EFFECTS OF SYSTEMATIC DESENSITISATION AND TOKEN ECONOMY ON SEPARATION ANXIETY OF JUNIOUR SECONDARY SCHOOL STUDENTS IN ZARIA METROPOLIS, NIGERIA

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JUNE, 2019

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A THESIS
SUBMITTED TO DEPARTMENT OF EDUCATIONAL PSYCHOLOGY AND COUNSELING, AHMADU BELLO UNIVERSITY ZARIA IN PARTIAL FULFILLMENT FOR THE AWARD OF DEGREE OF THE DOCTOR OF PHILOSOPHY IN EDUCATIONAL PSYCHOLOGY

JUNE, 2019

DECLARATION

The researcher hereby declares that this work: Effects of Systematic Desensitisation and Token Economy on Separation Anxiety of Juniour Secondary School Students in Zaria Metropolis, is an original research conducted by me. To the best of my knowledge, it has never been presented in part or as a whole anywhere for the award of any degree or publication in any form. All quotations and other sources of information have been duly acknowledged.

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CERTIFICATION

This dissertation titled **Effects of Systematic Desensitization and Token Economy on Separation Anxiety Among Seniour Secondary School Students in Zaria Metropolis** by Zainab **Yusuf** meets the requirements governing the award of the degree of Doctor of Philosophy of Ahmadu Bello University, Zaria, and is approved for its contribution to knowledge and literary presentation.

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DEDICATION

To my parents:
Hajiya Khadija Husain and Alhaji Yusuf Umar
for being my pillars of support from the cradle.
My kids Abdulmalik, Fatima, Umar, Hafsat,
Khadija and Hasana, for their understanding

ACKNOWLEDGEMENTS

The researcher is grateful to Almighty Allah, who gave her the life and wisdom to carry out this study, whose guidance and support knows no bound. Many people have contributed to the success of this study, whose names are too numerous to mention, but the researcher will make some efforts to acknowledge those who have contributed immensely to the successful completion of this work.

The researcher is grateful to Prof. A. I. Mohammed Head of Department, Educational Psychology and Counseling, who supported this work as the major supervisor. The researcher profoundly appreciates Professor E. F. Adeniyi, who has been a mother, a teacher and a mentor. The constructive criticism made by Dr. Yunusa U. who raised this work to reality. The researcher is also indebted to the internal examiners Prof. R. M. Bello of Educational Psychology and Counseling Department, Prof. C. E. Dikki of Physical and Health Education Department and Prof. A. A. Udoh, of Vocational and Technical Education Department, who despite their tight schedules, created time to look into this work, and made constructive, scholarstic observations that assisted in making this work a success. The researcher is also greatly indebted to Prof. K. Mahmoud, Dr. H. Tukur, Prof. S. Sambo and Prof, M. I. Abdullahi for their contributions that greatly assisted this work. The researcher is also grateful to Dr. L. K. Maude for his academic support, and for the support of all the academic and non-academic staff of the Department of Educational Psychology and Counseling.

The researcher is grateful to Federal College of Education Zaria that gave me their permission to go for this study. The researcher is indebted to TETFUND that sponsored this study. The researcher acknowledged the support of her colleague and classmate Dr. Z. L. Adamu whose company and encouragement the researcher enjoyed throughout the period of this

study. The researcher appreciates the cooperation of Zaria Educational Zone, The Principals of Barewa College, and Government Girls' Secondary School Zaria, as well as all the students that participated in the study. The researcher is grateful to Mal. Dahiru of Foundation Department of Federal College of Education, Zaria, who helped in formatting the work.

With all respect, the researcher acknowledged the support of her spouse in person of Abubakar Gambo Muhammad, whose support and encouragement kept the work moving to its successful completion. The researcher is profoundly grateful to her wonderful Sisters, Haj. Husaina, Haj. Aisha, Saudat and Barrister Hajara (The Yusufs), for their sisterly love and support. The researcher is also grateful to these wonderful gentlemen, my Brothers Alhaji Balarabe, Commander A. Yusuf and Umar Yusuf who kept checking on the progress of this work, and greatly influenced the success of the work. The researcher also acknowledges the support of her children Abdulmalik, Fatima Umar, Hafsat, Khadija and Hasana, who gave me the space and serenity in putting this work together at home.

ABSTRACT

This study investigated the effects of systematic desensitization and token economy on separation anxiety of Juniour Secondary School Students in Zaria Metropolis. The population of the study consisted of two hundred and eighty seven students with separation anxiety as identified using Spence Children Anxiety Scale. Twenty students from JS II, that are between 13-15 years were selected to participate in the study. The students sampled out for the study were students with high level of separation anxiety. The study employed quasi experimental pretest-posttest design, in which selected students were grouped into two experimental groups. One of the experimental groups was treated with systematic desensitization, and the other with token economy technique. All the participants were exposed to pretest and a posttest. Statistical Package for the Social Science (SPSS) was used, where descriptive statistics of mean and standard deviation was used in answering research questions; hypotheses were tested using paired sample t-test, and analysis of co variance to compare the two variables. The research hypotheses formulated, were tested at 0.05 level of significance. The findings revealed that significant effect exist in the use of systematic desensitization on separation anxiety among Juniour Secondary School Students of Zaria Metropolis (t=4.486 p=.000). The findings also revealed that, token economy has significant effect on separation anxiety among Juniour Secondary School Students in Zaria Metropolis, (t=6.40 p=-.000). There is no significant differential effect of systematic desensitization and token economy technique on post test scores of students with separation anxiety (p=.000). The study also discovered no significant differential effect in the use of systematic desensitization and token economy technique on male and female students with separation anxiety (p=0.52), and (p=0.20). It was recommended that psychologists and counselors should be encouraged by school authorities to use these techniques of systematic desensitization and token economy in handling separation anxiety problems among secondary school students in Zaria Metropolis, Nigeria.

TABLE OF CONTENTS

Content		Page
Cover Page		i
Title Page		ii
Declaration		iii
Certification		iv
Dedication		v
Acknowledgement		vi
Abstract		viii
Table of content		ix
List of Tables		xii
List of Appendices		xiv
Abbreviations		xv
Operational Definition of Terms		xvi
CHAPTER ONE: INTRODUCTION		
1.1	Background to the Study	1
1.2	Statement of the Problem	6
1.3	Objectives of the Study	7
1.4	Research Questions	8
1.5	Research Hypotheses	8
1.6	Basic Assumptions	9
1.7	Significance of the Study	9
1.8	Scope and Delimitation of the Study	11
CHAPTER TWO: REVIEW OF RELATED LITERATURE		
2.1	Introduction	13
2.2	Conceptual Review	13

2.2.1 Concept of Separation Anxiety 13
2.2.2 Concept of Token Economy 24
2.3 Systematic Desensitization 34
2.4 Theoretical Framework 39
2.4.1 Freud's Psychoanalytic Theory 40
2.4.2 Skinner's Operant Conditioning Theory 58
2.4.3 Erickson's Psychosocial Theory 65
2.4.4 Bowlby's Attachment Theory 79
2.4.5 Bandura's Social Learning Theory 87
2.5 Review of Empirical Studies 88
2.6 Summary 95

CHAPTER THREE: METHODOLOGY

3.1 Introduction 97
3.2 Research Design 97
3.3 Population of the Study 98
3.4 Sample and Sampling Technique 100
3.5 Control of Intervening Variables 102
3.6 Instrumentation 103
3.6.1 Scoring Key of Instrument 104
3.6.2 Validity of the Instrument 104
3.6.3 Pilot Testing 105
3.6.4 Reliability of the Instrument 106
3.7 Procedure for Data Collection 106
3.8 Procedure for Data Analysis 112

CHAPTER FOUR: RESULTS AND DISCUSSION

4.1	Introduction	114
4.2	Answering Research Questions	114
4.3	Hypotheses Testing	119
4.4	Summary of Major Findings	126
4.5	Discussions	126

CHAPTER FIVE: SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1	Introduction	130
5.2	Summary of the Study	130
5.3	Conclusion	134
5.4	Contributions to Knowledge	135
5.5	Recommendations from the Study	136
5.5	Suggestions for Further Studies	137
	References	138
	Appendices	145

List of Tables

Table	Items	Page
Table1	Population of Students with Separation Anxiet	100
Table 2	Distribution of Respondents by Group	101
Table 3	Distribution of Participants by Gender	101
Table 4	Example of Pre-test Calculatio	108
Table 5	Criteria for having separation anxiety	109
Table 6	Criteria for selection	109
Table 7	Mean and standard statistics on the effect of Systematic Desensitization on separation anxiety among junior secondary school students in Zaria Metropolis	115
Table 8	Descriptive statistics on the effect of Token economy on separation anxiety among junior secondary school students in Zaria Metropolis	116
Table 9	Mean statistics on differential effect of Systematic Desensitization and Token Economy Technique on separation anxiety among junior secondary school students in Zaria Metropolis	117
Table 10	Descriptive statistics on differential effect of Systematic Desensitization on separation anxiety of Male and Female students in Zaria Metropolis	118
Table 11	Descriptive mean statistics on differential effect of Token Economy on separation anxiety of Male and Female students in Zaria Metropolis	119
Table 12	Paired sample t test statistics on the difference, before and after students' exposure to Systematic Desensitization Technique	120
Table 13	Analysis of the difference between the situation of separation anxiety before and after students' exposure to Token Economy Technique using paired sample t test	121
Table 14	Analysis of Covariance statistics on differential effect of Systematic Desensitization and Token Economy Technique on separation anxiety among junior secondary school students in Zaria Metropolis	122
Table 15	Mean statistics on differential effect of Systematic Desensitization and Token Economy Technique on separation anxiety among junior secondary	123

school students in Zaria Metropols

Table 16 Independent t test statistics on differential effect of Systematic Desensitization on separation anxiety of Male and Female students in Zaria Metropolis 124

Table 17 Independent t test statistics on differential effect of Token Economy on separation anxiety of Male and Female students in Zaria Metropolis 125

List of Appendices

Appendix		Page
Appendix 1	Letter of Introduction	144
Appendix 2	Spence Childrens'Anxiety Scale	146
Treatment Sessions		147
Appendix 3	Result of Pilot Testing	160

ABBREVIATIONS

SA Separation Anxiety

SD Systematic Desensitization

TE Token Economy

OPERATIONAL DEFINITION OF TERMS

Separation Anxiety: Separation anxiety is the primary expression of excessive anxiety, that occurs upon the actual or anticipated separation of the child from adult caregivers, most often the parents. It is also a psychological condition in which an individual experiences excessive anxiety regarding separation from home or from people (parents, caregiver or siblings), to whom the individual has strong emotional attachment.

