



A Study of Cognitive Behaviour of High School Students in Relation to their Socio-Economic-Status

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Abstract:

Cognitive Behavior Therapy is a form of talking therapies which is goal oriented and structured therapy. This therapy can be delivered one to one or in group setting. Cognitive Behavior Therapy encourages the client to be collaborative and actively participate not only during but also outside of the therapy sessions to work towards his or her goals. The investigator is interested in knowing the relationship between the Self concepts, Emotional Adjustment and Socio-Economic Status Cognitive Behavioral Therapy of higher Secondary students. The present study is an experimental study with two group comparison design with pre and post assessment. Experimental group was subjected to intervention, whereas for the control group no intervention was given. Following tests were used prepared and standardized by the investigator. there was a significant difference between experimental and control group in relation to academic stress. Research indicates that Cognitive Behavioral Therapy interventions directly affect middle and high school students' mental health and achievement. In fact, the obtained results show that Cognitive Behavior Therapy can be an effective program to help the students with psychological and educational problems.

Keywords: Cognitive Behavior, Socio-Economic-Status

1. Introduction

The cognitive behavior therapy program exploring feeling was designed to be highly structured, interesting and successful in encouraging the cognitive control of emotions. Every student participating in the program has a workbook for the six-two-hour sessions that includes activities and information to explore the specific feelings of being happy, relaxed, anxious or angry. These are sections in their workbook to record individual comments and responses to questions. Cognitive Behavior Therapy has been at the forefront of empirically supported therapies. In a large number of controlled studies, Cognitive Behavior Therapy has proven to be highly effective in treating a variety of problems including anger, depression, anxiety, eating disorders, substance abuse, personality disorders, and in facilitating relapse prevention (Ronen & Freeman, 2007). Anger is a multidimensional construct that includes not only an affective state but also cognitive manifestations and behavioral expressions. In cognitive behavioral terms, anger is caused by distorted thinking patterns about oneself and environments, which trigger negative emotional and behavioral responses (McGinn & Sanderson, 2001). Cognitive Behavior Therapy emphasizes cognitive process such as attributions, expectations, interpersonal belief, and problem solving as the most powerful tools in shaping an individual's response to provocation and help identify anger arousal as a mediator of aggression. Cognitive Behavior Therapy is a form of talking therapies which is goal oriented and structured therapy. This therapy can be delivered one to one or in group setting. Cognitive Behavior Therapy encourages the client to be collaborative and actively participate not only during but also outside of the therapy sessions to work towards his or her goals. Cognitive Behavior Therapy sessions are time limited. It follows particular models depending on the needs of the client, and the treatment protocols are based on research-based models.

2. Need of the study

Cognitive Behavioral Therapy involves lectures and workshops from Cognitive Behavioral Therapists and Clinical Psychologists in practice allowing students to apply Cognitive Behavioral Therapy theory and research into clinical practice by experienced clinicians. You will learn the core principles of Cognitive Behavioral Therapy across the lifespan and also address complexity and transdiagnostic factors and strategies to address these. Clinical practice commences in semester two of year one and involves clinical supervision of practice allowing students to develop their practice competencies in cognitive behavioral therapy supported by a strong evidence base.

The investigator is interested in knowing the relationship between the Self concepts, Emotional Adjustment and Socio-Economic Status Cognitive Behavioral Therapy of higher Secondary students. Especially the students face too many difficult at this stage due to greater demands of bodily changes, family and socio-cultural expectations etc. it becomes difficult for them to manage themselves socio-emotionally and keeping stable midst to excel academically. In this context the present study assumes a greater significance.

3. Objectives

Specifically, the study would like to:

1. To study the effectiveness of cognitive behavior therapy on academic stress among high school students.
2. To study the effectiveness of cognitive behavior therapy on depression among in high school students.

4. Hypotheses

Hypothesis of this study are under following:

1. Cognitive behavior therapy is effective in decreasing Academic Stress.
2. Cognitive behavior therapy is effective in decreasing Depression.

