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# EFFECT OF COGNITIVE RESTRUCTURING TECHNIQUE (CRT) ON SOCIAL WITHDRAWAL BEHAVIOUR OF IN-SCHOOL ADOLESCENTS.

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## ABSTRACT

*This study examined the Effect of Cognitive Restructuring Technique (CRT) on Social Withdrawal Behaviour of in-school Adolescents. Three specific purposes with three research questions and three hypotheses guided the study. The study adopted quasi-experimental design, specifically non-equivalent control group design or pre-test, post-test control group research design. Infinite population was adopted for the study. The sample size for the study was 56 senior secondary I and II (SS I and SS II) in-school adolescents from four co-educational public secondary schools obtained through multistage sampling technique. The sample size of 56 in-school adolescents was drawn from those who possess the characteristic of social withdrawal. The study sample was randomly assigned into two groups. The first one was experimental group which comprised 30 in-school adolescents (males: 16 and females: 14) from two secondary schools that received treatment. The second group was the control group that consisted of 26 in-school adolescents, (males: 8 and females: 18) from the other two secondary schools that were not exposed to treatment. The instrument for the data collection was adapted Social Withdrawal Identification Scale (SWIS) by Oladipo, Erhabor and Idemedia (2014). The reliability of the instrument was determined through Cronbach Alpha statistic which yielded the coefficient index of 0.89. The results of the study among others show that the in-school*

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*adolescents who suffered from social withdrawal behaviour that participated in the intervention programme (CRT) experienced reduction of social withdrawal behaviour than the control group. Also, the male and female in-school adolescents who exhibit social withdrawal behaviour that were exposed to Cognitive Restructuring Technique (CRT) had substantial improvement in reduction of social withdrawal behaviour, but favoured the male-in-school adolescents more with a slight difference than their female counterparts. Based on the findings of the study, the following recommendations were made among others. School counsellors should ensure that all identified male and female in-school adolescents exhibiting social withdrawal behaviour should be exposed to appropriate intervention techniques, like CRT. This will go a long way to improve their thinking and reduce their social withdrawal behavour. Ministry of Education should provide enough guidance counsellors in the various secondary schools and organize workshops for counsellors where the use of CRT for both male and female social withdrawn adolescents can be exposed to them*

**Keywords:** Adolescents, Social Withdrawal Behavior and Cognitive Restructuring Technique (CRT)

**Introduction**

Adolescence is the phase of life between childhood and adulthood, from ages 10 to 19. It is a unique stage of human development. Adolescence is referred to as a stage of maturity between childhood and adulthood which indicates the period from pubertal stage to adult stage of human development (Nwangwu, Adimora, Ukweze & Ugwueze, 2017). According to Uka and Ukwuoma (2015), Adolescence is a transition stage that demand to be handled with care by both the adolescents, parents, school counsellors and teachers. It is a period when the youths wish to live in a world of their dreams but may not be able to function independently to achieve their dreams. They seem to feel dishonored and slighted when addressed as children especially in the midst of their peer group. Unfortunately, they are not equipped and prepared for the challenges that usually characterize adult's life. As noted by Uka and Ukwuoma (2015), adolescents are easily distracted because they seem to hear what their ears like to hear and behave in manners that appeal to them.

Presently in Nigeria, adolescence stage falls within the period of secondary education. Secondary education forms the bedrock aimed at preparing the individual for useful living within the society and higher education (Federal Republic of Nigeria, 2014, Efiong, 2015). Hence, an in-school adolescent refers to a typical adolescent who is in school, be it college or high school, enrolled to acquire learning experience necessary to transmit into adulthood (Schneider, & Stepsion, 2013) In-school adolescent in this study refers to learners who are in secondary school. Their emotions at this stage are high and may give room for changes in their social, psychological and physical development. These changes are critical to understanding

their social relations and/or interactions with other individuals especially in a social setting. Most in-school adolescents appreciate associating and building a relationship among themselves, this behavioural disposition according to Salami, Kilttan and Okoiye (2016) impact positively on the quality of lives of adolescents. However, observation shows that some of the in-school adolescents find it difficult to associate with their peers, hence giving room for social withdrawal.

