EFFECTIVENESS OF RATIONAL EMOTIVE BEHAVIOUR THERAPY ON TRUANCY AMONG IN-SCHOOL ADOLESCENTS IN ABIA STATE

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Abstract

This study looked at the effect of rational emotive behavior therapy in reducing truancy among in-school adolescents in Abia State. The study was based on two research questions and two null hypotheses. The study employed a quasi-experimental design employing the non-randomized pre-test, post-test and control group using a 2x1 factorial matrix. The sample size of the study consisted of 32 (13 males and 19 females) in-school adolescents who were purposefully selected from 680 in-school adolescents in Two (SS II) students identified with truancy using Truant Behaviour Identification Questionnaire (TBIQ) in-school adolescents in Abia State in 2023/2024 academic session. The study equally adopted multi-stage sampling techniques. The instrument used for data collection was a 14-item questionnaire titled: Truant Behaviour Identification Questionnaire (TBIQ). Test of reliability for the internal consistency of the instrument was measured using Cronbach alpha statistics which yielded a reliability index of .77 indicating the usability of the instrument for the present study. Stability of the instrument was established using Pearson Product Moment Correlation reliability Coefficient to obtain index of .77. Data were collected in the three phases of pre-treatment, treatment and follow-up periods. The data were interpreted using mean and standard deviation to answer the study questions and Analysis of Covariance (ANCOVA) to test the null hypotheses at the 0.05 level of significance. The findings, among other things, revealed that REBT was successful in reducing the rate of absenteeism among in-school adolescents during both the posttest and follow-up periods. It was proposed that researchers should attempt to conduct out more studies to find out more unwanted behaviors for which rational emotive behavior therapy (REBT) could be effectively applied.

Keywords: Rational Emotive Behaviour Therapy, Truancy, In-school Adolescents

Introduction

Truancy is one of the most common dishonesties or delinquent behaviors done by students in modern Nigeria, regardless of school type, gender, and region. Okolie, Igwe, Nwosu, Eneje, and Mlanga (2020) saw truancy as a major delinquent behaviour among students that frequently leads to other deviant behaviours. Egbo, Nwangwu, and Odo (2024) defined truancy as leaving school or lessons without permission from school authorities. This is the persistent absence of students from school or class without authorization to prevent duties such as homework, tests, examinations, and other extracurricular activities. Egbo, Nwangwu, and Odo (2024) described truancy as leaving school during school hours without the consent of parents or school authorities in order to prevent punishment, avoid specified functions, or neglect certain authorized school obligations.

Egbo, Nwangwu and Odo (2024) considered truancy as an extrovert's reaction to a school difficulty; however, introverts also engage in truancy, particularly throughout adolescence. Truants are inconsistent in their attendance at school; some may opt to come once or twice a week, or they may arrive in the morning and leave later, while others are constantly absent for no good or acceptable cause provided by their parents or school authorities. Egbo *et al.* (2024) classified truants as vagrants, worthless, lethargic, or indolent persons who shirk or abandon their tasks and intend to violate school rules by attending movies, attending special events, preparing for nights, playing games during school hours but outside of school, not wearing school uniform, failing to serve punishment, engaging in substance abuse, and cultism. Other maladaptive or anti-social traits identified by truants include hyperactivity, disruptive classroom conduct, bullying, shyness, avoiding classes, indiscipline in school, disdain for school authority, poor performance, and eventually becoming a school dropout

Though the aims of secondary education are noble and critical to the country's prosperity, truancy has the ability to destroy everything by negating the labor, costs, and time invested owing to low attendance, a sluggish attitude toward learning, and, ultimately, student dropout rates. Truancy among in-school adolescents is a widespread problem with serious consequences for academic performance and social development. Truancy is perceived as unlawful absence from school, which interrupts the educational process and can have long-term effects for both individuals and society. Truancy is defined as any unexplained or undetected absence from school, taking into consideration the attendance rules of the specific country. It can take several forms, ranging from frequent late arrivals to absence from a complete or multiple school days (Ramberg, Låftman, Fransson & Modin, 2019).

