



Effects of Solution-Focused Brief Therapy on Preferred Choice of Tertiary Education among Senior Secondary School Students in Rivers State, Nigeria

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ABSTRACT

The study investigated the effects of solution – focused brief therapy (SFBT) on preferred choice of tertiary education among students in Rivers State, Nigeria. Two research questions and two corresponding null hypotheses guided the study. Quasi experimental research design was adopted for the study. The population consist of 34,269 senior public secondary school students. One hundred and nineteen students from 4 secondary schools in Rivers state were sampled for the study through a multi-stage sampling technique. Motivation for tertiary education preference scale (MTEPS) was the outcome measure. Face and content validity of MTEPS was established by six test experts while the reliability was established through the internal consistency method using Cronbach Alpha and it yielded $\alpha=0.8$. It was further subjected to a measure of stability through a test re-test procedure using Pearson Product Moment Correlation coefficient and it yielded $r'=0.93$. One treatment group and one control group for comparison was formed, treatment group was given SFBT. Data collected was analysed using mean and standard deviation for the research questions while T-test statistical analysis was used for the hypotheses. T-test statistical analysis of pre-to-post intervention MTEPS scores specified that the treatment condition produced significant change over the control group. Based on the findings it was recommended amongst others that students with dysfunctional choice pattern should be exposed to SFBT for a healthy choice pattern. Solution-focused brief therapy should be included in counsellor education training programmes.

Keywords: solution – focused brief therapy, counsellor education, choice

INTRODUCTION

Tertiary education is the education given after secondary education in universities, colleges of education, polytechnics, mono-technics including those institutions offering correspondence courses (NPE, FRN, 2004). Tertiary education is not limited to university education alone but to all others mentioned in the definition above. The goals of tertiary education as spelt out in the national policy of education are global and applicable to all tertiary educations. Section 8 no 59 article a-g of the national policy on education (FRN, 2004), explicitly stated these goals as follows;

- a) contribute to national development through high level relevant manpower training;

- b) Develop and inculcate proper values for the survival of the individual and society;
- c) Develop the intellectual capability of individuals to understand and appreciate their local and external environments;
- d) Acquire both physical and intellectual skills which will enable individuals to be self-reliant and useful members of the society;
- e) Promote and encourage scholarship and community service;
- f) Forge and cement national unity; and
- g) Promote national and international understanding and interaction.

In spite of the laudable objectives of tertiary education which are not peculiar to university education alone but global to all, students continue to embrace other tertiary educations as a last resort and develop an overwhelming preference for university education. This claim was affirmed by the registrar/ chief executive of Jamb Prof. Dibu Ojerinde who said that universities have the highest number of applicants as first choice as not less than 995,901 candidates chose universities as their first choice of institution. Polytechnics had 13,761 as first choice while colleges of education had 20,558 and innovative enterprise institutions had 32 candidates as first choice (source:www.vanguardngr.com 2014).

This overwhelming preference for university education by students have not helped matters as most students after completing secondary education with good grades spend countless years at home waiting for university admission. Some who pick up admission from other tertiary institutions as a last resort abandon them for university even when they are in their final year, they see other tertiary education as a place for the never do wells. The missing link is adequate information, information widens people's knowledge and it is out of an individual's knowledge content and experiences that effective decisions are usually taken.

Sait & Mitrosili (2005) observes that there is a lack of understanding and appreciation that, other than university education other tertiary institutions may lead to equally lucrative jobs and rewarding careers. They said university education may be viable for some, yet may not be for others. Harri, (2005) says that non university career options have changed dramatically with technological advancement over recent years. The occupational opportunities are more challenging, complex and rewarding than they have been in the past. Solution-focused brief therapy is employed in this study to make students see good in other tertiary education options.

Solution-Focused Brief Therapy, holds that clients can trust their future by using goals they choose in the present (Prochaska & Norcross, 2007). The aim of Solution Focused Brief Therapy (SFBT) according to Egbochuku (2012) is on what the client aims to achieve in the present and the future, and explore ways in which these goals can be realized. In the light of this fact, having a clear vision of a preferred future clients and counsellor together, can generate ideas for solution that can enhance a better future. Solution-Focused Therapists are competent and future focused. They highlight and utilize clients' strengths to enable a more effective future.