Social withdrawal has been defined as the consistent display of all forms of solitary behaviour when encountering familiar and unfamiliar peers across situations and overtime. (Oladipo, Erhabor & Idemudia, 2014). Social withdrawal is the tendency to feel awkward, worried or tense during social encounters especially with unfamiliar people, (American Psychological Association, 2013.) Social withdrawal in the view of Dexter (2022) involves the voluntary act of removing oneself from opportunities to connect with others. Social withdrawal can present as avoidance of social events or interactions, declining to engage with others when in a social setting, isolating from an already-established support system, or not engaging in social community activities. When an in-school adolescent withdraws socially, he experiences isolation. An individual may decide to be alone sometimes, probably to rest, reflect and regain strength. This is different from pulling away from your support system and intentionally avoiding opportunities to interact or connect with others.

According to the need-to-belong theory by Burmeister and Leary cited in Stenseng, Tingstad, Wichstrom and Skalicka (2022), humans have a fundamental motivation to create and maintain long term relationships. When failing to establish such relationships, the need for *belongingness* becomes thwarted and a stressful psychological state emerges which burdens cognitive and regulatory resources. Social withdrawal in this study represents refraining of an in-school adolescent from interaction and avoidance of social setting.

Gender is a societal meaning assigned to male and female with a particular role that each should play. Gender is a psychological term that describes behaviours and attitude expected of individuals on the bases of being a male or female (Nnachi, 2016). Gender is not a biological term but a social or cultural constructed that differentiates the roles of the males and females. In a society, a male might be expected to dig the ground while the female might be expected to cook the food. Culture could place such expectations based on their sex. Culture might expect the man to pay tax, to make big donation for the development of a village or town. Culture might expect the woman to be beauty conscious, soft and submissive. These are cultural expectations. Taylor (2015) defines gender as a set of assumptions about the nature and character of biological differences between males and females which are manifest in a number of ideas and social practices that have determinant influence upon the

identity, social opportunities and life experiences of human actors.

In a review by Duey, Complan and Kingsbury (2014), it was suggested that social withdrawal constitutes a greater risk for male adolescents than female adolescents in terms of development problems. In support of this review, Rubin and Barsted (2014) conducted specific analysis of their data from the friendship project, findings showed that number of withdrawn 10 to 12 year- old male adolescents were more likely than female adolescents to be excluded and victimized by their peers.

Presently, in Ebonyi State, the researchers observe that making friends seem difficult among most of the in-school adolescents. It appears they experience much trouble in connecting with their schoolmates with whom they share common interests, experiences and hobbies. On the other hand, some of the in-school adolescents appear not to be participating in debate programmene, as they lack the desire for interacting with others. The researchers observe that such students absent themselves in class group assignments, oral presentation, game activities, for quite a long time. They often avoid peer interaction and classroom discussion. Consequently, it is feared that they may be exposed to the traits of loneliness, reduction in socialization, poor relationship with others, avoidance behaviour, suicidal thought, anxiety, exclusion of themselves from others, inability to share their likes and dislikes, procrastination or neglecting their responsibilities, and tendency to perceive others wrongly may be developed. Those who are socially withdrawn appear to lose confidence in social situations. The way an individual views and relates with others is essential in a social group and this could be developed through cognitive restructuring.

According to Society of Clinical Psychology (2017), different Scholars recommend that appropriate use of Cognitive Restructuring Technique (CRT) in solving cognitive related problems leads to improvements in functioning and quality-of-life. Nwangwu *et al*, (2017) notice that cognitive restructuring technique is a learning skill designed to refute negative interpretation or fundamental, "faulty thinking" with the goal of replacing one's irrational thoughts and illogical reasoning to a rational and logical reasoning. Enota cited in Ncheke, Nwosu, Egenti, Enajedu, Ede, Umah, Omeje, and Ugwu, (2020) observe that in-school adolescents who were exposed to cognitive restructuring technique adjusted on their anger behaviour more than those who were not exposed to the treatment.