Truancy is sometimes defined as a student's willful absence from school without parental knowledge or approval (Bajon, 2022). Truancy among in-school adolescents has become a big issue in Nigeria's education system, and it is one of the delinquent behaviors. According to Imafidon and Ikuero (2022), truancy arises when a learner is absent from school without a legitimate excuse. Tripathy and Sahu (2020) defined truancy as an antisocial and delinquent behavior, and it is also known as school refusal or school phobia. Adetumilara, Adeniyi, and

Ahimie (2023) define truancy as purposely missing particular class periods, leaving school without permission, and failing to attend class. Truancy is defined in this study as a circumstance in which a student is away from class without permission, whether for the full lesson or for one or more days throughout a week, month, or quarter of the school year. Truancy refers to any intentional, unapproved, or unlawful absence from obligatory schooling. Truancy is thus defined as the practice of missing school without authorization. Truancy is the terminology used to characterize a child who is engaging in the behavior. A truant is a student who skips school to meander about.

Truancy rates among in-school adolescents can vary greatly based on area, cultural variables, financial level, and educational programs. However, research offers some broad insights regarding the prevalence of truancy. According to the World Health Organization (WHO, 2019), truancy rates vary greatly among nations; in some regions, such as portions of Europe and North America, truancy rates can range from 5% to 28% among in-school adolescents. In Nigeria, the percentage of secondary school students who miss class has steadily increased. This is evident from the several studies undertaken by Adetumilara *et al.* (2023) and Onyele (2018), which discovered that the number of Nigerian secondary school students who have been reported to miss school is rapidly increasing. The study went on to note that one of the goals of in-school adolescents is personnel development, which might be threatened if the occurrence of truancy is not regulated.

According to Onyele (2018), truancy rates among in-school adolescents in Abia State are frighteningly high, resulting in a good sum of students leaving school and causing problems for their relatives and the society as a whole. Furthermore, Adetumilara *et al.* (2023) found that truancy occurrence are higher in urban regions than in rural regions due to a variety of factors such as peer influence, recreational activity availability, and socioeconomic status. They believe that truancy rates tend to rise as kids advance through secondary school. Younger adolescents may commit truancy at a lower rate than older adolescents. Low academic success, family instability, low socioeconomic position, peer influence, and school disengagement are all connected with increased rates of truancy.

The DSM-5 (Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition) does not specifically list truancy as a disorder with diagnostic criteria. Truancy is often regarded as a behavioral issue associated with school attendance rather than a distinct mental condition. Truancy, on the other hand, can be a symptom or indicator of underlying concerns like school avoidance caused by anxiety disorders (e.g., separation anxiety disorder, social anxiety disorder) or conduct disorder. The DSM-5 gives diagnostic criteria for several illnesses, which may include behavior associated with truancy as part of their presentation. Truancy includes willful absences without valid causes, such as skipping classes to avoid specific subjects or professors, as well as extended absences from school grounds without permission. These behaviors can be suggestive of larger problems such as social anxiety, conduct disorders, or family troubles, all of which can contribute to persistent school avoidance. Furthermore, there

are numerous reasons why students participate in truancy, which Bajon (2022) divides into three categories: family issues, school factors, and student-related factors. Parents' education, parental supervision, and household income are all factors that can contribute to truancy. According to Bajon (2022), low-income families and single parents account for roughly one-third (1/3) to one-half (1/2) of all truancy instances.

Some school characteristics that may contribute to truant attitude among in-school adolescents include school atmosphere, class size, attitudes, ability to satisfy each student's different needs, and the school's truancy disciplinary policy. According to Ogbonna, Chinasa, and Grace (2019), kids who attend large schools may feel lonely or alienated in their learning environment, therefore they opt not to attend. In enormous classrooms, students' unique needs, whether instructional, social, or otherwise, cannot be consistently satisfied, and student-teacher relationships cannot be created, resulting in a school climate and mentality in which each person must fend for himself. Physical and mental health issues, as well as drug usage, are examples of student characteristics that might contribute to truancy.