Token Economy: Token economy is a system of paying children for completing tasks and children can then use these tokens to buy desired activities or items. It can also be regarded as a form of behavior modification designed to increase desirable behavior and decrease undesirable behavior with the use of tokens.

Systematic Desensitization: This is a behavioural technique whereby a person is gradually exposed to an anxiety-producing object, event, or place while being engaged in some type of relaxation at the same time in order to reduce the symptoms of anxiety.

CHAPTER ONE

INTRODUCTION

1.1 Background to the Study

Anxiety is more than just feeling stressed or worried, it is when these anxious feelings don't subside, but persist and exist without any particular reason or cause, and in so many cases affects the individual daily life activities in one way or the other. There are different types of anxiety like Generalised Anxiety, Obsessive Compulsive Anxiety, Post Traumatic Anxiety, to mention but a few. This study chose to focus on separation anxiety, because it is one big problem that affects students. Like many childhood concerns, separation anxiety is normal at certain developmental stage, for example, when a little child is separated from his/her mother or other primary caregivers, he/she may experience distress, which is normal. However, separation anxiety that occurs at later ages is considered a problem because it is outside normal developmental expectations, and because of the intensity of the child's emotional response. Separation anxiety occurs most frequently from the ages of five to seven and from eleven to fourteen (www.minddisdorders.com). It is observed that children with Separation Anxiety tend to come from families that are close-knit, when separated from home or major attachment figures, they may recurrently exhibit social withdrawal, apathy, sadness, or difficulty concentrating on work or play (McLeod 2006).

The researcher observed from some of the studies reviewed here that children in developed countries are separated from parents at a tender age, because most parents in such countries go to work, and as a result, infants are taken to Day Care Centres, Crèches

or left in the hands of Nannies who are usually employed by parents to look after their children while they are away.

In Nigeria on the other hand, children experience separation from parents when they gain admission into secondary schools, especially where a child is admitted in the boarding house, such children are expected to stay in the dormitory for the whole term usually three (3) months. The situation of leaving home to stay with some relatives for a while usually at the age of to (2) years when a chikd is weaned from breast milk, exposes the child to an entirely new life experience, the strange faces, new environment, absence of parents and breast milk create a lot of tension in the child, which can cause fever as a result of excessive cry and so much anxiety, which may affect the child, later in life.

Infants with anxious temperaments may have a predisposition towards later development of anxiety disorders. Another reason for separation anxiety is parent/child attachment, which translates into quality of attachment between children and their parents that has also been identified as a factor in separation anxiety. If the child senses emotional distance, the behaviour may be an attempt to draw the parent in more closely. The problematic behaviours can also draw the attention and care of others as well. Children developmental considerations can also be a cause of separation anxiety; because children develop at different rates when compared to each other (boys mature slower than girls, for example). Furthermore, the rate of development within the same person can vary across different types of functioning (for example, a gifted child is advanced intellectually but may be behind developmental expectations for social and emotional areas of functioning). A slower rate of development in the intellectual, social, emotional,

or physical arena can foster anxiety within the child, making the separation more difficult.

Separation of children also take place when children of a divorced woman are accepted into a new family when she re marries, without any problem. But in some cases or, in most cases the wife leaves her children behind, to be looked after by her mate, or the children's maternal grandparents. Separating children from a parent or both parents can significantly affect their personality later in life (Nigeria Cultural Heritage 2009).

In the Hausa society for example, parents send their little children to distant cities to acquire Islamic education. These children are left in the care of adult men, which in most cases are not related to them, they are also responsible for teaching the children. Some of these children stay away from their parents for a long period of time, ranging from a year, two or more years. They experience a lot of hardships, like hunger, bullying, they lack basic hygiene; they equally suffer from loneliness that can lead to a number of anxious feelings.

Obi (2009) observed that in Igbo culture, the father has his crops to tend to, while his wives will have their own jobs, whether they will be tending the family garden, processing palm oil, or selling vegetables in the local market. The struggle the Ibo child faces during the course of his development, exposes him to frequent separation from the family, and in some cases, the child becomes permanently separated from his family, to live with a relative or a master elsewhere (usually in the cities).

In an average Nigerian family for example, children begin schooling at around three (3) years of age, which marks the beginning of leaving home for some hours. Some of these children find going to school each morning as amazingly pleasing, while others

find it seriously disgusting, challenging, and a means of cutting the tie between the child and his parents for the period he is away. Children that find going to school each morning as a challenge to their happiness usually show a lot of problems in the school, and the teacher needs to understand the peculiar needs of the child in order to adopt the best approach in helping the child.

There are also some problems that are related to separation anxiety like depression, which is a condition that is commonly associated with anxiety disorders. Developing social skills can also be negatively affected by separation anxiety. There is also academic performance problem associated with separation anxiety. Prevention can be enhanced through parent effectiveness training that emphasizes the child's positive and successful coping strategies when dealing with separation. Overly anxious parents may need to develop their own support mechanisms and systems to manage their feelings and avoid influencing their children negatively (PsychCentral.com).

The most effective treatments for separation anxiety involve parents, as well as school personnel when appropriate. Giving the child a sense of safety and security is key to successful treatment. Current treatment methods of separation anxiety combine some form of group or individual cognitive behavioural intervention. A number of treatment options include: Modeling, where Parents and Teachers can be helpful in modeling appropriate behaviours and coping mechanisms at home and at school. For example, parents can model being relaxed when saying goodbye to their children and other people.

Another strategy that could be adopted to help children with separation anxiety is Systematic desensitization, which is a behaviour modification technique in which a person is gradually exposed to an anxiety-provoking or fearful object or situation while

learning to be relaxed. A child with separation anxiety may be taught relaxation techniques for managing his/her anxiety, and, as a result, can spend longer periods of time at school without a caregiver present by teaching him/her coping starategy through relaxation.

Separation anxiety has a poorer prognosis in environments where threats of physical harm or separation actually exist. Existence of other conditions, such as autism, decreases the likelihood of a positive prognosis. Presence of separation anxiety in childhood is sometimes associated with early onset panic disorder in adults (Kruck 2012),

This research also looked into token economy as a treatment strategy that was used to help children with separation anxiety problem. It is one of the most commonly used behaviour management interventions, especially in settings for students who have learning or behavioural challenges.Within an educational setting, a token economy is a system for providing positive reinforcement to a child or children by giving them tokens for completing tasks or behaving in desired ways. Token economies are used as a method of strengthening behaviour, or increasing its frequency, because the tokens are a way of "paying" children for completing tasks and the children can then use these tokens to buy desired activities or items (Miltenberger, 2008). A token economy is a form of behaviour modification, designed to increase desirable behaviour and decrease undesirable behaviour with the use of tokens.

Some previous studies focused on solving other behavioural problems like the study conducted by Ventas, Higbee and Murdock (2001), who investigated the effectiveness of systematic desensitization for fear reduction and Waggy (2002) who investigated the effects of a token economy system in comparison to social praise on the

manifest behaviours of learning disabled students at an elementary school in West Virginia.

It is against this background that the researcher decided to focus on using systematic desensitization and token economy in addressing the problem of separation anxiety in our schools.

1.2 Statement of the Problem

It is a tradition that exists right from time immemorial, of a strong bond between mother and child, children are so much attached to their mothers than other people in the environment, in such a way that separation between the duo usually comes with a lot of difficulties that is manifested by the child in a number of disturbances-ranging from clinging, crying among others. Leaving home for the first time by the child, is usually accompanied by a lot of worries and anxiety, likewise when parents are leaving the child behind with a caregiver or a stranger to whom the parents have agreed to look after the child in their absence. A change of environment also brings about some discomforts to the child, which if not properly addressed, can affect the child's education in school.

The researcher noticed how some children are in the habit of displaying a lot of aggressive behaviours when leaving home for school, some of them will be fighting their younger ones, others will fight the parents, and become easily irritated for no just cause and some other ones will refuse to eat adequately when resumption date approaches; others will become withdrawn, and refuse to interact with friends and family members. The researcher also noticed how some children are frequently absent from school and pay multiple visits to medical doctors or paediatricians due to one problem or the other, while symptoms seem to appear only on school days and usually disappear as soon as the

parents decide the child will stay at home. Sometimes young children describe having nightmares about separation themes more often, some other children show extreme distress upon separation from parents while leaving for school. The result of such behaviours usually leads the child to experience a lot of worries that can lead to poor performance, reluctance to interact with other children, refusal to sleep alone, truancy, ill health, frequent disputes with school mates and authority, among others. In spite of all these, separation anxiety has seldom been studied, and children are not usually clinically assessed until it results in school refusal.

It is in view of these problems, that the study sought to find out the effects of systematic desensitization and token economy on separation anxiety among secondary school students in Zaria Metropolis, Nigeria.

1.3 Objectives of the Study

The study hopes to achieve the following objectives:

1. determine the effect of systematic desensitization technique on separation anxiety among junior secondary school students in Zaria Metropolis.
2. find out the effect of token economy technique on separation anxiety among junior secondary school students in Zaria Metropolis. .
3. determine the relative effects of systematic desensitization and token economy techniques on separation anxiety among junior secondary school students in Zaria Metropolis.
4. Examine the differential effects of systematic desensitization on separation anxiety of male and female students in junior secondary schools of Zaria Metropolis.

5. Assess the differential effects of token economy technique on separation anxiety of male and female students in junior secondary school of Zaria Metropolis.

1.4 Research Questions

In line with the specific objectives, the study hopes to answer the following questions:

1. What is the effect of systematic desensitization on separation anxiety of junior secondary schools students of Zaria Metropolis?
2. What is the effect of token economy on separation anxiety of junior secondary school students in Zaria Metropolis?
3. What is the relative effect of systematic desensitization and token economy technique on separation anxiety of juniour secondary school students in Zaria Metropolis?
4. What is the differential effect of systematic desensitization on separation anxiety of male and female students in junior secondary schools of Zaria Metropolis?
5. What is the differential effect of token economy on separation anxiety of male and female students in junior secondary schools of Zaria Metropolis?