5. Methodology

The present study is an experimental study with two group comparison design with pre and post assessment. Experimental group was subjected to intervention, whereas for the control group no intervention was given. Boys and Girls students. In 10th, 11th, and 12th grade for the present research were selected from different high schools. In the present study, subjects were trained and taught to monitor and record their negative thoughts in stress diary. Special emphasis was put on automatic thoughts that came into their mind as if by habit rather than as a specific response to what was currently going on. With Cognitive Behavior Therapy interventions (e.g., self-monitoring), subjects were able to identify these automatic thoughts when they occurred and recorded in their diary.

6. Tools used for the study

Following tests were used to measure respondent's responses for this study-

1. The effectiveness of cognitive behavior therapy on academic stress (prepared and standardized by the investigator).
2. The effectiveness of cognitive behavior therapy on depression (prepared and standardized by the investigator)

7. Results and Discussions

Table 1: Results of repeated measure ANOVA for mean scores on pre-treatment and post treatment for academics

Source of variation	Sum of squares	df	Mean squares	F	Sig
Within subject effects					
Time	297.67	1	297.67	134.93	0.000*
Time* group	316.87	1	316.87	143.64	0.000*
Error	127.95	58	2.21		
Between subject effects					
Intercept	45202.09	1	45202.09	338.53	0.000*
Group	216.09	1	216.09	160.18	0.000*
Error	774.48	58	13.35		

**Significant at p<0.001).*

According to above table the effect of cognitive behavior therapy on academic stress was statistically significant $F(1, 58) = 134.93, p < 0.001$. Clearly showed the efficacy of CBT in decreasing academic stress. Further, the combination of time*group showed a significant effect in decreasing academic stress $F(1, 58) = 143.64, P < 0.001$.

Further, between subject effects showed that the effect of group in relation to the efficacy of CBT interventions in decreasing academic stress which was statistically significant $F(1, 58) = 160.18, P < 0.001$.

Cognitive behavior therapy is effective in decreasing Academic Stress. Results of repeated measure ANOVA showed that there was a change (reduction) in academic stress from pre to post assessment. Further, there was a significant difference between experimental and control group in relation to academic stress. Further, the observed improvement i.e., reduced 206 academic stresses from pre to post intervention was reconfirmed by the large effect size 0.82 for CBT group.

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

Source of variation	Sum of squares	df	Mean squares	F	Sig
Within subject effects					
Time	255.21	1	255.21	106.34	0.000*
Time* group	285.21	1	285.21	118.84	0.000*
Error	139.08	58	2.40		
Between subject effects					
Intercept	22027.38	1	22027.38	2612.98	0.000*
Group	284.44	1	284.44	33.74	0.000*
Error	774.48	58	8.43		

** Significant at P < 0.001*

Above table shows that as far as effect of CBT on depression was reduced, a significant change (difference) was observed from pre to post treatment session. The difference was highly significant $F(1, 58) = 106.34, P < 0.001$.) indicating the effectiveness of CBT in reducing level of depression. Further, when combination of time × group was made a differential decrease between the groups was observed and it was significant $F(1, 58) = 118.84, p < 0.001$ Further, between subject effects showed that the effect of group in relation to the efficacy of CBT in decreasing depression was statistically significant $F(1, 58) = 33.74, P, p < 0.001$

Cognitive behavior therapy is effective in decreasing Depression. Results of repeated measure ANOVA showed that there was a change (reduction) in depression from pre to post assessment. Further, there was a significant difference between experimental and control group in relation to depression). Further, the observed improvement i.e., reduced depression from pre to post intervention was confirmed by the medium effect size 0.78 for Cognitive Behavioral Therapygroup.

8. Implication of the study

Research indicates that Cognitive Behavioral Therapy interventions directly affect middle and high school students' mental health and achievement. In fact, the obtained results show that Cognitive Behavior Therapy can be an effective program to help the students with psychological and educational problems. In the light of the pre and post-treatment data, it is apparent that 199 intervention has helped to reducing depression symptoms and higher student self-efficacy and achievement.

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