The Cognitive theory by Ellis (1955) holds that one's own unrealistic beliefs are directly responsible for generating dysfunctional emotions and their resultant behaviour like stress, depression, phobia, and social withdrawal. The application of CRT is based on the premise that how in-school adolescents think (cognitive), feel (emotions) and act (behaviour) all interact together. This means that the thoughts of the in-school adolescents condition their feelings and consequently their behaviour

of social withdrawal. Social withdrawal which is AS RESULT OF distorted or dysfunctional thinking, underlines all psychological disturbances. This may affect the in-school adolescents' moods, belief and behaviour. It is not the event (Social interaction that affect the withdrawn adolescents but how they perceive social engagement. The fundamental believes impact on our thoughts in any given opportunity, and different in-school adolescent react differently to such faulty information processing. It therefore becomes necessary to explore the effect of Cognitive Restructuring Technique (CRT) on social withdrawal behaviour of in-school adolescents.

**Purpose of the Study**

The main purpose of the study is to investigate the effect of Cognitive Restructuring Technique (CRT) on social withdrawal behaviour of in-school adolescents in public secondary schools.

The specific purposes are to:

1. determine the mean rating in the social withdrawal behaviour of in-school adolescents treated with Cognitive Restructuring Technique (CRT) and the control group.
2. examine the mean rating in the social withdrawal behaviour of male and female in-school adolescents treated with CRT.
3. ascertain the interaction effects of method (CRT) and gender on social withdrawal behaviour of in-school adolescents.

**Research Questions**

The researcher posed the following questions to guide the study:

1. What is the mean rating in the social withdrawal behaviour of in-school adolescents treated with Cognitive Restructuring Technique (CRT) and the control group?
2. What is the mean rating in the social withdrawal behaviour of male and female in-school adolescents treated with CRT?
3. What is the interaction effect of method (CRT) and gender on social withdrawal behaviour of in-school adolescents?

**Hypotheses**

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

1. There is no significant difference in social withdrawal behaviour of in-school adolescents treated with Cognitive Restructuring Technique (CRT) and the control group.
2. There is no significant difference in the social withdrawal behaviour of male and female in-school adolescents treated with Cognitive Restructuring Technique (CRT).
3. There is no significant difference in the interaction effects of method (CRT) and gender on social withdrawal behaviour of in-school adolescents.

**Literature Review**

Social withdrawal is defined as a long-term social isolation and self-exclusion, including non-attendance at school or work, minimal social contact and consistently

staying at home. (Masi, Berloffa, Milone & Paola, 2021) In addition, Nwangwu, Akaneme and Amoke (2015) argue that social withdrawal is an internal state in which the individual lacks a sense of belonging in a social relationship leading to exclusion and inability to meet the expectation in the association of their peers. According to the above social withdrawn persons are more likely to have direct experience of peer neglect and rejection than their more sociable age mates.

Major contribution to social withdrawal behavior is the environment of the child in combination with the child's internal characteristics. Within the social environment are characteristics which may act as stressors or supports for children, such as size, complexity, density, and provisions of their social world, and thus facilitating or limiting adequate functioning (Franzoi, Davis, & Vasquez-Suson, 2011). Three factors are at work in the discussion of environment and child: the internal characteristics or temperament of the child, socialization, and setting conditions. The child may have an external temperament displaying overactive behaviours and being difficult to soothe or an internal temperament having a low arousal threshold, therefore easily agitated and difficult to soothe. In both cases the temperament of the child is detrimental to interactions. From these temperaments, Rubin, Lemare and Lollis (2013) hypothesize two pathways to social withdrawal. The child in pathway one is more hostile and aggressive because of temperament and the environment, where living conditions are poor and the relationship with parents is more focused on issues of discipline rather than nurturing. These early influences lead to aggressive and inappropriate peer interactions, subsequent exclusion from the peer group, and further antisocial and solitary activities ensue. Moreover, in pathway one, social withdrawal and isolation from the peer group are a forced consequence of the aggressive child and his or her negative environment.

