EFFECT OF COGNITIVE RESTRUCTURING COUNSELLING TECHNIQUE ON TIMID BEHAVIOUR AMONG JUNIOR SECONDARY SCHOOL STUDENTS IN DALA ZONAL EDUCATION DIRECTORATE, KANO STATE, NIGERIA

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B.A. Ed. Hausa (BUK) Second Class Upper (2014)

A DISSERTATION SUBMITTED TO THE SCHOOL OF POSTGRADUATE STUDIES THROUGH THE DEPARTMENT OF EDUCATION, BAYERO UNIVERSITY KANO, IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE AWARD OF MASTER'S DEGREE OF EDUCATION IN GUIDANCE AND COUNSELLING.

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APRIL, 2021

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DEDICATION

This work is dedicated to my beloved parents; late Ali Hashim (Bunun Kano) and my mother HajiyaSadiya Ahmad, may Allah (S.W.T.) forgive them and grant them withJannatul Firdausi, Ameen.

AKNOWLEDGEMENTS

TABLE OF CONTENTS

Contents   **Pages**

CHAPTER ONE: INTRODUCTION

CHAPTER TWO: REVIEW OF RELATED LITERATURE

LIST OF TABLES

OPERATIONAL DEFINITION OF TERMS

For the purpose of this study, the following term was operationally defined.

TimidBehaviuor: Timid behaviuor is an emotional behavior problem of easily frightened and excessive shyness identified with 'Timid Behavior Scale' as having scoring 15 or less points.

Cognitive restructuring counseling technique: refers to the counselling technique where by a clients are led by the counselor to learn how to think differently, to change fundamental faulty thinking, and replace it with more rational, realistic and positive thinking.

ABSTRACT

The study assessed the effect of cognitive restructuring counselling technique on timidbehaviour among junior secondary school students in DalaZonal Education Directorate, Kano State, Nigeria. The objectives of the study were to find out the prevalence oftimid behaviour among junior secondary school students, effect of cognitive restructuringCounselling technique on timid behaviour, difference in the effect of cognitive restructuringCounselling technique on timid behaviourbetween male and female and private and public junior secondary school students in DalaZonal Education Directorate, Kano State. Based on these objectives one correspondence research question and three null hypotheses were formulated. The design of this study was quasi experimental design in form of pretest posttest design. The population of this study comprised15,821 male and female students in both public and private JSS 2 students with 198 JSS II studentswho exhibited the symptoms of timid behavior in DalaZonal Education Directorate, Kano State. Out of them 60 were purposely sampled to participate in the study. An adopted instrument namely 'Rosenberg Self-Esteem Scale (RSES)' was used as a data collection instrument. The validity and reliability of the instrument was obtained with established reliability index of 0.68. Frequency count and percentage as well as t-test were used for data analysis. The study found that: the prevalence oftimid behaviour among junior secondary school students in DalaZonal Education Directorate, Kano State is 53.51%, there is significant difference in the pre-test and post-test mean scores of timid behaviour among junior secondary school students exposed to cognitive restructuring Counselling technique in DalaZonal Education Directorate, Kano State, there is no significant difference in the post-test mean scores of timid behaviour between male and female junior secondary school students exposed to cognitive restructuring Counselling techniqueDalaZonal Education Directorate, Kano State and there is no significant difference in the post-test mean scores of timid behaviour between private and public junior secondary school students exposed to cognitive restructuring Counselling technique in DalaZonal Education Directorate, Kano state.The study concluded that,cognitive restructuring Counselling techniqueis significantlyeffective in the reduction oftimid behaviour among junior secondary school students in DalaZonal Education Directorate, Kano state. Therefore it is a relevant counselling technique in the reduction of timid behavior among students. Lastly, the study recommend that, adequate attention should be given to the psychological and physiological causes of timid behavior and a comprehensive and structured cognitive restructuring counselling technique should be formulated and utilized in the school guidance and counsellingprogramme.

CHAPTER ONE

INTRODUCTION

1.1 Background to the Study

Timid behaviour is one of the behaviour that causes emotional disturbances. Emotions are often thought of as irrational or non-intellectual feelings that are beyond control. However, emotions are complex states of mind and body, consisting of physiological, behavioural, and cognitive reactions to situations that can be managed and directed. Cognitively, individuals interpret an event as one that may be sad, dangerous, or joyous. Although emotions have the potential to energize students' thinking, emotional states also have the potential to interfere with learning. If students are overly excited or enthusiastic, they might work carelessly or quickly rather than working methodically or carefully. In addition, emotions such as anger, anxiety, fear and sadness have the potential to distract students' learning efforts by interfering with their ability to attend to the tasks at hand. Emotions can interfere with students' learning in several ways – limiting the capacity to balance emotional issues with schoolwork; creating anxiety specifically about schoolwork; and triggering emotional responses to classroom events, among others (William, &Miller, 2003).

What is urgent in education is enabling emotionally worried youths to break off from the fetters that are oppressive like fear, timidbehavior, aggression anxiety, nervousness and depression. Freeing youths means, freeing them from self-downing, self-defeating behaviours and helping them to be creative nation builders through accepting the reality of themselves, their people and the world at large for education has, as its aim, formation of character, and if education is to be relevant, then these emotionally sick students need to be helped (Powel, 2003).

Experience shows many students in junior secondary schools are suffering with timid behaviour as you found them not associating themselves with school activities such as participating in class

work, group assignment, and school clubs. Some of these students could not express their mind even when they were required to do so. They avoid their colleague and hide their potential qualities.

It is common with junior secondary school students to develop other behaviour disorder as a result of timid behaviour such as anxious disorder since they can easily frighten, they develop excessive shyness because they often worry that things will go wrong with them. Therefor school counsellor need to identify relevant counselling technique and appraisal strategies that could be used in handling these timid students.

Many factors play significant role in shaping emotions of students that warrant them to develop timid behavior. Timid behavior are based on rational, and irrational beliefs. These are beliefs thought of as attitudes that describe a person's stance or position towards something. For instance, among other factors, Parents as role models and reinforcing- punishing agents play a major part in preventing, minimizing, or exacerbating emotional and behavioural problems such as timid behavior in their children; the environment of the individual not only creates the conditions for normal cognitive, affective development, but also provides the basis for the child's learning of situation-specific adaptive behaviour as well as acquiring of mediational control of emotions; the school teachers too have an impact on students because the students are influenced by their lives, teachings, conversations and values, in essence, some teachers were lethargic, strict and inactive while a few were gentle and caring (Anthonio,2010).

Timidbehavior is one of the personality disorder manifested on students in schools which is characterized by feelings of extreme social inhibition, inadequacy and sensitivity to negative criticism and rejections. It causes significant problems to students with timid behaviors which

lead to inability to interact with others and maintain relationships in academic life. It makes them to avoid work or school activities as a result of fear of rejection or low self-esteem.

The major symptoms of timid behavior are low self-esteem, strong feelings of inadequacy, sensitive to rejection, self-conscious, excessive shy, inhibited, fear of criticism or rejection and inferiority feeling to others. The central fear of people with timid behavior is rejection, ridicule and humiliation by others. It often interferes with occupational functioning, work and school avoidance especially one that requires inter-personal contact and they are also reluctant to take risks or engage in new activities.

One of the possible behaviours problems among junior secondary school students is timid. Philips (2000) opined that timid is a personality trait associated with feelings of apprehension, lack of confidence, or awkwardness experienced when a person is in proximity to, approaching, or being approached by other people, especially in new situations or with unfamiliar people. The term is often used by laypersons as a blanket-term for a family of related and partially overlapping afflictions, including shyness around new people, bashfulness and diffidence, lack of assertiveness, apprehension and anticipation of interaction, social anxiety, or intimidation. Such timid may come from personality introversion, genetic traits, or the environment in which a person is raised.

Cognitive Restructuring (CR) as one of the Cognitive Behavior Therapy (CBT) is a Counselling process of learning to identify and dispute irrational or maladaptive thoughts and dispute irrational thoughts which are commonly associated with many mental health disorders such as timid. It is being used to help individuals experiencing a variety of psychiatric conditions including depression, anxiety disorders, bulimia, and social phobia, Avoidance Personality Disorder, among others. It is also a useful technique for understanding what lies behind negative

moods. CR is a useful tool for understanding and turning around negative thinking. It helps put unhappy, negative thought, under the microscope challenging them and in many cases receipting the negative thinking that lies behind them. In doing this it can help person to approach situations in a positive frame of mind. A number of studies demonstrated considerable efficacy in using CR-based therapist, this is why this study examined its efficacy in the treatments of timid behaviors among junior secondary school students in Dala education zone.

Cognitive restructuring is of the view that people are responsible for generating undesirable behavior or faulty thinking among themself, in which ones set unachievable goals by saying that everyone are timid, must love him or fear him or he said that "I can fail Cognitive restructuring then advises student to change such irrational beliefs and substitute them with more rational ones. It is very difficult for us to develop ourselves when our students right from the lower level of post primary school are emotionally disturb. Many of thesestudents at the secondary school level are drifting away from the normal life stream throughself-defeatingbehaviours (SDBs) that are destructive to self-academic excellence, other life endeavours. Students can grow emotionally only in an atmosphere of freedom, acceptance and recognition. Therefore, it is against this background that this research work investigated the effect of Cognitive Restructuring Counselling Technique on timid among junior secondary school students in Dala Education Zone of Kano State, Nigeria

1.2 Statement of the Problem

The study assessed the effect of cognitive restructuring counselling technique on timid behaviour among junior secondary school students in DalaEducation Zone, Kano State, One of the possible behaviours that causes emotional disturbances (EDBs) among junior secondary school students is timid behaviour. The researcher experience shows the adverse effect of this unwanted

emotionally social disorder seems to have rendered our junior secondary school students' learning domains weak, and potent. Students experiencing this timid personality are exercising difficulty in almost everything they happened to be engaged or doing ranging from mingling with the school peers, to approaching, or being approached by other people. They fear new situations, and lack assertiveness, and apprehension, as well as experiencing great socialdisturbances that may compel the child to even refrain himself from showing up within the school parameter (for instance, timid components from syndromic perspective – private timid and public timid).

Timidbehavior as a primarily source of avoidance, and reducing the level of individual's effectiveness in the presence of other people is grounded both in nature and in upbringing.Timid, could also be seen as a complex set of characteristic syndromes related to simultaneous malfunction of behavioural, emotional and self-appraisal spheres. These EDBs are exhibited by practically many junior secondary school students in one form or the other; this in turn is affecting the Students population in their poor academic performance as well as in self-destructive behaviours.

Poor academic achievement is one of the major problem face by students with the symptoms of timid behaviors because they tend to avoid any academic activities that required group work or expressing their views in public as a result of excessive shyness or feeling of inadequacy. And as a result of their avoidant behavior they could not get peer support. Psychological treatment can reduce the symptoms of the timid behaviors, unfortunately, observations shows that the psychological process is been neglected and receive less attention in the treatment of the disorder. The persistent of the symptoms of timid behaviors among junior secondary school students in Dala education zone whose experiences provide too little support for the development

of a positive view of self and who find the world as they see it hostile and unpredictable are subjected to a kind of alienation that leads to low self-esteem and worth. Indeed, these symptoms may cause students to avoid participating in all academic activities of the school or general teaching and learning activities in the school.The researcher experience observed that, the attitude of teachers, counselors and all concerned towards students with the timid behaviors especially in junior secondary schools is very alarming.

There are many factors that lead to the timid behaviour among students in the world but it depend with gender, parental socio economic background and learning infrastructure, timid behaviour is more prevalence among female students than male students and affect his academic achievement as well as social interaction among his colleagues because biologically and culturally female students failed to express themselves or his views in front of others similarly socialization also play an important role on the negative impact of timid behaviour between male and female because female were left at home with their parents while male students were outside and interact with different people. Learning infrastructural materials is also another factors that cause timid among students and affect academic performance because most of students from private schools are exposed with enough and well learning equipment which will help them to express themselves such as internet, computer, reading materials and others gargets.