Seagram (1997) investigated the efficacy of SFBT for improving attitudes and behaviours and reducing antisocial thinking and behaviour in adolescent offenders in a secure facility for youthful offenders. The sample consisted of 40 youths who were rank-ordered according to sentence and then alternately assigned to the treatment (N=21) or control (N=19) group to insure comparability on seriousness of offence. Participants had to have a diagnosis of psychosis and history of refusal to take medications to be eligible for the study. 85% of the sample had a history of violent behavior, 90% were repeat offenders and 65% were currently incarcerated for a violent crime.

All subjects attended a group orientation session and three individual assessment sessions prior to the treatment, participants beginning 10 weekly SFBT sessions with each SFBT session lasting 45-60 minutes. An external reviewer rated first and last sessions to insure adherence to the SFBT model. Outcome measures included the Jesness Behaviour Checklist, Recidivism Scales, Achenbach Youth self-report, Carlson psychological survey; cooper-smith self-esteem inventory and a solution-focused questionnaire developed by Seagram. The Jesness behavior checklist was completed by the youth, his correctional officer and a teacher, the other measures were all self-report.

Scores on the solution-focused questionnaire indicated that the treatment group made more progress in solving problems and had higher confidence in their ability to maintain changes than did the control group. Carlson psychological survey data indicated that the treatment group had significantly more optimism for the future, greater empathy, fewer antisocial tendencies and less chemical abuse. Treatment group subjects showed significantly less difficulty with concentration. The Jessness and Cooper Smith measures failed to show any significant between group differences. Teacher ratings on the Jessness and teacher Report form showed trends favouring the SFBT subjects, but differences did not reach significance. Within a 6 – months follow up period 4 (20%) members of the treatment group vs 8 (42%) members of the control group had re-offended (run-away or were moved from open to secured custody)

In another study La-fountain and Garner (1996) evaluated the impact of Solution-Focused Groups (SFG) on school age children and school counsellors. School counsellors were recruited for a training programme in SFG as an alternate approach to managing large caseloads with fewer resources. The final sample was made up of 57 counsellors randomly assigned to treatment and control groups who served a total of 311 elementary, middle and high school students. Experimental group counsellors attended a full day SFG training workshop and were then asked to select 4-8 students from their caseloads who met criteria for inclusion in SFG. Treatment consisted of 8 weekly SFG sessions, control group counsellors (who were told the purpose of the study) did not provide any type of group counselling to their students. They were asked instead to identify potential students for SFG intervention and administer pre-post measures only to those students. The index of personality characteristic (IPC) a 75 – item questionnaire was the outcome measure. It was administered prior to intervention and 8 weeks latter (at the completion of the intervention for SFG students). Modest but statistically significant between group differences were found on 3 IPC subscales: Nonacademic, perception of self and acting in. According to the authors, these differences suggest that students in the experimental group had higher self-esteem in nonacademic arenas, more positive attitudes and feelings about themselves and more appropriate ways of coping with emotions.

Polk (1996) adopted a single subject AB design to investigate the effectiveness of SFBT on problem-drinking behaviour, the client was a 36-year-old male who had a 10-year history of problem drinking and poor work attendance. Baseline data were reconstructed from archival records and client historical report findings indicated that the absence from alcohol and work attendance both increased over the course of treatment. At baseline, the client had been abstinent one day per week, by the end of treatment he was abstinent three days per week. Work attendance during baseline has been as low as two days per week but increased to 4-6 days per week during treatment.

Eakes, Walsh, Markowski, Cain & Swanson (1997) investigated the impact of SFBT on families with a member diagnosed as schizophrenic. The sample was composed of 10 patients and their families being served by a community mental health center. The first 5 families to volunteer were assigned to the treatment group and the next 5 were assigned to the control group. Treatment and control groups met every other week with a psychiatric nurse for standard aftercare consisting of 20-minutes medical checks. Immediately following each of these checks, for five times the treatment group participated in a SFBT session facilitated by the study authors and a psychiatric nurse supervisee. The SFBT group showed significant increase on several dimensions of the family Environment scale. Expressiveness, Active-recreational orientation and incongruence, whereas the control group showed significant decreases.

So far we have seen that solution focused brief therapy has been used to help individuals to overcome diverse problems in foreign countries, the problem is, can it be effectively used to effect students preferred choice of tertiary education in Nigeria having been used successfully on diverse issues of life? The researchers think that students are stuck at little corners by thinking that university education is the only golden key that holds their future success while there are other lucrative and viable keys to a fulfilling future. Solution focused brief therapy was used to counsel students to appreciate the usefulness of other tertiary education options, it is against this background that the researcher conceived the idea to investigate the 'Effects of Solution-Focused Brief Therapy on preferred choice of tertiary education among senior secondary school students' in Rivers-State, Nigeria' to fill the existing gap.

