



Impact of Rational Emotive Behaviour Therapy on Self-Esteem and Aggression Among Adolescent Students

KEYWORDS

Adolescents, Self-esteem, Aggression, Rational Emotive Behaviour Therapy (REBT)

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ABSTRACT *The present study is designed to examine the impact of Rational Emotive Behaviour Therapy (REBT) on self-esteem and aggression among adolescent students. The aim of this study was to examine the impact of REBT on self-esteem, and aggression. Sample for the study consisted of 120 (60 experimental group, and 60 control group) adolescent students who scored low in self-esteem and high in aggression. Participants were selected from different schools in Bangalore city in Karnataka, India. The participants were assessed with Rosenberg Scale of Self-esteem (1965a) and Mathur and Bhatnagar Aggression Scale (2004). Data analysis was done using means, SDs and t-test. Findings of the study revealed that the impact of REBT is positive in increasing self-esteem and decreasing aggression among adolescents.*

Introduction

India is a country with the largest share of the world's adolescent population (20.5%), accounting for around 243 million youths. Like the other countries in the world, there is increasing concern in India too about the mental health status of adolescents (Singh, Bassi, Junnarkar, & Negri, 2015).

According to Bradley (2011) self-esteem is defined as an individual's evaluation of their own self-worth. The most broad and frequently cited definition of global self-esteem in psychology is by Rosenberg (1965b), who defined it as a favorable or unfavorable attitude towards the self. High global self-esteem shows a feeling that one is "good enough" and has high positive sense of one's value as a person. Global self-esteem has positive relationship with life satisfaction and well-being and may be observed as a result of achievement and having positive social relations (Birkeland, Melkevik, Holsen, & Wold, 2012).

Self-esteem has become a household word. Teachers, parents, therapists, and others have concentrated efforts on increasing self-esteem, on the hypothesis that high self-esteem will cause many positive results and (Baumeister, Campbell, Krueger, & Vohs, 2003). It is an eminent component of psychological health. Many previous studies indicate that lowered self-esteem often accompanies psychiatric disorders. It has been recommended that low self-esteem is an etiological factor in numerous psychiatric conditions (Salsali & Silverstone, 2003).

Aggression is considered one of the most important issues during adolescence whiles the aggression and bullying can have many negative consequences. Aggression is defined as a destructive behaviour which violates social agreements and which may contain deliberate intent to harm or injure another person or object (Berkowitz, 1993).

Aggressive behaviour can be expressed in three forms: physical, verbal, and relational. All these three categories can be displayed in different types of aggression, such as bullying, reactive aggression, and proactive aggression". Physical aggression comprises activities in which real physical harm is deliberately done to a person, animal, or ob-

ject. Verbal aggression comprises the use of words to harm another, and it contains behaviors such as making threats or writing threatening notes, calling names, cursing, and teasing. Relational aggression has been defined as behaviors that harm others through hurt to social relationships or feelings of acceptance, friendship, or group inclusion (Crick, Grotpeter, & Bigbee, 2002). The aggressive adolescents cannot predict correctly their behaviors. They observe various hostile signs in social stimuli and have no correct understanding of their aggression levels. They use few verbal methods to prove themselves in social problems and use more aggressive solutions (Graham, 1998).

Method

Participants

A total of 478 adolescent students from different schools in Bangalore, Karnataka were administered with Rosenberg Scale of Self-esteem (1965) and Mathur and Bhatnagar Aggression Scale (2004). Finally 120 adolescents were selected who scored low on self-esteem and high on aggression. They were randomly assigned to experimental group and control group with 60 boys and 60 girls in each group. REBT intervention was only given to experimental group and any intervention to the control group was avoided.

Instrumentations

Rosenberg Scale of Self-esteem (RSES, Rosenberg 1965): Designed to measure adolescents' global feelings of self-worth, it has 10 first person statements and the responses are on a 4 point scale of "strongly agree," "agree," "disagree" and "strongly disagree." Positively and negatively worded items are included in the scale to reduce the likelihood of a represent set. Scores range from 0 to 30, with higher scores indicating better self-esteem.

Aggression Scale (Mathur and Bhatnagar, 2004): is used to study the level of aggression in any age group (above 14 years). It consists of 55 statements. Each statement describes different forms of individual's aggression in different situations. It is a likert type 5 point scale and scale statements are in two forms i.e. positive and negative. 30 statements are in positive form and 25 in negative form. Maximum score is 275 and minimum is 55, higher scores show higher aggression level and lower scores show lower

aggression level. Reliability co-efficient of the aggression scale was calculated by 'test retest reliability' method. Reliability was .88 in males and, .81 in females.

Hypotheses

Hypotheses 1: There is no significant difference in the, mean scores of experimental and control group with reference to self-esteem among adolescent students.

Hypotheses 2: There is no significant difference in the, mean scores of experimental and control group with reference to aggression among adolescent students.

Result

The analysis of data has been presented under following tables:

The pre- test data was analyzed to examine if the control and experimental groups were similar to each other. Independent t- tests revealed the students in the schools were homogenous (t= 0.11; p= 0.91 and t= -0.92; p= 0.36) with regard to self-esteem and aggression, respectively.

Table 1
Showing Mean and SD scores of pre and post treatment for experimental and control groups on Self-esteem

Groups	Times	Self-esteem		
		M	SD	MD*
Experimental	Pre-treatment	12.67	1.65	7.25
	Post-treatment	19.92	3.19	
Control	Pre-treatment	12.63	1.59	1.68
	Post-treatment	14.32	2.81	

Note. MD stands for Mean difference

Table 1 indicates that there was a change (enhance) observed between pretreatment and post-treatment sessions mean score in self-esteem. 1) For experimental group self-esteem pre-treatment score was 12.67 which was increased to 19.92 in post treatment assessment (MD= 7.25). 2) For control group self-esteem pre-treatment score was 12.63 which was increased to 14.32 in post-treatment assessment (MD= 1.68).