Truancy has numerous consequences that have an immediate and long-term impact on the academic lives of those involved. Ogbonna *et al.* (2019) state that a few of the impacts of truancy include a decrease in educational quality, poor academic results in examinations, having half-baked graduates, a large number of school dropouts, and an impact on their general life style in the future and in adulthood after school. Truancy is also an element that gives room to sluggishness, unemployment, and underemployment among most persons today. Truancy, according to Adetumilara et al (2023), is an issue among school-aged adolescents, with severe effects for truants, their schools, and society as a whole. They discovered that being absent from school can have disadvantageous effects on a person, such as low academic achievement, wasted time studying, strained relationships with parents and teachers, and eventually dropping out of school. Bad academic achievement, the time teachers spend pursuing absentee students and providing Counselling, and other factors all have an adverse impact on the school. Poverty for the truants' families in the future due to unemployment, family instability, and insecurity as the truants go out stealing and indulging in other delinquent behavior both now and in the future, becoming involved in robberies and other crimes as a result of their social standing.

Efforts by schools, teachers, counsellors, researchers, and society at large to reduce truancy rates through non-therapeutic approaches such as increased supervision, close monitoring, scolding, punishment, and suspension appear to have yielded unsatisfactory results (Ehindero, 2015). Many secondary school kids are still observed in amusement centers, selling, loitering on the streets, and committing daytime robberies during school hours. The researcher concluded that other treatments, such as rational emotive behavior therapy (REBT), had the potential to assist individuals in changing undesired behaviors. It is thus hypothesized that such psychological interventions may be useful in reducing truancy among secondary school students in Imo State.

More so, addressing truancy requires effective interventions that not only improve school attendance but also address underlying psychological factors contributing to absenteeism. Instructively, Albert Ellis' Rational Emotive Behaviour Therapy (REBT) is a therapy method that assists people in breaking free from self-defeating thoughts that impede overall life growth.

Mahfar and Senin (2015) state that REBT holds that emotional problems including self-blame, self-pity, clinical rage, hurt, guilt, and shame, depression, and anxiety, as well as behavioral tendencies such as procrastination, compulsiveness, avoidance, addiction, and withdrawal, through irrational and self-defeating thinking are created by people both intentionally and unconsciously. Even when truancy behaviours cannot be completely eliminated, the way a student perceives and arranges his thoughts can go a long way toward assisting that student in making required adjustments and continuing his academic pursuit.

As a mental restructuring technique, REBT is commonly employed as an educational process in which the therapist actively guides the client in recognizing illogical and counterproductive ideas and viewpoints. Rational Emotive Behaviour Therapy (REBT) uses the ABCDEF model to train clients. This model explains in detail how an individual's emotional disturbance or truancy behaviors are caused by an irrational belief system rather than unfavorable circumstances (Obi & Nicholas, 2020). There is considerable empirical evidence that REBT can reduce truancy among in-school adolescents.

Based on the aforementioned, this study sought to investigate the potential benefits of rational emotive behavior therapy in reducing truancy among in-school adolescents in Abia State. To the researcher's knowledge, no empirical research has looked at how REBT affects truancy rates among in-school adolescents in Abia State.

Statement of the Problem

The school exists as a social agent, shaping student's habits, interests, attitudes and sentiments while also passing down societal norms, culture, values and customs from generation to generation. Adolescents in Abia State are expected to participate actively in school since teaching and guidance activities are conducted to help them acquire relevant skills and academic knowledge.

