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The effectiveness of group consolation with rational-emotional approach on students' resiliency

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Abstract

The aim of this study is to evaluate the effectiveness of group consolation with rational- emotional approach on students' resilience. The method of survey was semi-experimental and pre-test and post-test design along with control group was used. Cluster random sampling method was applied and 30 girl students of first grade of high school who had got lower grades at Connor-Davidson Resilience Scale (2003) were assigned in two control and experimental groups. Then, the survey project took part in eight sessions of cognitive-behavioral group consultation. Covariance analysis was used to analyze the data. Data analysis showed that there is a significant difference in the amount of resiliency in the post-test phase between the experimental and control groups. According to these findings, cognitive behavioral group consultation method was effective in students' resilience.

Keywords: Group consolation with cognitive behavioral approach, resiliency, teen

Introduction:

Teenage is a period of prominent social and development psychological growth in the human. Socially adolescence period is for the future Infraction of one as a young adult (Kaplan, 2007). Teen period makes plenty issues for individual, in this teen period one that encounters With Requirements of plenty. In this among ones has need to endurance of hard term of this age period and available pressures. The resiliency is there in trait that of view in positive psychological. This viewpoint sees his ultimate goal to identify structures and practices that lead to well-being and happiness of human beings (Saamaani et al, 2007). Joseph (1994) resiliency means as the ability of individuals to adaptation and compromise in the face of changing demand and defines the disappointments of life. Resilient person is one who is able to succeed in the face of adversity and change of life. Every human being has the capacity of resiliency but resiliency behavior is

Acquisitive and can be learned. The resiliency is product of process and it formed in over time. In addition to learning resiliency for individual characteristics such as social savings bond, clear and consistent boundaries and life skills must also nurture an environment in which one is of great twists. The individual characteristics of resilience can be taught to children and adolescents. Families and schools can show a very important role in the resiliency increase. Cordich-Haal and Pierson in year of 2005 said that we have need to sensation to this query that peoples learned skills that when affront with problems and throb positions to more resiliency method thinks and therefore it action. Therefore, interventions that their aim is to influence thought processes, can be an important step in the development of skills and abilities related to the irresiliency (Kaveh, 2009).Although some genetic and biological characteristics associated to be determined with resiliency, but the resiliency skills can be taught and strengthened. Including interference that can be has used to increase the strength student is group consolation. Approach about group consolation can be implemented according that seems to increase resiliency in school is Ellis Rational Emotive Therapy skill. Inestimable feature cognitive – behavioral therapy including intimate relationship of cooperation, active treatment therapy process, the purpose of which, according to educational problems, development of coping skills and an emphasis on feedback is a good platform to focus on provides teen problems, because the most effective methods for working with adolescents, methods of operation of the circuit. (Zarb ,2002; Translated by Afrooz and Alavi, 2004).Feldman (2001) with survey reviewed 28 studies on the effectiveness of cognitive-behavioral therapy methods on students mental health, he showed that therapy, cognitive – behavioral therapy is more effective than treatment, medication and non-intervention (Holmes et al(2002)). A review on the literature showed that cognitive-behavioral therapy is the most effective way of treating mental disorders. Cater (2005) studied the Cognitive-behavioral approach to mental health syndrome is considered very effective too. Tavakolitaameh (2015) in his survey as tittle the combination of cognitive-behavioral approach to medicine is not only efficient of treatment to reduce and control public health symptoms, but long-term therapeutic efficacy of this method is stable and prevent the return of symptoms after stopping treatment is discontinued. This results say combination of cognitive-behavioral approach to medicine is not only efficient treatment to reduce and control public health symptoms, but long-term therapeutic efficacy of this method is stable and prevent the return of symptoms after stopping treatment is discontinued.(Tor kingtown and King down,2002; Vizink et al,2003 and Tarier et al,2004). This means that ones with help of this Intermediation can be more uses their capabilities and capacities and in versus of the stresses of life been more resistant and in ultimate this action help to their. Zamirinejhad et al (2010) in their study compared the effectiveness of resilience as a group and group cognitive therapy on depression in their dormitory students. The results were showed different in both group but the difference was not significantly different from the control group. In a study by Mortazavi (2007-2009) as title examining the effects of cognitive-behavior accretion resilience and social skills were delinquent adolescent boys. He concluded that CBT has no effect on the increase of teen offenders. DashtiPoor(2013) in his study as tittle the effectiveness of cognitive behavioral therapy on increasing resilience and modify dysfunctional attitudes authoritarian mothers of adolescent girls has shown that cognitive behavioral therapy is to increase the resiliency of these teen girls and in fact, with this approach you can withstand the harsh conditions raised the target group. Due to the efficient and rational-emotional –behavioral Ellis about the change in mass opinion and belief system, emotional and behavioral states and also according to management that combines the variables of the study group counseling rational way-emotional behavioral of Ellis?