Pathway two involves children who, because of their internal temperament and low arousal threshold, have withdrawn early in life. Social withdrawal has been brought about by the child's wariness, anxiety, and insecurity in new environments. Initial social withdrawal by the child, then, will lead to peer perceptions of abnormal behaviour and subsequent rejection by the peer group. Again, adolescents in pathway one, where aggression creates rejection leading to social withdrawal and pathway two, in which social withdrawal is initially present, all have limited chances for social and social-cognitive skill development (Rubin, LeMare, & Lollis, 2013).

Under socialization, the withdrawn, or non-interactive child has fewer opportunities for social relations and instead of developing socially, the child recognizes his or her social difficulties, withdrawing further and increasing the negative experience, while setting conditions in conjunction with the child's behaviour will influence parental

sensitivity, the feelings directed toward the child, knowledge of child rearing, and opinions on discipline (Rubin, LeMare, & Lollis, 2013). Financial or living conditions are examples of negative setting conditions that impact family relations; subsequently stress may be displayed in interactions of mother, father, and children (Rubin, LeMare, & Lollis, 2013).

On the other hand, the findings of Ahmed (2016) who investigated the effectiveness of Cognitive Restructuring and graded exposure counselling technique on school phobia among secondary school students in Kaduna Metropolis agreed that Cognitive Restructuring help reduce phobia in favour of the female students. Ncheke, Nwosu, Egenti, Enajedu, Ede, Umah, Omeje and Ugwu (2020) investigated the efficacy of Cognitive Restructuring Technique on Adjustment of Social Isolates in a sample of Nigeria Secondary School Adolescents. The findings of the study revealed that the efficacy of cognitive restructuring technique on the adjustment of social isolates adolescents was significant at post-test and follow-up measures.

Furthermore, researchers had begun to investigate questions pertaining to sex differences in social withdrawal in its various forms and some of the available literature have implicated gender as a predictor variable of social withdrawal, particularly among adolescents and there is evidence to suggest that withdrawal may be (a) less acceptable for boys than girls, (b) somewhat encouraged in girls, and (c) related to adjustment problems in boys but not girls (Radke-Yarrow, Richters, & Wilson, 2009). Although researchers like Coplan, Gavinski-Molina, Lagace-Seguin, and Wichmann (2017) have a different view to this, in that they did not find significant gender differences in social withdrawal among the sample they studied.

In addition, Nwangwu, Akaneme and Amoke (2015) investigated the effect of Cognitive Restructuring on Social Competence of Pupils with Social Withdrawal Behaviour. Major findings of the study reveal that exposing Socially Withdrawn pupils in the skills associated with cognitive restructuring has an enhanced effect on their Social Competence. Maleness and femaleness did not have any significant effect on the mean social competence scores of those exposed to cognitive restructuring and those that were not. The interaction effect of gender and treatment on social competence of pupils with social withdrawal behaviour was not significant.

**Cognitive Restructuring Technique (CRT)**

Cognitive restructuring is a technique derived from Albert Ellis, the chief proponent of Rational Emotive Therapy (RET). This technique attempts to teach a client how to reduce negative reactions by getting him/her to interpret situations/ events with greater accuracy. Cognitive restructuring is a re-education of clients using assorted counselling skills/techniques such as confrontation, direct teaching and homework. It involves changing the way a client thinks or adheres to certain maladaptive beliefs. Ellis cited in Umezurike & Eneastor (2010), outlined this

approach to therapy based on the assumption that emotions and behaviour are the result of the individual's attitude and belief. According to Ellis, people interpreted events based on these beliefs