Aim and Objectives of the Study

The aim of the study is to investigate the effects of solution focused brief therapy on preferred choice of tertiary education among senior secondary school students (SS3) in Rivers State, while the objectives are to;

- 1) Determine the effects of solution focused brief therapy on preferred choice of tertiary education among SS3 students in Rivers State when their pretest and posttest mean scores are compared?
- 2) Ascertain the effects of solution-focused brief therapy when the result of the experimental group is compared to that of the control group.

Research Questions

The following research questions were answered to guide the study;

- (1) What is the effect of solution-focused brief therapy (SFBT) on preferred choice of tertiary education among SS3 students in Rivers State as measured by their pre-test and post-test mean scores?
- (2) What is the level of effectiveness of solution-focused brief therapy (SFBT) when the result of the experimental group is compared to that of the control group.

Hypotheses

The following two corresponding null hypotheses were stated and tested at 0.05 level of significance to guide the study.

- (1) Solution-focused brief therapy has no significant effect on preferred choice of tertiary education among SS3 students in Rivers State when the pretest and post-test mean scores of the experimental group (SFBT) is compared.
- (2) Solution focused brief therapy has no significant effect on preferred choice of tertiary education among SS3 students in Rivers State when the post-test mean scores of the experimental group is compared to that of the control group.

METHODOLOGY

Research Design

The study adopted the quasi-experimental research design. The greatest of the conditions that call for use of quasi-experimental research according to Kpolovie (2010) is when total randomization cannot be applied to control all known and unknown extraneous variables required for true experimentation. Specifically, the study adopted the nonequivalent control group quasi-experimental design otherwise known as the pretest, posttest control group quasi-experimental design. The researchers are convinced that this present study was most appropriate with the use of quasi experimental research.

Population for the Study

The target population for this study consists of all the SS3 students in senior public secondary schools in Rivers State for 2014/2015 academic session. As at the time of this study the total number of SS3 students in the state was 34,269 (Source: state ministry of education)

Sample and Sampling Technique

A multi-stage sampling procedure was used to draw the sample for the study using simple random sampling technique and cluster sampling. The sample was composed of 137 students from four senior secondary schools in Rivers state of Nigeria identified as being dysfunctional in their choice of tertiary education. A total of 119 students completed the study and this number formed the basis of the conclusion of the study.

Instrument for Data Collection

The instrument used for data collection was adapted from motivation for occupational preference scale (MOPS) developed by Bakare (1977) with 16 items. The instrument was tagged Motivation for Tertiary Education Preference Scale (MTEPS). It measured "students' preferred choice of Tertiary Education. Some of the items on MOPS were left as they were originally, some were changed to suit the study.

The instrument was in 3 sections accompanied with a transmittal letter which specified the essence of the study. Section A was the personal data section indicating name of student, school, Local Government Area, class, section B elicits information such as 1st and 2nd choice of tertiary education preferred (preferred institution type) and willingness to accept admission offer from other tertiary institutions while section C consisted of 16 self-report items in relation to reasons for preference of choice of tertiary education. It is segmented into 4 parts (A – D) for purpose of identification of those with unhealthy choices, the items on the instrument were responded to on a 4 points scale of Strongly Agree (SA), Agree (A), Disagree (D), Strongly Disagree (SD) with scores ranging from 4 – 1.

Validity of the Instrument

Face and content validity of the instrument was established by 6 experts from the three universities in the state from the department of educational psychology/ guidance and counselling.

Reliability of the Instrument

The reliability of Motivation for tertiary education preference scale (MTEPS) was determined through the test-retest method for a measure of stability using Pearson Product Moment Correlation coefficient statistic and it yielded 'r' 0.93. It was further subjected to the internal consistency method using Cronbach Alpha to analyze the scores obtained and it yielded $\alpha=0.8$.

Method of Data Analysis

The research questions were answered using mean and standard deviation of the pretest and post-tests scores, while T-test was used to test the null hypotheses.

Experimental Procedure

The experimental procedure was divided into three stages:

Stage 1 – Pre-test administration

The researcher administered the motivation for tertiary education preference scale (MTEPS) to 100 SS3 students in each of the sampled four schools in the four local government areas of the state in their respective schools bringing the total to 400 students.

Stage 2 – scoring of the pre-test

The researcher scored the responses of students on each item on MTEPS in all the three sections. Students who chose university as their first and second choice and also say "NO" to admission offer to other tertiary institutions in section B were identified as students who need counselling. The implication of this is that these students have seen university as a "DO" or "DIE" affair.