1.5 Research Hypotheses

The hypotheses raised for the purpose of this study are as follows:

HOI: There is no significant effect of systematic desensitization on separation anxiety of junior secondary school students in Zaria Metropolis.

HO2: There is no significant effect of token economy on separation anxiety

of junior secondary school students with in Zaria Metropolis.

HO3: There is no significant differential effect of systematic desensitization and token economy technique on separation anxiety of junior secondary school students in Zaria Metropolis.

HO4: There is no significant differential effect of systematic desensitization on separation anxiety of male and female students in junior secondary school of Zaria Metropolis.

HO5: There is no significant differential effect of token economy on separation anxiety of male and female students in junior secondary school of Zaria Metropolis.

1.6 Basic Assumptions

The study assumes the followings:

1. That systematic desensitization may have significant effect on separation anxiety of junior secondary school students in Zaria Metropolis.
2. That token economy may have significant effect on separation anxiety of junior secondary school students in Zaria Metropolis.
3. That systematic desensitization and token economy technique may have significant differential effect on separation anxiety of junior secondary school students in Zaria Metropolis.
4. That significant difference may exist in the effect of systematic desensitization on separation anxiety of male and female students in junior secondary schools of Zaria Metropolis.

5. That significant difference may exist in the effect of token economy on separation anxiety of male and female students in junior secondary schools of Zaria Metropolis.

1.7 Significance of the Study

The findings of the study is significant to the followings:

a. Theory development.

b. Teachers.

c. Parents/Caregivers.

d. Reference material.

e. Students with separation anxiety.

a. Psychologists: It is believed that the findings of this study contributes to theory development in the area of behaviour management by Psychologists and counsellors, most importantly in Token Economy, Systematic Desensitization and Separation Anxiety, through strengthening the work of Skinner in the area of the use of Rewards to increase desired behaviour, and Wolpe, in his work on systematic desensitization in reducing fear towards objects, events, situations or place. Researchers can also expand on the findings of the study by further re-establishing new facts on the existing findings of this research (either by using a different population, or by building on the existing population), or by bridging the gap left in this study.

b. Teachers: It is also believed that the study would expose teachers to the concept of separation anxiety, and strengthen them with understanding and ability to distinguish separation anxiety from other behaviours and anxiety related problems, like panic disorder, generalized anxiety disorder, among other problems. Using the signs and symptoms of separation anxiety problems as listed in this work, secondary school

teachers will be able to identify children with separation anxiety, and liaise with psychologists or counsellors to help children so identified. Teachers can also learn the concepts of systematic desensitization and token economy strategies that could be employed by school administration, Paarent-Teachers' Associatio, to help children with separation anxiety overcome their problems.

c. **Parents/Caregivers:** The study would also expose parents and caregivers to the concept of separation anxiety problems and strategies that if adopted could be of great help to children with separation anxiety. Parents and caregivers can use the knowledge acquired from this study to help their children overcome their anxiety problems, through the use of friendly/subtle strategies when leaving home. Through this research work, parents/caregivers can learn to gradually expose their children to separation coping strategies, even before it comes. For example, parents can begin by leaving the child for some minutes, then hours. They can also take the child to spend some few hours with friends or relatives before the actual time of separation (example, when going to boarding house), or they can even use more friendly gestures when leaving the child.

d. **Researchers:** The study would serve as a reference material for further research in the fields of educational psychology, guidance and counseling, curriculum planning and other disciplines that deal with behavior problems. This research work can expose a researchers to the gap that needs to be studied, which can help the student with research topic. Students can also quote from the findings of the study when trying to establish a fact (reference material).

1.8 Scope and Delimitation of the Study

The study was carried out in two boarding secondary schools in Zaria Educational Zone of Kaduna State. The choice of students in juniour secondary schools for this study is due to the fact that separation anxiety usually disturbs children that leave home, parents, caregivers and siblings, children at this level go to boarding houses, as such, they face serious separation problems. Therefore, the study covers all students with separation anxiety in Zaria Metropolis but delimited to some selected students with separation anxiety from two boarding schools of Zaria Metropolis. The study focused on boarding secondary school students because they leave home, to stay in the hostel. The study also found out the effect of two (2) behaviour treatment techniques (systematic desensitization and token economy) on separation anxiety of junior secondary school students in Zaria Metroplis.

CHAPTER TWO

REVIEW OF RELATED LITERATURE

2.1 Introduction

This chapter clearly defined the concepts of separation anxiety, token economy, and systematic desensitization. Moving down, the chapter analysed some theoretical frame works associated with the study, such as: psychoanalytic, operant conditioning, systematic desensitization, attachment and social leaning theories. The chapter also reviewed some literatures related to the study.

2.2 Conceptual Review

For better understanding of this research work, the concepts of separation anxiety, token economy and systematic desensitization are discussed as follows:

2.2.1 Concept of Separation Anxiety

Anxiety is more than just feeling stressed or worried, stress and anxious feelings are common responses to a situation where a person feels under pressure, it usually passes once the stressful situation has passed, or 'stressor' is removed. It is when these anxious feelings do not subside, it is when they are ongoing and exist without any particular reason or cause, and separation anxiety is a serious condition that makes it hard for a person to cope with daily life. We all feel anxious from time to time, but for a person experiencing anxiety; these feelings cannot be easily controlled. Anxiety is a feeling of uneaseness, such as worry or fear.

But for some children, anxiety affects their behavior and thoughts on a daily basis, interfering with their school, home and social life. This is when you may need professional help to tackle it before it becomes a more serious issue. Everyone has

feelings of anxiety at some point in their life. For example, you may feel worried and anxious about sitting an exam or having a medical test or job interview. During times like these, feeling anxious can be perfectly normal. However, some people find it hard to control their worries. Their feelings of anxiety are more constant and can often affect their daily life. Anxiety is the main symptom of several conditions, including panic disorder, phobias, post-traumatic stress disorder and social anxiety disorder (social phobia).

A certain level of separation anxiety is an expected part of normal development experience among individuals, which can occur in varying degrees, depending on the disposition of the individual. Normal separation anxiety is typically first sighted around 8-10 months of age, when children are increasingly exploring their world but always like to return to their caregivers for love and security (schoolpsychiatry.org). Unlike the occasional, mild worries that children may feel at times of separation, separation anxiety can dramatically affect person's life by limiting the ability to engage in ordinary activities.

Separation anxiety in infants is a natural process in development that helps their survival. Infants who experience separation from a caregiver demonstrate some behavior characteristics like crying, chasing and calling. The goal of these tantrums is to end separation and permit a return to close proximity with the caregiver, as a result of this intimacy seeking behaviors, infants increase their life chances (Bowlby, 1969). The development of the infant's caregiver directed separation protest, and contact-seeking behavior coincides with the development of the infant's attachment to his or her major caregivers (Cassidy and Shaver, 1999). Therefore, the quality of an infant's attachment to

major caregivers does not influence the development of separation anxiety, but it may influence the infant's separation protest behaviors and the child's ability to cope during separations. Insecurely attached infants may have increased or decreased levels of separation protest (Sroufe, Carlson, Levy, and Egeland, 1999). Children's level of anxiety might be affected by the way in which they are attached to their caregivers. Ambivalently attached children were constantly afraid of being alone and in danger, because their caregivers were unreliable concerning their needs (Bowlby, 1973);

Separation Anxiety is a psychological condition in which an individual experiences excessive anxiety regarding separation from home or from people to whom the individual has strong emotional attachment (example, a parent, caregiver or siblings). According to Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), separation anxiety is a common anxiety disorder, occurring in youth younger than 18 years (persistent and lasting for at least 4 weeks), and in adults (typically requiring a duration of six months).

Separation anxiety is a normal stage of development that usually begins in childhood and is characterized by worrying out of proportion to the situation of temporarily leaving home or otherwise separating from loved ones. Approximately 4%-5% of children and adolescents suffer from separation anxiety problem (DSM-5). Separation anxiety refers typically to younger children who are extremely unwilling to separate from major attachment figures (for example, parents, grandparents, older siblings) or from home (DSM-IV 1994). The threat of having to separate from a caregiver often results in anxiety as well, such as when parents plan to go out for the evening and leave the child with a sitter.

Adults who are suffering from separation anxiety often place their focus on the health, wellbeing and safety of their children, significant people or another person with whom there is a strong attachment. Adults with separation anxiety may constantly check on the whereabouts of loved ones, be overly protective of children (regardless of the child's age), or refuse to be alone.

Children with separation anxiety on the other hand, have separation worries that are excessive and much greater than their peers. These worries can overwhelm a child, even when they involve brief separations, such as leaving to go to school, going to sleep, or staying behind at home when a parent runs an errand. The child's fears may appear to be irrational, such as the fear that the parent may suddenly die or become ill. Young people with separation anxiety often go to great extremes to avoid being apart from their home or caregivers. They may protest against leaving a parent's side, refuse to play with friends, or complain about physical illness at the time of separating. Frequently, a child tolerates separation from one parent more easily than separation from the other parent.

Even though there is no one generally accepted cause of separation anxiety, most psychologists believe that the development of this problem occurs when certain genetic, physiological, and environmental factors are working together, others believe that certain traumatic events can bring about separation anxiety, and some others explain change of environment as the cause of separation anxiety. Additionally, research obtained from DSM-5, has concluded that there are some additional causal factors that can make a person more susceptible to developing separation anxiety as follows:

a. **Genetic**: Research has found that 73% of individuals who meet diagnostic criteria for separation anxiety have a family history of this condition. Because of this link

between family members who suffer from the same problem, it can be deduced that separation anxiety can, in fact, be inherited. This case is especially true for individuals with a first-degree relative who have a history of this problem.

b. **Physiological**: As with other anxiety problems, those who are suffering from separation anxiety problem have been found to have certain chemical imbalances in their brains. Specifically, neurotransmitters that are responsible for regulating mood and impulses are often not regulated in the brains of these individuals and can lead to the onset of anxiety symptoms. When these chemicals are not balanced, a person's ability to respond to stress is hindered and can cause an exacerbated startle response to minor triggers or to perceived fear or danger.

c. **Environmental**: Experiencing an abrupt life stressor in which a person is separated from his or her parents, significant others, or other loved ones as a result can ultimately lead to the development of separation anxiety. Examples of life stressors that can trigger this form of anxiety include the unexpected death of loved one, experiencing a disaster in which one is separated from loved ones, and having a personal history of forced separation from primary caregivers during childhood. Lastly, it has been found that those with a history of codependent relationships that are romantic in nature can lead to the onset of symptoms if an individual is not able to adjust when he or she is not around his or her partner.

