxiety-arousing situation. In other words, the therapist tries to make the client feel comfortable in situations in which he has previously been highly anxious or fearful. After a hierarchy has been established, the therapists teach clients to clear their minds to release tense muscles, and to relax. In some cases, drugs or mild hypnosis help the clients to relax (Morris. 1982). Once clients have mastered the techniques of deep relaxation, the therapist begins to work at the bottom of their anxiety hierarchy. Systematic desensitization can be used in a classroom situation, with students, who suffered from examination phobia or fearful of their teacher.

Use of Punishment

Punishment is a technique, which is used to suppress maladaptive behaviour. It is an unpleasant experience that tends to cause behaviour not to be repeated. Oladele (2000) sees punishment as avoidance learning which is learning motivated by punishment, by the application of an unpleasant stimulus. Awanbor (1997) viewed punishment as a process whereby an event is made to follow a response so that the frequency of that response is decreased.

Blair and associates (1975), in Momoh (1999) are of the view that punishment could be effectively use for the following:

- 1. To teach clients to have respect for authority
- 2. To block maladaptive behaviour or undesirable responses.
- 3. To force a client to do something he/she was not ready to do and did not want to do
- 4. Punishment sets an example for 'potential offenders' and
- 5. It serves as a motivator to students to learn assigned material. Punishment is widely used in classrooms and by society in an effort to eliminate undesirable behaviour and to teach socially approved behaviour. A teacher can do this by rewarding rational and appropriate behaviour with smiles and attention while irrational and inappropriate behaviour are ignored.

Use Of Contingency Contracting:

A special type of reinfrocment procedure involves the use of a negotiated and clearly specified agreement between a client and the parent, teacher, counsellor or therapist that outlines the behaviours the client is expected to engage in and the consequences that will be received as a result. All the details of the agreement are typically put in writing and are signed by the parties concerned. This agreement, according to Myers (2008) is referred to as a 'contingency contract' since it specifics in advance the contingencies that will occur for appropriate behaviour.

Achenbach (1982) posited that contingency contract have been found to be most useful with adolescents and youths who have some sort of interpersonal problem with authority figures. According to him, such problem usually can be reduced to perceive mis-behaviour on the part of the client. Behaviour changes are thus aimed at by way of the contingency contract, which is based upon 'a quid pro quo system of reciprocal reinforcement (Achenbach 1982). When the client changes from undesirable behaviour to the agreed upon desired behaviour, which is reinforcing to the parent or therapist, the parent or therapist responds in kind by providing the stipulated reinforcement for the client newly displayed desired behaviour.

In a school situation, contingency contracting can be used by a teacher or counsellor to treat students with regular poly drug abuse. The students would receive reinforecer, such as allowances, valuable gifts, etc in order to increase appropriate behaviours that were incompatible with drug abuse, such as enrolling, preparing for, and attending a vocational training school. Weekly sessions would be held to monitor execution of the contract. This procedure would mark, lasting decrease in drug usage as well as increased ratings of family happiness. Myers (2008), asserted that contingency contracting has been found to be useful

Print ISSN: ISSN 2054-6297, Online ISSN: ISSN 2054-6300

<u>Published by European Centre for Research Training and Development UK (www.eajournals.org)</u> with adolescents in classroom settings, with youths' behavioural problems and with school dropouts.

Use of Token Economy:

Another special type of reinforcement procedure involves the use of token economy. Token economy is based upon the therapeutic use of generalized conditioned reinforcer, which are known as 'tokens' (Unachukwu and Igborgbor 2014). Tokens may take the form of points, stars, poker chips, money, tickets, sweet, priviledges, films, trips or anything that lends itself to immediate, convenient delivery after reinforcible behaviour has been observed. The imaginative and appropriate use of token procedure can serve as a motivational vehicle for effecting behavioural changes.

Unachukwu and Igborgbor (2014), identified three steps involved in changing behaviour with the use of token economy,

- (1) Specification of target behaviour that are to receive token reinforcement
- (2) Specification of a medium of exchange (i.e type of token to be used) and
- (3) The availability of one or more back up reinforce for which the tokens may be exchanged.
 - Achenbach (1982) listed the advantages of token economy as follows:
- (a) It is more convenient to administer than other reinforcing events.
- (b) Their delivery does not interrupt on-going behaviour and the allows them to be delivered immediately after desirable behaviour.
- (c) Their delivery serves as a bridge for any time delay that might have occurred between the reinforcible behaviour and the reinforcing event. Tokens, when used in a well-designed system can become potent reinforcer, which can maintain behaviour at higher levels than other conditioned reinforcer, such as praise and approval.