The researcher experience have shown that Students who came from low parental socio economic status have to be more timid than those who came from high socio economic status because they were more social and interact with people than those who came from low parental socio economic status.

Several efforts were made by the researchers on handling timid behaviour among students using different method or design such as descriptive survey design e.g. study conducted by Jimba on

relationship between self-esteem and parenting style and timid behaviour among secondary school students. But up to know there is still needs for intervention on reducing timid behaviour among students.

Cognitive restructuringCounselling technique were used by the researcher on handling and shaping behavior among junior secondary school students because is based on the assumption that beahaviour can be changed if identified, challenge and evaluate with more rational thought through cognitive rehearsal and listening rational alternatives.

It is against this background that this research work investigated effect of Cognitive Restructuring Counselling Technique on timidBehavior among junior secondary school students in Dala Education Zone, Kano State, Nigeria.

1.3 Objectives of the Study

The objectives of the study were to find out:

1. Prevalence of timid behaviour among junior secondary school students in DalaZonal Education Directorate.

2. Effect of cognitive restructuringCounselling technique on timid behaviour among junior secondary school students in DalaZonal Education Directorate.

3. Difference in the effect of cognitive restructuringCounselling technique on timid behaviourbetween male and female junior secondary school students in DalaZonal Education Directorate.

4. Difference in the effect ofcognitive restructuringCounselling technique on timidbehaviour between private and public junior secondary school students in DalaZonal Education Directorate.

1.4 Research Question

In line of the objectives of the study One Research Question were answered:

1. What is the prevalence of timid behaviour among junior secondary school students in DalaZonal Education Directorate?

1.5 Hypotheses

The following hypotheses were tested at 0.05 level of significance:

1. There is no significant effect ofcognitive restructuringCounselling technique on timidbehaviour among junior secondary school students in DalaZonal Education Directorate.

2. There is no significant difference in the post-test mean score of timid behaviour between male and female junior secondary school Studentsof DalaZonal Education Directoratetreated with cognitive restructuringCounselling technique.

3. There is no significant difference in the post-test mean score of timid behaviour between private and public junior secondary school Studentsof DalaZonal Education Directoratetreated with cognitive restructuringCounselling technique.

1.6 Significance of the Study

The study in the effect of cognitive restructuring counselling technique on timidbehaviour among junior secondary school students is expected to be useful to teachers, students, parents, educational administrators and policy makers. The study is useful to teachers by offering them insights on students experiencing timid personality, and prepare possible approaches of effecting behaviour modification in such secondary school students so as to assist them into becoming more sounding, and emotionally balanced.

The study, through its findings will, also, assist Parents in noticing when their children are experiencing emotional disturbances, and designed new strategies, so that the mismatch

behaviour could be, arrested, minimized, prevented, or exacerbated in their children, and help the children behave in more responsible manner.

All counsellors in education will also benefit from this study through highlighting areas where improvements on cognitive restructuring counselling technique on timid are needed.

The finding of this study would also highlight to the state ministry of education the need for making provision or policy, and services for studentssuffering from emotional setbacks or have developed signs of Low Frustration Tolerance, and bring about all round development of individuals physically, mentally, emotionally, socially and spiritually.

1.7 Scope and Delimitation of the Study

The scope of this study covered the effect of cognitive restructuring counselling technique on timidbehaviour among junior secondary school II students in Dala Education Zone, Kano State, The study also covered all public and private junior secondary schools in Dala Education Zone, Kano State therefore all other education zone were delimited from the study, secondary schools under science and technical board were also delimited from the study. The study also delimited to other class level such as JSS I and JSSIII, other counselling techniques such as Social Skills Counselling technique, Self-management counselling technique and Response Cost Counselling technique were delimited from the study. The study also delimited to other behavioural problem such as Anxiety, bullying, and personality disorders and hyperactive.

CHAPTER TWO

REVIEW OF RELATED LITERATURE

2.1 Introduction

This chapter presents review of related literature on the concept of Cognitive Restructuring Counselling Technique on Timid among junior secondary school students in Dala Education Zone, Kano State. The chapter was discussed related concept such as: conceptual frame work, timid, causes of timid, effects of timid, gender and timid, cognitive restructuring Counselling technique, process of cognitive restructuring Counselling technique, effectiveness of cognitive restructuring Counselling technique, cognitive restructuring counselling technique and timid behavior, theoretical frame work, rational emotive therapy (Albert Ellis), review of empirical studies, and lastly summary and uniqueness of the study was provided.

2.2 Conceptual Framework:

2.2.1 Timid Behavior

Dzwonkowska (2009) defined timid from both symptomatic and syndromatic approach as either a state of being a form of social fear or a relatively stable or permanent human character trait being dispositional. Crozier and Design (2009) explained timid as primarily avoiding social interactions and reducing the level of individual's effectiveness in the presence of other people. Borecka-Biernat (1999) observed that timid is grounded both in nature and in upbringing. Its causes may be traced in chemical processes in brain, the level of reactivity, the way being treated by others such as parents, teachers, and misappraisal of oneself, adaptive problems, appearance, and low tolerance for ambiguity or cultural expectations. Carducci (2008) maintained that timid is frequently underlined by namely self-appraisal which is a specific attitude of timid people towards themselves displayed as a sense of inferiority, lack of confidence, lack of trust in one's personal skills, diminishing actually held skills and a tendency to underestimate themselves.

Harwas-Napierała (2000) viewed the contemporary syndromatic approach of timid as a complex set of characteristic syndromes related to simultaneous malfunction of behavioural, emotional and self-appraisal spheres. Pilkonis, and Zimbardo (1999) determined two types of timid components from syndromatic perspective – private timid and public timid. They claim that every timid person experiences both components.

The relationship between social phobia and timid continued to be an area of controversy. In the revised third edition of the Diagnostic and Statistical Manual of Mental Disorder (DMM-lll- R; American Psychiatric Association, 1987), defined social phobia as a fear of one or more situation in which the person is exposed to possible scrutiny by others and fears that he or she may do something or act in a way that will be humiliating or embarrassing, while timid in the other hand was defined as a pervasive pattern of social discomfort, fear of negative evaluation, and timid which present in a variety of contexts.

Timid as a trait of character may also be regarded with respect to public self-awareness and apprehensiveness therefore the division into self-awareness timid and apprehensive timid (Buss, 2006). Harwas-Napierała (1995) noticed that social, including family, factors play a significant role in the shaping of timid. It is mainly about the personality traits of parents and their approach to upbringing. In his research (1994) Zimbardo proved that the timid of parents (especially the mothers) and their children are correlated (Dzwonkowska, 2009). The research also show that physical attractiveness influences the way individuals are socially perceived and whether or not they are going to be accepted (Aronson, Wilson, Akert, 1997, as cited in: Dzwonkowska, 2009).

2.2.2 Symptoms of Timid Behavior

Timid behavior is an emotion that affects how a person feels and behaves around others. Shyness can mean feeling uncomfortable, self-conscious, nervous, bashful, shy, or insecure. People who

feel timid sometimes notice physical sensations like blushing or feeling speechless, shaky, or breathless. Timid behavior is the opposite of being at ease with yourself around others. When people feel shy, they might hesitate to say or do something because they're feeling unsure of themselves and they're not ready to be noticed(Muazzama&Ifrah, 2012).

Christopher(2008) maintained that, timid behavior and shyness is most likely to occur during unfamiliar situations, though in severe cases it may hinder an individual in his or her most familiar situations and relationships as well. Timid individuals avoid the objects of their apprehension in order to avoid feeling uncomfortable and inept, thus the situations remain unfamiliar and the timid behavior perpetuates itself. Timid behavior may fade with time (a child who is timid toward stranger for instance, may eventually lose this trait when older and more socially adept), often by adolescence and young adulthood (most likely around the age of 13), or it may be an integrated, life-long character trait. Humans experience timid behavior to different degrees and in different areas. For example, an actor may be loud and bold on stage, but shy in an interview. In addition, timid behavior may manifest when one is in the company of certain people and completely disappear when with others one may be outgoing with friends and family, but experience love-timid behavior toward potential partners, even if strangers are generally not an obstacle (Christophr, 2008).

As stated in Muazzamaand Ifrah, (2012 the condition of true timid behavior may simply involve the discomfort of difficulty in knowing what to say in social situations, or may include crippling physical manifestations of uneasiness. Timid behavior usually involves a combination of both symptoms, and may be quite devastating for the sufferer, in many cases leading them to feel that they are boring, or exhibit bizarre behavior in an attempt to create interest, alienating them further. Instinctive behavioral traits in social situations such as smiling, easily producing suitable

conversation topics, assuming a relaxed posture and making good eye contact, which come spontaneously for the average person, may not be second nature for a timid person, requiring struggle or being completely unattainable. Timid behavior is considered to be a neutral personality trait by people who are not shy, but a very negative trait by those who are timid themselves(Yasmeen, 2005).

2.2.3 Causes of TimidBehaviour

Many attributions could be linked to timid, however, children may develop timid through

social learning – children copy parents, hence, if the parent is shy as will be the child also suggests that timid may be shaped as a result of parents depriving of children's needs e.g. if children lack satisfactory fulfillment of the need for security, independence and autonomy through excess requirements or over-protectiveness of parents (Harwas-Napierała, 2000).Dzwonkowska, (2009) revealed that the order in which children were born may influence the development of timid as the majority of shy people happened to be first-borns. Zimbardo (2002) opined that both low social acceptance and social rejection may become a factor that brings about timid. Further on Zimbardo (2002) outlines the factors that contribute to the development of timid: high appreciation of individualism and competition in society,

(a) promotion of the cult of "ego",

(b) rewarding individual successes and treating failures as a source of personal embarrassment,

(c) lack of faith in common social goals,

(d) discouraging from open manifestation of feelings,

(e) setting unlimited aspirations,

(f) Severe taboo concerning sexuality.

Timid bears some similarity to social avoidance, wary watchfulness and introversion in that it, too, can give rise to reticent behaviour. Timid students have difficulty with small talk, are slow to share their feelings and typically do not reciprocate when feelings are disclosed by others. However, timid as a behavioural inhibition is a distinct personality construct. A timid student may have different reasons for doing so, and might well in his being wants to interact more, but would be prevented from doing so by fear of social disapproval. Timid is rooted in social anxiety, which is defined as a fretful disquiet that stems from the prospect of negative evaluations from others. Timid individuals see themselves as somehow personally deficient, that leads to feelings of self-blame and shame. Timid is a painful way of being it limits speaking up in class, and compromises academic performance. When timid students are in an environment, such as a classroom, that arouses their fear of negative evaluation, they may suffer embarrassing manifestations such as blushing, sweating, stammering, shaking hands or knees and even dizziness.

2.2.4 Effects of TimidBehaviour

Timid has so many effects on people that are experiencing it, also, it has become an obstacle to meeting new people, enjoying interpersonal contacts, establishing friendships, and many other unwelcoming conditions. Timid people feel like they are left alone, unnecessary, not understood, worse. They also believe that timid inhibits them from being firm assertive when expressing their ideas or asserting their rights. Timid people suffer embarrassing manifestations as follow (Harwas-Napierała, 2000):

i.Mistrust of one's self;

ii.Avoidance of expressing thought;

iii.Excessive fear of public opinion;

iv.Refrain from activity;

v.Remain passive;

vi.Do not initiate activities;

vii.Withdrawal from interpersonal contacts.

Timid behavior is a tendency to feel tense, worried or awkward during social interactions (Cheek& Watson, 1989 as cited in Muazzama, and Ifrah, 2012) and timid people tend to feel embarrassed, uncertain, frightened and doubtfulabout their personal merits and capabilities (Crozier & Burnham, 1990 as cited in Muazzama, and Ifrah, 2012). It is reasonable tobelieve that this can lead to more passive behavior in school. Research shows that timid pupilsreport having difficulties asking for help needed in class and that they avoid social activities(Jones & Carpenter, 1986 as cited in Muazzama, &Ifrah, 2012).