Again those who score 9 – 16 in section 1, 2, 3 were also identified for counselling. Those who scored 9 – 16 in section 4 and 4 – 8 in sections 1, 2, 3 were identified as healthy in their preferred choices. After painstakingly scoring the pre-test 137 SS3 students were spotted as having unhealthy dysfunctional choice of tertiary education and they were used for the study but only 119 completed the study and were used as the basis for the conclusion of the study.

Stage 3 – placement of subjects into experimental and control groups

Those who were identified as being healthy in their preferred choices were exempted from the experiment while those who were identified as needing counselling that is, those who see university education as a do or die affair were placed into either control or experimental group. Students from 2 schools formed the experimental group and benefited from solution-focused brief therapy (SFBT) while students from 2 schools also formed the control group and received no treatment.

RESULTS

Research Question 1: *What is the effect of SFBT on preferred choice of tertiary education among SS3 students in Rivers State as measured by their pre-test and post-test mean scores?*

To answer this research question, the pretest and posttest scores were extracted from table 1

Table 1: Pretest and Posttest mean scores and standard deviation for the 2 groups.

Pretest mean scores/standard deviation				Posttest mean scores/ standard deviation			
Group	N	x	Sd	N	X	Sd	Mean difference
Experimental group	57	51.8	5.2	57	27.9	3.3	23.9
Control group	62	51.4	10.8	62	54.2	6.0	-2.8

Table 1 reveals that experimental group (SFBT) had a mean score of 51.8 and standard deviation of 5.2 before treatment (pre-test scores) after treatment this group recorded 27.9 as mean score and 3.3 as standard deviation score. The mean difference of 23.9 between the pretest and posttest shows the gains of SFBT on preferred choice of tertiary education among SS3 students in Rivers State as measured by their pretest and posttest scores.

Based on this analysis the answer to research question 1 is: - Vocational guidance (VG) is effective on preferred choice of tertiary education among SS3 students in Rivers State as revealed by their pretest and posttest scores.

Research Question 2: *To what extent are those in the experimental group different from those in the control group when the pretest and posttest mean scores are compared?*

To answer this research question the pretest and posttest mean scores and standard deviation scores of the experimental and control group were extracted from table 1 and compared. Control group had 51.4 and 10.8 as pretest mean score and standard deviation respectively, subsequently, the group recorded 54.2 and 6.0 respectively as posttest mean score and standard deviation and a mean difference of -2.8 while the experimental group had 51.8 and 5.2 as pretest mean and standard deviation scores and 27.9 and 3.3 as post-test mean and standard deviation scores with a mean difference of 23.9 showing the gains of SFBT on preferred choice of tertiary education among SS3 students in Rivers State over the control group.

Based on this analysis the answer to research question 2 is; those in the experimental group improved over those in the control group in terms of preferred choice of tertiary education as measured by their pretest and posttest mean scores when compared.

Null hypothesis one- Solution focused brief therapy has no significant effect on preferred choice of tertiary education among SS3 students in Rivers State when the pre-test and post-test mean scores of the experimental and control groups are compared.

Table 2; t-test summary for the null hypothesis on the effects of SFBT on preferred choice of tertiary education.

Experimental group	N	X	Sd	Df	t-crit	t-cal	sig	Decision
Pretest	57	51.8	5.2	55	2.0	29.3	0.5	Reject H0
Posttest	57	27.9	3.3					

Table 2: revealed that the calculated t-test value of 29.3 is higher than the table value of t at a degree of freedom of 55 at 2.0 at .05 level of significance, this calls for the rejection of the null hypothesis and the acceptance of the alternate hypothesis which states that SFBT has a significant effect on preferred choice of tertiary education among Ss3 students in Rivers state when the pretest and post-test results of the experimental group are compared. The rejection of the null hypothesis indicates that SFBT has significant effect on the preferred choice of tertiary education among Ss3 students in Rivers state.

Test this hypothesis t-test statistic was employed to analyze the result.

Null hypothesis 2: Solution focused brief therapy has no significant effect on preferred choice of tertiary education among SS3 students in Rivers State when the post-test mean scores of the experimental group (SFBT) is compared to that of the control group.

To test this hypothesis T-test statistic was employed to test the significance of the result.

Table 3; summary of t-test analysis on the effects of solution focused brief therapy when compared to the control group.