Other related anxiety problems can also be associated with panic attacks that can occur with comorbid panic disorder. Separation anxiety consists of persistent and excessive anxiety beyond what is expected for the child's developmental level related

to separation or impending separation from the attachment figure. When an adult/child is suffering from separation anxiety, it is common for that individual to also suffer from another condition.

The following disorders are known to occur alongside this form of anxiety:

i. **Specific Phobia:** Is a kind of anxiety problem that leads to an unreasonable or irrational fear related to exposure to specific objects or situation

ii. **Posttraumatic Stress Disorder:** Is a form of fear that engulfs an individual after witnessing or experiencing terrifying event.

iii. **Panic Disorder:** Being engulfed by sudden intense fear or anxiety and some physical symptoms based on a perceived threat rather than imminent danger.

iv. **Generalized Anxiety Disorder:** Is a profound, persistent anxiety that interferes with an individual daily activities.

v. **Social Anxiety Disorder:** This has to do with severe mental health condition that has to do with irrational anxiety associated with social interactions.

vi. **Agoraphobia:** Excessive fear of being in an open or crowded place, or a place where escape is difficult.

vii. **Obsessive-Compulsive Disorder:** Repeating certain behaviour over and over again due to excessive thoughts of incompletion or imperfection.

viii. Personality disorders: Is a mental disorder where one experiences rigid and unhealthy pattern of thinking, functioning and behaviour. it is a situation where one has trouble perceiving and relating to situations and people.

ix. **Depressive disorders:** also known simply as depression, is a mental disorder characterized by two or more weeks of low mood that is present across most

situations. It is often accompanied by low self-esteem, loss of interest in normally enjoyable activities, low energy, and pain without a clear cause.

x. **Bipolar disorder:** Previously known as manic depression, is a mental disorder that causes periods of depression and periods of abnormally elevated mood. The elevated mood is significant and is known as mania or hypomania, depending on its severity, or whether symptoms of psychosis are present.

Some of the signs and symptoms of separation anxiety may manifest duringchildhood, there are a number of signs that can infer that a child is suffering from separation anxiety as well. The following conditions should be taken into consideration when checking for signs and symptoms of anxiety, namely: behavioral, physical, cognitive and psychos7ocial symptoms, they are discussed as follows:

a. Behavioral symptoms

These are symptoms that has to do with the activities of the individual, such as: frequently checking up on the whereabouts of parents, significant people or other loved ones, refusing to leave home, missing classes, **s**ocial withdrawal or isolation, **r**efusing to sleep alone or when away from parents, significant others, or other loved ones, **a**voiding travel, **r**itualistic or repetitive behaviors, **c**yclical thinking, **p**acing, crying, clinging and restlessness.

b. **Physiological symptoms may include the followings**:

Physiological symptoms has to do with system reaction of the individual during the time of separation, like, labored breathing, headaches or migraine complain, stomachaches, nausea, vomiting, frequent urination due to pervasive nervousness, dizziness, muscle tension, disturbed sleep, increased heart rate,

appetite changes, profuse sweating.

c. Cognitive symptoms include the followings:

Cognitive symptoms has to do with the individual's thought and perception that can be seen in his nightmares, impaired memory, convulsions, difficulty making decisions, lack of concentration, inability to focus on tasks.

d. **Psychosocial symptoms include the followings:**

Guilty feelings, ongoing feelings of nervousness, agitation, elevated level of anxiety, intense and excessive fear, and irritability. But specific symptoms of separation anxiety may include three (3) or more of the followings:

a. Recurrent excessive distress when anticipating or experiencing separation from home or from major attachment figure.

b. Persistent and excessive worry about losing major attachment figure or about possible harm to them, such as illness, Injury, disaster or death.

c. Persistent and excessive worry about experiencing an untold event (eg, getting lost, being kidnapped, having accident, becoming ill) that causes separation from a major attachment figure.

d. Persistent reluctance or refusal to go out, away from home, to school, to work, or elsewhere because of fear of separation. and excessive fear of or reluctance about being alone or without major attachment figures at home or in other settings.

e. Persistent reluctance or refusal to sleep away from home or to go to sleep without being near major attachment figure.

f. Repeated nightmares involving the theme of separation.

g. Repeated complains of physical symptom (e.g. headaches, vomiting, stomachaches, nausea) when separation from major attachment figure is anticipated.

There are those factors that can put individual at risk of experiencing separation anxiety, which includes:

i. Being female.

ii. Having a family history of separation anxiety or other anxiety condition.

iii. Personal history of another mental health condition.

iv. Experiencing the loss of a loved one.

v. Experiencing an abrupt major life change in which one is separated from a loved one

vi. Being in an unhealthy, codependent, romantic relationship.

Diagnosing separation anxiety can be challenging because children with separation anxiety may have more than one anxiety problem. Children with separation anxiety frequently have physical complaints, which also may need to be medically evaluated. A trained clinician (such as a child psychiatrist, child psychologist or pediatric neurologist) should integrate information from home, school, and the clinical visit to make a diagnosis as follows:

At home, children with separation anxiety may experience a combination of the symptoms as listed below.

a. Consistent and extreme worry and fear when separating from home or primary caregiver. Children also may be extremely frightened and worried when they anticipate separation and may be unwilling to be alone.

b. Persistent worry and fear that something bad may happen to their parent or to themselves. They may worry about a parent becoming sick or getting hurt. They also may worry about getting lost if separated.

c. Refusal to attend school often develops, due to worries about separation.

d. Refusal or reluctance to participate in ordinary outings or activities, the child may not want to go out to dinner, meet friends to play, or engage in after- school programs.

e. Difficulty sleeping alone: Children may insist that a parent sleep with them or may insist on sleeping with the parent in the parent's bed.

f. Scary dreams about being separated.

g. Frequent physical complaints at times of separating: Children with separation anxiety often complain about stomachaches, headaches, or other physical discomforts when they know they will have to separate.

If left untreated, the condition may lead to considerable limitations in other areas of the child's life. Peer relationships, school functioning, and family functioning may suffer, or depression may develop. In some situations, if a child believes there is no way to reduce extreme anxiety, thoughts of self-harm or not wanting to be alive may develop.

However, a child or adolescent with separation anxiety may try to hide symptoms while at school. As a result, a child may appear to have more symptoms at home than at school. For other children, the symptoms are particularly evident at school because of the child's difficulty leaving a parent and the resulting impact on school attendance.

At school, a child with separation anxiety disorder may have a combination of the symptoms listed below:

i. Difficulty transitioning from home to school: Children may have great trouble separating from their parents in the morning: This may lead to late arrival times, long and tearful morning drop-offs, or tantrums at school.
ii. Refusal or reluctance to attend school: Anxiety associated with this disorder is powerful and may lead a child to insist on staying at home.
iii. Avoidance of activities with peers: Any additional time at school may be resisted.
iv. Low self-esteem in social situations and academic activities
v. Difficulty concentrating due to persistent worry, which may affect a variety of school activities, from following directions and completing assignments to paying attention.
vi. Other conditions, such as generalized anxiety disorder, panic disorder, phobias, or depression, which may also be present, compounding any learning challenges. Having one mental health condition does not "inoculate" the child from having other conditions as well.
vii. Learning disorders and cognitive problems which are often overlooked in this population. A child's difficulties or frustrations in school should not be presumed to be due entirely to the separation anxiety. If the child still has academic difficulty after symptoms are treated, an educational evaluation for learning disabilities should be considered. A child's repeated reluctance to attend school may be an indicator of an undiagnosed learning disability.

viii. Behavioral or cognitive effects from medication. If a child is receiving medication for symptoms, new mood changes or behaviors should be discussed with parents, as they can reflect medication side effects.

Other conditions, particularly other anxiety disorders, may look like separation anxiety. These conditions include specific phobias (anxiety triggered repeatedly by the same object or situation, such as spiders or flying), generalized anxiety disorder (extreme anxiety throughout the day regarding many matters), social phobia (anxiety triggered by social situations), and panic disorder (unpredictable panic attacks). The symptoms of mood disorders can also be similar to the symptoms of separation anxiety. Depression is also often found in these children. Frequent physical complaints such as stomach aches, headaches, nausea, or injury occur in children with separation anxiety. The clinician must determine whether these complaints warrant further medical investigation.

Children may have difficulty talking about the fears around separation. Phrasing questions with particular sensitivity and compassion may allow a more complete picture of symptoms to emerge. For example, to elicit information from a child, clinicians might ask, "What do you worry about when you go to bed alone?" Children may be unaware, or unwilling to admit that their behavior may indicate symptoms of a problem.

2.2.2 Concept of Token Economy

One of the most commonly used behaviour management interventions, especially in settings for students who have learning or behavioural challenges, is the token economy.Within an educational setting, a token economy is a system for

providing positive reinforcement to a child or children by giving them tokens for completing tasks or behaving in desired ways. Token economies are used as a method of strengthening behaviour, or increasing its frequency, because the tokens are a way of "paying" children for completing tasks and the children can then use these tokens to buy desired activities or items (Miltenberger, 2008). A token economy is a form of behaviour modification designed to increase desirable behaviour and decrease undesirable behaviour with the use of tokens.

A token economy involves awarding ("reinforcing" a student with) tokens, chips, stickers, check marks, points, stars, or other items/markings to students who demonstrate desired behaviours identified by the teacher. Students may periodically exchange the tokens for rewards, which are items or activities desirable to them. A token program is often compared to a national economic system in which we work for money, which has no value in and of itself ("secondary reinforce"), and later exchange it for items and activities that are valuable to us. Interestingly, 'tokens, in the form of clay coins first appeared in human history in transition from nomadic hunter-gather societies to agricultural societies, and the expansion from simple barter economies to more complex economies' (Hackenberg, 2009, and Schmandt-Besserant, 1992). The basic principle is that a child earns a certain number of tokens by engaging in desired behaviours (called "target behaviours") and can then exchange these tokens – effectively using them as payment – to gain access to backup reinforcers.