Timid behavior involves anxiety and behavioral inhibition in social situations (Leary, 1986). Itoccurs most frequently in situations that are novel or suggest evaluation of the person orsituations where the person is conspicuous or others are intrusive (Buss, 1986 as cited in Muazzama, &Ifrah, 2012). Although allchildren may experience timid behavior sometimes, some children experience timid behavior to adebilitating degree. Timid children are perceived as less friendly and assertive than others, theyare not usually viewed as negatively as they fear. Timid children remember negative feedbackmore than other non-timid children and they remember negative self-descriptions better thanpositive self-descriptions. They overestimate the likelihood of unpleasantness in socialinteraction and are exquisitely sensitive to potential negative reaction in others, dealing withperceived threat by rumination and worry. In fact cognitive distraction has been shown tointerfere more than anxiety with social interaction (Yasmeen, 2005).

Timid children want to interact with unfamiliar others but don't because of their fear. Adifferent problem exists when a child simply prefers to be alone. These loner children, whoare rare, show little or no interest in observing others and little or no excitement whenapproached by others (Asendorpf, 1993 as cited in Muazzama, &Ifrah, 2012).

Timid children have been found to be less competent at initiating play with peers. Schoolagechildren who rate themselves as timid tend to like themselves less and consider themselvesless friendly and more passive than their non-timid peers (Zimbardo&Radl, 1981 as cited in Muazzama, &Ifrah, 2012). Suchfactors negatively affect others' perceptions. According to him timid people are often judgedby peers to be less friendly and likeable than non-timid people. For all these reasons, timid children may be neglected by peers, and have few chances to develop social skills. Childrenwho continue to be excessively timid into adolescence and adulthood describe themselves asbeing lonelier, and having fewer close friends and relationships with members of the oppositesex, than their peers.

The process of adjustment involves a person's attempt to cope with master, and transcendsuch challenges (Kaplan, 1995 as cited in Muazzama, and Ifrah, 2012). Harmony between the individual and the world. It is not justa supine bending to reality but a process of working to change both self and the environmentto achieve and maintain harmony (Bernard, 1964 as cited in Muazzama, and Ifrah, 2012). The psychological process of adapting to,coping with, and managing the problems, challenges and demands of everyday life (Simons,1994).

One study by Xinyin, Kenneth, and Boshu (1995) as cited in Muazzama, and Ifrah, (2012) on social and school adjustment of timid and aggressive children in China. 57 extremely timid /inhibited children, 59 extremelyaggressive children, and 352 average children (aged 8 and 10 yrs) in 2nd and 4th grade inShanghai were compared on sociometric nominations of peer

acceptance and rejection;teachers' assessments of school related competencies self-report measure of depression; andChinese measures of normative school behavior, honor ship, leadership, and academicachievement. Aggressive were more likely to have difficulties in adjustment than were theiraverage age-mates. Timid /inhibited were more accepted by peers than were their average age mates.

Compared with average and aggressive, timid /inhibited were most likely to beconsidered for honor ship and leadership positions and were regarded by teachers as the mostcompetent in school. The three comparison groups did not differ on a measure of depression.Results support the traditional Chinese view of timid behavior as a positively valued characteristic.One study by D'Souza and his colleagues in (2001) study effect of timid behavior on various areasof adjustment among high school students. They were assessed using timid behavior questionnaireResults revealed that timid behavior has no differential effect on home and health adjustment.

However, there is a significant linear increase in the social, emotional and totalmaladjustment with the increase in level of timid behavior i.e., higher the timid behavior higher themaladjustment in social and emotional adjustment of the students.Paulhus, Duncan, and Yik, (2002) study Patterns of timid behavior in East-Asian and European heritagestudents. Reviews of the self-report literature suggest that timid behavior is more prevalentamong East Asians than among those of European heritage. The generalizability of that claimwas evaluated with four studies comparing students of Asian heritage (AH) and Europeanheritage (EH). Study 1 (N ¼ 897) confirmed a substantially higher rate of self-reported timid behavior among AH students (68%) than among EH students (44%). In Study 2 (N ¼ 309),the ethnic difference in self-reported timid behavior was substantially higher for classroom than forsocial situations. In Study

3 (N ¼ 213), the ethnic difference was strong for cross-ethnicitysocializing but nil for same-ethnicity socializing. In Study 4 (N ¼ 250), a behavioral indexclassroomparticipation was recorded and coded. The observed ethnic difference inparticipation rate showed a medium effect size comparable to the self-report difference (Muazzama, and Ifrah, 2012).

There was no ethnic difference, however, in the mean complexity and challengingness of theclassroom participations or in final course grades. It was conclude that the ethnic difference ismaximal for classroom participation because the latter situation combines several keycontributing factors to Asian timid behavior.

One study reports relationship between timid behavior and various areas of adjustment ofcollege students. They were assessed using timid behavior Questionnaire and Adjustment Inventoryfor College Students. Results revealed that timid behavior has got no differential effect oneducational adjustment of the students. There is a significant linear increase in the home,health, social, emotional and total maladjustment as the level of timid behavior increased. Higher the timid behavior more was the maladjustment in home, health, social and emotional adjustments in thecollege students. In addition, treatment aspects of timid behavior are discussed (D'Souza,Ramaswamy, &Babu, 2008).

2.2.5Gender and Timid Behavior

A definition of gender identity establishes it as a person's own feeling about their gender whether they are male, female, both or neither. In the construction of gender identities, there is recognition of the interplay of several other factors, primarily race and social class; thus, certain students are positioned in schools in ways that can produce cumulative disadvantage (Paechter, 2001). Connell (2002) mentioned that school researches on gender today explicitly address issues such as the construction of masculinities and femininities, forms of violence such as

bullying and homophobia, and the active role of peers in the formation of school cultures. Francis, and Skelton (2001) explained that looking at schools and classrooms as key sites for the formation of beliefs about femininity and masculinity has necessitated close attention to everyday practices – teacher talk, peer culture, curriculum content, school messages, and a strong focus on the individual to examining the role of social contexts in the process of identity formation.   It has further necessitated observation and analysis of subtler social phenomena, often involving biased and unconscious practices. Younger (1999) postulated that the attention to gender in society has passed through several phases. Initially, concern with differences between men and women and the extent to which these might be based on biological attributes. Then attention centered on the socialization processes women and men experienced differentially in various societies. More recently, studies recognize gender as an organizing principle in all social institutions, from educational institutions and the workplace to legal systems.

Socialization is a central concept social theorists use to explain both cultural maintenance and cultural change. Socialization links the individual to collective life by molding members into compliance and cooperation with social requirements. At the same time, the process is not predetermined, because individuals may question and reject certain cultural features. In other words, the process is fluid and contingent on multiple factors; thus, some scholars consider that the term "identity formation" captures more the dynamic nature of the socialization process. Socialization clearly occurs in multiple institutions and settings, some of which, as the mass media and peer networks, are acquiring unprecedented levels of influence. Socialization in the schools, which touches substantially on the informal (hidden) curriculum, is a critical dimension of schooling through which educational settings may introduce changes in social perceptions or, conversely, continue to reproduce traditional values and attitudes. This socialization covers a

wide array of practices, ranging from administrators' and teachers' attitudes and expectations, textbook messages, peer interactions, and classroom dynamics, to the greater environment. The understanding of the sex criterion has a determinant role in the perspective of collective representations on timid, especially in a masculine world, as the one we live in – the woman seems timid than the man.

Gender connotes the set of visible characteristics that distinguish male and female, and the rolesConstructed for them by societal acceptance. The attention to gender in society has passed through several phases. Initially, concern with differences between men and women and the extent to which these might be based on biological attributes. Then attention centered on the socialization processes women and men experienced differentially in various societies (Heg, 2014). Looking at schools and classrooms as key sites for the formation of beliefs about femininity and masculinity has necessitated close attention to everyday practices – teacher talk, peer culture, curriculum content, and school messages. Such attention has shifted from a strong focus on the individual to examining the role of social contexts in the process of identity formation. It has further necessitated observation and analysis of subtler social phenomena, often involving biased and unconscious practices (Connell, 2002).

2.3.1 Cognitive Restructuring Counselling Technique

Cognitive restructuring was originally developed by Ellis (1989). It is a psychotherapies process of learning to identify and dispute irrational or maladaptive thought. Thisprocess of learning that identifies and challenge of irrational or maladaptive thoughts using strategies, such as logical identification. It also a process of replacing cognitive distortion with the thought that are more accurate and useful. Cognitive restructuring involves paying attention to thought, recognizing when they are irrational thoughts, challenging them, and learning replacement thoughts and

behaviors, says Connolly. People learn healthy ways to talk to themselves so that they can let go of the self-defeating talk (Diana, 2013).

Cognitive restructuring, is a process of recognizing, challenging, and changing cognitive distortions and negative thought patterns can be accomplished with the help of a therapist trained in cognitive therapy or cognitive behavioral therapy (Rupke, David & Marjorie 2006).

Cognitive restructuring and the disputing of dysfunctional or irrational beliefs of people who have emotional and behavioral disturbances date back to the ancient times, particularly early Asian Greek and Roman Philosophers who took to constructivist view of humans. A contemporary of the period called Epictetus concluded that people are disturbed not by the events that happen to them, but by their views of these events (Jane & Steven 2003).

Cognitive restructuring, also called cognitive reframing, is a behavioral technique associated with cognitive therapy. Cognitive restructuring involves learning how to think differently, to change faulty thinking, and replace it with more rational, realistic, and perhaps positive thinking, through cognitive restructuring, we can learn how to control our thoughts not simply be optimistic in all things, but be realistic as well (Diana, 2013).

Terms like reframing 'idea repairs' are all used to refer to cognitive restructuring. It is a therapy that was popularized by Ellis. Ellis (1989) argued that the primary causes of human distress are not unconscious impulses as opined by psychoanalysis, but that certain irrational beliefs are the causes of such behavior problems. Ogechiesere (2002) Ellis did not however claim to have initiated the CBT as he declared as follows;

> *I was not the first therapist to use what becomes known as Cognitive Behavior Therapy (CBT) since a few practitioners such as Herzberg (1945) and Salter (1949) had employed aspects of it previously. But I seem to have been the main Therapist to create Systematic Cognitive restructuring which I called disputing Irrational Beliefs. (Jane & Steven. 2003).*

Beck (1979), explains how a cognitive therapist can help a client to think and act more realistically and adaptively about his problems and thus reduce the symptoms of the behavior that deserves to be changed. Beck emphasized that cognitive techniques aim at delineating and testing the client's specific misconceptions and maladaptive assumptions. This approach consists of specific learning experiences designed to change the clients' unwanted behavior.

Therefore cognitive Restructuring is one of the most suitable approaches to treat Timid behavior because one of the major causes of timidbehavior is negative thinking. Cognitive restructuring involve four basic steps which identify by Hope, Burns, Hyes, Herbert and Warner (2010) identified four steps involved in cognitive restructuring and six types of automatic thoughts. The four steps include:

1. Identification of problematic cognitions known as "automatic thoughts" which are dysfunctional or negative views of the self, world, or future.

2. Identification of the cognitive distortions in the automatic thoughts.

3. Rational disputation of automatic thoughts with the Socratic dialogue.

4. Development of a rational rebuttal to the automatic thoughts.

5. The six types of automatic thoughts are:

    a) Self-evaluated thoughts.

    b) Thoughts about the evaluations of others.

    c) Evaluative thoughts about the other person with whom they are interacting.

    d) Thoughts about coping strategies and behavioral plans.

    e) Thoughts of avoidance.

    f) Any other thoughts that were not categorized.

2.3.2 Process of Cognitive RestructuringCounselling Technique

Cognitive restructuring refers to the process of replacing cognitive distortions with the thought that are more accurate and useful. Cognitive restructuring has two basic steps as enumerated in (Burns, 1980)

 (1) Identifying the thoughts or beliefs that are influencing the disturbing emotion;

 (2) Evaluating them for their accuracy and usefulness using logic and evidence, and if warranted, modifying or replacing the thoughts with ones that are more accurate and useful.

