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Effect of REBT on academic procrastination of secondary school students

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Abstract. In this paper, Rational Emotive Behaviour Therapy (REBT) is utilized as a significant tool to deal with the Academic Procrastination (AP). The sample of students having AP tendency is ranked as moderate and high after measuring based on an AP scale is selected. This study sample is delimited for secondary school students at private schools of Amritsar district, Punjab, India only. T-test is used for analyzing the effect of various issues on the selected students. From significance analysis it is found that there is a significant difference in the effect of REBT on AP of secondary school students as compare to the control group. Thus, overall analysis rejects the defined null hypothesis. Therefore, REBT has significant impact on the AP of secondary school students as compare to the control group.

Keywords:AP, secondary school students.

I. INTRODUCTION

Education is the greatest tool to create an optimistic improvement in the world. To produce an era of responsible persons and to promote the growth of the excellent individuals, it provides the means to really build themselves psychologically and socially. Students are the main focus of the education system of every country. Therefore, attention to student's outcomes is seen as essential to the development of education and progress in each country as the students' failure leads to stagnation in education and the backwardness of the society. AP is a serious problem in the educational environment.APhappens when studentsdelay academic related tasks such as projects and assignments unreasonably. According to Yong (2010) [1], AP is "an irrational tendency to delay at the beginning or completion of an academic task".Due to technological advancements, students often believe in putting off work on never coming tomorrow by indulging in activities such as net surfing, social networking, whatsapp, games, music, videos etc. which finally leads to wastage of time. They start tending to delay academic tasks to the level of not finishing it till the deadline (Beswick, Rothblum, & Mann, 1988)[2].All these concerns affect his academic performance. However, academic performanceis considered as a key point to evaluate the growth and progress of the students.Procrastination negatively influences the academic growth as it reduces the scholar's performance. It is expected that 95% of teen and youths encounter procrastination during their acadamic life (Ellis &Knaus, 1977; Steele, 2007) [3,4]. It has a great rate of pervasiveness at numerous academic standards (Ferrari, 2002)[5]. Akbay and Gizir (2010)[6] concluded that scholars who engage in AP behavior experience negative effects like withdrawing courses, expanding durations of their course, restricting university education, etc. [7].

It is a cognitive problem as the individuals who delay academic work have irrational thoughts, unreasonable expectations and opinions about their performance, employed circumstances, and outcomes. The investigators who directed an investigation on students examined the relationship between irrational thoughts and AP behavior. The outcomes provedthat there was a significant relationship between AP and irrational thoughts, depression, low self-esteem, and anxiety (Solomon &Rothblum, 1984) [8]. Research of Chow (2011) [9] proved that AP appears to scholars who have a negative self-assessment as a form of mind dysfunctional. Research of Flett et al. (1991) [10] also found that there is correlation of AP with negative automatic thoughts. Dysfunctional understanding of the task also turn the students who certainly give up before the task. Gallagher, Golin, and Kelleher (1992)[11] state that 52% of studentssuffer with procrastination problem and wants to seek help for. The negative outcomes of AP on academic achievement and emotional and physical well-being demands the need for intervention researches on this topic (Glick, Millstein,&Orsillo,2014) [12]. Since the AP is of a cognitive nature, a REBT approach can be used to reduce the AP. REBT has been designed to identify irrational

beliefs (IBs), to examine the links between cognition, emotion, and behavior, and to replace the realistic change with IBs (C.H. (1995) [13].Since the AP is of a cognitive nature, a REBT approach can be used to reduce the AP. REBT has been designed to identify irrational beliefs (IBs), to examine the links between cognition, emotion, and behavior, and to replace the realistic change withIBs[13].

II. RATIONAL EMOTIVE BEHAVIOUR THERAPY

Rational Emotive Behaviour Therapy is the cognitive-behavioral approach to counselling and psychotherapy and it is proposed by Dr. Albert Ellis. It is a technique that helps toreduce self-defeating emotions and negative behaviour by integrating cognitive restructuring with the help of behavioural techniques (Ellis 2004) [14]. The main objective behind REBT is that people disturb themselves not by the event but by the way they interpret the event and understand outcomes and circumstances (corey, 2009) [15]. REBT suggests that distinguishing between irrational and rational thoughts is important since irrational thoughts lead to disturbed emotions and negative behavioral reactions. Thus, irrational thinking do not help in achieving goal. Rational beliefs (RBs) usually result in moderate emotions that help in accomplishing the goal and enjoyment with life (Shannon, 1998) [16]. Thus, Rational Emotive Behaviour Therapy helps children and teenagers in changing their irrational thinking. ABC (DE) model of REBT states that A is the activating event, regarding which they have rational and IBs/cognitions (B). It may lead to emotional, behavioral, and cognitive consequences (C). RBs give rise to adaptive and healthy outcomes, whereas IBs (IBs) lead to maladaptive and unhealthy outcomes. People who participate in REBT are advised to actively dispute (D) their IBs and in turn to incorporate effective (E) RBs, to allow healthy, functional, and adaptive emotional, cognitive, and behavioral responses (Elli, et al., 2003) [17]. The key objective of REBT is to substitute IBs with a different set of RBs to support people in reducing emotional disturbances, decreasing self-defeating behaviors, and developing more self-actualization so that they can lead a more contented life (Ellis, 2003, 2004, 2005) [14,17,18].

