

# EFFECTS OF PSYCHOEDUCATION TECHNIQUE ON EXAMINATION MISCONDUCT TENDENCIES OF SECONDARY SCHOOL STUDENTS

*Ada Anyamene, PhD*  
*Chinyelu Nwokolo, PhD*  
*Uju Madegbuna*

Department of Guidance and Counselling,  
Nnamdi Azikiwe University, Awka, Anambra State, Nigeria

---

## Abstract

This study sought to examine the effects of psychoeducation technique on secondary school students' examination misconduct tendencies in Anambra State. Four research questions were generated to guide the study and four null hypotheses were tested at the 0.05 level of significance. The design of the study was a quasi-experimental, non-equivalent control group design involving an experimental groups and a control group. The sample consisted of 165 senior secondary school (SSS) class II students selected through purposive sampling technique. The students were exposed to the experimental and control treatments for six weeks. The instrument used for the study was the Examination Misconduct Tendencies Scale (EMTS) which was administered as a pre and posttest. Means, standard deviation and analysis of covariance were used to analyze the data. Major findings of the study showed that psychoeducation technique had significant effect on the reduction of students' examination misconduct tendencies. It was also effective on the reduction of the examination misconduct tendencies of students in various age groups. It was also found out that Psychoeducation technique was effective in positively modifying urban and rural students' examination misconduct tendencies. Based on these findings, some recommendations were made which include the use of psychoeducation has been shown to be effective in reducing examination misconduct tendencies, it should be encouraged. Practising school guidance and counsellors should learn to use the therapy to assist students to develop positive examinations conduct tendencies.

---

**Keywords:** Psychoeducational technique, examination misconduct tendency, student

## **Introduction**

Several research and media reports in Nigeria have continued to raise concerns about the alarming incidence of examination misconduct among students. Examination misconduct is anything done by an examination candidate, examination administrator, teacher, parent or any other person, that goes against stipulated examination ethics and laws. Emaikwu (2013) listed some acts of examination misconduct to include: cheating at examinations, stealing of question papers, impersonation, disturbances at examinations, obstruction of supervision, forgery of result slips, breach of duty, conspiracy and aiding, and damaging or hiding other students' materials. In other words, any act of dishonesty, cheating or improper action carried out during any examination against stipulated examination rules and regulations constitutes examination misconduct.

The incidence of examination misconduct in Nigeria has become so widespread that there is almost no examination anywhere at all levels of the formal school system, without one form of sharp misconduct or the other (Exam Ethics Marshals International, 2013; Folarin, 2013; Oluremi, 2014, Olatunbosun, 2009). The situation is so bad that according to Omeri (2012), Nigeria occupies the number one position in the world's examination malpractice index. Results from a nationwide study by Boris and Awodun (2012) indicated that 62% of secondary school students in Nigeria practised one form of examination misconduct or the other before leaving secondary school. Many students are ready to pay any prize, cash or kind to pass examination they did not prepare for. This suggests that a high percentage of the students appear to have examination misconduct tendencies.

Tendency refers to a likelihood that a person would engage in a particular behaviour or action. Freeman (2013) defined it as a prevailing movement in a given direction. Macmillan (2013) defined tendency as a strong chance that something will happen in a particular way. In the light of these definitions, examination misconduct tendency is described as a high possibility, disposition or likelihood that a student would engage in examination misconduct. It is an inclination or proneness of a student to manifest characteristics, traits and attitudes as well as express opinions in favour of examination misconduct. Negative tendencies could heighten the possibility of thoughts, feelings, and physiological arousal to engage in examination misconduct. Examination misconduct tendency is identified in this study through a questionnaire containing certain items of examination misconduct scenarios and statement.

Statistics detailing the extent of examination misconduct tendencies in Anambra State are not available to help understand the severity of the issue at hand, but many principals, counsellors, teachers, parents and students would attest that such tendencies exist in the school setting.

Examination misconduct tendencies are evident through students' defences of perpetrators of academic dishonesty and cheating, as well as their peer discussions, which placed premium on passing examinations by foul means at the expense of hard work, merit and integrity. The most disturbing aspect of it all is that parents, teachers and leaders who are supposed to be actively involved in the crusade against examination misconduct are instead aiding and abetting it in one way or the other, thereby increasing its' tendencies among students (Aderogba, 2011, Okorodudu, 2013).

Examination misconduct tendencies among students are associated with such negative outcomes as high level of academic dishonesty, procrastination in tackling learning tasks, academic problems, poor satisfaction in studying, gangsterism, and an increased risk of school dropout (Adeyemi, 2010; Ibukun & Oyewole, 2011). Such tendencies have also been shown to cause low skill acquisition, increased feelings of incompetency and ineffectiveness in students, lack of good study habits, academic planning and conscientiousness (Badejo & Gandonu, 2010). Examination misconduct tendency is a major precursor and predictor of actual engagement in examination misconduct among students of different age groups, gender and school locations. It has the inherent danger of leading students to engage in examination misconduct which can cause disaster to individual students, schools, teachers and nation at large. Unfortunately, some measures used in schools to curb examination misconduct tendencies such as orientations, suspensions, expulsions, and referred counselling do not appear to be highly effective. Therefore, if the pervasiveness of examination misconduct must reduce, further interventionist programmes need to be considered. One of such programmes is psychoeducation technique.