2.3.3 Effectiveness of Cognitive RestructuringCounselling Technique

Cognitive restructuring, in combination with other techniques, has been used successfully in Nigeria and other parts of the world to reduce anxiety and delinquent behavior among adolescent. cognitive restructuring in combination with other techniques, has also helped patients struggling with post-Traumatic Stress Behavior, Body Dysmorphic Behavior (BDD), Substance Abuse Habits (SAH) and Non –generalized Social Phobia (NGSP) (Bingeli,2013).

Cognitive restructuring has been used to help individuals experiencing a variety of psychiatric conditions, including depression, anxiety, bulimia, social phobia, borderline personality disorder, attention deficit hyperactivity disorder, gambling, avoidance personality disorder and other behavioral problem (Pull, 2007). Frojan-Pargol, Calero-Elviva, and Montana (2009) maintained that when utilizing cognitive restructuring in RET the emphasis is on the following two central notions: thoughts affect human emotion as well as behavior and irrational beliefs are mainly responsible for a wide range of disorders.

When utilizing cognitive restructuring in cognitive behavioural therapy (CBT), it is combined with psycho-education, monitoring, in vivo experience, imaginal exposure, behavioural activation and homework assignments to achieve remission (Huppert, 2009). The cognitive behavioral approach is said to consist of three core techniques: cognitive restructuring, training

in coping skills, and problem solving. Frojan-Pargol, Calero-Elviva, and Montana(2009) Huppert, (2009) maintain that there are many methods used in cognitive restructuring, which usually involve identifying and labeling distorted thoughts, such as, all or none thinking, disqualifying the positive, mental filtering, jumping to conclusions, catastrophizing, emotional reasoning, should statements, and personalization.

Huppert (2009) lists the following methods commonly used in cognitive restructuring:

 i. Socratic questioning

 ii. Thought recording

iii. Identifying cognitive errors

iv. Examining the evidence (pro-con analysis or cost-benefits analysis)

 v. Understanding idiosyncratic meaning/semantic techniques

vi. Labeling distortions

vii. Decastastrophizing

viii. Reattribution

ix. Cognitive Rehearsal

 x. Guided imagery

xi. Listing rational alternatives

The basic idea of cognitive restructuring is that peoples 'emotions and behaviors can be greatly affected by what they think. If people can consciously change their habits of what they say about themselves, they can make themselves happier or more productive or can accomplish any of several changes. Sometimes people do blame worthy things, and it is quite normal to get angry with these things. Sometimes, when something very bad is in danger of happening, some fear is appropriate. If we do things that hurt other people, it is quite appropriate to feel guilty. All these

stimuli are normal in life. But if we perceive them wrongly and record them wrongly in our cognition, then such cognition is bound to make us behave equally wrongly. Therefore in changing the behavior, we would need to change the cognition first. The good thing is that there are some ways of changing the unwanted behaviors as human beings have the capacity for rewriting their cognition.

Conclusively cognitive restructuring is widen one's conscious perspective and thus allow room for a change in perception., cognitive restructuring it also helps the client consider any maladaptive patterns in their thinking-feeling-behavior cycles. The client's goal is to rethink these patterns and consider more adaptive alternatives that will work better for him or her. Ultimately, the goal is to have the adolescents recognize that sometimes his thoughts lead to feelings and actions whichare antisocial. By examining and changing his thought (belief), help the timid to minimize chances of future misconduct (Baker &Scarth, 2002; Salman, Esere, Omotosho, Abdullahi, &Oniyangi, 2011; Okwun, 2011).

2.3.4 Cognitive Restructuring Counselling Technique and Timid Behavior

Cognitive restructuring Counselling technique is one of the behavior modification techniques that can be used on students with maladaptive behavior or irrational thinking which lead to timid Behavior. The main objective of cognitive restructuring Counselling technique are to identified, challenge, modified and dispute of maladaptive thought. This is show that students with timid behavior can use cognitive restructuring Counselling technique to modify their behavior by the School counselors or parents.

Cognitive restructuring are design to teach individuals on how to recognized, identified and challenge of irrational or maladaptive thoughts and replacing cognitive distortion that cause timid behavior among students, with the thought that are more accurate and useful. Students with

timid behavior can use cognitive restructuring technique to change their behavior and replace it with more desirable once by challenging it. Cognitive restructuring Counselling technique help the students to became aware of their behavior and evaluate his progress.

2.4 Theoretical Frame Work (Cognitive Behavior Therapy)

The cognitive behavior therapy(CBT)was pioneered by Beck in the 1960s, while he was a psychiatrist at the University of Pennsylvania. Cognitive behavior therapy is based on the idea that how we think affects our behavior and we can monitor. The behavioral change may be affected through mental reasoning, Dobson cited in (McLeod, 2009). It focuses on changing unhelpful or unhealthy thoughts and behaviors. It is a combination of two therapies: *cognitive therapy'* and *behavior therapy'*. The belief of both techniques is that healthy thoughts lead to healthy feelings and behaviors. Cognitive behavior therapy is based on a cognitive theory of psychopathology. The cognitive model describes how people's perceptions of, or spontaneous thoughts about, situations influence their emotional, behavioral and often physiological reactions. Individuals 'perceptions are often distorted and dysfunctional when they are distressed. They can learn to identify and evaluate their ―automatic thoughts‖ (spontaneously occurring verbal or imaginable cognitions), and to correct their thinking so that it is more closely resembles reality (Beck, 2017).

CBT was primarily developed through an integration of behavior therapy with cognitive psychology therapy. Many works conducted by Donald and several other authors with the label of cognitive behavior modification in the late 1970s. This tradition thereafter merged with earlier work of a few clinicians, labeled as cognitive therapy (CT), developed by Aaron Beck, Cognitive Restructuring, and Ration Emotive Therapy (RET) developed by Albert Ellis. While rooted in rather different theories, these two traditions have been characterized by a constant reference to

experimental research to test hypotheses, both at clinical and basic level. Common features of CBT procedures are the focus on the "here and now", a directive or guidance role of the therapist, a structuring of the psychotherapy sessions and path, and on alleviating both symptoms and patients' vulnerability (Martin, 2007).

In the 1960s, Beck, a psychiatrist, observed that during his analytical sessions, his patients tended to have an internal dialoguegoing on in their minds, almost as if they were talking to themselves. But they would only report a fraction of this kind of thinking to him. Beck realized that the link between thoughts and feelings was very important. He invented the term automatic thoughtsto describe emotion-filled thoughts that might pop up in the mind (Martin, 2007).

Beck called it cognitive therapy because of the importance it places on thinking. It is now known as cognitive-behavioral therapy (CBT) because the therapy employs behavioral techniques as well. The balance between the cognitive and the behavioral elements varies among the different therapies of this type, but all come under the umbrella term cognitive behavior therapy. CBT has since undergone successful scientific trials in many places by different teams, and has been applied to a wide variety of problems, Martin (2007). Cognitive therapy makes the assumption that thoughts precede moods and that false self-beliefs lead to negative emotions. Cognitive therapy aims to help the patient recognize and reassess his patterns of negative thoughts and replace them with positive thoughts that are more closely reflecting reality (Rupke, David and Marjorie, 2006).

As a result of his findings, Beck began to look for other ways of conceptualizing depression. He found that depressed patients experienced streams of negative thoughts that seemed to arise spontaneously. He called these cognitions-automatic thoughts.‖ He found that the patients 'automatic thoughts fell into three categories. The patients had negative ideas about themselves,

the world and/or the future. Therefore he began helping patients identify and evaluate these automatic thoughts. He found that by doing so, patients were able to think more realistically. As a result, they felt better emotionally and were able to behave more functionally. When patients changed their underlying beliefs about themselves, their world and other people, therapy resulted in long-lasting change. Beck called this approach cognitive therapy. It has also become known as cognitive behavior therapy(Martin, 2007).

2.4.1. Basic Principles of Cognitive Behavior Therapy

There are several approaches to CBT. These include Rational Emotive Therapy, Rational Behavior Therapy, Rational Living Therapy, Cognitive Restructuring Therapy, Social Skills Training and Dialectic Behavior Therapy. In general, most of these approaches follow the principles listed below (Grohol, 2015: & Beck, 2011):

a. Cognitive behavior therapy is based on an ever-evolving formulation of patients' problems and an individual conceptualization of each patient in cognitive terms.

b. Cognitive behavior therapy requires a sound therapeutic alliance.

c. Cognitive behavior therapy emphasizes collaboration and active participation.

d. Cognitive behavior therapy is goal oriented and problem focused.

e. Cognitive behavior therapy initially emphasizes on the present.

f. Cognitive behavior therapy is educative, aims to teach the patient to be her own therapist, and emphasizes relapse prevention.

g. Thoughts cause us to feel or behave in certain ways, not external things like people, situations, and events. This is the foundation of CBT. The benefit of this fact is that healthier thinking can lead to feeling better and reacting better even if people, situations, or events around us do not change.

h.   CBT works best when the therapist or coach teaching the principles has a positive relationship with the client.

i.   CBT is based on an educational model. The goal is to help clients unlearn their unwanted reactions and to learn a new way of reacting to people, situations, or events.

j.   Homework is important in CBT. Instructors who use a CBT model will frequently assign homework to their clients. The purpose of homework is to practice healthy ways of thinking and reacting to people, situations, or events.

Conclusively cognitive behavioral therapy is a form of psychotherapy that help the client to change on how he think (cognition) and what he do (behavior), these changes can help him to feel better and improve his mental wellbeing as well as breaking various negative thinking, feelings and thought or behavior .

The relevance of CBT to this study is that behaviors are changed and modified when you identify and challenge the maladaptive thought as well as encourage the client to change disruptive pattern of behavior. This means that behaviors are likely to be change when you teach the client on how to identify distorted cognition/thinking through the process of re-evaluation, and those who are not identified and challenged them are likely to be repeated.

2.5 Review of Empirical Studies

In a study conducted by Muazzamaand Ifrah (2012) on effects of timid behavior (shyness) on the adjustment of high school children two scales wereused , Shyness Questionnaire (Yasmeen, 2005) for measuring Shyness leveland Bell Adjustment Inventory (Bell, 1934) for measuring different types ofadjustment. Shyness questionnaire was in Urdu whereas Bell AdjustmentInventory was in English and both had highly satisfactory reliability. Therewere 150 school children and the age range was 13-15years. There were 75girls and 75 boys in the present

study. The main hypothesis of their study was that Timid Behavior (Shyness) has no differential effect on home and health adjustment but there was significance linear increase in social and emotional adjustment. Results also support this hypothesis that Timid Behavior (Shyness) has no effects on home and health adjustment but effects social and emotional adjustment of school children. Other hypothesis proved that girls are more timid as compared to boys and nuclear family children are timid as compared to extended family system children. Their study show that shyness has no differential effect on home and health adjustment whereas it effects on social and emotional adjustment of high school children.

A study conducted by Jimba (2017) on Relation between Self-esteem, Parenting Style and Timid among secondary school children in SabonGariLocal Government area of Kaduna state where a sample of 100 students selected from different schools of SabonGariLocal Government. Interpersonal Sensitivity Scale, Perceived Parenting Style Scale and Rosenberg's Self Esteem Scales along with socio demographic sheet were used for data collection. The results states that timid has negative relation with self-esteem. Further, it states that low self-esteem can be a good predictor of timid among children and authoritative parenting style may tend to develop timid and low self-esteem among children. The study further describes the relation between timid, self-esteem and parenting style among children, and hypothesized that there is significant relation between timid, self-esteem and parenting among children. Studies have shown that two parenting styles such as authoritarian and permission are more likely to have a low impact on child's emotional and cognitive development. The major conclusion elicited that low self-esteem is an interpreter of timid with high positive significant correlation. Self-esteem, the general self-evaluation one makes of oneself, can vary during life predominantly throughout major life changes. It is no speculate then that during the changes and challenges of adolescence there can

be significant changes in a teenager's assessment of their personal self-image or self-worth. Researches illustrate that that self-esteem acted as a mediator between introversion, reserve and anxiety. It is stated that up to a half of adolescents will resist with low self-esteem, many of these occurrences during the early teen years. Researches show that the increased rate of lower self-esteem is the transition from one stage of development to the next. The most remarkable transition period is from 8 years to 18 years. The development of self-esteem may change the status of the child or adolescent and may occur the comfort level. If the child is having high self-esteem, then the child will show low level of timid character. In other sense if the child shows high level of timid character then the child may have the low self-esteem.