However, some students do not benefit from these benefits since they are frequently absent from school and class for a variety of reasons. Truancy appears to be on the rise, with a large proportion of students absent from school, missing courses and other school activities that could prepare them appropriately for their future. Educators, parents, students, and other stakeholders have devised several means to check the rising incidence of truancy. Their efforts, however, have not generated significant gains, as truancy among in-school teenagers in Abia State remains high.

There is much of evidence to support the usefulness of several psychological interventions, such as REBT, in enabling people to reduce their truancy. This study investigated the effectiveness of REBT in reducing truancy among in-school adolescents in Abia State. The

issue posed in this study is: what is the efficacy of REBT in reducing truancy among in-school adolescents in Abia State?

Purpose of the Study

The purpose of this study is to find out the efficacy of rational emotive behaviour therapy (REBT) on truancy among in-school adolescents in Abia State. Specifically, the study sought to:

♦ determine the difference in the rate of reduction of truancy of students exposed to REBT and control at post-test period.

♦ ascertain the difference in the rate of reduction of truancy of students exposed to REBT and control at follow-up period.

Research Questions

The following research questions guided the study:

♦ What is the mean score difference in the rate of reduction of truancy of students exposed to REBT and control at post-test period?

♦ What is the mean score difference in the rate of reduction of truancy of students exposed to REBT and control at follow-up period?

Hypotheses

The following null hypotheses were formulated and tested at 0.05 level of significance to guide the study.

Ho_1: There is no significant mean score difference in the reduction of truancy of students exposed to REBT and control at post-test period.

Ho_2: There is no significant mean score difference in the rate of reduction of truancy of students exposed to REBT and control at follow-up period.

Methodology

The study used a quasi-experimental design with non-randomized pre-test, post-test, and control groups represented by a 2x1 factorial matrix. The study's sample size was 32 (13 males and 19 females) secondary school students who were purposefully selected from 680 (299 males and 381 females) in-school adolescents in (SSI) identified with truancy using the Truant Behaviour Identification Questionnaire (TBIQ) among in-school adolescents in the 2023/2024 academic session. These included eight subjects each for the REBT and control groups. The study also used multistage sampling approaches. The instrument for the data collection in this study was Truant Behaviour Identification Questionnaire (TBIQ). The TBIQ is a 14-item questionnaire designed to measure severity of social anxiety in the area developed through extensive literature search. The TBIQ is divided into two sections: section one elicited information on demographic variables. Sections two contains 14 items arranged in clusters used

to identify and measure the severity of Truant Behaviour. The TBIQ was designed on a four-point rating scale of Very High Extent (VHE), High Extent (HE), Low Extent (LE) and Very Low Extent (VLE) scored 4, 3, 2 and 1 respectively. Negative items of the SAIQ were reversed weighing 1, 2, 3 and 4. The cut-off mean score of 2.50 and above represented High frequency severe low social anxiety while mean score below 2.50.

The initial draft of TBIQ accompanied with the purpose of the study, research questions and hypotheses was face validated by three research experts in College of Education of Michael Okpara University of Agriculture, Umudike Abia State, Nigeria. The experts examined the items and established the suitability, language construction, coverage, clarity, and relevance of the instrument. The experts' comments, suggestion and corrections were effected to produce the final draft of the instrument. The reliability estimate of TBIQ was established through split half method (Cronbach alpha method). The scores obtained were arranged even and odd members for analysis using Cronbach alpha statistics which yielded a reliability index of .77 indicating the usability of the instrument for the present study. Stability of the instrument was established using Pearson Product Moment Correlation reliability Coefficient to obtain index of .77.

The data collection of the study was carried out basically in three phases:

Pre-treatment Phase: this phase involve two pre-treatment sessions conducted in the study, two weeks prior to treatment it involved preliminary introductions to the sampled in-school adolescents and the subject for the study. The phase carried our pre-treatment assessments in order to identify adolescents with Truant Behaviour using TBIQ to obtain the baseline data while served as covariant to pretest data for the level. The subjects were purposely assigned to one treatment group and control group respectively (REBT and control group).