Token economies are often quite effective for students who are resistant to other types of motivational or behaviour management techniques. Other benefits

of this system are ease of administration, the use of immediate or frequent reinforcement (tokens) while teaching delayed gratification (holding tokens until trade-in time), lack of boredom or satiation for the student due to the availability of a variety of back-up reinforcers, and lack of competition between students as they compete only against themselves. When a token economy is used for one or a few students only, it is often arranged through the development of a contract. Over time, the tokens are periodically devalued so that students must perform at a higher level to earn the same value in back-up reinforcers. This stiffening of requirements promotes continual improvement in behaviour or performance by the students.

Token economies have great flexibility and utility; they have been shown in research studies to be effective among students with various kinds and severities of disabling conditions. Perhaps the reason for the effectiveness is that a token or check mark is visible evidence of success and progress, it also reminds the student to display proper behaviour, and assures that the teacher will notice appropriate behavior and interact with the student in a positive manner.

2.2.3 Token Economy as a Conditioned Reinforcement

The token economy is a form of "conditioned reinforcement" or "secondary reinforcement" (Malott & Trojan-Suarez, 2006). This is because the tokens are not naturally occurring reinforcers, like food or water could be classed as "unconditioned reinforcers" or "primary reinforcers" because they do not need to be paired with anything.

The money you earn by going to work is a form of conditioned reinforcement because the money itself is not naturally reinforcing. It is the fact that you can use this money to get desired items and activities like a house, food, cars or holidays. To expand a little more, imagine you go to work and get given some plastic tokens at the end of the day. It's unlikely that you're going to be in any way happy about this. However, if you were told that those tokens could be traded in for an extra day off work, all of a sudden those tokens will become something that you're going to want to get more of (well for most people anyway). In this case, the tokens become conditioned reinforcers because they have now been "paired" with the ability to get a day off work. In other words, getting tokens leads to getting a day off work while no tokens means no day off. In the case of school children, the tokens serve as a way of gaining access to preferred items and activities – therefore, getting tokens leads to getting activities and no tokens means no activities.

In Conditioned versus Generalised Conditioned for example, about trading tokens for a day off work, if the tokens could only be traded for a day off then these tokens would be termed "conditioned reinforcers". If the tokens could be traded for various different desired items and not just one specific thing then they would be termed "generalised conditioned reinforcers". The distinction here is about whether the tokens can be traded for only one item/privilege (conditioned reinforcers) or numerous items/privileges (generalised conditioned reinforcers). The money earned through employment is a form of generalised conditioned reinforcement because you can buy any number of things with it.

Tokens used within educational settings are typically “generalised conditioned reinforcers” as well, because they can be traded for a number of different items and activities, this is not always the case though. Sometimes a programme may be implemented where a specific type of token (e.g. red stars) can only be traded for specific activities/items (e.g. a special trip at the end of a school week).

In using token economies, it is important to note that, after a clear understanding of the concept of token economy, one should be able to study how it can be implemented for a successful achievement of the set objectives. The followings are guidelines for the implementation of token economy system:

1. Select the behaviours to be rewarded, the behaviours to be reinforced should be in concert with classroom rules and guidelines.
2. State the desired behaviours in specific and observable terms, if at all possible, phrase them in a positive manner. Be sure to tell the student what to do (the desired action), rather than what not to do (e.g., "Raise hand before talking" rather than "No speaking out"). Promote a replacement behaviour for the inappropriate action. That replacement behaviour should serve the same internal need and serve the same purpose as the present incorrect behaviour.
3. Decide how you will measure the behaviours (e.g. percentage correct, number of minutes engaged in proper behaviour, number of times student displays appropriate behaviour).
4. Where to monitor the behaviours (e.g., only in the classroom or also in the lunchroom and on the bus).

5. Select the initial reinforcer, use a reinforcer that is easy to administer and convenient to store. Devise a token/item/marking that will inhibit theft or counterfeiting.
6. Select your back-up reinforcers, involve your students in the selection to insure that the reinforcers will be perceived as being valuable. (For instance, have the students list things that they would work to obtain, or complete one of the many published reinforcement inventories, or set out possible reinforcers and observe which ones are selected most often.) Be sure that the reinforcers are appropriate. Consider educational value, cost, possible misuse, or danger involved.
7. Place a price (in tokens) on your back-up reinforcers. Record the actual price of any purchased items. Higher priced items will demand more tokens for trade-in. Place a value on back-up reinforcers (the rewards) that are activity-oriented such as free time, listening to music, or painting. Develop a wall chart that lists the number of tokens needed to purchase each back-up reinforcer.
8. Place a value on the tokens; give the tokens a value that is worth more now than in the future. As students begin to function more appropriately, tokens will have to be devalued to motivate the kids to improve continually. Next, develop a wall chart that lists the number of tokens to be given for each desired behaviour, and decide whether inappropriate behaviour will result only in a withholding of tokens or whether you will place a fine ("response cost") and take away tokens for that misconduct. If the latter is the case, make

a wall chart that indicates the amount to be fined for each mis-behaviour. **Before deciding on fines for a youngster who fails to demonstrate the required behaviour, consider whether it seems fair to do so, and whether you are able to handle protests by students.** Consider too whether you would consider it fair if the following were the case: You were absent from your job, claiming a "sick day". It was found out that you actually went on a ski trip on that day of your absence. The school district then decides to not only withhold reinforcement (dock you a day's pay) for the day you were skiing, but also take away your pay from a day where you were present in your classroom. Now, is it fair to not only withhold a token from a student, but also take away a token that was earned earlier?

9. Finalize the details by developing your own monitoring sheet to keep track of awards and fines, and deciding how often and when tokens can be exchanged for back-up reinforcers (e.g., at the end of each day, at the end of each week). Develop storage containers/procedures for yourself and the students and devise a method for displaying the back-up reinforcers.
10. Start your program. Have the materials ready to show to students as you explain the program in language that they can understand. Make your presentation very positive and upbeat. Post the wall charts or desk cards and review them periodically. Implement the program, providing the tokens as soon as they are earned. Add to your back-up reinforcer menu as necessary to maintain student motivation to strive for success.

11. Periodically modify your system to wean your students from the token economy. This change usually involves requiring more positive behaviour for a longer period of time in order to obtain a check mark or a token. **Be sure to tell the student that the change is because you know that she is capable of so much more, and should be proud of his or her progress** (Just as you are proud of him/her)**. If you meet with strong resistence, or the student refuses to work for less, consider changing the "level" of reinforce.** (McIntyre, 2012).

However, not every item can be considered as token, because the term "token" suggests something physical that you can hold in your hand. Some token economies do use physical objects such as poker chips, printed cards with smiley faces, fake money or even marbles. However, not all tokens are like this, some might just use a tick on a sheet of paper, a hole punched in a card or a stamp put onto a card (Foxx, 1998). These "non-physical" tokens are sometimes called "points" (Miltenberger, 2008).

In Kazdin and Bootzin's (1972, p. 343-344) review of token economies, they cite Ayllon and Azrin (1968) regarding a number of advantages in using tangible items for tokens. These include:

a. The number of tokens can bear a simple quantitative relation to the amount of reinforcement.

b. The tokens are portable and can be in the subject's possession even when he is in a situation far removed from that in which the tokens were earned.

c. No maximum exists in the number of tokens a subject may possess.

d. Tokens can be used directly to operate devices for the automatic delivery of reinforcers.

e. Tokens are durable and can be continuously present during the delay.

f. The physical characteristics of the tokens can be easily standardised.

g. The tokens can be made fairly indestructible so they will not deteriorate during the delay.

h. The tokens can be made unique and non duplicable so that the experimenter can be assured that they are received only in the authorised manner.

In addition, tokens provide a visible record of improvement. This may facilitate social reinforcement from staff members, as well as self-reinforcement.

Another aspect of token economy that needs to be understood is: One-to-One Token Economy. For example:

Tarbox, Ghezzi and Wilson (2006) investigated the use of token economies in an effort to increase the eye contact of a 5 year old boy called Adam who was diagnosed with autism. We are going to go through one of the economies used in the Tarbox and Wilson's study and use Miltenberger's (2008) seven components to describe it.

ii. Target Behaviour: attending to his tutor before the delivery of an instruction; with "attending" defined as making eye contact with the tutor for at least 3 seconds.

Tokens to be used: laminated "star stickers" placed on a "token board".

b. Backup Reinforcers: a 90 second break from academic tasks where he could play with preferred toys of his choice.

ii. Reinforcement Schedule: Adam received 1 token every single time he engaged in the target behaviour (made eye contact for 3 seconds).

iii. Rate of Token Exchange for Reinforcers: a total of 10 tokens were required before Adam could earn a backup reinforcer.

iv. Time and Place to Exchange Tokens for Backup Reinforcers: this was done immediately after 10 tokens had been earned. It was completed at the classroom desk.

Response Cost: Cooper, Heron and Heward (2007) make it clear that a response cost should be saved for those major undesirable behaviours that call attention to themselves and need to be suppressed quickly. The teacher's or parent's primary attention should always be focused on positive behaviour to reinforce; response cost should be a last resort and should be combined with other procedures to build adaptive behaviours.

A response cost is a penalty or fine where tokens are taken away from the child for breaking rules or engaging in inappropriate behaviours. Much like breaking a law such as driving over the speed limit and being fined money for it by the police.

It's important that children are aware of the rules before any response cost would be used so it's crystal clear what is a rule and what is a broken rule. Additionally, a response cost should never be used if a child does not already have tokens. Never put a child in "token debt" (Cooper et al. 2007).