III. SIGNIFICANCE OF THE PROBLEM

AP is considered as one of the serious problems in educational settings in modern societies. In today's learningestablishing, students are obliged to participate with numerous curricular and co-curricular events in a smallperiod. For e.g., planning for presentation, composing assignment, internal and external assessment for varioustopics, etc. In these kinds of situations, scholarsincline to delay their respective academic work as they areparticipating in additionalevents, lack of attention and idlenessthusAPdistracts the learning outcomes and confidence towards academics. Thus, procrastinationgenerates more pressure in the life of students and never producesquality effort of students.Thus, to handle the procrastination, suitable treatments are required. Therefore, in this paper,our objective is to evaluate the impact ofREBT on AP.

Operational Definitions

AP: AP refers to delay or putting off academic activities to the last minutelikemaking assignments, performingschoolwork, preparing exams etc. In the present study it is assessed on the basis of scores obtained by the students on Academic Procrastination Scale (APS) developed by Kalia & Yadav (2013).

Objectives and Hypotheses of the Study

Objective: To study the effect of REBT on academic procrastination (AP).

H_o1: There is no significant difference in the effect of REBT on AP of secondary school students as compare to control group.

IV. METHODOLOGY

In the present study experimental method was used to see the effect of REBTon APof secondary school students.In the present study,REBT was used to enhance the experimental group's capability to handle their AP.

Design

In the present study, pretest- posttest experimental control groupdesign was used. There wasone experimental group and one control group. 30 subjects were included in each group. Both the groups were assessed before and after the treatment. The treatment based on REBTwasgiven to the experimental

group for three months in twelve sessions conducting one session per week. In the present study the investigator would review theimpact of REBT(i.e., independent variable)onAP(i.e., dependent variable).

i.Size:Size of the sample comprised of 60 students whose AP tendency rated as moderate and highutilizing an AP scale.

ii. Techniques:Random Sampling technique was used to select Private schools of Amritsar district of Punjab.Students withAP were identified purposively by administeringAP scale.Allotment of the subjects to two groups was done randomly.

Procedure of Sample Selection

Thepopulationforthestudycomprisedof9thGradestudentsstudyinginthe private schools located in Amritsar, Punjab(India).Forthepurposeofthestudy, out of five, two private schools which had highest number of students with AP were randomly selected from Amritsar district for experiment. From the selected schools,79students with AP were identified with the help of teacher's referral forms. ThenAP scale was administered on the 79 students. The final sample consisted of 60 students whose AP tendency was moderate and high on the basis of AP scale. They were randomly assigned into two groups i.e., experimental group and control group. 30 subjects were included in each group. Table 1 shows the descriptive statistics for AP of students in CG (N=30) and EG (N=30) at pretest stage.

Table 1.*Descriptive statistics for AP of students in CG (N=30) and EG (N=30) at Pre-test Stage*

Academic Procrastination	Pre-Test Stage (Control Group)	Pre-Test Stage (Experimental Group)
N	30	30
Mean	60.100	58.700
Std. Error of Mean	2.1795	2.0740
Median	57.500	56.500
Mode	48.0[b]	51.0[b]
Std. Deviation	11.94	11.36
Skewness	.672	.432
Std. Error of Skewness	.427	.427
Kurtosis	-.193	-.606
Std. Error of Kurtosis	.833	.833
Minimum	42.0	40.0
Maximum	89.0	82.0

For present study, the assumption of normally distributed population was tested through descriptive statistics of skewness and kurtosis. From table 1. It can be seen that Skewness, Kurtosis of scores at pre test stage of the two groups i.e control group and experimental group for the measures of academic procrastination. The values of skewness were found to be lie within ±1 range. Values within ±1 range could be accepted as having skewness of moderate degree (Croxton and Cowden, 1956). If the distribution is normal, value of kurtosis is 0.263 if Ku is greater than 0.263 the distribution is platykurtic; if less than 0.263 the distribution is lepokurtic (Garett and Woodworth, 1981). In the present study, the total sample is N=60 and the size of the sample in each group is 30. Values of skewness and kurtosis for both the experimental and control groups of academic procrastination showed that the distribution of scores is normal. This satisfies the assumption of normality. As data is showing normal distribution, it justifies the use of parametric tests.

Homogeneity of Variance onAP

Theassumptionofequalvarianceinthepre-testscoresfor AP ofstudentsinCGandEGhasbeentestedusingLevene'stest(Table2).

Table 2.*Homogeneity of Variance in groups on AP scores (Pre-test Stage)*

Levene's Test for Equality of Variances		
Variables	F	Sig.
Pretest Scores AP	.003	.956

Table 3.*Showing thedifferences in means of PreTest Scores of Control group and Experimental Group for showing Equivalence of the Groups*

	Group	N	Mean	SD	SEM	SED	Df	t-value	Sig. (2-tailed)
Pre test Scores	Control	30	60.100	11.9376	2.1795				
AP	Experimental	30	58.700	11.3598	2.0740	3.0086	58	-.465	.643

From Table 3, it can be seen that t-ratio was found to be statistically non-significant for AP (t=-.465) for the difference between the pretest scores on AP of control group and experimental group for df=58 at 0.05 level of significance. The calculated t-values for both the variables were found to be less than +/-1.96, It indicated that there exists no significant difference in the Experimental group and Control group on the variable APbefore the conduct of experiment.