Treatment Phase: This phase dealt with the actual manipulation of experimental conditions after two weeks group while the control group was regarded as waitlist group. The experimental group has six sessions which last for 40 minutes each. The researchers and the subjects choose days, time and venue for their meeting that lasted for four weeks. There was two sessions in each week. A description of the REBT and a methodological outline of the session activities for the group were briefly stated below:

REBT

Session one: initial counselling establishment issues and setting of goals

This was an introductory session. This session was for the establishment of rapport and the issue of confidentiality, explanation of roles and responsibilities of counsellor and client and other initial establishment issues were raised. The researcher assisted the subjects to set counselling goals both short and long term goals.

Session Two – Imaginal Disputation Technique of REBT

The session started with the motivation of subject and the review of the previous session. Subjects were asked to submit their assignment of the last sessions which was followed by

discussion that emanated from the assignment. Having recognized/realized their irrational thought and an orientation of REBT, the researcher introduced the first REBT technique which was imaginal disputation.

Session Three – Behavioural Disputation Technique of REBT

The session started with the motivation of subjects. Progress verification continued in this session. Task and assignment given to the subjects, in the last session were reviewed and discussed by the researcher and subjects, then behavioural disputation technique were explained; it is having the client behave in a way that is opposite to the way they would have responded to the situation.

Session four – Emotional control technique of REBT

The session started with the motivation of subject. There was a recap of the last session's activities. Progress verification continued in this session. Task and assignment given to the subjects in the last session were reviewed and discussed by the researcher and subjects. Disputing irrational thought either through imaginal or behavioural disputation was highlighted or discussed with the subjects.

Session five – Confrontation and encouragement technique of REBT

The session started with the motivation of subjects. Progress verification continued in this session. Task and assignment were given to the subjects. Confrontation technique was exposed to the subjects by the first discussion. For instance, confrontation is an attempt by the counsellor to gently bring about awareness in the clients of something that they may have purposively overlooked or carefully avoided.

Session six – Review of activities in all sessions

This was the final stage of the rational emotive behaviour therapy treatment plan. The session started with the motivation of subjects. The subjects were commended for their efforts.

Post-Treatment Phase

The post-treatment was carried out immediately after the last treatment session. The TBIQ was re-administered to the subjects after reshuffling at the end of the experiment. The responses of the subjects were scored and results compared with the pre-test score of the subjects on TBIQ. Analysis of Covariance (ANCOVA) was used as a statistical control measure. It also has the ability to increase the power of a statistical test.

The data collected for the study were statistically analyzed using mean and standard deviation to answer the research questions and Analysis of Covariance (ANCOVA) was employed to test the null hypotheses at 0.05 level of significance as shown in tables 1-4.

Results

Research Question 1:

What is the mean score difference in the rate of reduction of truancy of students exposed to REBT and control at post-test period?

Table 1: Mean and Standard Deviation on Difference in the rate of truancy reduction of students exposed to REBT and control group at posttest period

Source Groups	N	Pre-test	SD	Post-test	SD	Mean Reduction	Mean Reduction	Difference
REBT	8	3.79	2.36	1.27	1.34	2.52		
								2.20
Control	8	3.78	2.32	3.46	1.43	0.32		

Table 1 shows that patients with truant conduct who were treated with rational emotive behaviour therapy (REBT) had a pre-test mean score of 3.79 with a standard deviation of 2.36 and a post-test mean score of 1.27 with a standard deviation of 1.34. Similarly, respondents in the control group who engaged in truant behaviour had a pre-test mean score of 3.78 with a standard deviation of 2.32 and a post-test mean score of 3.46 with a standard deviation of 1.43. The table also demonstrated that subjects with truant behaviour exposed to REBT had a mean reduction of 2.52, whereas their counterparts in the control group had a reduction of 0.32. The mean reduction difference between the REBT and control groups is 2.20, implying that participants with truant behaviour exposed to REBT had a lower mean truant behaviour than their counterparts in the control group. As a result, the findings indicated that using rational emotive behavior therapy (REBT) reduced truancy rates among in-school adolescents at the posttest.