A study conducted by Anyamene ,Chinyeluand chinyere (2017) on the effects of Cognitive Restructuring Technique on Lateness among secondary school students in Gombe State, Nigeria. One research question guided the study and one hypothesis was formulated. The study was carried out using quasi-experimental design. The population of students with lateness behaviour was one hundred and sixty-five (165) latecomers. A sample of ninety (90) students with very high late coming were selected from the two schools used for the study. An observation guide was adopted by the researchers for data collection. Pre-test and post-test were given to both groups. Observation guide was used in answering the research question and ANOVA was used in testing the hypothesis at 0.05 level of significance. The findings of the study showed that Cognitive Restructuring was effective in modifying lateness behaviour and reducing the magnitude of times of lateness among secondary school students. Based on the findings, recommendations were made including that Cognitive restructuring should be adopted by school counsellors as an effective treatment technique on students' lateness behaviour in school setting.

A study conducted by,Theophilus(2015) on the effect of cognitive restructuring on Delinquent Behavior among adolescent in Borstal training Institute, Barnawa, Kaduna state, Nigeria. The study employed a quasi-experimental, non –equivalent control group, pre-test-post- test design. The population of the study was 364 inmate out of which 40 inmate were purposively sampled and used for the study. The instruments used for data collection was conduct Disorder Scale (CDS) and inmate Therapeutic Technique Questionnaire (ITTQ). Research question and hypothesis were analyzed using mean, standard deviation and t-test. These hypothesis where drawn for this study and the findings reveal that significant difference exist between those in the experimental and control group in their aggressive ($p=0.05$, $t=1.96$), Hostility (0.30, $t=1.96$) and theft delinquent behavior ($p=0.000$, $t=1.96$) after exposure to cognitive restructuring treatment technique respectively. It was recommended among others that psychologist and those in the helping profession be encouraged to use cognitive restructuring technique to serve as corrective measures for delinquent adolescent. The study will serve as reference point for parents, teachers, owners of delinquent homes and the government.

A study conducted by, olubusayo(2014*),*in which he examine the effect of Cognitive-Restructuring training on mathematics anxiety in Mathematics among a group of Senior Secondary School Students in Ogun State. A 2 x 2 x 3pre-test, post-test factorial design (treatment, gender, and study habit) was used in the study. The sample was drawn from Mathematics anxious students who were randomly assigned to one experimental group and one control group. Only the experimental group was treated withCognitive Restructuring training while the control group received a placebo treatment. The subjects comprised ninety males and ninety females of high, medium and low levels of study habit. Two validated instruments namely Mathematics Anxiety Rating Scale Revised (MARS-R) by Plake and Parker (1982) and Study

Habit Inventory (SHI) by Bakare (1977) were used in generating response from the students. Analysis of Covariance was used to analyze the three hypotheses formulated and tested at 0.05 level of significance. Results of this study revealed a significant effect of treatment (Cognitive-Restructuring training) on subjects' level of Anxiety in Mathematics (F-ratio= 5.81, P <0.05). Cognitive-Restructuring was found to be more effective ($\times$ = 40.80) than the control group. The study also revealed that gender affected students' anxiety in Mathematics significantly (P<0.05) with male students having more reduction in Mathematics anxiety than female students. It was found that study habit did not affect students' anxiety in Mathematics significantly. Based on these findings, it was recommended that counselors could use Cognitive- Restructuring treatment as a strategy to reduce anxiety in Mathematics among Secondary School Students since it has been identified as effective

Cognitive restructuring, says the American Psychological Association, means "changing the way you think" (APA 2000, Shobola, 2007; Yahaya, 2006, Salman, et. al., 2011). Studies revealed that cognitive restructuring has been found to be very effective in the treatment of all forms of antisocial behaviors. Aderanti& Hassan (2011) report that cognitive restructuring is effective in the treatment of rebelliousness and disorderliness while Obalowo (2004) established its effectiveness in treating stealing. Findings from Aderanti and Hassan (2011) showed that cognitive restructuring is more effective on females than males 'rebelliousness and also effective on the rebelliousness of inmates from medium socio-economic backgrounds than the inmates 60 from both low and high socio-economic backgrounds. According to Aderanti and Hassan (2011), the effectiveness of cognitive restructuring in treating rebelliousness is not a surprise, because cognitive factors play an important and well documented role in delinquent behavior since the way people think has a controlling effect on their actions.

A study conducted by (Schmidt, Miskovic, Boyle andSaigal2008) on Shyness and Timid in Young Adults Who Were Born at Extremely Low Birth Weight among university students of California. Recent studies have noted personality differences among adult survivors ofvery preterm birth, including higher neuroticism and cautiousness and lower extraversion. We attempted to replicate and extend these recent studies by examining personality characteristics across multiple components of personality that traditionally define personality structure in a birth cohort of young adults born at extremely low birth weight (501–1000 g), the smallest and most at-risk infants. We assessed 71 (76% of the original birth cohort) extremely low birth weight and 83 (74% of the original cohort) term normal birth weight young adults by using well-validated personality measures, indexing 4 traditional components of personality: temperament (Cheek and Buss shyness and sociability and Eysenck neuroticism and extraversion), motivation (Carver and White behavioral inhibition and behavioral activation), cognitive and affective (Coopersmithself-esteem and University of California, Los Angeles, loneliness), and socialization (Eysenck psychoticism and lie). All of the participants were right-handed and free of neurosensory and psychiatric impairments. Findings revealed that extremely low birth weight adults reported significantly higher shyness, behavioral inhibition, and socialization (a measure of prosaically behavior defined by risk aversion and adherence to societal mores) and lower sociability and emotional well-being than their normal birth weight counterparts, replicating and extending the findings of previous studies. Conclusions Young adults who were born at extremely low birth weight and without major impairments are more cautious, shy, and risk aversive and less extravertedthan their normal birth weight counterparts, possibly placing them at risk for future psychiatric and emotional problems.

2.6 Summary and Uniqueness of the Study

This chapter provided the discussion on the conceptual framework of the study, and views of related studies were explained, the discussion of the theoretical framework of the study is based on Cognitive Behavior therapy. The study finds that Cognitive Behavior therapy, Change Theory as well as Causation Theory can be very useful factors in modification of students' attitudes concerning timid. The chapter also through the empirical assessed revealed that Cognitive Restructuring Counselling Technique could influence students' timid condition state to adjust toward meeting standards of intellectual competency, and social interaction.

This is study is unique in terms of dependent and independent variables of the study, population, sample size, sampling technique, most of the reviews were made used descriptive design and experimental design in form of pretest, posttest and experimental design, while this research where use Quasi experimented design inform of pre-test and posttest design only. This study is also unique in terms of area coverage which were covered only the effect of Cognitive Restructuring Counselling Technique on Timid Behavior in Dala Zonal Educational Directorate of Kano State.

In view of the above, the recent study fill in the gap by providing the new empirical data on the effect cognitiverestructuring counselling techniques ontimid behavior among junior secondary school students inDala Zonal Educational Directorate of Kano State.

CHAPTER THREE

METHODOLOGY

3.1 Introduction

The chapter presents the methodology adopted in the conduct of the study. The chapter explained the procedures used in this study. These procedures included research design, population of the study, sample size and sampling technique. The instrumentation, validity and reliabilityof data collection instrument, procedures for data collection and procedures for data analysis were also discuss.

3.2Research Design

The design of this study was quasi experimental design in form of pretest posttest design. This method was adopted because it is appropriate in bringing features from both pretest and posttest designs, and measured variables can be brought in, for gathering information about an existing condition so as to presents picture of the specific details of situations, social settings, or relationships (Neumann as cited in Kriel, 2007). Also, quasi experimental design permits the researcher to reach reasonable conclusions even though full control of the subjects and variables is not possible. (Ary, Jacobs &Razariely 2002).

3.3 Population and Sample

3.3.1 Population of the Study

The population of this study comprisedfifteen thousand eight hundred and twenty one (15,821) male and female students in both public and private Junior Secondary Classes (JSS 2) in Dala Zonal Educational Directorate e. Out of them three hundred and seventy Timidity Behavior Scale were distributed as suggested by Research Advisor (2016), who exhibited the symptoms of timid behavior in Dala Zonal Educational Directorate Kano State. Thetarget population were drawn

from 4 Public junior secondary schools, and 2 private junior secondary school existed in DalaZonal Educational Directorate.

Table 3.1: Population of the Study

S/N	Local Govt.	Type of School	Gender	Population
1	Dala	Public	Male	2539
			Female	3074
		Private	Male	846
			Female	1025
2	Gwale	Public	Male	2865
			Female	3388
		Private	Male	955
			Female	1129
		Total		**15,821**

Source: Department of Planning, Research and Statistics, KSSSMB, Kano State, 2018

3.3.2 Sample Size

A total of (60) JSSII students who exhibited the symptoms of timidbehavior were selected as sample size from six selected schools in Dala Education Zone of Kano State out of one hundred and ninety eight 198identified students with timid behavior. Four public and two Private junior secondary schools were purposely selected to conduct the study. The schools are GGSS MariyaSunusi, GSS Gwammaja, and AbubakarSadiq Academy from DalaLocal Government and GGSS SaniMainagge, GSS Gwale, and Abu Hanifa Academy from Gwale local government. This implies timid students were drawn from each School who met the criteria for selection as the sample size. However the used of (60) as sample size was guided based on the fact that sample size is determined by the style of the research (Cohen, Marion & Morrison 2002). Below is the table of sample size:

Table 3.2: Sampled Sizes:

S/N	LG.	Types of Schools	Gender	N	No. of Items Distributed	Students with Timid	Sample Size
	Dala	Public	Girls	3074	72	49	11
			Boys	2539	59	25	9
		Private	Girls	1025	24	14	2
			Boys	846	21	9	3
	Gwale	Public	Girls	3388	79	40	12
			Boys	2865	67	32	13
		Private	Girls	1129	26	15	6
			Boys	955	22	14	4
	Total			**15,821**	**370**	**198**	**60**

Source: Field work (2019)

3.3.3 Sampling Technique

Proportionate sampling technique was used in drawing up the sample for the study. In purposive sampling technique specific elements which satisfy some predetermined criteria are selected: the criteria to be used are usually of the researcher's judgment (Buba, 2012). The purpose of using purposive sampling technique is to select the JSSII students who are timid in school to participate in the study. Gay (2009) also stated that researchers using this technique to select sample using their experience and knowledge of group to be sample. Dala Zonal Education Directoratewas selected and four junior secondary schools and Two private were randomly selected, from these six randomly selected schools timid students will be selected in each school from identified making a total of (60) timid students.

3.4 Data Collection Instrument

To collect the data for the study for the identification of students with the symptoms of timid behavior and in the pretest and posttest the researcher used the adapted instrument fromRosenberg Self-Esteem Scale (RSES) namely 'Timid Behavior Scale'.The RSES is an instrument for evaluating self-attitude and self-evaluation tool, the items used in the instrument

for data collection was fromDoganand who performed the tool's validity and reliability studies in Turkey (1986) and was adapted by the researcher.

3.4.1 Description of the Instrument (Timid Scale)

The scale entitled, the timid Scale contained itemsadapted from Rosenberg Self-Esteem Scale (RSES)that elicited information about the respondents. All the questions were on the four-point, likert scale: Strongly Agree (SA); Agree (A); Strongly Disagree (SD) and Disagree (D), the scale will be scored as follows: strongly agree = 4, agree = 3, strongly disagree =2, and disagree = 1. All the items of the instrument contain a statement based on the symptoms of timid.