Psychoeducation technique is a therapeutic intervention that is being increasingly emphasised in behaviour modification programmes. Wood, Brendtro, Fecser and Nichols (1999) noted that the term psychoeducation consists of two words-psycho and education. Psycho refers to the broad range of psychological ideas and theories upon which the approaches, programme missions, and practices of various psychoeducation programmes are based, while education refers to the teaching and learning paradigms that largely make up the content and practices of psychoeducation programmes. Lukens and Mcfarlene (2004) described psychoeducation as a technique whereby education and information therapy are provided to people as much as possible in order to keep them informed and assist them in accessing support to face their problems. It is an emotion-based therapy that focuses on identifying, realistically evaluating, and revising negative thoughts, and problem-solving skills and strategies to help people eliminate future negative tendencies. The emphasis is on providing support, self-mastery and emotional processing to enable a person modify undesirable attitude.

According to Clarion (2013), psychoeducation technique often involves several therapeutic sessions with three aims: improving participants' self-management and coping, providing participants with help to manage their behaviour, and providing participants with education about causes, effects and techniques to deal with behaviours and emotions.

In the light of these definitions and descriptions, psychoeducation is defined in this study as the application of psychological theories and practices to educate people with a view to helping them have more information as to tackle their challenges more effectively. The rationale behind a psychoeducation technique is that, with a clear understanding of a condition, and self-knowledge of own strengths and coping skills, the individual is better equipped to deal with the problem and to contribute to his or her own improvement. The core psychoeducation principle is that education has a role in emotional and behavioural change. It involves the provision of planned educational therapy through a variety of information, media, guidance, counselling, group discussions and thought processing activities. The therapy involves scheduled regular factual information sessions on the status, types, causes, effects and strategies for ameliorating such tendencies by a trained leader. The sessions also comprise academic advising, goal setting, time management, mentoring, role-playing, modelling, interactive group activities, homework, modeling and reflections. The participants are also provided with information about appropriate service options by counsellors if required. This therapeutic approach aims at helping students understand how their troubling feelings and emotions influence their dispositions towards examination misconduct.

Psychoeducation technique mostly involves longer structured educational group programmes that help participants develop knowledge and skills for coping with immediate or potential problems, developmental transitions, or life crises. It is offered as a therapeutic process that allows time to reflect on the current issues which participants face within their lives. This reflection implies a process of thinking about and interpreting situations, events, experiences and emotions, aimed at critically analysing decisions, actions and effects in order to learn from them.

Studies have shown that psychoeducation technique provides opportunities for empowerment, practical help, goal-setting, peer learning culture, desire for excellence and increased understanding of psycho-social problems (Chowdury, Caulfield & Hayman, 2003, Reynes, 2012). It has been effectively used in mental health, clinical, school and family based programmes to reverse undesirable situations (McBride, 2006; Hossfeld, 2008). There are also some evidences that psychoeducation technique has been found to be effective in cases involving eating disorders, modifying

adolescents' perceptions of parenting and disclosure of sexual abuse (Barth, Yeaton & Winterfelt, 2004; Hayes & Morgan, 2005).

In the light of the reported benefits of psychoeducation technique and pervasiveness of examination misconduct tendencies with its consequences among secondary school students in Anambra state, it has become important to determine the effects of psychoeducation technique on reducing examination misconduct tendencies among students irrespective of gender, age or school location. No such studies appear to have been done in Anambra State, thus leaving a research gap. Filling this gap is particularly crucial to the present study. Besides, researchers have shown that male students are more dishonest than female students in examinations and are more likely to be suspended or expelled from school because of examination malpractices (Aderogba, 2011; Adeyemi, 2010). Other studies have also shown that frequent cheaters are more likely to be older than younger students and that some factors in school locations influence students in developing misconduct tendencies (McCabe & Klebe, 1993; Maheshwari, 2011). Some authors insist that both academic dishonesty and cheating also result from the students' age and school location (Udoh, 2011; Ugo & Odimba, 2010). Hence, age and school environment are possible variables to be targeted at psychoeducation technique towards modifying examination misconduct tendencies among secondary school students.

### **Statement of the Problem**

A report released by the Exam Ethics Marshall International (2013) revealed that Anambra State ranked the 3<sup>rd</sup> State in South-East zone and the 13<sup>th</sup> State in Nigeria with the highest rate of examination misconduct in examinations conducted by West African Examinations Council (WAEC), National Examinations Council (NECO) and Joint Admissions and Matriculations Board (JAMB). In terms of compliance with Examination Ethics, the State ranked 25<sup>th</sup> out of 36 States in Nigeria. Worse still, Ugo and Odimba (2010) reported that 37 out of every 100 secondary school students in Anambra State consider examination misconduct an appropriate behaviour. A situation where students irrespective of gender, age and school environment tend towards getting involved in examination misconduct, the students do not study hard. They skip lessons, lack effective study habits, goal setting and time management skills and consequently they violate examination rules and regulations at unprecedented rates. Some of them vandalize principals' offices to forge results, get suspended or expelled from school, and end up as societal nuisance.

Informal discussions with students revealed that many of them tend towards examination misconduct. Some of them justify such tendencies with reasons such as ignorance of examination ethics, policies and penalties; poor

teaching and learning environments; peer influence and the need to improve grades. Other reasons given by the students are that some teachers and parents encourage examination misconduct. Further, information explosion of the Internet, getting a good job, impressing parents, procrastination, underdeveloped moral reasoning, societal influence and a cheating culture, reinforce students' examination misconduct tendency. Some students create the impression that examination misconduct is something the smart student does to remain competitive. With these various reasons, it is obvious that examination misconduct tendency is high among secondary school students, and most students will cheat if they have the opportunity.