Moreover, Ellis sees a duality in human nature. Thus, he believes that man is both rational and irrational. He also believes that there is a close link between thinking and emotion. He insisted that emotion originates from, and is determined by thinking, emotion being biased thought or an intrinsically attitudinal and cognitive process. Thinking and Emotion, according to Ellis, are fused, and for pragmatic purposes, the two processes, must be regarded as the same thing.
Irrationality is the source of emotional problem. One's emotional problem is not caused by the event but by the individual's philosophies and belief that is the "self-talk" or internalized sentences with which the individual keeps indoctrinating himself. This remarks every human being who gets disturbed is really telling himself a chain of false sentences and it is these sentences which really are, which constitute his neurosis." These sentences which cause emotional difficulties in the person may have been developed over a long time. (Umezulike & Eneastor, 2010, Otta, 2011).

Ellis outlined several illogical and irrational ideas which are universally inculcated and would seem inevitable leading to emotional disturbance like:

1. "An adult must be loved or approved by almost everyone," This is an illogical thinking because though it is desirable to be loved and approved, it is not possible to be loved and approved by everyone.
2. A person must be completely competent, adequate and achieving if he is to be worth-while.
   "When things are not the way you want them to be, it is a catastrophe'".
3. "People have little or no control over the external causes of the bad things that happen to them".

Cognitive Restructuring Technique (CRT) offer socially withdrawn in-school adolescents more opportunities to imagine better options on how to handle self-negative thoughts, behaviours and lifestyle. In order words, CRT exposure helps to sensitize withdrawn students on how to develop positive interest towards social interaction.

**Methodology**

This study adopted a quasi-experimental design, involving pre-test, treatment and post-test. One experimental group involved in the study received treatment and the other which is the control group did not receive any treatment, but each group participated in the administration of pre-test and post-test. The subjects were randomly assigned to the experimental group and control group. The population of the study comprises all the SS1 and SS2 adolescents that display social withdrawal behaviour, in all the 224 public secondary schools in Ebonyi State (infinite population). The sample size for the study was 56 participants (30 for experimental group and 26 for control group). The researcher

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adopted Multi stage procedure in the sampling to select secondary schools and four were selected. Two secondary schools were assigned to experimental group (30 participants, males: 16, Females 14) and two secondary schools to control group (26 participants; Males 8, Females 18) using simple random balloting without replacement. The Instrument for Data Collection was Social Withdrawal Identification Scale (SWIS) adapted from Oladipo, Erhabor & Idemudia 2014. The Reliability of the Instrument was tested using Cronbach Alpha Technique. The instrument was subjected to a trial testing using 30 students in an equivalent two public secondary schools in Enugu State, not included in the main study sample. The overall co-efficient yielded 0.89.

**Results**

The results are presented in tables in line with research questions and hypotheses that guided the study.

**Research Question I:** What is the mean rating of social withdrawal behaviour of in-school adolescents treated with Cognitive Restructuring Technique (CRT) and those in control group?

For research question 1, the pretest and post-test scores of social withdrawn in-school adolescents treated with CRT and those in control group were analyzed using the adjusted mean and standard deviation. The summary of the data analysis/result is presented in Table 1 below:

**Table 1: Effect of Cognitive Restructuring Technique (CRT) on the social withdrawal behaviour of in-school adolescents.**

| Groups | N | Adjusted mean | Standard deviation |
|---|---|---|---|
| Group exposed to CRT | 30 | 71.67 | 10.02 |
| Control group (Vocational counselling) | 26 | 40.23 | 3.81 |

The summary of result in Table 1 indicates that the experimental group that received Cognitive Restructuring Technique (CRT) had a mean score of 71.66 and a standard deviation of 10.02. The social withdrawn in-school adolescents that are in control group had a mean score of 40.23 with the standard deviation of 3.81. This implies that the in-school adolescents exhibiting social withdrawal behaviour that participated in the treatment experienced reduction of social withdrawal behaviour than those in the control group.