3.4.2 Scoring Procedure

The instrument Timid Scale has Ten (10) items, therefore the scoring procedure done by the researcher using four (4) likert scale, the total score range from 10-40 and 15 as the cut off mark. Therefore, any respondents who scored 15 and below met the criteria for selection and was selected as students with timid behavior. While those who scored above 15 were not considered and not met the criteria for selection.

3.5 Validation of the Instrument

3.5.1 Validity of the Instrument

The research instrument timid Scale was carefully adopted by the researcher and was already validated by professionals in the field of Counselling, in Turkey, and the instrument was said to have face validity, construct validity, and content validity. For instruments to be valid in Dala Zonal Education Area of Kano State, copies of the instrument were given to the research supervisor and other experts in the field of Guidance and Counselling, in Bayero University Kano through face and content validity.

3.5.2 Reliability of the Instrument

Reliability coefficients of the Timid Behavior Scale instrument was established using the test re-tests method.Twenty JSS two students were selectedwithin the study area to conduct a pilot study among JSSII Students in the study area who were not included in the sample size. The instrument was administered to them for the first time and second time within an interval of three weeks. Pearson product moment correlation co-efficient used in computing the correlation co-efficient of the instrument. A reliability co-efficient of 0.68 was obtained hence the instrument was statistically adjudge to be reliable and considered suitable for research use.

3.6   Procedure for Data Collection

The researcher secured permission from the relevant authorities to carry out the study in the schools identified. The study conducted during the school hours in each school with the help of research assistant, the instrument administered concurrently in the classes organized for the study. This precaution was considered necessary in order to prevent leakages that could give a group an advantage over the other.

3.6.1 Pre-Test Session

At this researcher with the help of research assistant from the sampled schools, the researcher explained the students on what to do with the instruments. Then copies of the instruments were given to the students to respond. The result obtained were kept up to the time that the researcher post-test the groups and used it to determine the differences or otherwise on the treatment groups.

3.6.2 Treatment Session

This segment engage with interaction meeting between the researcher and the identified timid students from sample schools, which involved the use of Counselling intervention in which the

researcher used Cognitive Restructuring Counselling Technique on the identified timid the treatment lasted for about 25-30 minute session and it was twice in a weeks (Tuesday and Thursday) for period of six weeks.

3.6.3. Post–Test Session

In this segment the researcher also administered the instrument again in which the same procedure was used in pre-test. Pre-test and post-test results was analyzed and compare it for differences or otherwise. The extent of the difference in the behavior mean score determine the significant effect of Cognitive Restructuring Counselling Technique on the treatment giving during the period of intervention.

3.7 Procedures for Data Analysis

The data collected from this study weresubjected to statistical analysis. Descriptive statistics in form of frequency count and percentage was used inanswering research question while t-test for related sample was used to test the null hypothesis one and t-test for independent sample was used to test hypotheses two and three respectively at the 0.05 level of significance.The used of t-test was considered appropriate because it is the best statistical tools for determining significant difference between two groups (Gay, 2009). Therefore, they are the most appropriate statistical tools for the study.

CHAPTER FOUR

DATA PRESENTATION ANALYSIS

4.1 Introduction

The chapter presents the analysis of data collected from the experimental study. Summary of findings and discussion of results were also presented in the chapter. The basis for the determination of the rejection or acceptance of the null hypotheses is 0.05 levels of significance. Frequency count and percentage were used for the descriptive analysis in answering research question. The t-test for relative sample and for independent sample were used to test the hypotheses.

4.2 Data Presentation

The result of data analysis is presented here with tables indicating different result of the findings of the research question and hypotheses.

4.2.1 Summary of Data

Table 4.1 Distribution of Respondents by Gender and Local Government and Types of Schools:

Gender	Frequency	Percentage
Male Students	29	48%
Female Students	31	52%
Total	**60**	**100%**
Local Govt.		
Students of Dala LG	25	41.7%
Students Gwale LG	35	58.3%
Total	**60**	**100%**
Types of Schools		
Public School Students	49	81.7%
Private School Students	11	18.3%
Total	**60**	**100%**

Source: Field Work (2019).

Table 4.2 above shows frequency and percentage of the distribution of respondents according to gender, types of schools and local government. It present that, the total male respondent were

29(48%) and that of female were 31 (52%). The total number of the respondents from Dala local government were 25 (41.7%) and that of Gwale local Government were 35 (58.3%). And the total number of the respondents from public schools were 49 (81.7%) and that of Private schools were 11 (18.3%).

4.2.1 Answering Research Question

Frequency count and percentage were used to answer the research question raised at chapter one.

Research Question One: What is the prevalence of on timid behaviour among junior secondary school students in DalaZonalEducation Directorate, Kano state?

Table 4.1 Prevalence of Timid Behaviour among JSSS Students in DalaZonal Education Directorate:

S/No	Local Govt.	Types of School	Gender	N	Prevalence ofTimid Behaviour
1	Dala LG	Public School	Girls	72	49 (68.06%)
2		Public School	Boys	59	25 (42.37%)
3		Private School	Girls	24	14 (58.33%)
4		Private School	Boys	21	9 (42.86%)
5	Gwale LG	Public School	Girls	79	40 (50.63%)
6		Public School	Boys	67	32 (47.76%)
7		Private School	Girls	26	15 (57.69%)
8		Private School	Boys	22	14 (63.64%)
	Total			**370**	**198 (53.51%)**

Source: Field Work (2019)

Table 4.1 above showed the prevalence of on timid behaviour among junior secondary school students in DalaZonalEducation Directorate, Kano state. It shows that out of 72 girls students of public school 49 (68.06%) were identified withtimid behaviour from Dalalocal government while out of 59 boys students of public schools 25 (42.37%)were identified with timid behaviour from Dala local government. Out of 24 girls students of private school 14 (58.33%)were identified withtimid behaviour from Dalalocal government while out of 21 boys students of private schools 9 (42.86%)were identified with timid behaviour from Dala local government. Out of 79 girls students of public school 40 (50.63%)were identified withtimid behaviour from

43

Gwalelocal government while out of 67 boys students of public schools 32 (47.76%)were identified with timid behaviour from Gwale local government. Out of 26 girls students of private school 15 (57.69%)were identified withtimid behaviour from Gwalelocal government while out of 22 boys students of private schools 14 (63.64%)were identified with timid behaviour from Gwale local government. And out of the total number of 370 public and private junior secondary school students 198(53.51%) were identified with timid behaviour. Therefore the above analysis revealed that, the prevalence of timid behaviour among junior secondary school students in DalaZonalEducation Directorate, Kano state is 53.51%.

4.4 Hypotheses Testing

Three (3) null hypotheses raised at chapter one to determine the effect of cognitive restructuring counselling technique on timidbehaviour among junior secondary school students in DalaZonalEducation Directorate, Kano State. The hypotheses were tested at 0.05 level of significance and results were presented as follows:

Hypothesis One: There is no significant difference in the pre-test and post-test mean scores of timidbehaviour among junior secondary school students exposed to cognitive restructuringCounselling technique in DalaZonalEducation Directorate, Kano state.

Table 4.3 t-test for Pre-test and Post-test Timid Behavior Mean Scores of JSS IIStudents Exposed to CRCT Treatment:

	N	Mean	SD	Df	t-value	P-Value (2-tailed)
Pre-Test	60	12.10	1.45	59	64.54	0.000
Post-Test		22.02	4.89	59	34.68	

Source: Field Work (2019)

Table 4.3 above shows t-test analysis for pre-test and post-test mean scores of timidbehaviour among junior secondary school students exposed to cognitive restructuringCounselling technique in DalaEducation Zone, Kano state. It shows that, t-value for pre-test is (64.54) and that of post-

test is (34.68), 59 degree of freedom at 0.05 level of significance and p-value of (0.000). The p-value is less than 0.05 level of significance, as such the null hypothesis which says there is no significant difference in the pre-test and post-test mean scores of timidbehaviour among junior secondary school students exposed to cognitive restructuringCounselling technique in DalaZonalEducation Directorate, Kano state is rejected and maintain that, there is significant difference in the pre-test and post-test mean scores of timidbehaviour among junior secondary school students exposed to cognitive restructuringCounselling technique in DalaZonalEducation Directorate, Kano state.

Hypothesis Two: There is no significant difference in the post-test mean scores of timidbehaviour between male and female junior secondary school students exposed to cognitive restructuringCounselling technique in DalaZonalEducation Directorate, Kano state.

Table 4.4 t-test Analysis for Posttest Mean Scores of Timid Behaviour between Male and Female JSS II Students:

	N	Mean	SD	Df	t-value	P-Value (2-tailed)
Post-test Male Students	29	22.53	5.91			
				58	0.605	0.548
Post-test Female Students	31	21.65	3.76			

Source: Field Work (2019)

Table 4.4 above shows t-test for independent sample Posttest Mean Scores of timidbehaviour between Male and Female junior secondary school students of DalaZonalEducation Directorate, Kano State. It shows that, the t-value is (0.605), 58 degree of freedom at 0.05 level of significance and p-value of (0.548). The p-value is greater than 0.05 level of significance, as such the null hypothesis which says there is no significant difference in the post-test mean scores of timidbehaviour between male and female junior secondary school students exposed to cognitive restructuringCounselling technique in DalaZonalEducation Directorate, Kano state is retained and maintain that, there is no significant difference in the post-test mean scores of

timidbehaviour between male and female junior secondary school students exposed to cognitive restructuringCounselling technique in DalaZonalEducation Directorate, Kano state.

Hypothesis Three: There is no significant difference in the post-test mean scores of timidbehaviour between private and public junior secondary school students exposed to cognitive restructuringCounselling technique in DalaZonalEducation Directorate, Kano state.

Table 4.5 t-test for Independent Sample forTimid Behaviour Mean Scores of Public and Private JSS II Students Exposed to CRCT:

Gender	N	Mean	SD	df	t-value	P-Value (2-tailed)
Post-test Public Schools' Students	49	22.39	5.18			
				58	1.245	0.218
Post-test Private Schools' Students	11	20.36	2.94			

Source: Field Work (2019).

Table 4.5 above shows t-test for independent sample analysis forpost-test mean scores of timidbehaviour of private and public junior secondary school students exposed to cognitive restructuringCounselling technique in DalaZonalEducation Directorate, Kano state. It shows that, the t-value is (1.245), 58 degree of freedom at 0.05 level of significance and p-value of (0.218). The p-value is greater than 0.05 level of significance, as such the null hypothesis which says there is no significant difference in the post-test mean scores of timidbehaviour between private and public junior secondary school students exposed to cognitive restructuringCounselling technique in DalaZonalEducation Directorate, Kano stateis retained and maintain that, there is no significant difference in the post-test mean scores of timidbehaviour between private and public junior secondary school students exposed to cognitive restructuringCounselling technique in DalaZonalEducation Directorate, Kano State.

4.5 Summary of Findings

The findings of the study are summarized as follows:

1. The prevalence of on timid behaviour among junior secondary school students in DalaZonalEducation Directorate, Kano state is 53.51%.

2. There is significant difference in the pre-test and post-test mean scores of timid behaviour among junior secondary school students exposed to cognitive restructuring Counselling technique in DalaZonalEducation Directorate, Kano state.

3. There is no significant difference in the post-test mean scores of timid behaviour between male and female junior secondary school students exposed to cognitive restructuring Counselling technique in DalaZonalEducation Directorate, Kano state.

4. There is no significant difference in the post-test mean scores of timid behaviour between private and public junior secondary school students exposed to cognitive restructuring Counselling technique in DalaZonalEducation Directorate, Kano state.