Research Methodology

This research is quasi-experimental pretest-posttest with control group.
Independent variables are 8 sessions of cognitive-behavioral group counseling and the dependent variable is resiliency. The population of this study is, all of the junior high school girl students in the first grade of Aran va Bidgol city. Some subjects were 30 ones of students that in the Questionnaire Resiliency Scale scores were lower. The cluster sampling was method That 200 clusters were selected and among them 30 were selected in two experimental groups and control group. Tools used in research of Connor - Davidson Resiliency Scale (CD-RISC; Connor & Davidson*, 2003) that measures a tool of 25-item instrument that resiliency structures in the size of the Likert from zero to four. Resiliency minimum score of zero and a maximum score of one hundred is the subject of this scale. Preliminary results of the psychometric properties of Essen has its confirmed scale reliability and validity (Connor& Davidson,2003).The internal consistency, test-retest reliability and convergent and divergent validity sufficient scale has been reported, although the results of exploratory factor analysis, five factors (competence /personal competence/tenacity , confidence to personal instincts / trust in one's instinct/tolerance of negative effects, positive emotions reception positive acceptance of change/ positive acceptance of change/secure relationships, control, spirituality) for resiliency scale has confirmed. As the reliability and validity of the following measures certainly are not yet confirmed, now just overall resiliency score is valid for the purpose of research (Connor& Davidson,2003).Reliability and Validity of Persian form has been reviewed and approved in Resiliency Scale also in a preliminary study in normal subjects and patients (Besharat, 2007).

The counselling session group meeting are 8 sessions of 1 hour that in every week was1 session that hold on the content of the meetings is as under table:

Content of meetings	sessions
Introduced and become acquaintance with each other -Basic relation between group members -To introduce the consulting group -Raised the important issue of privacy law group As the objectives of the group Agreement on doing homework Understanding the pattern A-B-C at an example	Session 1
With the participation of all group members with examples from everyday life and understand A-B-C -Negative automatic thoughts and cognitive knowledge of common design errors- Offering a registration sheet useless ideas	Sessions 2
Grading negative beliefs on the scale 100-0 -The evidence for actual and reasonable thoughts- Replacing negative beliefs with real thought and logical by group members	Sessions3
Training relaxation technique- Training relaxation in a group counselling session with the participation of the members (to ensure correct technical understanding)	Sessions4
Setting life goals (long term, medium term , short term)- Prioritization of objectives and abilities planning to do it	Sessions5
Learn the techniques of problem solving -Explain the techniques by providing tangible examples of lives members- Offering a hypothetical problem and solve it by method of problem-solving	Sessions6

Run multiple scenarios and the critical role of education in difficult conditions- The task group counselling sessions	Sessions 7
Continue to play its role and practice by all the members of the group -Summary of past meetings and discussions overview - Preparation for applying methods learned in real-life situations.	Sessions 8

Findings

We used for analysis of data from covariance analysis. To calculate the default equality of variance Levine test was used. The default setting for both the equality of variance in the dependent variable (post- test score) and the random variable adjuvant (pre-test score) is required.

Table 1: Review the Levine's test for equality of variances default study two experimental and control groups.

sig	*df2*	*df1*	*F*	*Variable*
0.10	***28***	***1***	***2.97***	***Pre-test score***
0.20	***28***	***1***	***1.83***	***Post-test score***

Note: N=30; control n = 15 = test n=15 ; auxiliary random variable = pre-test score ; scores of post-test = dependent variable.

As same table 1 shows results both in the dependent variable (post- test score) and the random adjuvant variable (pre-test score) before assuming the equality of variances is not rejected both experimental and control groups (P>0.05).Therefore, assuming the equality of variances was not violated.

Examine before assuming of the normal distribution

The second of assumption in the normal distribution of dependent variable is using analysis of covariance (post-test score) and be normal distribution of the random variable adjuvant (pre-test score). Table 2 shows the results of calculation of the default data research.

Table2: Abstract of The results of Kolmogorov-Smirnov test and Shapiro Wilk normality is assumption for the study.