Several measures have been taken to combat examination misconduct tendencies. The Federal Military Government (1997) promulgated a decree which imposed a twenty- one year jail term on those involved in examination misconduct. Other measures include de-recognition of schools as examination centres, school counselling, orientation programmes, formulation of examination ethics, policies and penalties (Wike, 2011). Yet, these measures do not appear to have effectively tackled the problem.

Effective reduction of examination misconduct might be enhanced using universal behaviour modification intervention as is offered by psychoeducation technique. This intervention focuses on providing counselling, guidance, advice and training using media, support groups and reflections, in order to modify behaviours, attitudes and cognitions. Researches demonstrate that psychoeducation technique has therapeutic properties that can improve students' attitudes and perceptions of depression, parenting, drug abuse, self-esteem and problem-solving skills (Clarion, 2013; Anderson, 2012). Therefore, the problem of this study, (put in question form) is: Will the use of psychoeducation reduce examination misconduct tendencies of secondary school students in Anambra State?

### **Purpose of the Study**

The main purpose of this study was to find out the effect of psychoeducation technique on the reduction of examination misconduct tendencies among secondary school students in Onitsha Education zone. Specifically, this study sought to:

1. find out the reduction effects of psychoeducation technique on students' mean ratings of their tendencies to examination misconduct,
2. determine the effects of psychoeducation technique on the reduction of examination misconduct tendencies of male and female students,
3. ascertain the effects of psychoeducation technique on the reduction of examination misconduct tendencies on the basis of age of the students, and

4. establish the effect which psychoeducation technique has on the reduction of mean ratings of students' examination misconduct tendencies on the basis of school location.

The following research questions guided the study:

1. What effects have psychoeducation technique on the reduction of students' mean ratings of their examination misconduct tendencies when compared with those of students in the control group?
2. What effects have psychoeducation technique on the reduction of the mean ratings of male and female students' examination misconduct tendencies?
3. What are the effects of psychoeducation technique on the reduction of students' mean ratings of examination misconduct tendencies on the basis of age?
4. What effect does psychoeducation technique have on the reduction of the students' mean ratings of examination misconduct tendencies on the basis of urban and rural locations?

## **Hypotheses**

Four null hypotheses were tested in this study at the 0.05 level of significance:

1. There is no significant difference in the mean ratings of examination misconduct tendencies of students exposed to psychoeducation technique and those in the control group.
2. The reduction effect of psychoeducation technique on the students' mean examination misconduct tendency ratings does not differ significantly for male and female students.
3. The reduction effect of psychoeducation on students' mean ratings of examination misconduct tendencies does not differ significantly on the basis of age.
4. The reduction effect of psychoeducation on students' mean ratings of examination misconduct tendencies does not differ significantly for students in urban and rural school locations.

## **Methods**

### **Research Design**

This study used a quasi-experimental design. The Center for International Rehabilitation Research Information and Exchange (CIRRIE, 2008) described the quasi-experimental design as a pre-post intervention study that involves selecting groups, upon which a variable is tested, without any random pre-selection of individuals. Quasi-experiments are studies that aim to evaluate interventions but that do not use randomization. The quasi-experimental design of the study is represented as follows:

E <sub>1</sub> ;	NR	Q <sub>1</sub>	X <sub>1</sub>	Q <sub>2</sub> ,
C:	NR	Q <sub>1</sub>	NT	Q <sub>2</sub>

Where :

NR = Non-Randomized assignment to experimental and control groups

E<sub>1</sub> = Experimental Group (Psychoeducational technique)

C = Control Group (Neutral Treatment)

Q<sub>1</sub> = Examination Misconduct Tendency Scale Pretest

Q<sub>2</sub> = Examination Misconduct Tendency Scale Post-test

X<sub>1</sub> = Treatment (PsychoEducation Technique)

NT = Neutral Treatment

### **Area of the Study**

This study was carried out in Onitsha Education Zone of Anambra State. It comprised three local government areas namely Onitsha North, Onitsha South and Ogbaru LGA of Anambra State.

### **Population of the Study**

The target population for this study was made up of all the senior secondary II students in the 12 secondary schools with very high cases of examination misconduct in Onitsha Education Zone of Anambra State from 2010 to 2012. Data collected from the Anambra State Post Primary Schools Service Commission (PPSSC), Onitsha Zonal office stated that this population comprised 3,130 SS II students enrolled for the 2012/2013 academic session in the 12 schools. This population was made of 1,314 males and 1, 816 female students aged between 14 and 18 years.

### **Sample and Sampling Technique**

Sample involved 165 SS II students with examination misconduct tendencies selected through stratified random sampling technique. Stratification was based on the location of the schools (urban and rural) as well as gender of the schools (i.e Boys Schools and Girls Schools).

### **Instrument for Data Collection**

The researchers designed a questionnaire used as an instrument for data collection. The instrument titled “Examination Misconduct Tendency Scale” (EMTS) was for the students. This questionnaire was designed to give students the opportunity of disclosing their tendencies towards examination misconduct. It was divided into two parts. Part I sought information on respondents’ demographic variables namely gender, school location, and age. Part II had 35 items separated into 2 sections. The second section contained 10 examination misconduct scenarios.



### **Validation of the Instrument**

The face and content validation of the research instruments were obtained through critical evaluation of the Examination Misconduct Tendency Scale by three lecturers (two lecturers in the Department of Guidance and Counselling and one lecturer in Measurement and Evaluation), all from the Faculty of Education, Nnamdi Azikiwe University, Awka.