4.6 Discussion

The study assessed the effect of cognitive restructuring counselling technique on timidbehaviour among junior secondary school students in DalaZonalEducation Directorate, Kano State, Nigeria. The first finding of the study revealed that, the prevalence of on timid behaviour among junior secondary school students in DalaZonalEducation Directorate, Kano state is 53.51%.Timid and shyness are often seen as a hindrance to students and their development. The cause of timid is often disputed but it is found that fear is positively related to shyness.(Eggum, Eisenberg, Spinrad, Reiser, Gaertner, Sallquist& Smith, 2009) suggesting that fearful children are much more likely to develop being shy as opposed to children less fearful. Shyness or timidcan also be seen on a biological level as a result of an excess of cortisol. When cortisol is

present in greater quantities it is known to suppress an individual's immune system, making them more susceptible to illness and disease (Chung & Evans, 2000).

With regard to prevalence of timid disorder, in a study by Kagan andSnidman, (1991) as cited in Wayne (2010) who have relied on direct observations of children in their studies. They have found that about 15%–20% of infants display an inhibited temperament characterized by shyness, timid, and wariness of unfamiliar people, objects, and events. In contrast, about 25%–30% of infants exhibit an uninhibited temperament. These children are less restrained, approaching unfamiliar people, objects, and events with little trepidation. Evidence suggests that these temperamental styles have a genetic basis and are reasonably stable into young adulthood (Wayne, 2010).

Wayne (2010) suggested that there is a moderategenetic predisposition to anxiety disorders such as timid and social anxiety. These findings are consistent with the ideathat inherited differences in temperament mightmake some people more vulnerable than others toanxiety disorders. As Jerome, Kagan and his colleagues (1992)as in Wayne, (2010) foundthat about 15%–20% of infants display an inhibited temperament, characterized by shyness, timid, andwariness, which appears to have a strong geneticbasis. These suggests that this temperament is arisk factor for the development of anxiety disorders (Timid behavior).

Timid is in a child who rarely seems interested in what the other kids his or her age are up to or is the one who has trouble making friends in new situations. While shyness is a personality trait that is determined by the unique way a person's brain adjusts to the unfamiliar and can't necessarily change, according to the journal Social Cognitive and Affective Neuroscience, there are tools to coach your child to work on accepting new situations with a little more ease.

When observing your child for reserved tendencies, it is also important to keep in mind that times of transition intensify shyness so those first preschool years can be particularly hard for timid children. Even the overly confident kid can turn reserved during this time of development and drastic change. If you fear that your child is timid as a result of suffering from social anxiety, be aware of his or her needs without being overly concerned. Not only did a recent study show that half of all teenagers in the United States think of themselves as shy, but also half of adults classify themselves as the same - yet, they are still able to successfully handle most social situations.

The second finding of the study revealed that, there is significant difference in the pre-test and post-test mean scores of timid behaviour among junior secondary school students exposed to cognitive restructuring Counselling technique in DalaZonalEducation Directorate, Kano state.Timid behavior is highly comorbid with shyness, avoidance personality disorder and social phobia (SP), particularly the specific subtype of SP, Generalized Social Phobia (GSP). Patients with SP and APD have greater social impairment and depressive Comorbidity. GSP patients with APD reported significantly higher levels of timid than GSP patients without APD. Similarly Timid children with APD also reported significantly greater social fear and avoidance than the patients with GSP alone. No significant differences were found between two groups regarding hopelessness, alexityhmia, anxiety, and functional impairment. When occurring with GSP, APD increased the degree of psychopathology; however, this did not result in greater functional impairment. (Samet, 2009).

Cognitive restructuring (CR) is one of the most effective psychological treatments for common personality disorders. It is a useful tool for understanding and turning around negative thinking through putting unhappy and negative thoughts 'under the microscope' challenging them and in

many cases re-scripting the negative thinking that lies behind them. In doing this it help the clients with timid behavior approach situations in a positive frame of mind. The assumption of CR here is that negative thinking is not only unpleasant but also reduces the quality of performance and undermines working and social relationships with other people.

Another finding of the study revealed that, there is no significant difference in the post-test mean scores of timid behaviour between male and female junior secondary school students exposed to cognitive restructuring Counselling technique in DalaZonalEducation Directorate, Kano state. This finding is in line with the study conducted by Bhan and Gupta (2010) as cited in Mahwish, Naima, Hira, &Wajiha (2017) on academic achievement and timid behavior among the students belonging to scheduled caste and non-scheduled caste group. The result revealed that sex has no significant impact on academic achievement and timid behavior of students.

The last finding of the study discovered that, there is no significant difference in the post-test mean scores of timid behaviour between private and public junior secondary school students exposed to cognitive restructuring Counselling technique in DalaZonalEducation Directorate, Kano state.Although this study recorded no significance difference in the effect of cognitive restructuring between private and public school there are so many factors that differentiate the two. Over the years, private schools have gained popularity and acceptance from Nigerians because of the failures of public schools. Private schools are seen as the better option for gaining quality education amongst many Nigerians. This has resulted to a sharp proliferation of private schools in the past one and half decade ranging from elementary to tertiary levels. In Nigeria, private schools are different from public schools in so many ways as in: Class Size, Strikes, Teaching Facilities, Training and School Fees. Experience shows that these factor could have

great impact in the students psychological and physical well-being and it affect their performance in schools.

CHAPTER FIVE

SUMMARY, CONCLUSIONAND RECOMMENDATIONS

5.1 Introduction

This chapter present the summary of work on effect of cognitive restructuring counselling technique on timidbehaviour among junior secondary school students in Dala Education Zone, Kano State, Nigeria. It also brings the conclusion of the study, recommendations and suggestion for further studies.

5.2 Summary

The study assessed the effect of cognitive restructuring counselling technique on timidbehaviour among junior secondary school students in Dala Education Zone, Kano State, Nigeria. The objectives of the study were to find out the prevalence of on timid behaviour among junior secondary school students, effect of cognitive restructuringCounselling technique on timid behaviour, difference in the effect of cognitive restructuringCounselling technique on timidbehaviour between male and female junior secondary school students and difference in the effect ofcognitive restructuringCounselling technique on timidbehaviour between private and public junior secondary school students in Dala Education Zone, Kano state. Based on these objectives one correspondence research question and three null hypotheses were formulated. The scope of this study covered JSS II students of public and private junior secondary schools in Dala Education Zone, Kano State.

The study presents review of related literature on the concept of Cognitive Restructuring Counselling Technique on Timid among junior secondary school students in Dala Education zone, Kano state. The chapter was discussed related concept such as: conceptual frame work, timid, causes of timid, effects of timid, gender and timid, cognitive restructuring

Counsellingtechnique, process of cognitive restructuring Counselling technique, effectiveness of cognitive restructuring Counselling technique, cognitive restructuring counselling technique and timid behavior, theoretical frame work, rational emotive therapy (Albert Ellis), review of empirical studies, and lastly summary and uniqueness of the study was provided.

The methodology adopted in the conduct of the study were presented. These included research design, population of the study, sample size and sampling technique. The instrumentation, validity and reliabilityof data collection instrument, procedures for data collection and procedures for data analysis were also discuss.The design of this study was quasi experimental design in form of pretest posttest design. The population for this study comprisedone hundred and twenty one (121) male and female students in both public and private Junior Secondary Classes (JSS II) who exhibited the symptoms of timid behavior in Dala Education Zone Kano State. Out of them sixty JSS II students were purposely sampled to participate in the study. An adopted instrument namely 'Rosenberg Self-Esteem Scale (RSES)' was used as a data collection instrument. The validity and reliability of the instrument was obtained and a reliability index of 0.68 was established. Frequency count and percentage as well as t-test were used for data analysis.

The study presents the analysis of data collected from the experimental study. Summary of findings and discussion of results were also presented in the chapter. The basis for the determination of the rejection or acceptance of the null hypotheses is 0.05 levels of significance. The study found that: the prevalence of on timid behaviour among junior secondary school students in DalaZonalEducation Directorate, Kano state is 53.51%, there is significant difference in the pre-test and post-test mean scores of timid behaviour among junior secondary school students exposed to cognitive restructuring Counselling technique in DalaZonalEducation

Directorate, Kano state, there is no significant difference in the post-test mean scores of timid behaviour between male and female junior secondary school students exposed to cognitive restructuring Counselling technique in DalaZonalEducation Directorate, Kano state and there is no significant difference in the post-test mean scores of timid behaviour between private and public junior secondary school students exposed to cognitive restructuring Counselling technique in DalaZonalEducation Directorate, Kano state.

Lastly, the summary of the work on the effect of cognitive restructuring counselling technique on timidbehaviour among junior secondary school students in DalaZonalEducation Directorate, Kano State, Nigeria were provided. It also brings the conclusion of the study, recommendations and suggestion for further studies.

5.3 Conclusion

Based on the outcomes of this study, the following conclusions were drown:

The prevalence oftimid behaviour among junior secondary school students in Dala Education Zone, Kano state is high with 53.51% compared to other countries.

Cognitive Restructuring CounsellingTechniqueis significantlyeffective in the reduction oftimid behaviour among junior secondary school students in Dala Education Zone, Kano state. Therefore it is a relevant counselling technique in the reduction of timid behavior among students.

The effectiveness of cognitive restructuring Counselling techniquein the reduction of timid behaviour junior secondary school students in Dala Education Zone, Kano State is not gender sensitive.

The effectiveness of cognitive restructuring Counselling techniquein the reduction of timid behaviouris not differ between private and public junior secondary school students in Dala Education Zone, Kano State.

5.4 Recommendations

5.4.1 Recommendations from the Study

Based on the outcome of this study work the following recommendations were made:

1. Since the rate of timid behavior among senior secondary school students in DalaZonal Education, Kano State is high (53.51%),attention should be given to the psychological and physiological causes of timid behavior among secondary school students.

2. Since there is significant effect of cognitive restructuring counselling technique on timid behavior among JSS II students of Dala Zonal Education, Kano State, a comprehensive and structured cognitive restructuring counselling technique should be formulated and utilized in the school guidance and counsellingprogramme.

3. Since there is significant difference in the effectiveness of cognitive restructuring Counselling techniquein the reduction of timid behaviour between male and female JSS II students the same CRCT treatment package could be used in the reduction oftimid behavior.

4. Since there is no significant difference in the posttest mean scores of timid behavior between public and private JSS II students of Dala Zonal Education, Kano State the same CRCT treatment package could be used in both private and public schools.

5.4.2 Recommendationsfor Further Studies

The following recommendations were made for further studies:

1. The scope of this study covered only junior Secondary School Students, thus it is important to extend this empirical study to other institutions like correctional institutions, senior secondary schools and tertiary institutions.

2. Study need to be conducted on the level of timid behavior problems among students and comorbidity with other disorders for the attentions of school counsellors.

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DEPARTMENTAL LETTER OF AUTHORITY FOR RESEACH

Department of Education
P.M.B. 3011
Kano State
Head Prof. Bello A. Bello
Email: hodedu@buk.edu.ng
Date .

B.U.K.
Bayero University, Kano

Dear Sir,

LETTER OF INTRODUCTION

This is to certify that: BINTA ALI HASHIM with Registration

Number: SPS/15/MED/00085 is our student in the Department of Education

Bayero University, Kano

Kindly render any assistance he/she may require from you.

DEPARTMENT OF EDUCATION
BAYERO UNIVERSITY
KANO

Sign.....................

for: **Prof. Bello A. Bello**
Head of Department

KANO STATE SECONDARY SCHOOLS MANAGEMENT BOARD
ZONAL EDUCATION DIRECTORATE DALA
Cable & Telegram: PERMED KANO
PREMISES OF G.G.S.S. BULUKIYA AMINU WAY, KANO.

Our Ref: DLZED/ADM/PP/Vol.019 ... Your Ref:................................ Date: 17/7/2019

The School's Director/Principal;

1. GGSS GWAMMAJA   6. ....
2. GSS GWALE   7. ....
3. GGSS S/MAINAGGE   8. ....
4. GGSS M/SONUSI   9. ....
5. ABUBAKAR SADIQ   10. ....

INTRODUCTORY LETTER

I write to introduce BINTA ALI HASHIM ....
From BAYERO UNIVERSITY KANO .... he/she/they (is, are)
conducting a research on EFFECT OF COGNITIVE COUNSELLING
TECH ON TIMIDITY BEHAVIOUR AMONG JSS IN DALA ZONE
in your school(s).