Shapiro Wilk			**Kolmogorov-Smirnov**			***Belong to a group***	***variable***
sig	***df***	Statistics	***sig***	***df***	Statistics		
0.12	*15*	*0.91*	*0.20*	*15*	*0.17*	*control*	*Post-test*
0.67	*15*	*0.96*	*0.20*	*15*	*0.17*	*test*	
0.01	*15*	*0.84*	*0.02*	*15*	*0.24*	*control*	*Pre-test*
0.10	*15*	*0.90*	*0.02*	*15*	*0.24*	*test*	

Note: N=30; control n = 15 = test n=15 ; pre-test score=Auxiliary random variable; post-test score= dependent variable

As Table 2 shows, in scores on the dependent variable (post-test score), as a result both Kolmogorov-Smirnov and Shapiro-Wilktests, in both groups were breached before assuming normal distribution(P>0/05).The hypothesis of survey: consulting group based on a rational approach to increase students' emotional resiliency level. Table 3 abstract on the results of descriptive statistics psychological resilience scores of experimental and control embankments students in pre-test and post-test that is displayed.

Table 3: Abstract of results of descriptive statistics psychological resiliency experimental and control groups

Post-test score			*Pre-test score*		Belong to group	*Variable*
standard deviation	Average adjusted	***Average***	***standard deviation***	***Average***		
15.68	***53.91***	***60.67***	***7.49***	***88.13***	***control***	Resiliency
9.92	***48.101***	***94.73***	***11.74***	***64.27***	***Test***	psychological

Note: The average adjusted average post-test score after controlling for differences in pre-test effect . 30 = N; 15 = control n; 15 = test n.

According to the results in Table 3, the pre-test and post-test in both groups had differences in the resiliency scores. As Table 3 shows the pre-test psychological resiliency experimental group (SD=11.74;m=64.27) was significantly lower than the resiliency control (SD=7.49;m=88.13) was (P<0.05).But in the post-test resiliency control group (SD=15.68;m=60.67) was significantly reduced compared to pre- test , the experimental group compared to pre-test scores and resiliency (SD=9.72;m=94.73) is significantly increased. The result of this swing resulted in a very tangible and significant difference between the two groups is post-test scores (P<0.05).After controlling for differences in pre-test, post-test difference in adjusted that mean the two groups has increased. So that the experimental group (m'=101.49) as a result of psychological intervention much more resiliency than the control group (m'=53.91) have shown (P<0.05). Table 4-5, detail significant beneficial effect has to offer.

Table 4: Abstract on results of an independent analysis of covariance to calculate the differences between the two groups in psychological resiliency.

Statistical power	***Effect size***	***sig***	***f***	***Mean Square***	***df***	***Sum of squares***	***source***
0.65	***0.18***	***0.02***	***5.95***	***870.41***	***1***	***870.41***	***Pre-test***
1.00	***0.63***	***0.0005***	***45.09***	***6598.91***	***1***	***6598.91***	***Group***
				146.37	***27***	***3951.85***	***Error***

Note : The dependent variable = post-test score psychological resilience ; 30 = N; 15 = control n; 15 = test n.

As Table 4 shows that after controlling for the effect of the random variable adjuvant (pre –test scores), increase psychological resiliency effect of intervention on students was significant.($P<0.05$; f (1.27); $\eta 2=0.63$).In other words, 63 percent of students at post- test scores of psychological resiliency can be attributed to the effects of intervention.

Discussion and conclusion

The aim of this study was to investigate the effectiveness of cognitive behavioural group counselling on resiliency secondary high school of girls. The results of analysis of covariance showed that cognitive behavioural group counselling high school girl students affected Avery turn away. The results obtained by previous research carried out by DashtiPour (2013) , TavakoliTaame (2015) and ZamiriNejhad (2010) is the same but with research Mortazavi (2019) investigated the effectiveness of cognitive behaviours therapy for juvenile offenders turn away Technologies is not antithetic , which is probably due be to the disruption of difference is a research sample .The findings of this study are very promising and demonstrate the potential value of cognitive behavioural therapy, group counselling was based. In the other word the research hypothesis have been confirmed. In explaining the effectiveness of cognitive behavioural group counselling can said that because in this method was the works of Irrational Beliefs and forced people to analyse their dysfunctional thoughts to help people with their beliefs that did not help them. And often create obstacles to achieve their goals efficiently identify and beliefs are replaced and this factor has led resiliency was higher. Tolerance is adaptive resiliency in difficult conditions that It is obvious that in situations with despair and black people as if they Difficult and in fact, Ellis managed to members of the group cognitive behavioural approach to deal with negative thoughts , and this tool helps them To behave more consistently because the thoughts , feelings and subsequent behaviour makes. In fact, by modifying the thoughts, feelings, and behaviour modified. Teens in this group counselling sessions of active role in setting objectives, experience catch, training and management had a performance. This approach was designed to facilitate more effective and better self-control and to achieve that, the support framework created therapist. The therapist's role was to create a partnership in which the members of this authority to a better understanding of their problems and explore multiple ways of thinking and behaviours due to create such an atmosphere that has resulted in increased levels of resiliency students was sent.

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