Hypothesis 1: There is no significant mean score difference in the reduction of truancy of students exposed to REBT and control group at post-test period.

Table 2: Analysis of Covariance (ANCOVA) of the Mean Score Difference in the Reduction of truant Behaviour of the REBT Group and Control Group at Post-Test

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	3839.116[a]	2	11919.558	11.912	.000
Intercept	2630.668	1	2630.668	22.65	.000
Pre-test	1524.670	1	1524.670	18.923	.001
Group	1231.017	1	1231.017	14.713	.000
Error	1087.726	13	88.671		
Total	38967.000	16			
Corrected Total	7476.888	15			

a R squared = .354 (Adjusted R squared = .346).

The results in Table 2 above reveal that REBT, as a study factor, has a substantial effect on reducing truancy among the subjects. The calculated f-value of 14.713 for the treatment as the primary effect of REBT on the mean rate of reduction in truancy scores is greater than the f-critical value of 1.96 with a degree of freedom of 13 at the 0.05 level of significance. This suggests that introducing people with truant conduct to REBT dramatically reduced their truancy. As a result, the null hypothesis that there would be no significant mean score difference in truancy reduction between the REBT and control groups in the post-test period was rejected. Consequently, at the post-test time, there is a substantial mean score difference in the reduction of truancy between the REBT group and the control.

Research Question 2:

What is the mean score difference in the rate of reduction of truancy of students exposed to REBT and control group at follow-up period?

Table 3: Mean and Standard Deviation on Difference in the rate of reduction of truancy of students exposed to REBT and control group at follow-up period

Source		Post-test		Follow-up		Mean Reduction	Mean Reduction Difference
Groups	N		SD		SD		
REBT	8	1.27	1.34	1.21	1.77	0.06	
							0.04
Control	8	3.46	1.43	3.44	0.90	0.02	

Table 3 shows that subjects with truancy who received Rational Emotive Behaviour Therapy (REBT) had a post-test mean score of 1.27 with a standard deviation of 1.34 and a

follow-up mean score of 1.21 with a standard deviation of 1.77. Similarly, patients with truancy in the control group had a post-test mean score of 3.46 with a standard deviation of 1.43 and a follow-up mean score of 3.44 with a standard deviation of 0.90. The table also demonstrated that patients with truancy who were exposed to rational emotive behaviour therapy (REBT) had a mean reduction of 0.06, whereas their counterparts in the control group had 0.02.

The mean reduction between the rational emotive behaviour treatment (REBT) and the control group is 0.04, implying that participants with truancy who received rational emotive behaviour therapy (REBT) had a mean reduction in their truant behaviour compared to their counterparts in the control group. Consequently, the results suggested that the treatment gains of the REBT group were maintained after one month of follow-up.

Hypothesis 2:

There is no significant mean score difference in the rate of reduction of truancy of students exposed to REBT and control at follow-up period.

Table 4: Analysis of Covariance (ANCOVA) on Difference in the Rate of Reduction of Truancy of Students exposed to REBT and Control Group at Follow-up Period

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected model	2263.221a	2	1131.611	10.6625	.002
Intercept	4136.357	1	4136.357	41.3965	.000
Posttest	2255.717	1	2255.717	22.575	.000
Follow-up	91.240	1	91.240	0.913	.286
Error	1348.919	13	103.763	0.879	
Total	7016.000	16			
Corrected Total	1045.5385	15			

a.R Squared = .001 (Adjusted R Squared = .068)

Table 4 shows that there was no significant mean score difference in the reduction of truancy between the REBT treatment group and the control group at follow-up. The computed f-value of 0.879 for the difference in truancy reduction between the REBT treatment group and the control group at follow-up is less than the f-critical value of 1.96 with 13 degrees of freedom at the 0.05 level of significance. As a result, the null hypothesis of no significant mean score difference in decrease of truancy between the REBT treatment group and the control group at follow-up was maintained. Thus, the truancy mean scores of the REBT group did not differ significantly between the post-test and one month follow-up period.