Kindly give them/him/her the necessary assistance he/she/they may
required please.

Best Regards.
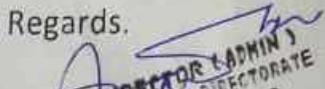
NASIDI ABUBAKR GARBA
(DEPUTY DIRECTO ADMIN)

TIMIDITY BEHAVIOR SCALE

Introduction: Dear Respondents, I am currently conducting my Masters Research work titled 'Effect Cognitive Restructuring Counselling Technique on Timidity Behavior among Junior Secondary School Students in Dala Education Zone, Kano state. This is Students Timidity Behavior Scale design to determine the level of timidity behavior among junior secondary school students. Please kindly respond correctly, all the information given will be protected with confidentiality.

Instruction; - Below is a list of statements dealing with your general feelings of yourself. Please indicate how strongly agree or disagree with each statement.

Section ''A'': Student information

School:…………………………………………………………………………………………...

Gender: -   Male …..[   ]…… Female………….[   ]………………………………….

School Type; - Public [   ]   Private   [   ]

Section "B"

Ten items (10) On Timidity behavior Scale

S/N	TEST ITEMS	SA	A	D	SD
1.	On the whole, I am satisfied with myself.				
2.	At times I think I am good at all.				
3.	I feel that I have a number of good qualities.				
4.	I am able to do things as well as most other people.				
5.	I feel I do have much to be proud of.				
6.	I certainly feel useless at times.				
7.	I feel that I am person of worth, at least on an equal plane with others.				
8.	I wish I could have more respect for myself.				
9.	All in all, I am inclined to feel that I am a failure.				
10.	I take positive attitude toward myself.				

Thanks

APPENDIX IV

TREATMENT SESSIONS COGNITIVE RESTRUCTURING

Cognitive restructuring counseling technique

FIRST SESSION: orientation and establishing counseling relation:

i. introduction; greeting the participant by the researcher

ii. The researcher tell the participant more about himself; name, address, profession and his purpose.

iii. Participants introduce themselves; name, class, age and address.

iv. Building rapport by showing a sign of regard and caring, helping them to settle down comfortably.

v. confidentiality: assuring the participant on keeping their information, identity and problem secret.

vi. Setting on rules and regulations to guide the counseling sessions.

SECOND SESSION: Introduction:

i. Discussion on the major objectives and goals of cognitive restructuring counseling technique as a technique to be use in the treatment sessions.

ii. Explanation of Timidity behavior problem

iii. Description on major characteristics and symptoms of Timidity behavior problem.

iv. **HOMEWORK**: The participants will be asking to select out of the list of Timidity behavior problem characteristics and symptoms that match their behavior.

THIRD SESSION: Functional Analysis:

i. explanation on Timidity behavior problem

ii. Identifies thought patterns that cause Timidity behavior problem

iii. The researcher will use Socratic questions strategies to ask participant numerous questions in order to help them identify needed changes to explore thought patterns.

iv. **HOMEWORK**: The participants will be given a stories of thought pattern to read and understand.

FORTH SESSION: Positive Thought Pattern

i. Ask the participant to explain the types of thought pattern they identified at home.

ii. Discussion on unwanted reactions and pattern that cause Timidity behavior problem

iii. Identify positive responses to stress by asking participant about many instances in their life.

iv. **HOMEWORK**: Ask the participants to write at least twenty negative thought they can think they are making.

FIFTH SESSION: Focus on Realistic Interpretations of Events.

i. Discussion on the relationship between thinking, feeling, action and behavior.

ii. Discussion on ABC rational Emotive Therapy strategies.

iii. Discussion with examples on rational and irrational thinking that is related to their Timidity behavior problem.

iv. Modifying the negative or self-defeating automatic thought process or perceptions as identify by the participant that seems to perpetuate the symptoms of Timidity behavior problem.

v. Show how internal influences i.e. our thought cause our feelings and behaviors

vi. Learn how to interpret their environment differently example as people will laugh at me, if X is around I must fail.

HOMEWORK: the participant will be given a list of Tips to change negative thinking to read and explain how to use them to change their negative thinking.

SIXTH SESSION: How to change negative thinking:

i. Understanding thinking styles; examples:

View self as complete success or failure in every situations i.e. (black and white) thinking.

ii. How to stop thinking negatively

iii. How to cope with criticism

iv. How to gain control of your emotional reactions situations by allowing the thinking part of the brain to take over.

v. How to recognize distorted thoughts and replace them with realistic ones.

vi. What is self-esteem in relation to Timidity behavior problem?

vi. Important of self-esteem.

vii. Causes of Low self-esteem.

viii. Strengthen self-esteem.

ix. Avoiding social situations as a result of low self-esteem.

x. Negative thought about one's ability or appearances as a result of low self-esteem.

xi. Pass up opportunity for advancement at work or at school as a result of low self-esteem.

xii. The researcher will narrate many stories and instances on how to improve self-esteem for the reduce Timidity behavior problem.

HOMEWORK: The participants will be given thought-diaries to be complete daily before next sessions.

S/N	Gender	School Type	LGA	Pretest Scores	Posttest Scores
1	2.00	1.00	1.00	14.00	20.00
2	2.00	1.00	1.00	11.00	25.00
3	2.00	1.00	1.00	10.00	22.00
4	2.00	1.00	1.00	12.00	26.00
5	2.00	1.00	1.00	13.00	28.00
6	2.00	1.00	1.00	12.00	26.00
7	2.00	1.00	1.00	13.00	28.00
8	2.00	1.00	1.00	12.00	26.00
9	2.00	1.00	1.00	10.00	22.00
10	2.00	1.00	1.00	12.00	18.00
11	2.00	1.00	1.00	13.00	26.00
12	2.00	1.00	1.00	14.00	26.00
13	1.00	1.00	1.00	12.00	28.00
14	1.00	1.00	1.00	14.00	24.00
15	1.00	1.00	1.00	13.00	26.00
16	1.00	1.00	1.00	10.00	28.00
17	1.00	1.00	1.00	13.00	26.00
18	1.00	1.00	1.00	12.00	28.00
19	1.00	1.00	1.00	13.00	26.00
20	1.00	1.00	1.00	12.00	28.00
21	2.00	2.00	1.00	14.00	24.00
22	1.00	2.00	1.00	13.00	22.00
23	1.00	2.00	1.00	12.00	20.00
24	1.00	2.00	1.00	10.00	18.00
25	1.00	2.00	1.00	10.00	16.00
26	2.00	1.00	2.00	12.00	22.00
27	2.00	1.00	2.00	14.00	20.00
28	2.00	1.00	2.00	10.00	18.00
29	2.00	1.00	2.00	12.00	22.00
30	2.00	1.00	2.00	10.00	14.00
31	2.00	1.00	2.00	14.00	22.00
32	2.00	1.00	2.00	12.00	20.00
33	2.00	1.00	2.00	14.00	22.00
34	2.00	1.00	2.00	10.00	18.00
35	2.00	1.00	2.00	12.00	14.00
36	2.00	1.00	2.00	10.00	18.00
37	2.00	1.00	2.00	14.00	20.00
38	1.00	1.00	2.00	10.00	18.00
39	1.00	1.00	2.00	14.00	26.00
40	1.00	1.00	2.00	14.00	34.00
41	1.00	1.00	2.00	12.00	36.00
42	1.00	1.00	2.00	12.00	24.00
43	1.00	1.00	2.00	10.00	18.00
44	1.00	1.00	2.00	12.00	14.00
45	1.00	1.00	2.00	14.00	28.00
46	1.00	1.00	2.00	12.00	14.00
47	1.00	1.00	2.00	13.00	16.00
48	1.00	1.00	2.00	12.00	22.00
49	1.00	1.00	2.00	10.00	18.00

50	1.00	1.00	2.00	10.00	14.00
51	2.00	2.00	2.00	13.00	20.00
52	2.00	2.00	2.00	12.00	18.00
53	2.00	2.00	2.00	14.00	20.00
54	2.00	2.00	2.00	12.00	18.00
55	2.00	2.00	2.00	10.00	22.00
56	2.00	2.00	2.00	14.00	26.00
57	1.00	1.00	2.00	10.00	20.00
58	1.00	1.00	2.00	13.00	18.00
59	1.00	1.00	2.00	12.00	16.00
60	1.00	1.00	2.00	13.00	24.00

APPENDIX

ANALYZED RESULTS

Frequencies

[DataSet0] C:\Users\HP 550\Desktop\Binta Ali Hashim\BintaHashim Raw Data.sav

Statistics

		Gender	TYpes of School	Local Govt of the Scool
N	Valid	60	60	60
	Missing	0	0	0

Frequency Table

Gender

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	29	48	48.0	50.0
	Female	31	52	52.0	100.0
	Total	60	100.0	100.0	

TYpes of School

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Public School	49	81.7	81.7	81.7
	Private School	11	18.3	18.3	100.0
	Total	60	100.0	100.0	

Local Govt of the Scool

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	School of Dala	25	41.7	41.7	41.7
	School of Gwale	35	58.3	58.3	100.0
	Total	60	100.0	100.0	

T-TEST

```
/TESTVAL=0.05
/MISSING=ANALYSIS
/VARIABLES=PreTestPostTest
/CRITERIA=CI(.95).
```

T-Test

One-Sample Statistics

	N	Mean	Std. Deviation	Std. Error Mean
Pre-Test Scores	60	12.1000	1.44621	.18671
Post-Test Scores	60	22.0167	4.89376	.63178

One-Sample Test

	Test Value = 0.05					
					95% Confidence Interval of the Difference	
	t	df	Sig. (2-tailed)	Mean Difference	Lower	Upper
Pre-Test Scores	64.540	59	.000	12.05000	11.6764	12.4236
Post-Test Scores	34.769	59	.000	21.96667	20.7025	23.2309

T-TEST GROUPS=Gender(1 2)
 /MISSING=ANALYSIS
 /VARIABLES=PostTest
 /CRITERIA=CI(.95).

T-Test

Group Statistics

	Gender	N	Mean	Std. Deviation	Std. Error Mean
Post-Test Scores	Male	29	22.4138	5.91316	1.09805
	Female	31	21.6452	3.76429	.67609

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means						
		F	Sig.	t	Df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
									Lower	Upper
Post-Test Scores	Equal variances assumed	8.232	.006	.605	58	.548	.76863	1.27112	-1.77579	3.31305
	Equal variances not assumed			.596	46.956	.554	.76863	1.28950	-1.82556	3.36283

T-TEST GROUPS=SchoolTypes(1 2)

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/MISSING=ANALYSIS
/VARIABLES=PostTest
/CRITERIA=CI(.95).
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T-Test

Group Statistics

	TYpes of School	N	Mean	Std. Deviation	Std. Error Mean
Post-Test Scores	Public School	49	22.3878	5.18337	.74048
	Private School	11	20.3636	2.94186	.88700

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means							
										95% Confidence Interval of the Difference	
		F	Sig.	t	Df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper
Post-Test Scores	Equal variances assumed	4.787	.033	1.245	58	.218	2.02412	1.62519	-1.22906	5.27729
	Equal variances not assumed			1.752	26.149	.092	2.02412	1.15546	-.35031	4.39854

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T-TEST GROUPS=LocalGovt(1 2)
/MISSING=ANALYSIS
/VARIABLES=PostTest
/CRITERIA=CI(.95).
```

T-Test

Group Statistics

	Local Govt of the Scool	N	Mean	Std. Deviation	Std. Error Mean
Post-Test Scores	School of Dala	25	24.2800	3.57678	.71536
	School of Gwale	35	20.4000	5.10594	.86306

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means						95% Confidence Interval of the Difference	
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference		Lower	Upper
Post-Test Scores	Equal variances assumed	.980	.326	3.266	58	.002	3.88000	1.18784		1.50228	6.25772
	Equal variances not assumed			3.461	57.990	.001	3.88000	1.12098		1.63610	6.12390