Groups	N	X	Sd	Df	t-cint	t-cal	sig	Decision
Experimental group	57	27.9	3.3	117	1.960	29.9	.05	Reject Ho
Control group	62	54.2	6.0					

The result on table 3 shows that there was a significant difference between the experimental group and the control group when the post-test results of the two groups were compared. This is so because the calculated T-test value of 29.9 is much higher than the critical T-test value of 1.960 at a degree of freedom of 117 at .05 level of significance. This therefore calls for the rejection of the null hypothesis and the acceptance of the alternate hypothesis as stated above

DISCUSSION OF FINDINGS

The results in table 1 reveals that the pretest and posttest mean scores of students treated with SFBT were 51.8 and 27.9 respectively, this means that students had a higher score in their pretest mean score than in their posttest mean score. This indicates that their dysfunctional preferred choice reduced after treatment, this mean difference was subjected to T-test statistics and it was found that SFBT had significant effect on preferred choice of tertiary education among SS3 students in Rivers State. Dysfunctional preferred choice improved to a healthy preferred choice of tertiary education with statistical proofs, this finding was not surprising as SFBT is quite helpful in handling diverse issues. Again the pretest mean-scores of the two groups revolved around 51.8 and 51.4 while the posttest mean scores of the experimental group showed a remarkable decrease to 27.9, the posttest mean scores of the control group still showed a slight increase over the pretest mean score. This goes a long way to show that the treatment factor was effective in influencing preferred choice of tertiary education among SS3 students in rivers state. These mean differences were subjected to T-test statistic and it was discovered that there was a significant statistical difference between the experimental group and the control group with substantial statistical evidence.

This finding is in line with the findings of the studies of Sundstrom (1993), Seagram (1997), Lafountain (1996), Polk (1996), Sundman (1997), who used solution-focused brief therapy in their different experimental studies and found it to be very effective in addressing different life issues. Solution-focused brief therapy (SFBT) helps client to shift focus from problem to solution and forward focused. It assists clients to alter complaints into solutions, provides client with cues-focused therapeutic suggestions, tasks or directives that lead in the direction of solutions.

Students treated with SFBT were helped to focus on their life goals irrespective of the path ways of training preferred. They were helped to see the good in other tertiary education path ways and to make choices in line with their dreams and aspirations.

This finding is in positive connotation with the view of Egbochukwu (2012) who states that, the focus of SFBT is change and client is to be helped to foster an awareness of his/her capacity for movement towards a preferred future. The preferred future remains un-altered, the educational (training) pathways were streamlined to get to the preferred future. Egbochukwu concludes that despite the effectiveness and efficiency of SFBT it is only used by a handful of counsellors and often not taught in schools in Nigeria. This explains the paucity of indigenous empirical literature on SFBT. Nevertheless, SFBT have been proven to be effective in this study.

Implications for counselling

By implication the results of the study have shown that, SFBT can be very effective in influencing preferred choice of tertiary education among secondary school students.

The outcome of this study has significant implication for the counsellors, students, government, parents, teachers and all stakeholders in the educational system. The first finding that SFBT is effective on preferred choice of tertiary education among SS3 students implies that SFBT aims at helping students to make decisions on academic and vocational matters. It also implies that individuals can gain greater self-awareness and become more knowledgeable about their future goals and training opportunities. Unwholesome beliefs and attitudes acquired through lack of information can be modified through effective application of SFBT.

Finally, the second result states that the experimental group is more effective on preferred choice of tertiary education among SS3 students in Rivers State over the control group. This implies that intervention strategies are helpful in redirecting negative, dysfunctional, unhealthy belief systems and thinking patterns to positive and desirable ones for an effective living. Counsellors should use SFBT to address similar issues.

CONCLUSION

Based on the results of the study the researcher drew the following conclusions;

- 1) SFBT is an effective tool in enhancing dysfunctional preferred choice of tertiary education among SS3 students in Rivers State. It can also be used to effect educational choices among students.
- 2) SFBT adopted in this study was effective in bringing about healthy choice patterns among the experimental group while the control group continued to show dysfunctional preferred choice pattern as revealed by the pretest and posttest mean scores of all the groups. This means the gains obtained from the treatment factors are quite overwhelming.

RECOMMENDATIONS

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

- 1) SFBT should be included in counsellor education training programmes
- 2) The government in collaboration with the counselling association of Nigeria should organize workshops, seminars, train the trainers' conferences to sensitize and train counsellors on how to use SFBT effectively to help students to overcome dysfunctional choice patterns and other challenges of life.

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