

A Brief Online Preventive Psychoeducation Intervention Programme for 12-15-Year-Old School Students

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Abstract: *Developing emotional competence early in life empowers children to face life better. Following the adage, “prevention is better than cure”, children can be taught to develop a more adaptive life philosophy, by changing the way they see and perceive things. As part of a research program to improve the mental well-being of 12-15-year-old school-going students, the study aimed to investigate the effect of a brief online intervention based on the tenets of REE (Rational Emotive Education) on their irrational beliefs, perceived stress, and subjective well-being. An experimental pretest-posttest design was utilized to examine the impact. 44 students from two schools participated in the study. In five sessions of 50 minutes each, participants learnt to practice rational thought patterns, develop coping strategies and cultivate a balanced emotional outlook. A self-report questionnaire was used for data collection. The data were analyzed using paired samples t-test at a 0.05 probability level and Pearson’s correlation. Results showed that the short intervention had a significant effect on their irrational beliefs and perceived stress. There was no significant difference in subjective well-being after the intervention. The results confirm the weak positive correlation between Irrational Belief variables and Perceived Stress in both pre ($r=.22$) and post-intervention ($r=.44$), and a weak negative correlation between irrational beliefs and subjective well-being in both pre ($r=-.22$) and post ($r=-.06$) interventions, indicating that decrease in irrational beliefs has a reducing effect on perceived stress and an increasing effect on subjective wellbeing. Hence, a brief online preventive psychoeducation intervention based on the principles of REE can be effective in reducing the irrational beliefs and perceived stress levels of 12-15-year-old school children. Specific REE-based training for children and teachers could be integrated into the classroom curriculum, to promote general well-being in the school environment.*

Keywords: Rational thinking, mental health, School going children, online, intervention

1. Introduction

Emotional disturbance is common in school-going children. There is a dearth of preventive emotional health education in Indian schools. An online preemptive model to teach emotional education can provide a much-needed support system for adolescents to equip them to face their normative and school-related challenges.

Rational Emotive Education (REE) is a comprehensive, structured and empirical programme of study using cognitive, emotive and behavioural methods to teach emotional education to school going children. It is a scholastic application of Rational Emotive Behavioural Therapy (REBT) pioneered and developed by Dr Albert Ellis (Knaus, 1977; Vernon & Bernard, 2006, 2019). It can be easily adapted and customized for any age group in offline and online mode. The self-help and preemptive focus of REE help students gain insights to stoically face current problems and inculcate attitude and skills to prevent or minimize future ones (Vernon & Bernard, 2006). Hence, considering the need for an intervention and the effectiveness of REE, this study proposes REE as an online psycho-educational intervention approach for Indian school students aged 12-15 years.

2. Statement of the Problem

To assess the effect of a brief online intervention based on the tenets of Rational Emotive Education (REE) on irrational beliefs, perceived stress and subjective well-being of school going children.

Significance of the study

If students are armed with the self-help philosophy and tools of REE early on in life, they can apply the cognitive-emotive-behavioural model of emotional upset and can better manage the inevitable academic and social stressors. The study proposed an online model of psychoeducation to enable an effective, economical and wider dissemination among school-going children.

Purpose of the Study

The purpose of this study was to test whether five sessions of an online preventive psychoeducation intervention programme based on the REE tenets could reduce irrational beliefs, and perceived stress levels and increase the subjective well-being of a group of 12-15-year-old school students.

Objectives of the Study

- 1) To study the effect of a brief online intervention based on the tenets of REE on irrational beliefs, perceived stress and subjective well-being of 12-15-year-old school students.
- 2) To study the relationship between irrational beliefs and perceived stress of 12-15-year-old school students.
- 3) To study the relationship between irrational beliefs and subjective well-being of 12-15-year-old school students.

3. Review of Literature

Literature abounds with studies indicating that despite their healthy appearance, adolescents’ death rate and indisposition from mental ill-health have increased (UNICEF, 2021; WHO, 2021) and also that their mental health concerns are often overlooked. A balanced emotional upbringing can

have a life-long impact at the critical developmental stage of children. Successful school programmes like *The Living School* (Ellis, 1972), *Rational Emotive Education* (Knaus, 1977) and *The Thinking, Feeling, Behaving Curricula* (Vernon, 2006) support the hypothesis that students can acquire knowledge of rational principles and that altering their irrational statements has a positive effect on their emotions and behaviour (Vernon & Bernard, 2019). Rational self-analysis provided in REE teaches them behavioural and emotional self-control by teaching what they can and cannot change in their lives (Maultsby et al., 1974; Vernon & Bernard, 2006). Children and adolescents vastly benefit from the preemptive self-help emphasis to facilitate problem resolution independent of expensive and regularly scheduled counselling sessions. The grade-level lessons of REE are adaptable and can be incorporated into classroom teaching and school-wide setting (Knaus, 1977; Maultsby et al., 1974; Vernon & Bernard, 2006). Considering the need to provide effective and economical preventive mental health approaches to children across schools the rationale of the study is to provide online preventive psychoeducational intervention to school students aged 12-15 and study its impact on their irrational beliefs, perceived stress and subjective wellbeing.