### **Reliability of the Instrument**

It was necessary to confirm the homogeneity of items on the Examination Misconduct Tendency Scale (EMTS) considering the two sections that it had. The Cronbach alpha method was used to ascertain the reliability of the two sections of the instrument. To do this, a pilot study of the instrument was carried out by administering the questionnaire on a sample of 20 SSII students from a public secondary school in Ogidi Education zone that was not included in the final study. Their scores were collated and subjected to Cronbach Alpha reliability. The scale analyses for the sections yielded a coefficient of 0.76 for section A and 0.77 for section B.

### **Experimental Procedure**

This was the procedure the researchers adopted to ensure a successful implementation of the programme of psychoeducation. The researchers visited the schools, solicited for the cooperation of the school principals so as to build in the programme into the school's activities. The researchers explained the purpose and benefits derivable from the programme to the principals of the schools.

Prior to the commencement of the treatment, the Examination Misconduct Tendency Scale (EMTS) Questionnaire was administered on the students in the experimental and the control group. The researchers administered the experimental treatment, while the research assistant handled the control group and administered copies of the questionnaire. The treatment was designed to last for six weeks using the normal school timetable that allocated free 45 minutes for guidance and counselling. A total of 12 sessions were run. The control groups were exposed to conventional counselling with the school counsellors providing the services to the referred students with examination misconduct tendencies. This also continued for six weeks, and then the students were post-tested.

For the experimental group, psychoeducation technique was also designed to last for six weeks. In the psychoeducation group, students were introduced to several expositions and reflections on Examination misconduct. Each session started with the counsellor's introduction to the issue to be addressed in the session and sample questions to elicit students' participation in the sessions. The introduction was followed by students'

discussions of examination misconduct scenarios, how they felt about the scenarios and the various techniques for avoiding examination misconduct. The researchers' facilitated group brainstorming to help students reason about what they thought was good, fair, bad, or unfair about examination misconduct. This also continued for six weeks. After the treatment, the researchers, administered the post-test for the experimental group.

After the treatment, the Examination Misconduct Tendency Scale (EMTS) was re-administered to the experimental and control groups. The instrument was disguised by reshuffling before they were re-administered. This was done after the six weeks treatment programme, so it was not a delayed post testing. The researchers monitored the exercise and made sure the students were under the same condition and then, collected all completed questionnaires. The students' responses were scored and the data generated were collected for statistical analysis.

### **Control of Extraneous Variables**

The researchers made attempts to control the following variables in order to neutralize or minimize their influence or avoid their interference with the research. They include: counsellor bias, class interaction, effect of pre-test on post-test, homogeneity of time for assessment, and experimenter bias.

### **Method of Data Collection**

Each of the participants was given the EMTS as pretests and posttests prior to and following the intervention by the researchers with the assistance of their school guidance counsellors. The EMTS was administered as a pre-test during the first group session and as a post test at the end of the last group session. The pre-test was the same as the post-test except that the items were reshuffled.

### **Method of Data Analysis**

The data collected by administering the various research instruments were analyzed in line with each research question and hypothesis. The mean scores were used in answering all the research questions and the scores obtained from the responses to the EMTS (pre-and post-tests) were subjected to Analysis of Covariance (ANCOVA) using the Statistical Package for Social Sciences (SPSS) at the 0.05 significance level. ANCOVA was used to determine if there was a significant difference in the mean scores of the groups.

## Findings

**Table 1**

Mean Scores on the Reduction Effect of Psychoeducation Technique and those of Students in the Control Group on Students' Examination Misconduct Tendencies.

Variable	Pre-Test		Post-Test	Mean Diff.	Remarks
Group	N	$\bar{X}^1$	$\bar{X}^2$	$\bar{X}^1 - \bar{X}^2$	
Experimental Group	82	78.91	38.54	40.37	Psychoeducation
ControlGroup (CSGC)	83	79.45	66.37	13.08	< Control Group

Data presented in Table 1 show that the mean pre-test score for 82 students in experimental group was 78.91, while that of students in the control group was 79.45. The mean post-test score for the students in experimental group was 38.54, while that of the control group was 66.37. On the overall main treatment effects, the psychoeducation group obtained a mean difference of 40.37 while the control group had a mean difference of 13.08. The mean difference of the students in the psychoeducation group was higher than that of the control group.

**Table 2**

Means Scores on Effects of Psychoeducation on Male and Female Students' Mean Ratings of Their Examination Misconduct Tendencies

Variable	Pre-test	Post test	Mean Diff.	Remarks	
Gender	N	$\bar{X}^1$	$\bar{X}^2$	$\bar{X}^1 - \bar{X}^2$	
Male	42	80.07	39.9	40.17	psychoeducation is effective for both male and female students
Female	40	77.70	40.87	36.83	

In Table 2, the mean pre-test score for 42 male students in experimental group was 80.07 while their posttest mean score was 40.17. Further, the male students in the psychoeducation group obtained a pretest-posttest mean difference of 39.9. This indicates that psychoeducation technique had a positive effect on reducing the examination misconduct tendencies of male students. Similarly, the mean pretest score for the female students in experimental group was 77.70 which dropped to a mean score of 36.83 in the posttest. The pretest-posttest mean difference of the same female students was 40.47, an indication that participation in the psychoeducation technique had a positive effect on the reduction of the examination misconduct tendencies of female students.

**Table 3**

Mean Scores on the Effects of Psychoeducation Technique on Students' Examination Misconduct Tendencies Based On Age.