Some benefits of token economy according to Kazdin and Bootzin (1972), the use of tokens as a method of delivering reinforcement through the child

exchanging them for back-up reinforcers has a number of advantages, which may include:

a. bridge the delay between the target response and back-up reinforcement.

b. Permit the reinforcement of a response at any time.

c. May be used to maintain performance over extended periods of time when the back-up reinforcer cannot be parcelled out.

d. Allow sequences of responses to be reinforced without interruption.

e. Maintain their reinforcing properties because of their relative independence of deprivation states.

f. Is less subject to satiation effects.

g. Provide the same reinforcement for individuals who have different preferences in back-up reinforcers.

h. May take on greater incentive value than a single primary reinforcer.

Additionally, Miltenberger (2008) highlights how positive reinforcement, via the tokens, can be provided immediately after the target behaviour occurs. A token economy is structured; therefore there will be consistency with how positive reinforcement is delivered for target behaviours.

i.

ii. A child's future planning skills can be developed because different amounts of tokens need to be earned for different types of backup reinforcers and the tokens must be kept until enough has been earned. If an economy is being implemented at a large scale, across a group of individuals and settings, it may be time consuming and take a lot of effort to organise and train staff to correctly

implement it. Depending on the preferred backup reinforcers, it may be costly to purchase them. It's pertinent to check that 'the expected benefits (improvement in behaviour) justify the time, effort and cost of conducting the pr0gramme' (Miltenberger, 2008).

2.3 Systematic Desensitization

This is a technique used to treat phobias and other extreme or erroneous fears based on principles of behaviour modification. Systematic desensitization is a type of behavioural therapy based on the principle of classical conditioning. It was developed by Wolpe during the 1950s. This therapy aims to remove the fear response of a phobia, and substitute a relaxation response to the conditional stimulus gradually using counter conditioning. Systematic desensitization is a behavioral technique whereby a person is gradually exposed to an anxiety-producing object, event, or place while being engaged in some type of relaxation at the same time in order to reduce the symptoms of anxiety (Gilston, 2003).

Systematic desensitization is a therapeutic intervention that reduces the learned link between anxiety and objects or situations that are typically fear-producing. The aim of systematic desensitization is to reduce or eliminate fears or phobias that sufferers find distressing or that impair their ability to manage daily life. By substituting a new response to a feared situation — a trained contradictory response of relaxation which is irreconcilable with an anxious response — phobic reactions are diminished or eradicated.

This behaviuor modification technique, which is founded on the principles of classical conditioning, was developed by Joseph Wolpe in the 1950s. Some of

the most common fears treated with desensitization include fear of public speaking, fear of flying, stage fright, elevator phobias, driving phobias and animal phobias. Relaxation responses are trained to occur through progressive relaxation training, a technique initially perfected by Edmund Jacobson during in 1930.

Systematic desensitization is used to help the client cope with phobias and other fears, and to induce relaxation. In progressive relaxation, one first tightens and then relaxes various muscle groups in the body. During the alternating clenching and relaxing, the client should be focusing on the contrast between the initial tension and the subsequent feelings of relaxation and softening that develop once the tightened muscles are released. After discovering how muscles feel when they are deeply relaxed, repeated practice enables a person to recreate the relaxed sensation intentionally in a variety of situations.

After learning relaxation skills, the client and therapist create an "anxiety hierarchy." The hierarchy is a catalogue of anxiety-provoking situations or stimuli arranged in order from least to most distressing. For a person who is frightened by snakes, the anxiety hierarchy might start with seeing a picture of a snake, eventually move to viewing a caged snake from a distance, and culminate in actually handling a snake. With the therapist's support and assistance, the client proceeds through the anxiety hierarchy, responding to the presentation of each fearful image or act by producing the state of relaxation. The person undergoing treatment stays with each step until a relaxed state is reliably produced when faced with each item. As tolerance develops for each identified item in the series, the client moves on to the next. In facing more menacing situations progressively,

and developing a consistent pairing of relaxation with the feared object, relaxation rather than anxiety becomes associated with the source of their anxiety. Thus, a gradual desensitization occurs, with relaxation replacing alarm. Several means of confronting the feared situations can be used. In the pre-computer era, the exposure occurred either through imagination and visualization (imagining a plane flight) or through actual real-life — or so-called in vivo— encounters with the feared situation (going on an actual plane flight). More recently, during the 1990s, virtual reality or computer simulated exposure has come to be utilized in lieu of in vivo exposure. Research findings indicate that mental imagery is the least effective means of exposure; in vivo and virtual reality exposure appears to be indistinguishable in terms of effectiveness. As earlier mentioned, exposure can be done in two ways:

In vitro – the client imagines exposure to the phobic stimulus.

In vivo – the client is actually exposed to the phobic stimulus.

For example: Wolpe (1964) successfully used the method to treat an 18 year old male with a severe handwashing compulsion. The disorder involved a fear of contaminating others with urine. After urinating, the patient felt compelled to spend 45 minutes cleaning his genitalia, two hours washing his hands, and four hours showering.

Treatment involved placing the young man in a state of relaxation and then asking him to imagine low anxiety scenes (such as an unknown man touching a trough of water containing one drop of urine). As the patient's anxiety gradually dissipated, Wolpe gradually increased the imaginary concentration of urine. In

addition, a real bottle of urine was presented at a distance and moved closer to the patient in gradual steps. Finally Wolpe could apply drops of diluted urine to the back of the patient's hand without evoking anxiety. A follow-up 4 years later revealed complete remission of the compulsive behaviors. There are three phases to the treatment, which are as follows:

1. First the client forms a hierarchy of fear, involving the conditioned stimulus (e.g. a spider), that are ranked from least fearful to most fearful.
2. Next, the patient is also given training in relaxation techniques. For example, control over breathing, muscle detensioning or meditation. Wolpe taught his patients relaxation responses because it is not possible to be both relaxed and anxious at the same time.
3. Finally, the client progresses along the fear hierarchy while simultaneously using relaxation techniques. The client works their way up starting at the least unpleasant and practicing their relaxation technique as they go. When they feel comfortable with this (they are no longer afraid) they move on to the next stage in the hierarchy.

The client repeatedly imagines (or is confronted by) this situation until it fails to evoke any anxiety at all, indicating that the therapy has been successful. This process is repeated while working through all of the situations in the anxiety hierarchy until the most anxiety-provoking.

Thus, for example, a spider phobic might regard one small, stationary spider 5 meters away as only modestly threatening, but a large, rapidly moving

spider 1 meter away as highly threatening. The client reaches a state of deep relaxation, and is then asked to imagine (or is confronted by) the least threatening situation in the anxiety hierarchy.

The number of sessions required depends on the severity of the phobia. Usually 4-6 sessions, up to 12 for a severe phobia. The therapy is complete once the agreed therapeutic goals are met (not necessarily when the person's fears have been completely removed), (SimplyPsychology.com). It is worthy of mentioning that, because of the potential for extreme panic reactions to occur, which can increase the phobia, this technique should only be conducted by a well-qualified, trained professional. Also, the relaxation response should be thoroughly learned before confronting the anxiety-provoking hierarchy. Desensitization is an effective form of therapy; Individuals who have a positive response are enabled to resume daily activities that were previously avoided. The majority of persons undergoing this treatment show symptom reduction. (Encyclopedia of Mental Disorders). But some of the weaknesses of systematic desensitization as highlighted by Mycleod (2008), includes the following:

a. It relies on the client's ability to be able to imagine the fearful situation.
b. Some people cannot create a vivid image and thus systematic desensitization is not always effective (there are individual differences).
c. Studies have shown that neither relaxation nor hierarchies are necessary, and that the important factor is just exposure to the feared object or situation.
d. Systematic desensitization is highly effective where the problem is a learned anxiety of specific objects/situations (e.g. phobias).

e. Systematic desensitization is a slow process. Although, research suggests that the longer the technique takes the more effective it is.

f. Systematic desensitization is not effective in treating serious mental disorders like depression and schizophrenia.

g. It only treats the symptoms of the problem, not the underlying cause.

2.4 Theoretical Framework

As part of the demands in research work, relevant theories are revised in order to provide more direction to research work, and to further get supporting evidences to strengthen the findings of the researcher. It is in view of the above, that some theories were discussed to further shed more light on the topic under study; the followings are the theories: Psychoanalysis, Classical conditioning, Attachment and Psychosocial. The overview is explained in the diagram that follows:

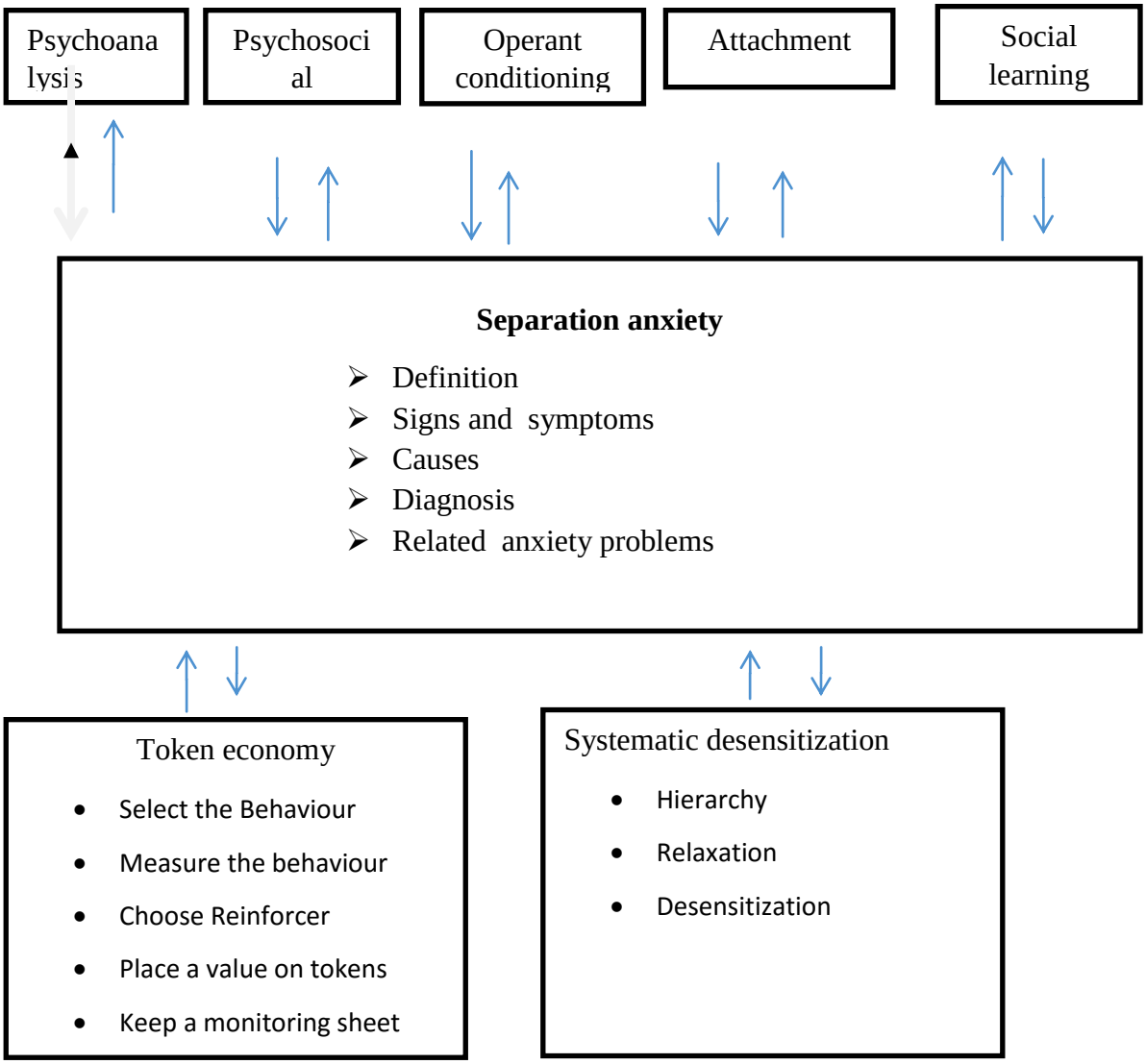


Figure 1.1: Relationship between Separation Anxiety, Systematic Desensitization and Token Economy

2.4.1 Freud's Psychoanalytic Theory

In Freudian psychology, psychosexual development is a central element of the psychoanalytic sexual drive theory, that human beings, from birth, possess an instinctual libido (sexual energy) that develops in five stages. Each stage – the oral, the anal, the phallic, the latent, and the genital – is characterized by the erogenous zone that is the source of the libidinal drive. Freud proposed that if the

child experienced sexual frustration in relation to any psychosexual developmental stage, he or she would experience anxiety that would persist into adulthood as a neurosis, a functional mental disorder. Freud was also one of the first writers to argue that anxiety was a critical component of neurosis; he recognised the importance of anxiety, he distinguished between Objective and Neurotic Anxiety. By objective, Freud meant the reaction we have to external danger or expected injury. Neurotic anxiety was viewed as free-floating and something likely to hinder or even paralyze actions (Kennard 2008). Freud also wrote about a form of anxiety that was not groundless but was fairly focused on one or more objects or situations.

Freud continued to introduce new ideas about his subject as his psychoanalytic theories evolved. The focus on anxiety became central to his theory as far as development and functioning of the mind was concerned. In the early days of his work on anxiety, he referred to it as toxic theory; he believed that anxiety arises from a transformation of the accumulated tension. His earliest theory of anxiety dates back to the mid-1890s, even before he started using the word Psychoanalysis, during that early stage, he didn't consider anxiety to be related to thoughts or ideas, but he did observe that it was closely linked to sexuality, defining it as sexual excitation that has been transformed. At this time, Freud thought of this sexual excitation (or 'libido' as he called it) as a hypothetical substance that we might compare to something like testosterone. His argument was that when the path to satisfaction is blocked (for instance, in coitus interruptus (when sexual intercourse ends before ejaculation), the resulting build-

up of unsatisfied libido takes on a toxic character, finding an outlet in anxiety. As he would later put it as Neurotic Anxiety that arises out of libido.

He called the second phase Anxiety as a Result of Repression which arises out of libido by the process of repression. Freud's views on anxiety shifted as he developed his theory of repression, which he described as the ideas connected to sexual urges that are repelled from consciousness when they come into conflict with civilised-social norms. In other words, Freud claimed that the process of becoming social beings requires us to give up some of our sexual impulses. His earlier toxic theory of anxiety as transformed sexual excitation was preserved, but with an important modification, while his earlier views assumed the cause of anxiety to be external blocks to sexual release, the theory of repression shifted the emphasis to internal ones or psychological inhibitions.

The final phase was called Anxiety as a Signal where ego is regarded as the actual seat of anxiety. In the late 1920s, Freud began to introduce a new and very different theory of anxiety, eventually abandoning his earlier view of anxiety as transformed libido. He made an important distinction between a more primary automatic anxiety, triggered by a traumatic situation in which the helpless ego is overwhelmed, and signal anxiety, which can be activated in the ego response to situations of danger as a kind of warning that a traumatic situation is imminent, so that defensive measures can be put into place to avoid it.

These danger situations tend to gravitate around the threats that arise from the prospect of being helpless and at the mercy of others: threats of losing a loved

one, of losing another's love, or of being attacked. Ultimately, Freud claimed, these threats are manifestations of a more fundamental threat, the threat of castration.

This new perspective led Freud to a complete reversal of his former position, whereas before he had posited anxiety as a result of repression, he now understood it as preceding repression and giving rise to it. This final phase gives anxiety a much more central place in the workings of the psyche, instead of being a kind of side-effect of repression, it was now possible to think of the very contours of the mind itself, with its defences and symptoms, as above all a means of avoiding anxiety.

Today, we think of these as phobias. Freud reasoned that anxiety was largely sexual in origin; sexual thoughts and impulses were repressed and were then transformed into some symbolic representations. He considered the root of problems to exist at early stages of development, and that is to say, parental love, care and attention have greater effect on individual's personaliy, thoughts and actions. He hinged on the notion that unconscious desires would manifest themselves in some thoughts or responses that can bring about anxiety (Sigmund_Freud.org).

Freud believed that separation was the result of the transformation into anxiety of sexual excitation of somatic origin which could not be discharged. This was known as the transformed libido theory. Some psychoanalysts believed that separation anxiety must be understood as resulting from the unconscious internal conflicts inherent in the individuation process and gradual attainment of

autonomy. From this point of view, the fear of losing one's mother by separation is not regarded as resulting from real danger. However, Freud considers the primary experience of separation from protecting others as the prototype situation of anxiety and compares the situation generating fear to separation experiences. For him, anxiety originates from two factors: the physiological fact is initiated at the time of birth but the primary traumatic situation is the separation from mother (Blanding 1994)..

In another development, Freud's earliest theory of anxiety goes back to the mid-1890s, predating even his use of the term 'psychoanalysis' itself. Freud paid great attention on anxiety throughout his professional life, his thinking about anxiety changed significantly as his psychoanalytic theories evolved. Towards the end of his life, anxiety had become central to his theory of the development and functioning of the mind. He further explained anxiety in three (3) stages as follows:

i. First phase: the toxic theory

At this stage, Freud observed that *a*nxiety arises from a transformation of the accumulated tension, he also didn't consider anxiety to be connected to thoughts or ideas, but he did observe that it was closely related to sexuality, and he explained that aspect as sexual excitation that has been transformed. Freud introduced what he referred to as libido, which he explained as sexual excitation that can be understood as a hypothetical substance that we might compare to something like testosterone.

Freud argued that when the route to satisfaction is blocked (for instance, in coitus interruptus, that is, when sexual intercourse ends before ejaculation), it will result to build-up of unsatisfied libido which takes on a toxic character, that will find an outlet in anxiety. As he later put it: "neurotic anxiety which arises out of libido, and is thus related to it in the same kind of way as vinegar is to wine."

ii Second Phase: Anxiety as a Result of Repression

To this end, Freud's views on anxiety shifted as he developed his theory of repression, which describes how the ideas relatedted to sexual urges are repelled from consciousness when they come into conflict with 'civilised' social norms. In other words, Freud claimed that the process of becoming social beings requires us to give up some of our sexual impulses. His earlier 'toxic theory' of anxiety as transformed sexual excitation was preserved, but with an important modification: while his earlier views assumed the cause of anxiety to be external blocks to sexual release, the theory of repression shifted the emphasis to internal ones or psychological inhibitions.

iii Final Phase: Anxiety as a Signal

Freud began to introduce a new and very different theory of anxiety in the late 1920s, which eventually made him abandon his earlier view of anxiety as transformed libido. He made an important distinction between a more primary automatic anxiety, triggered by a traumatic situation in which the helpless ego is overwhelmed, and signal anxiety, which can be activated in the ego response to

situations of danger as a kind of warning that a traumatic situation is imminent, so that defensive measures can be put into place to avoid it. These danger situations tend to gravitate around the threats that arise from the prospect of being helpless and at the mercy of others, like threats of losing a loved one, of losing another's love, or of being attacked. Ultimately, Freud claimed, these threats are manifestations of a more fundamental threat, the threat of castration.

This new perspective led Freud to a complete reversal of his former position: whereas before he had posited anxiety as a *result* of repression, he now understood it as preceding repression and giving rise to it. This final phase gives anxiety a much more central place in the workings of the psyche: instead of being a kind of side-effect of repression, it was now possible to think of the very contours of the mind itself, with its defences and symptoms, as above all a means of avoiding anxiety.

In another explanation, Psychoanalytic theory probably developed from a case study involving the fear of horses by a five year old boy known as little Hans. Freud actually only met the little boy once, but the development of concepts such as the Oedipus complex, repression and castration anxiety were felt to be substantiated through the experiences of little Hans, as described in an ongoing correspondence by his father with Freud. Fear of horses was interpreted as fear of the father and the anticipation of punishment, which was likely to be castration. Freud argued that the horse symbolised the little boys Oedipus complex, that is, his sexual desire for his mother and the fear of jealous retribution

from his father. It is perhaps worth noting that little Hans said that his fear of horses started when he saw a horse collapse in the street. His fear began immediately afterwards and was confirmed by both his mother and father.

Klein (2017) observed that, anxiety as the core of the psychoanalytic theory of affects (feelings), and from the beginning of psychoanalytic thought, has been recognized as central to an understanding of mental crisis (for it is through bad feelings that crises are experienced). In his early work, Freud as a psychiatrist, in keeping with his early discharge model of mental function, considered anxiety to be a "toxic transformation" of undischarged libido. This failure of discharge could either be physiological ("realistic"), as in coitus interruptus or other incomplete or unsatisfactory sexual practices, resulting in "actual neuroses" or "anxiety neuroses"; or it could arise from repression (or its failure), as a symptom of the continued pressure of unacceptable desires, which led to the "psychoneuroses"—hysterias and obsessions.