4. Methodology

Hypothesis

- 1) The Irrational belief of the participants would be different pre and post intervention.
- 2) Participants' perceived stress levels will be different pre-and post-intervention.
- 3) The subjective well-being of the participants will be different pre – and post-intervention.
- 4) There is a negative correlation between irrational beliefs and subjective well-being, pre-and post-intervention.
- 5) There is a positive correlation between irrational beliefs and perceived stress of students, pre-and post-intervention.

Sample

Purposive sampling technique was employed. 98 students from two schools enrolled for the study. However, only 44 students satisfied the sampling criteria of attending more than 3 sessions out of 5.

Procedure

An experimental comparative pre-post research design was used. The online intervention was done in five sessions of 50 min slots on the Zoom platform for two schools separately. The language used was a mixture of Hindi and English. The intervention was designed on REE's educational model that provides an excellent framework to learn unconditional acceptance of self, others and life, frustration tolerance, using preferences in life, critical thinking and application of the scientific method to self-awareness. The ABCDE model of cognitive restructuring was taught to the participants. Data was collected using a self-administered questionnaire before the first session (pre) and after the fifth session (post). Irrational beliefs were measured using The Child and Adolescent Scale of Irrationality (CASI), perceived stress was measured using Perceived Stress Scale-10 (PSS-10) and

subjective well-being was measured using Student Subjective Well-being Scale (SSWQ).

5. Results and Interpretation

Table 1: Mean, Standard Deviation, and t-value for all variables (N=44). Used Paired two-tailed t-test. Pre and Post-test Scores on CASI, PSS-10 and SSWQ

		Mean	SD	t-Value	P-val
Irrational Beliefs	Pre	2.75	.60	4.32	.000009
	Post	2.27	.77		
Perceived Stress	Pre	19.48	5.60	2.22	0.032
	Post	17.52	4.08		
Subjective Wellbeing	Pre	3.11	.58	-.05	.96
	Post	3.12	.65		

The findings of the study revealed a significant difference in the mean scores of irrational belief between the pre-test and post-test [$t(43) = 4.32, p = .00009$] and the mean scores of perceived stress between the pre-test and post-test. [$t(43) = 2.22, p = .032$]. A marginal increase was observed in the subjective well-being level of participants after the intervention, but the difference was not significant [$t(43) = -.05, p = .96$].

Table 2: The correlation of irrational beliefs and perceived stress among the sample (N=44)

	Perceived Stress
Irrational Beliefs Pre-test	.22
Irrational Beliefs Post-test	.43

The results confirm the weak positive correlation between Irrational Belief variables and perceived stress in both pre ($r = .22, p < .05$) and post-intervention ($r = .43, p < .05$), indicating that decrease in irrational beliefs has a reducing effect on perceived stress.

Table 3: The correlation of irrational beliefs and subjective well-being among the sample (N=44)

	Subjective Well-being
Irrational Beliefs Pre-test	-.22
Irrational Beliefs Post-test	-.06

A weak negative correlation was evident between irrational beliefs and subjective well-being both pre ($r = -.22, p < .05$) and post ($r = -.06, p < .05$) interventions indicating that decrease in irrational beliefs has an increasing effect on subjective wellbeing.

6. Conclusions

Granted, the sample (N = 44) size was small; still the results seemed promising because of the tightness of the experimental design and the brevity of the intervention.

- 1) Irrational beliefs of the participants were reduced after the intervention.
- 2) There was a significant difference in the perceived stress level of the participants after the intervention.
- 3) There was no significant difference in the subjective well-being of the participants after the intervention.
- 4) A weak negative correlation between irrational beliefs and subjective well-being was observed in the study.
- 5) A weak positive correlation between irrational beliefs

and perceived stress was observed in the study.

7. Limitations and Suggestions

- 1) Sample size was insufficient to determine reliability of the findings. To ensure consistent attendance, a more structured setting with mandatory participation linked to incentives is suggested.
- 2) Inadequate follow-up and absence of booster sessions.
- 3) Parental involvement was overlooked and future studies would benefit by encouraging participation of parents in the programme.
- 4) The lack of evidence of effectiveness of REE based psychoeducation programs in India warranted use of scales not standardized for Indian school-going students.
- 5) There is a need for age and culture sensitive online sessions on preventive psycho- education for wider dissemination.

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