Variable	Pre-test		Post test	Mean Diff.	Remarks
Age	N	$\bar{X}$	$\bar{X}$	$\bar{X}$	
14-15	35	75.51	40.89	34.62	Psychoeducation is effective for both age groups
16 and above	48	80.11	39.44	40.67	

Data in Table 3 indicate that with respect to age, students aged 14 to 15 years in the psychoeducation group had a mean pretest-posttest difference of 34.62 while those aged 16 and above obtained a mean difference of 40.67.

**Table 4**

Mean Scores on the Effects of Psychoeducation Technique on Examination Misconduct Tendencies of Students in Urban and Rural School Locations.

Variable	Pre-test		Post test	Mean Diff.	Remarks
Location	N	$\bar{X}$	$\bar{X}$	$\bar{X}$	
Urban	40	77.70	38.38	39.32	Psychoeducation is effective for both urban and rural students
Rural	42	80.07	38.69	41.38	

The analysis in Table 4 indicate that urban students in the psychoeducation group had a mean difference of 39.32 and rural students in the same group had a mean difference of 41.38.

**Table 5**

Summary of ANCOVA on the Main Effect of Psychoeducation Technique And Control Group On Students' Examination Misconduct Tendencies

Source	Sum of Squares	df	Mean Square	F-Cal	F-Crit	Sig.
Corrected Model	109.208 <sup>a</sup>	1	109.208	.405		.525
Intercept	1416.339	1	1416.339	5.252	3.84	.023
PRETEST	109.208	1	109.208	.405		.525
Error	43955.786	163	269.667			
Total	499529.000	165				
Corrected Total	44064.994	164				

As shown in Table 5, the calculated F for the pretest is .405. This is less than the critical F value of 3.84. This indicates that there was no significant differences between the levels of examination misconduct tendencies of students exposed to psychoeducation and those in the control group prior to the experiment. The students in both groups had equivalent

examination misconduct tendencies before the commencement of the experiment.

**Table 6**

ANCOVA on the Effect of Psychoeducation Technique on the Mean Examination Misconduct Tendency Ratings of Students by Gender

Source	Sum of Squares	df	Mean Square	F-Crit	F-Cal	Sig.
Corrected Model	26.391 <sup>a</sup>	2	13.195	1.153		.321
Intercept	519.623	1	519.623	45.394		.000
PRETEST	22.042	1	22.042	1.926		.169
GENDER	.947	1	.947	.083	3.96	.774
Error	904.304	79	11.447			
Total	113559.000	82				
Corrected Total	930.695	81				

Table 6 has F-calculated value of 0.83 which is less than the F-critical value of 3.96 at 1 and 81 degrees of freedom ( $P \geq 0.05$ ). Hence, the hypothesis of no significant difference is accepted.

**Table 7**

ANCOVA on the Effect of Psychoeducation on the Mean Examination Misconduct Tendency Ratings of Students by Age.

Source	Sum of Squares	Df	Mean Square	F-Cal	F-Crit	Sig.
Corrected Model	25.622 <sup>a</sup>	2	12.811	1.118		.332
Intercept	495.415	1	495.415	43.243		.000
PRETEST	24.730	1	24.730	2.159		.146
AGE	.178	1	.178	.016	3.96	.901
Error	905.073	79	11.457			
Total	113559.000	82				
Corrected Total	930.695	81				

Table 7 shows that the calculated F value for the effects of treatment on post scores of students based on age was .016. This value was less than the F-critical value of 3.96 at 1/81 degrees of freedom ( $P < 0.05$ ). Since the calculated F-value was lesser than the critical F value, the decision was to accept the null hypothesis.

**Table 8**

ANCOVA on the Effect of Psychoeducation on the Mean Examination Misconduct Tendency Ratings of Students by School Location.

Source	Sum of Squares	df	Mean Square	F-Cal	F-Crit.	Sig.
Corrected Model	42.897 <sup>a</sup>	2	21.449	1.722		.185
Intercept	629.158	1	629.158	50.513		.000
PRETEST	27.681	1	27.681	2.222		.462
LOC	6.799	1	6.799	.546	3.96	.140
Error	983.981	79	12.455			
Total	114472.000	82				
Corrected Total	1026.878	81				

Table 8 shows an F-calculated value of 0.55 and an F-critical value of 3.98 at 1 and 81 degrees of freedom ( $P \geq 0.05$ ). The F-calculated exceeded the F-critical. Going by this result, the hypothesis of no significant difference is accepted.

## Discussion

The findings of this study showed that psychoeducation technique significantly reduced students' examination misconduct tendencies more than was observed in the control group. Specifically, the findings indicated that students in both the experimental and control groups possessed a similar level of examination misconduct tendencies before the commencement of the study as measured by their scores on the pre-test. The findings also indicated that the magnitude of the mean difference between the experimental and control groups was significant in the post-test but not significant in the pre-test.

Moreover, the psychoeducation group reported a significantly larger decrease in examination misconduct tendencies than the control group. This may indicate that adolescents in the treatment group gained a better understanding of examination principles and strategies as well as a sense of apprehension over various forms of examination misconduct as a result of receiving psychoeducation. This finding is consistent with prior researches that suggest that psychoeducation is effective in decreasing negative cognitions in adolescents (Gaynor & Lawrence, 2002; Hayes & Morgan, 2005; Wells, Miller, Tobacyk, & Clanton, 2002). The United States Department of Health and Human Services (2013) also found that psychoeducation decreases several emotional; health problems of youths.