**Research Questions 2**: What is the mean rating in the social withdrawal behaviour of male and female in-school adolescents treated with CRT?

The mean rating and standard deviations of male and female-school adolescents that participated in the CRT intervention programme were used to answer research questions 2 in table 2.

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**Table 2: Social withdrawal Behaviour of male and female in-school adolescents treated with CRT.**

| Groups | N | Adjusted mean | Standard deviation |
|---|---|---|---|
| Male students | 16 | 72.56 | 8.86 |
| Female students | 14 | 70.64 | 11.47 |

The summary of the result in table 2 shows that male-in-school adolescents with social withdrawal behaviour who participated in CRT package had a mean score of 72.56 with a standard deviation score of 8.86, while their female contaparts that received the same treatments had a mean score of 70.64 with a standard deviation score of 11.47. This result shows that the intervention programme of CRT had effect on both male and female-in-school adolescents with social withdrawal behaviour, but favoured the male students with a slight mean gain of 1.92.

**Research Question 3:** What is the mean rating in the interaction effect of Method (CRT) and Gender on social withdrawal behaviour of in-school adolescents?
Data collected from both male and female in-school adolescents with social withdrawal behaviour in the two groups treatment and control groups (pretest and post-test) were used to answer this research question using the adjusted mean.

**Table 3: Effect of CRT on interaction effect of method (CRT) and gender on social withdrawal behaviour of in-school adolescents.**

| Groups | Male | Female |
|---|---|---|
| CRT | 72.56 | 70.64 |
| Control group | 41.13 | 39.83 |

The summary of the result in table 4.3 shows that male and female participants with social withdrawal behaviour in the treatment group obtained adjusted mean rating of 72.56 and 70.64 respectively, while the male and female in-school adolescents in control group who received vocational counseling (control group) obtained adjusted mean of 41.13 and 39.83 respectively. This is an indication that the mean scores of both male and female in-school adolescents that participated in the intervention programme (CRT) are higher than those of their counterpart in control group.

**Test of Hypotheses**
$Ho_1$: There is no significant difference in social withdrawal behaviour of in-school adolescent treated with Cognitive. Restructuring Technique (CRT) and control group.

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**Table 4 (1): Summary of Analysis of Covariate (ANCOVA) of the difference in social withdrawal behaviour of in-school adolescents.**

| Source of Variation | Sum of Squares | DF | Mean Square | F | sig of F |
|---|---|---|---|---|---|
| Covariates | 606.848 | 1 | 606.848 | 9.175 | .004 |
| PRETEST | 606.848 | 1 | 606.848 | 9.175 | .004 |
| Main Effects | 13350.682 | 4 | 3337.671 | 50.462 | .000 |
| METHODS | 11811.983 | 1 | 11811.983 | 178.585 | .000 |
| GENDER | 6.956 | 1 | 6.956 | .105 | .747 |
| TYPE | 45.599 | 2 | 22.800 | .345 | .710 |
| 2-Way Interactions | 111.790 | 5 | 22.358 | .338 | .887 |
| METHODS GENDER | 31.812 | 1 | 31.812 | .481 | .492 |
| METHODS TYPE | 8.602 | 2 | 4.301 | .065 | .937 |
| GENDER TYPE | 74.071 | 2 | 37.035 | .560 | .575 |
| Explained | 14069.320 | 10 | 1406.932 | 21.271 | .000 |
| Residual | 2976.394 | 45 | 66.142 | | |
| Total | 17045.714 | 55 | 309.922 | | |

56 cases were processed. 0 cases (.0 pct) were missing.

The result in table 4.2 (1) showed a probability value (PV) of 0.000 which is less than the 0.05 level of significance. Since the P. value is less than the 0.05 level of significance, the null hypothesis was rejected, and conclusion made was that there is a significant difference in social withdrawal behaviour of participants treated with Cognitive Restructuring Technique (CRT) and those not exposed to CRT.