Use of Modeling, 'Shaping', Role Playing and Instruction:

In addition to the above types of procedures, a parent, teacher or therapist can actually demonstrate for the child the behaviour that is expected. This may be done either physically or by way of videotape-known as modeling. For example, modeling can be used to teach retarded adolescents various social skills. By acting as a model, the therapist strives to provide cues for the client that will help develop new behavioural skills. Corsini and Wedding (2000) stressed that the use of 'modeling' technique is most effective in children, adolescents and youths who benefit from watching other people. A client may model himself or herself on the therapist. Modeling can also be used to reduce fear by having fearful clients observe another person engage in the feared activities or interact with the feared objects. The use of modeling as a behavioral therapy has been acclaimed to be more effective than instruction giving. Odemelam (2005), views modelling as a key ingredient in social skills training.

Another procedure for teaching entirely new skills is the use of instruction. Corey (2000), sees instruction as a widely used procedure for teaching new skills or new behaviour. This

simply involves the presentation of instruction or prompts, in verbal or written form, which detail the behaviour the client is expected to learn. As the client begins to display proficiency in the new skill, typically, the necessity for continuing the instructional or prompting process diminishes, and these procedures are then gradually faded out. He further stipulated that when such instructional or prompting procedures also involve the use of reinforcement for behaviour that successively approximate the ultimate target behaviour, the procedure is known as "shaping".

From the foregoing, it could be said that the effective application of these behaviour modification techniques could have great promise for helping children and adolescents with deviant behaviour or misdemeanor, to acquire appropriate behaviour patterns.

CONCLUSION AND RECOMMENDATION

This paper has attempted to highlight some frequently observed adolescents' misdemeanor which ranges from family violence to societal violence that include rape, robbery, drug abuse, cultism, kidnapping, among others. Against the backdrop of this discourse, an attempt was made to examine some behaviour modification techniques which could be useful in curbing or ameliorating these adolescents' misdemeanor. This paper has once again, forcefully drawn the attention of counselling psychologists and practitioners to the potency of behaviour modification therapies. It is believed that the effective application of these therapies at an early stage of adolescent misdemeanor would go a long way to curbing the incidence of maladaptive behaviour. It is recommended that all persons involved in moulding adolescents behaviour should gain mastery of these appropriate techniques and use them effectively. It is hoped that the information contained here would have both practical and research implications for all operators.

REFERENCE

Achenbach, G.R. (1982). Psychotherapy in Childhood, New York: Gardner Press Inc.

Awanbor, D. (1997). Learning and Learning Difficulties. Benin: Osasu Publishers.

Corey, g. (2000). *Theory and Practice of Group Counseling*. Stamford: Brooks/Cole. Thomson Learning.

Corsini, R. J. and Wedding, D. (2000). *Current Psychotherapies*. Itasca Illinoise F.E. Peacock Publishers, Inc.

Egbochuku, E. O. (2008) *Guidance and Counselling:* A Comprehensive Text. Benin City: University of Benin Press.

Gbemi Sodipo Press Ltd.

Jimoh. H.M (2012) Prevalence of Drug Abuse Among Nigerian Adolescents: implication for counselling. A dissertation submitted to the department of guidance and counselling to the department of guidance and counseling university of Ado Ekiti, Ado-Ekiti Nigeria

Momoh, S.O. (1999). Motivation and Human Learning in Ehiametalor, E.T. and Osagie, R.O. (Eds) (1999) *Fundamentals of Human Learning*. Benin City: Nigeria Educational Research Association.

Morris, G. C. (1982). *Psychology: an Introduction*, New Jersey: Prentice-Hall, Inc.

Myers, D. G. (2008). Exploring Psychology. New York: Catherine Woods

Odebunmi, A. (1992). Understanding Guidance and Counselling. Abeokuta:

- Published by European Centre for Research Training and Development UK (www.eajournals.org)
- Odigie, J. I (2013). The Effectiveness of Cognitive Behavioural Counseling Model In Managing Adolescent Psycho-socio Crisis. The Couonsellor vol 32(1&2) 24-29
- Odoemelam (2005). Behavior Modification Skills for Professional Counsellors' Use.

 Owerri: Divine Mercy Publisher.
- Oladele, J. O. (2000). *Guidance and Counselling: A Functional Approach*, Lagos: Johns-Lad Publishers Ltd.
- Olatunde, A (2001). Self medication: Benefits, prtecautions and dangers. Lagos macmillan Unachukwu, G.C and Igbogbor, G.C (1991) Guidance and counseling: A Realistic approach . Owerri. International universities press.
- Waston, D. l. and Tharp, R. G. (1997). Self-Directed Behavior: Self Modification for Personal Adjustment. Pacific Grove: CA: Brooks/ Cole.
- Wolberg, K. l. (1982). The Practice of Psychotherapy: 506 Questions and Answers, New York: Brunner Mazel Inc.