One reason for the high decrease in examination misconduct tendencies of students in the psychoeducation group over and above those in the control group might be due to novelty effect. Since psycho education is new, the students might have been thrilled by its novelty and as such it affected their examinations tendencies so much within a few weeks. Indeed, the leading researchers on psychoeducation acknowledge that "novelty might

well influence treatment outcome and serve as a basis for insisting that new and innovative strategies can play a significant role in the pattern of results related to antisocial behaviour". This being the case, one can reasonably argue that being a therapy that students received for the first time, it is expected to lead to significant changes. Whether these changes would be consistent over time becomes another issue for research. It is also possible that the reported decrease in examination misconduct tendency scores in the treatment group may also be due to expectation or their total involvement and interactions with one another during the psychoeducation programme. It could be explained by Ajzen's (2001) Theory of Planned Behaviour. That theory stipulated that behaviour is influenced not only by attitudes but also by subjective norms. It is likely that the levels of disclosure of thoughts and emotions which the psychoeducation component encouraged among the participants. It is also possible that while participating in the psychoeducation therapy even within a limited time (six weeks), students with common subjective norms about examination misconducts felt more comfortable discussing such norms in a group of peers experiencing similar issues who can provide support and influence one other. This possibility further gave empirical support to earlier findings such as Colom et al (2009) that shows how time-limited sessions with single intervention is able to bring about a major improvement. Findings also support Donker, Griffiths, Cuijpers & Christensen (2009) who found that disclosure, expectations and interactions in psychoeducation was effective in decreasing psychological and behavioural misconducts over and above conventional counselling provided by only the experts in schools.

Another finding of this study is that there was no significant gender influence on the effects of psychoeducation on students' examination misconduct tendencies. In particular, the decrease in the examination misconduct tendencies of male students was slightly higher than that of female students after they had participated in psychoeducation. This suggests that male students benefited more from psychoeducation than female students did, but the difference was very insignificant for both male and female students. This finding agrees with that of Bechdolf, Koln, Knost, Pukrop and Klosterkotter (2005) who found that the use of psychoeducation therapies did not have more significant effect on male participants than on female participants. In this study, psychoeducation technique had almost an equal reduction effect on both male and female participants.

The findings of this study also support Barth, Yeaton and Winterfelt (2004) who found that women gained more from psychoeducation technique than men. Those researchers cautioned, however, that the difference could have been due to a floor effect for the males in their study (in their control group, women had significantly higher rates of depression than men, making

a preventive effect on men more difficult to detect). However, the present study did not have that floor effect because the females had less examination misconduct ratings than males at the pretest but had higher posttest examination misconduct ratings than males. Perhaps the differences in result could be due to the fact that Barth et al's study was not on examination misconduct tendencies but on depression and was not conducted in Nigeria, with a different cultural setting.

It is important to note that the observed differences in effects of treatment due to gender were not significant in this study. This is because the test of null hypothesis two showed that there was no significant difference between male and female students that received psychoeducation technique. This indicated that although the present study found a difference between the mean post-test means ratings of male and female students, this difference was only marginal and not significant. The difference male and female students in the psychoeducation group were not due to gender per se. The difference may be due to chance. Being male or female is not a determinant of the effectiveness of psychoeducation, rather, both male and female students actually benefitted equally from the technique.

One possibility that might help to explain why examination misconduct tendencies reduced significantly almost equally for both male and female students was that the psycho educational activities were equally enriching and intense for both gender types. In this study, both male and female students in the experimental groups were prompted and given space to discuss their anxieties, phobias, and subjective norms regarding examinations in their own time and way. Both were allowed to freely discuss and recognize negative examination tendencies. All these might have helped them to reduce examination misconduct tendencies.

It was also found out in this study had reduction effects on the examination misconduct tendencies of students in various age groups. The test of null hypothesis three confirmed that this reduction effect of psychoeducation on students' mean ratings of their examination misconduct tendencies did not differ significantly due to age. Even though there was a consistent slight difference in both the pre-test and posttest examination misconduct tendencies between students aged 14 to 15 and those aged 16 and above, there was no significant evidence, however, that age moderated the effects of the psychoeducation. That is, the reduction in examination misconduct tendencies after participating in the experiment was not significantly different for students aged 14 to 15 and those aged 16 and above. This finding varies from that of Hossfeld (2008) who observed that the outcomes of psychoeducation intervention varied based on age. The reasons for these different findings are not clear, but indicate that



psychoeducation may serve as a useful prevention therapy in the context of examination misconduct.

The non-significant age differences could be because the activities provided in psychoeducation sessions were designed to assist students to believe that examinations misconducts are not the norm, age notwithstanding. This is in line with Vygotsky's (1978) theory that a child who receives ample assistance could perform more than a child in his age group that receives limited assistance. Students in the psycho education group received two forms of assistance, one from the school guidance and counsellor and the other from their peers.

It would be noted that in order to provide equal assisted performance for all groups, similar content and activities were used in all the classes. The psychoeducation technique had a workshop-like environment that requires participants of all ages to openly discuss problems in their relationships. Role playing and experiential learning are incorporated, and adolescents are encouraged to disclose personal information to the group comprising students of all age groups. The students in psychoeducation group were assisted to learn through both expert and guided peer activities in pairs, groups and class wide. These activities had both psychological and educational components and are preventative in nature. Also, preventive psychoeducation could possibly better serve students of different age groups since so many of their needs remain unmet. They worked through goal setting. The students in this study experienced the same range of cognitive perception, age differences notwithstanding. Psychoeducation technique's reduction effect is influenced by the cognitive perceptual level of the students. Ages 14-15 and ages 17 and above share the same level of cognitive perception. Hence the reduction effect of psychoeducation did not differ for the students used in this study.