Ho2. There is no significant difference in the social withdrawal behaviour of male and female in-school adolescents treated with Cognitive Restructuring Technique (CRT).

**Table 4 (2) Summary of Analysis of Covariate (ANCOVA) of the difference of male and female in-school adolescents with social withdrawal behaviour.**

| Source of Variation | Sum of Squares | DF | Mean Square | F | sig of F |
|---|---|---|---|---|---|
| Covariates | 606.848 | 1 | 606.848 | 9.175 | .004 |
| PRETEST | 606.848 | 1 | 606.848 | 9.175 | .004 |
| Main Effects | 13350.682 | 4 | 3337.671 | 50.462 | .000 |
| METHODS | 11811.983 | 1 | 11811.983 | 178.585 | .000 |
| GENDER | 6.956 | 1 | 6.956 | .105 | .747 |
| TYPE | 45.599 | 2 | 22.800 | .345 | .710 |
| 2-Way Interactions | 111.790 | 5 | 22.358 | .338 | .887 |
| METHODS GENDER | 31.812 | 1 | 31.812 | .481 | .492 |
| METHODS TYPE | 8.602 | 2 | 4.301 | .065 | .937 |
| GENDER TYPE | 74.071 | 2 | 37.035 | .560 | .575 |
| Explained | 14069.320 | 10 | 1406.932 | 21.271 | .000 |
| Residual | 2976.394 | 45 | 66.142 | | |
| Total | 17045.714 | 55 | 309.922 | | |

56 cases were processed. 0 cases (.0 pct) were missing.

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The result in table 4.2 (2) shows that F-cal value of 0.105 is not significant at the P-value of 0.747 which is 0.05 level. Since p-value of 0.747 is greater than the 0.05 level of significance. The researchers accepted the null hypothesis that is no significant difference in the social withdrawal behaviour of male and female in-school adolescents treated with Cognitive Restructuring Technique.

Ho3: There is no significant difference in the interaction effect of Method (CRT) and Gender on mean rating withdrawal behaviour of in-school adolescents.

**Table 4 (3) Summary of Analysis of Covariate (ANCOVA) of the difference in the interaction effect of Method (CRT) and Gender on social withdrawal behaviour**

| Source of Variation | Sum of Squares | DF | Mean Square | F | sig of F |
|---|---|---|---|---|---|
| Covariates | 606.848 | 1 | 606.848 | 9.175 | .004 |
| PRETEST | 606.848 | 1 | 606.848 | 9.175 | .004 |
| Main Effects | 13350.682 | 4 | 3337.671 | 50.462 | .000 |
| METHODS | 11811.983 | 1 | 11811.983 | 178.585 | .000 |
| GENDER | 6.956 | 1 | 6.956 | .105 | .747 |
| TYPE | 45.599 | 2 | 22.800 | .345 | .710 |
| 2-Way Interactions | 111.790 | 5 | 22.358 | .338 | .887 |
| METHODS GENDER | 31.812 | 1 | 31.812 | .481 | .492 |
| METHODS TYPE | 8.602 | 2 | 4.301 | .065 | .937 |
| GENDER TYPE | 74.071 | 2 | 37.035 | .560 | .575 |
| Explained | 14069.320 | 10 | 1406.932 | 21.271 | .000 |
| Residual | 2976.394 | 45 | 66.142 | | |
| Total | 17045.714 | 55 | 309.922 | | |

56 cases were processed. 0 cases (.0 pct) were missing.

The result in table 4.2 (3) reveals that for the two-way interaction effects of CRT and gender, the sig. of f-cal value is 0.65, which is greater that the alpha level (0.05). By the decision rule, the null hypothesis was upheld. Therefore, the researchers conclude that there is no significant interaction effect of method and gender based on their social withdrawal behaviour.