Discussion of Findings

The discussion of the findings of the study were based on the research suggestions and hypotheses that guided the study.

The results in Tables 1 and 2 for the first research question and hypothesis demonstrated that exposing truant individuals to REBT treatment considerably reduced their truancy. This is demonstrated by the finding that subjects with truancy who received REBT had a higher reduction in truancy than those in the control group at posttest. The hypothesis revealed a substantial mean score difference in the rate of truancy reduction between the REBT group and the control group during the post-test period, demonstrating the treatment's efficacy. The study supported Muhammad's (2020) findings on employing rational emotive behaviour therapy (REBT) counselling to minimize absenteeism among students at Ahmadu Bello University in Zaria. The counselling approach using the rational emotive behavior therapy (REBT) paradigm proven to be beneficial in reducing student absenteeism. In addition, the patient believes that they are not alone or lonely. Encouragement entails directly advising clients to utilize rational emotive behaviour therapy rather than continuing with self-defeating behaviours. In addition, efforts by schools, teachers, counsellors, researchers and society at large to reduce truancy rates through non-therapeutic approaches such as increased supervision, close monitoring, scolding, punishment, and suspension appear to have yielded unsatisfactory results (Ehindero, 2015). This is to say that REBT may not necessarily reduce truancy among in-school adolescents. Other techniques may be combined to enhance the effectiveness of treatment.

The results in Tables 3 and 4 reveal that rational emotive behaviour therapy (REBT) significantly reduced truant behaviour in participants with truancy, and the treatment improvements were maintained following a one-month follow-up period. The hypothesis that there is no significant mean score difference in the rate of truancy between patients exposed to REBT and the control group at the follow-up period was rejected. The study supported Obi and Nicholas' (2020) findings on the usefulness of rational emotive behaviour therapy (REBT) in reducing academic stress among undergraduate students in Rivers State. The results demonstrated that the treatment condition had a substantial effect on academic stress levels. This demonstrated that the treatment condition caused a significant drop in the academic stress level of students in the REBT group in comparison to those in the control group.

Conclusion

Based on the findings of the study, it was concluded that rational emotive behaviour therapy significantly reduced the truancy of in-school adolescents. This was evidenced from the findings that in-school adolescents exposed to REBT had higher mean rational emotive behaviour therapy than those in the control group. This implies that in-school adolescents exposed to REBT significantly reduced their incidence and prevalence of truancy.

Recommendations

Based on the findings and conclusions drawn from the study the following recommendations were made:

♦ Government should establish functional guidance and counselling in each public school and employ a qualified school counsellor.

♦ School guidance counsellors should employ rational emotive behavior therapy (REBT) to reduce truant behavior in students who are referred to them.

♦ School administrators that have challenges of truancy of adolescents against the opposite sex or the same sex should use appropriate behaviour modification techniques such as Rational Emotive Behaviour Therapy (REBT) irrespective of gender.

Limitation of the Study

There may be chances of the inclusion of those who might not have been involved and the exclusion of those that should be included in the study due to sampling error. The inclusion of such adolescents and the exclusion of those who should have been included might have affected the result, but the researcher made adequate efforts to include high percent of in-school adolescents identified with truancy incidences as recorded in attendance register.

Suggestion for Further

Researchers should strive to conduct more studies to discover other unwanted behaviours that Rational Emotive Behaviour Therapy (REBT) could be effectively applied to in other to ensure good teaching and learning in schools. Future researchers should discover other counselling techniques that can ameliorate the in-school adolescence from single-parent homes.

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