A final finding of this study is that students in the psychoeducation technique group, irrespective of their school location, had their examination misconduct tendencies decreased after participating in the experiment. However, it was found that there was no significant difference in those students' examination misconduct tendencies for urban and rural school locations. These findings made the researcher to uphold that psychoeducation decreased examination misconduct tendencies for students irrespective of their school locations. The findings align with McBride (2006) who also found that when psychoeducation interventions decreased examination misconduct tendencies for students irrespective of school location. The fact that psychoeducation decreased examination misconduct tendencies for students in urban and rural school locations almost equally is encouraging and suggests that psychoeducation approach can be a veritable tool for reducing examination misconduct. This lack of significant difference

between students in different school locations could be due to the fact that psychoeducation technique does not need a unique location to work effectively. It can work either in urban or rural school locations.

The present study found evidence of a true reduction effect for both the students in the urban and rural psychoeducation the sample as a whole. Whereas there was negligible difference in the examination misconduct tendencies of those students prior to the experiment, there was a significant decrease in level of examination misconduct tendencies after the experiment. Thus, this pattern of results is consistent with a reduction effect (James, 2003). This study showed that universal programmes such as psychoeducation can produce significant preventive effects.

## **Conclusion**

In conclusion, the significant effect of psychoeducation was manifested in students' reduction of examination misconduct tendencies. In addition, gender, age and school location did not prove significant determinants of the effects of psychoeducation on the reduction of students' examination misconduct tendencies. Hence the researchers feel strongly that this therapy is a valuable guidance and counselling technique that should be used to reduce examination misconduct tendencies among secondary school students.

## **Recommendations**

Based on the findings of the study, the following recommendations are made;

1. As the use of psychoeducation has been shown to be effective in reducing examination misconduct tendencies, it should be encouraged. Practising school guidance and counsellors should learn to use the therapy to assist students to develop positive examinations conduct tendencies.
2. The use of psychoeducation should be commenced in full force in secondary schools irrespective of students' gender, age and school location, as a way of reducing examination misconduct tendencies.
3. There should be constant sponsored workshops and seminars for all guidance counsellors in Anambra State secondary schools. This will enhance advancement on the knowledge and competencies for implementing innovative strategies such as psychoeducation. The Counselling Association of Nigeria (CASSON) and Ministry of Education should advertise such techniques in organised seminars and workshops.
4. The Anambra State Post Primary Schools Service Commission should provide on –the-job training to practising school guidance and

counsellors on the use of psychoeducation through seminars, symposia and conferences.

5. The teacher-training programmes in Nigeria should integrate psychoeducation in the counsellor training curriculum in order to equip would-be guidance counsellors with the skills and processes involved in the use of the strategy.

### References:

Aderogba, K.A. Examination malpractice in schools and colleges of Ifo Educational zone: Implications for sustainable educational development, *Savap Journal of Education* 1(3), 130-148. Retrieved on 24<sup>th</sup> July 2013 from [www.journals.Savap.org](http://www.journals.Savap.org). pkp (2011).

Adeyemi, T. O. Examination malpractices among secondary schools students in Ondo State, Nigeria: Perceived causes and possible solutions. *American-Eurasian Journal of Scientific Research* 5 (1): 67-75 (2010)

Ajzen, I. Nature and operation of attitudes. *Annual Review of Psychology*, 52, 27-58. (2001).

Anderson, S. R. Psycho-educational processes as strategies for students presenting with emotional and behavioural disorders. *American International Journal of Contemporary Research* 2(7) 21-30 (2012)

Badejo, A. O & Gandonu, M. B. Predisposing factors towards examination malpractice among students in Lagos universities: Implications for counselling. *Edo Journal of Counselling*, 3 (2) 197-209. (2010)

Barth, R.P., Yeaton, J., & Winterfelt, N. Psychoeducation groups with foster parents of sexually abused children. *Child and Adolescent Social Work Journal*, 11, 405-424. (2004)

Bechdolf, A., Koln, D., Knost, B., Pukrop, R., & Klosterkotter, J.. A randomized comparison of group cognitive-behavioural therapy and group psychoeducation in acute patients with schizophrenia: outcome at 24 months. *Journal Acta Psychiatrica Scandinavica* 112( 3): 173–179. (2005)

Center for International Rehabilitation research Information and Exchange (CIRRIE). *Early intervention: Diagnosis, tests and research*. Retrieved March 27, 2012 from <http://cirrie.buffalo.edu/thesaurus/index.php?letter=e>

Chowdury, U., Caulfield, C., & Hayman, I. (2003). Service innovations: A group for children and adolescents with obsessive-compulsive disorder. *Psychiatric Bulletin*, 27(5), 187-189. (2008)

Clarion, C.. *Classroom management strategies for dealing with habitually disruptive students: Applications of psycho-educational principles and models*. Retrieved on 14<sup>th</sup> August 2013 from <http://www.scribd.com/doc/36459574/Classroom-Management-Strategies-for-Dealing-with-Habitually-Disruptive-Students-Applications-of-Psycho-Educational-Principles-and-Methods> (2013)