Table 2
Results of repeated measure ANOVA for mean scores on pre-treatment and post treatment for Self-esteem

Source of variation	Sum of squares	df	Mean squares	F	Sig
Within-subject effects					
Time	1197.07	1	1197.07	241.41	0.00
time * group	464.82	1	464.82	93.74	0.00
Error	585.12	118	4.96		
Between-subject effects					
Intercept	53163.27	1	53163.27	7943.70	0.00
Group	476.02	1	476.02	71.13	0.00
Error	789.72	118	6.69		

*significant at p<0.001

According to table 2, the effect of REBT on self-esteem was statistically significant F (1, 118) = 241.41, p<0.001. It indicates that the differences in pre-post test scores (7.25) clearly showed the efficacy of REBT in increasing self-esteem. Further, the combination of time*group showed a significant effect in increasing self-esteem F (1, 118) = 93.74, P<0.001). Further, between subject effects showed that the effect of group in relation to the efficacy of REBT interventions in increasing self-esteem which was statistically significant F (1, 118) =71.13, P<0.001).

Table 3
Showing Mean and SD scores of pre and post treatment for experimental and control groups on Aggression

Groups	Times	Aggression		
		M	SD	MD
Experimental	Pre-treatment	220.33	14.81	43.93
	Post-treatment	176.40	20.62	
Control	Pre-treatment	223.02	17.05	4.73
	Post-treatment	218.28	20.28	

Note. MD stands for Mean difference

Table 3 indicates that there was a change (reduction) observed between pretreatment and post-treatment sessions mean score in aggression. 1) For experimental group aggression pre-treatment score was 220.33 which was decreased to 176.40 in post treatment assessment (MD= 43.93). 2) For control group aggression pre-treatment score was 223.02 which was decreased to 218.2833 in post-treatment assessment (MD= 4.73).

Table 4
Results of repeated measure ANOVA for mean scores on pre-treatment and post treatment for aggression

Source of variation	Sum of squares	df	Mean squares	F	Sig
Within-subject effects					
Time	35526.67	1	35526.67	113.33	0.00
time * group	23049.60	1	23049.60	73.53	0.00
Error	36991.73	118	313.49		
Between-subject effects					
Intercept	10534498.02	1	10534498.02	29263.07	0.00
Group	29792.82	1	29792.82	82.76	0.00
Error	42479.17	118	359.99		

*significant at p<0.001

According to table 4, the effect of REBT on aggression was statistically significant F (1, 118) =113.33, p<0.001. It indicates that the differences in pre-post test scores (43.93) clearly showed the efficacy of REBT in decreasing aggression. Further, the combination of time*group showed a significant effect in decreasing aggression F (1, 118) =73.53, P<0.001).

Further, between subject effects showed that the effect of group in relation to the efficacy of REBT interventions in decreasing aggression which was statistically significant F (1, 118) =82.76, P<0.001).

Discussion and conclusion

According to the results Rational Emotive Behaviour

Therapy (REBT) is effective intervention on increasing self-esteem and decreasing aggression among adolescent students. Previous studies revealed that REBT is effective in increasing self-esteem and reducing aggression among adolescents.

Roghanchi, Mohamad, Mey, Momeni, and Golmohamadian (2013) studied the result of integrating Rational Emotive Behavior Therapy and Art Therapy on self-esteem and resilience. The study was experimental type in which pre and post-test design were used. Samples of 24 Iranian university students were randomly placed in two groups, one experimental group and one control group. The experimental group received 10 sessions of therapy. The results showed that the integration of REBT and art therapy increase the self-esteem and resilience of students.

The study by Valizadeh and Emamipoor (2007) inspected the effect of Rational Emotive Behavior Therapy on the self-esteem of blind female students. For this purpose, twelve participants was carefully chosen and divided into experimental and control groups equally. The results showed that Rational Emotive Behavior Therapy raises the overall, family and social self-esteem of the subjects. But, physical and educational self-esteem didn't have significant changes by the therapy.

Moral (2011) tried to find out an effective treatment in treating anger. The study compared the efficiency of Homeopathy in medicine, Rational Emotive Behaviour Therapy (REBT) in psychotherapy, and Yoganidra in yoga for the treatment of anger. Results revealed that Rational Emotive Behaviour Therapy (REBT) with its cognitive behavioural approach aided the patient to change their irrational beliefs into rational ones.

Liu, Ho, and Song (2011) examined the relationship between online and real-world aggressive behavior among primary school students as well as the effects of an online rational emotive curriculum on reducing the tendency of students to display aggression online and in the real-world. Results showed that the online rational emotive curriculum had a significant effect alleviating aggressive behavior among students with strong hostile tendencies.

Another study by Kumar (2009) examined the effect of Rational Emotive Behaviour Therapy (REBT) on adolescent

students with conduct disorder. 100 boys and 100 girls participated in this study in Mysore city. Rational Emotive Behaviour intervention was conducted on an experimental group, in seven weeks. The results of the study showed that Rational Emotive Behaviour Therapy (REBT) has a positive impact on conduct disorder and other emotional and behavioural disorders co morbid with conduct disorder experienced by adolescents.

Finding of this study could be useful for guiding practitioners and therapists to control aggression and low self-esteem. Thus, REBT provide insight for adolescents to increase their self-esteem and reduce their aggressive behavior.

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