V. PERFORMANCE ANALYSIS

Objective

To study the effect of REBT on AP.

H_o1: There will be no significant difference in the effect of REBT on AP of secondary school students as compare to control group.

Table 4: t-Test analysis on pre- and post-AP.Mean, S.D. and t-value for the pre-test and post-test scores of AP of experimental group

Table 4.*t-Test for correlated means for 'AP'*

	N	Mean	Standard. Deviation	Standard. Error Mean	t- value	p-value
Pre-test	30	58.70	11.34	2.07	11.86**	.000
Post-test	30	45.46	10.23	1.86		

**Significant at 0.01 level

From Table 4, it is seen that the t-value for AP of experimental group at both pre-test and post-test level is 11.34, which is significant at 0.01 level with df=29. It is observed that there is a substantial difference in the mean scores of AP of experimental group at pre-test and post-test level. Further the post-test mean scores of AP of experimental group is45.46 which is lower than that of pre-test mean scoresof AP of experimental group which is 58.70.So, there was a significant effect of REBT on AP of students. It may, therefore, be said that AP was reduced when the students were exposed to REBT at posttest level. t-values for AP of control group and experimental group at posttest level have been presented below in Table 5.

Table 5.*t-Test for independent means for AP in Experimental group and control group*

`Groups	N	Mean	Difference in mean	SD	Value of t- ratio	p-value
Experimental group	30	45.46	16.77	10.22	**5.79****	**.000**
Control group	30	62.23		12.14		

**Significant at 0.01 level

From Table 5, it is seen that the t-value for AP of experimental group and control group is 5.79, with significant at 0.01 level and df=29.It is shown that there is a substantial difference in the post-test mean scores of AP of experimental group and control group. Further, the post-test means scores of AP of experimental group after applying REBT is 45.46, which is lower than that of post-test mean scores of AP control group which is 62.23. This indicates that AP of experimental group had reduced after applying REBT whereas control group at post-testlevel remained less or more the same.

Table 6. *Independent Samples t-test for Mean Gain Scores on AP of students in Control and Experiment Group*

Group	Mean Gain scores	SD	SE_M	Df	Difference in mean (Post-Pre)	SE_D	t-value (p-value)
CG	2.13	9.16	1.67	**58**	15.36	2.01170	t=**7.63**(p= .0001**)
EG	13.23	6.11	1.11				

From Table 6,it can be seen that themeangainscoresonAPofstudentsin the Control Group and Experiment Group were found to be 2.12 and 13.23respectively.Ascomparedtothecriticalvalue,theobtainedt-value,i.e., t=7.63,p=0001,wasfoundtobesignificant which shows that REBT had significant impact on AP behavior of students.

From significance analysis, it is found that there is a significant difference in the effect of REBT on AP of secondary school students as compare to the control group. Thus, overall analysis has rejected the defined null hypothesis "There is no significant difference in the effect of REBT on AP of secondary school students as compare to control group" for AP. Therefore, REBT has significant impact on the AP of secondary school students as compare to the control group.The findings of the present study are confirmed by the Studies (Lay, C. H. (1986) [23],Tuckman, B. W. (1991)[24], Bashir, S., Bashir [2015][25], Moksnes, U. K.,(2015)[26]; Ozer, Demir and Ferrari ,2013[21],Toker and Avci, 2015)[22], it has been observed that that APbehaviors of studentsreduced significantly after implementing the intervention enabled REBT. Many variables can affectAPperformancelikeintellectualmisrepresentations andIBs, lowself-esteem, inspiration, and efficient time management.

Implications of the Study

The present study evaluated the effect of REBTon AP of secondary schoolstudentsintheagegroup14-16yearsstudyingin9thgrade.Thisstudyhasyieldedsignificantresults,whichcanhavevaluableimplicationsforstudents. Results of the study clearly indicates that the AP of the students significantly reduced after the intervention. These results strengthen the idea to use such interventions/programs in schools. There is a need to integrate REBT based interventions with an academic curriculum in the schools so that the teachers can better help the students those who are academic procrastinators by increasingtheir rational thinking and thereby reducing emotional disturbance. It helps in developingthe skills necessary to control themselves. It can be effective in disputing theIBs with children and adolescents in classrooms. Furthermore, it allows all students to better understand their feelings and emotions so that they can be better learners.

VI. CONCLUSION

In the light of present findings, it has been observed that procrastination behavior of the secondary school studentswho have contributedto group practicesusingREBTlessenedsubstantially when contrasted to those who did not take REBT therapy. Thefindingimpliesthatincorporatingsuchintervention based on REBTinschoolscan reduceAPof students whichinturncanimprovetheiroverallllearningexperienceandmayresult inimprovedacademicperformance.

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