- Colom, F., Vieta, E. Moreno, S., Palomino-Otiniano, R., Reinares, M., Goikolea, J. M., Benabarre, A. & Martinez-Ara´, F.. A randomized trial on the efficacy of group psychoeducation in mood disorders: 5-year outcome of a randomized clinical trial. *British Journal of Psychiatry* 194, 260–265. doi: 10.1192/bjp.bp.107.040485. (2009)
- Donker, T., Griffiths, M., Cuijpers, P. & Christensen, H.. Psychoeducation for depression, anxiety and psychological distress: a meta-analysis. *BMC Medicine* 7:79 doi:10.1186/1741-7015-7-79 (2009)
- Emaikwu, S. O.. Assessing the impact of examination malpractices on the measurement of ability in Nigeria. *International Journal of Social Science & Education* 2 (4) 748-757 (2013)
- Exam Ethics Marshals International. *2013 Exam ethics report*. Retrieved on 12<sup>th</sup> November 2013 from <http://www.examsethicsinternal.org>. (2013)
- Folarin, S. (2013) *Lagos retires principals, eight others for examination malpractice*. Retrieved on 27<sup>th</sup> October 2013 from <http://www.punchng.com/n.....>
- Free Dictionary . *Dictionary, encyclopedia and thesaurus*. Retrieved March 16, 2013 from <http://www.freedictionary.com>. (2013)
- Gaynor, S.T., & Lawrence, P.S.. Complementing CBT for depressed adolescents with Learning through In Vivo Experience (LIVE): Conceptual analysis, treatment description, and feasibility study. *Behavioural and Cognitive Psychotherapy*, 30(1), 79-101. (2002)
- Hayes, C., & Morgan, M.. Evaluation of a psychoeducation programme to help adolescents cope. *Journal of Youth and Adolescence*, 34(2), 111-121. (2005)
- Hossfeld, B. Developing friendships and peer relationships: Building social support with the Girls Circle programme. In C.W. LeCroy & J.E. Mann (eds.), *Handbook of prevention and intervention programmes for adolescent girls* (pp. 42-80). Hoboken, New Jersey: John Wiley and Sons. (2008)
- Ibukun, W.O., & Oyewole, B.K. Examining examination malpractices and academic performances in Nigerian schools: Environmental influences and management strategies. *International Journal of Business and Management Tomorrow* 1(2); 1-7. (2011)
- James, C. M. *Engagement in psychoeducation family interventions for psychoses*. Unpublished Dissertation, University of Warwick. (2003)
- Lukens, E. P & McFarlane, W. R. Psychoeducation as evidence-based practice: considerations for practice, research, and policy *Brief Treatment and Crisis Intervention* 4 (3) Fall 221-245 (2004)
- Macmillian. *Free English dictionary online*. Retrieved March 16, 2013 from <http://www.macmillian.dictionary.com>. (2013)

- Maheshwari, V.K . Malpractice in examination- The termites destroying the educational set up. Philosophical commentary. *Issues of Today* 2 (4) 11-20. (2011)
- Mcbride, M. C. *The effects of brief psychoeducation on adolescents' depressive symptoms and perceptions of parenting*. Unpublished Master of Arts Dissertation, University of Montana, Missoula, MT. Retrieved on April, 16<sup>th</sup> 2012 from [http://Dissertation Abstracts International: Section B: 63\(3-B\), 1555.](http://Dissertation Abstracts International: Section B: 63(3-B), 1555.) (2006)
- McCabe, D. L., Feghali, T., & Abdallah, H. Academic dishonesty in the Portugal: Individual and contextual factors. *Research in Higher Education* 49, 451-467. doi:10.1007/s11162-008-9092-9 (2008)
- McCabe, L. & Klebe, T. Academic dishonesty: Honor codes and other contextual influences. *The Journal of Higher Education*, 64 (5) 522-538 (1993)
- Okorodudu, G. N.. Peer pressure and socioeconomic status as predictors of student's attitude to examination malpractice in Nigeria. *International Journal of Education*, 5 (1) 38-59. (2013)
- Olatunbosun, J.B. Examination malpractice in secondary schools in Nigeria: What sustains it? *European Journal of Education Studies*, 1(3), 101-108. (2009)
- Oluremi, D. F.. Functional guidance and counselling centre in tertiary institutions. *The Journal of International Social Research*, 7 (31) 697-705 (2014)
- Omeri, M.. *Nigeria ranked number one in World examination malpractice index*. Retrieved on 11th August 2013 from <http://www.informationng.com> (2012)
- Reynes, C. *Psycho-educational principles therapeutic teachers use to reduce habitually disruptive behaviours in the classroom*. Retrieved on 17<sup>th</sup> July 2013 from <http://thepsychoeducationteacher.blogspot.com/> (2012)
- Udoh, N. Remote causes and counselling implications of examination. *Continental Journal of Education Research*, 4 (3) 34 - 43, (2011)
- Ugo, O. K. & Odimba, I. O. Curbing examination malpractice through effective guidance and counselling services. *Nigerian Journal of Science, Technology and Environmental Education*, 3(1)135-142 (2010)
- United States Department of Health and Human Services.. *Building your own programme: Family psychoeducation*. Rockville: Center for Mental Health Services Substance Abuse and Mental Health Services Administration (2013)
- Vygotsky, L. S. *Mind and society*. Massachusetts: Harvard University Press. (1978)

Wells, D., Miller, M., Tobacyk, J., & Clanton, R.. Using a psychoeducation approach to increase the self-esteem of adolescents at high risk for dropping out. *Adolescence*, 37(146),431-434. (2002)

Wike, N. FG to blacklist students, schools involved in examination malpractice, *Vanguard Newspapers*, September 7 (2011)

Wood, M.M., Brendtro, L.K., Fecser, F.A., & Nichols, P. *Psychoeducation: An idea whose time has come*. Reston, Virginia: Council for Children with Behavioural Disorders. (1999)