## Discussion of Results

The first finding of this study in table 4.1 reveals that the participants with social withdrawal behaviour in the experimental group had higher mean rating score than those in the control group. Also, table 4.2(1) reveals that there was significant difference in the mean rating scores of in-school adolescents with social withdrawal behaviour in intervention group than their counterparts in control group. This means that the CRT decreases their automatic thoughts, increase their readiness for decision making and improve their social functioning. This is in line with Beck (2015) who confirmed that cognitive restructuring technique empowered in-school adolescents to restructure the mental mistakes they make that leads to the problems of social withdrawal. The result is

also consistent with Cross, Hamilton, disorder with cognitive restructuring and suggested that cognitive restructuring has desirable effects on behaviour problems. Abonike and Ebenebe (2016) also supported the finding that cognitive restructuring group demonstrated a significant reduction in mean differential across sections, whereas this effect was not seen in control group. In another development, Abodike and Ebenebe (2016) further contend that when subjects were given a specific contextual frame, they will apply it when subsequently presented with the same image even without being cued. Therefore, in-school adolescents with social withdrawal behaviour can be guided to use individually generated appraisals to alter the meaning associated with social withdrawal act, hence the effectiveness of cognitive restructuring therapy on the in-school adolescents.

The second findings of the study in table 4.2 indicated that the mean rating of male-in-school adolescents with social withdrawal behaviour is slightly higher than their female counterparts. This is an indication that Cognitive Restructuring Technique (CRT) had effect on both male and female in-school adolescent with social withdrawal. However, the treatment favoured male- in- school adolescents with a slight mean gain of 1.92. In addition, the test of hypothesis on table 4.2(2) shows that there was no significant difference in the social withdrawal behaviour of male and female participants treated with Cognitive Restructuring Techniques (CRT). The current study disagreed with the findings of Ahmed (2016) who investigated the effectiveness of Cognitive Restructuring and graded exposure counselling technique on school phobia among secondary school students in Kaduna Metropolis. He agreed that Cognitive Restructuring is significant and helps reduce phobia in favour of the female students.

The third finding illustrated in table 4.3 indicated that both male and female in-school adolescents in the experimental group performed better than their counterparts in the control group. Moreover, table 4.5 proved that there is no significant interaction effect of gender and CRT on the mean rating of the in-school adolescents with social withdrawal. In essence, gender did not influence the result of the study.

The positive change observed in the posttest mean rating of the in-school adolescents with social withdrawal behaviour exposed to treatment was not influence by gender, rather it anchored on the effectiveness of the exposure to the participants. Therefore, Cognitive Restructuring Techniques (CRT) could be employed to foster social competence among male and female in-school adolescents. In addition, result of no significant interaction effect from this study could be attributed to the same training provided for male and female in-school adolescents.

## Conclusion

Based on the findings of this study, the following conclusions are made:

The in-school adolescents that received training performed better in social interaction scores than their counterparts in control group, there was a significant difference in social interaction mean scores of the experimental and control groups. The result was in favour of the experimental group that scored higher than the control group.

Gender had no significant influence on socially withdrawn in-school adolescents. This is because there was no significant difference in the mean rating of male and female in-school adolescents exposed to CRT.

There was no significant interaction effect between gender and Cognitive Restructuring Technique on the social interaction-of-in-school adolescents with social withdrawal behaviour.

**Recommendations**

The following recommendations are made in this study based on the findings:

(1) School counsellors should ensure that all identified male and female in-school adolescents exhibiting social withdrawal behaviour should be exposed to appropriate intervention techniques, like CRT. This will go a long way to improve their thinking and reduce their social withdrawal behavour

(2) Teachers and parents should refer both male and female in-school adolescents that are socially withdrawn to school counsellors for modification.

(3) Ministry of Education should provide enough guidance counsellors in the various secondary schools and organize workshops for counsellors where the use of CRT for both male and female social withdrawn adolescents can be exposed to them

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