In 1926 Freud radically revised his ideas about anxiety, abandoning the distinction between neurotic and realistic anxiety, and the claim that repression caused anxiety. In this new theory, Freud distinguished two types of anxiety, a traumatic, reality-oriented "automatic" anxiety in which the system was overwhelmed, and a secondary, "neurotic" anxiety in which reprisals of these situations were anticipated, thus setting in motion defensive processes. "Automatic anxiety" was an affective reaction to the helplessness experienced during a traumatic experience. The prototype for this experience lay in the

helplessness of the infant during and after birth, in which the danger proceeded from outside, and flooded a psychic system essentially unmediated by the (as yet unformed) ego.

The second form of anxiety originated within the psychical system and was mediated by the ego. This "signal anxiety" presaged the emergence of a new "danger situation" that would be a repetition of one of several earlier, "traumatic states." These states, whose prototype lay in birth, corresponded to the central preoccupations of different developmental levels, as the infant's needs become progressively abstracted from the original situation of immediate sensory overload to more sophisticated forms of need regulation capable of synthesizing the many elements facing it (from the reality and pleasure principles and the object world). These moments: loss of the object, loss of the object's love, the threat of castration, and the fear of punishment by the internalized objects of the superego, which were experienced serially during the developmental process, could re-emerge at any time in a person's subsequent adult life, typically brought on by some conflation of reality and intra psychic conflict, as a new edition of anxiety.

This new way of conceptualizing anxiety was an outgrowth of Freud's late revisions of his theory with the structural theory and his formulation of the mediating agency of the ego, and it had the effect of shifting clinical work on anxiety into the realm of the ego. The correlation of the dangerous situations with developmental stages also suggested a diagnostic aspect to anxiety, with the

earlier types of anxiety indicating earlier fixations. In the work of later theorists, the presence of the earliest anxieties in clinical work were thought to be indicative of pre-Oedipal disturbances in development, and of corresponding structural deficits in the ego.

Despite his later formulations, Freud never explicitly abandoned his first idea of anxiety, and the two theories continued to coexist uneasily in Freudian metapsychology long after Freud's death.

Freud also focused his analysis on individual's early life experiences, which to him, holds greater influence on his behaviour later in life. In Freud's view, human is driven towards tension reduction, in order to reduce feelings of anxiety. Anxiety to Freud, is an aversive inner state that people seek to avoid or escape. The interest in separation anxiety is nowadays increasing, because its appearance during childhood may predispose to the occurrence of anxiety problems (such as panic and agoraphobia) and major depression into adulthood. Psychoanalytic theories differ on the nature of separation anxiety and its place in child development. For some authors, separation anxiety must be understood as resulting from the unconscious internal conflicts inherent in the individuation process and gradual attainment of autonomy. From this point of view, the fear of loss of mother by separation is not regarded as resulting from a real danger. However, Freud considers the primary experience of separation from protecting mother as the prototype situation of anxiety and compares the situations generating fear to separation experiences. For him, anxiety originates from two

factors: the physiological fact is initiated at the time of birth but the primary traumatic situation is the separation from mother. This point of view may be compared with behavioural theories. Behavioural theories suggest that separation anxiety may be conditioned or learned from innate fears. In Freud's theory, the primary situation of anxiety resulting from the separation from mother plays a role comparable to innate fears. Grappling with the problem of separation anxiety, Bowlby emphasizes then the importance of the child's attachment to one person (mother or primary caregiver) and the fact that this attachment is instinctive. This point of view, based on the watch of infants, is akin to ethological theories on behaviour of non human primates (Blandin, Parquet, Bailly, 1994)

In his view, humans seek to reduce anxiety through defense mechanisms. Defense Mechanisms can be psychologically healthy or maladaptive, but tension reduction is the overall goal in both cases.

A comprehensive list of Defense Mechanisms was developed by Anna Freud, Sigmund's daughter. Anna remained with her Father throughout his life, never marrying. In Freudian terms, she remained trapped in her Oedipus complex, never giving up her longing to possess her father sexually. However, because of a strong ego and super ego, this Id based desires were sublimated into psychological creativity which advanced Freudian theory, her father's greatest love.

Freud specified three major types of anxiety:

1. Reality Anxiety: the most basic form, rooted in reality, like fear of a dog bite, fear arising from an impending accident, (Ego Based Anxiety). Most Common Tension Reduction Method: Removing oneself from the harmful situation.
2. Neurotic Anxiety: Anxiety which arises from an unconscious fear that the libidinal impulses of the Id will take control at an in opportuned time. This type of anxiety is driven by a fear of punishment that will result from expressing the Id's desires without proper sublimation.
3. Moral Anxiety: Anxiety which results from fear of violating moral or societal codes, moral anxiety appears as guilt or shame. In this conception of Anxiety, we can see why Freud concentrated on strengthening the Ego through psychoanalysis.

Defense Mechanisms

When some type of anxiety occurs, the mind responds in two ways: First, problem solving efforts increases, and Secondly, defense mechanisms are triggered. These are tactics which the Ego develops to help deal with the Id and the Super Ego. All Defense Mechanisms share two common properties: They can operate unconsciously and they can distort, transform, or falsify reality in some ways. The changing of perceived reality allows for a lessening of anxiety, reducing the psychological tension felt by an individual.

Types of Defense Mechanisms:

a. Repression: The most basic defense mechanism sometimes referred to as

defensiveness can be conscious but is most commonly unconscious. Some of the advantages of repression may include:

i. Can prevent inappropriate Id impulses from becoming behaviors.Can prevent unpleasant thoughts from becoming conscious.

ii. Can prevent memories of things we have done wrong from resurfacing.

Repression does not have to be total, partial memories where only the single piece of damaging information is "forgotten" is common. What an individual represses depends upon cultural expectations and the particular development of an individual's super-ego.

b. Denial

When people are overwhelmed by the anxiety present within a situation, they can engage an even more severe form of memory repression: In denial, the individual denies that the threatening event even took place. For example: in war, a mother receives word that her Son has been killed, and yet refuses to believe it, still setting the table for him, keeping his room and clothes current.

At school, a student seeing a grade of "C" next to their name, and automatically assuming the professor made a grading error. Alcoholics and other Substance Abusers who refuse to admit they have a problem, despite it being very apparent to everyone around them.

Denial becomes more difficult with age, as the ego matures and understands more about the "objective reality" it must operate within. People engaging in Denial can pay a high cost is terms of cathected psychic energy

which is used to maintain the denial state. Repression and Denial are the two main defense mechanisms which everybody uses.

c. Projection

In projection, anxiety is reduced by claiming another person actually has the unpleasant thoughts that you are thinking. You are attributing your own repressed thoughts to someone else.

For example, let's say that you do not like someone. Your mother and father always told you to treat other people well, and to be friendly to everyone. These thoughts from your parents become embedded in your super ego. You discover that you do not like this person, if you allow this thought to consciously surface, you will experience moral anxiety in terms of guilt feelings, because this conscious thought goes against the moral prohibitions of your super ego. So, instead of consciously thinking the anxiety provoking thought "I do not like this person", this defense mechanism allows for the non-anxiety provoking thought: "This person does not like me"

d. Rationalization

This is a post-hoc (after the fact) defense mechanism, rationalization allows to find logical reasons for inexcusable actions. For Example: Cheating on Taxes- Possible Rationalization: It is better that I hold onto this money or the government will spend it on weapons of mass destruction.

Fail to get into Medical school or law school: Possible Rationalization: I didn't want to pursue that career, anyways. Rationalization helps to protect our sense of self-esteem. Rationalization is closely tied to the Self-serving bias,

which is the tendency to interpret success as inwardly achieved and to ascribe failure to outside factors.

e. Intellectualization

Thinking about events in cold, hard, rational terms, separating oneself from the emotional content of an event, focusing instead on the facts. Intellectualization protects against anxiety by repressing the emotions connected with an event. For example, a wife who learns her husband is dying tries to learn all she can about the disease, prognosis, and treatment options. By doing this she can help repress the emotional onslaught of feelings of loss and anger which can accompany the death of a loved one.

Freud believed that memories could have both conscious and unconscious, and that intellectualization allows for the conscious analysis of non-anxiety provoking information about an event.

f. Regression

Because of partial fixations in any of the psychosexual stages of development, regression can occur when an individual is faced with high levels of stress in their life. Regression is the giving up of mature problem solving methods in favor of childlike approaches to fixing problems.

Someone with an oral fixation may increase their cigarette smoking of lollipop licking behavior when stressed at work. Another person who is anal retentive might become more detail oriented and fastidiously neater as a result of anxiety. This regression represents a way of relating to the world that was

formerly effective. Regression is a way to try to recapture some childhood satisfaction.

g. Displacement

Displacement is the shifting of intended targets, especially when the initial target is threatening. The classic use of displacement is in the understanding of displaced aggression. An individual is "dressed down" by the supervisor at their job; they feel anger and hostility toward their supervisor. Their ID, driven by aggressive impulses, would like to tear the boss's head off. The Ego, being reality based and very much in favor of continued paycheques, realizes that this is not a good idea and therefore does not remove boss's head. The person goes home, but still has this aggressive impulse. The Ego allows for the individual to scream at the spouse, since it feels this will not threaten future pay cheques. The spouse, now angry and upset, displaces their anger on their child, who then becomes angry and kicks their pet dog, a further displacement of anger. (University of Michigan Health System 2012)

Freud's Stages of Development

Freud highlighted different stages an individual passes through in the process of

growth and development, which are discussed as follows:

1. **Oral Stage** – the mouth and the breast are the Centre of all experiences, feeding, crying, teething, biting, thumb-sucking, and weaning. The infant's actual experiences and attachments to mum (or maternal equivalent) through this stage have a fundamental effect on the unconscious mind and thereby on

deeply rooted feelings, which along with the next two stages affect all sorts of preferences in later life.

2. **Anal Stage** - It's a lot to do with pooh - 'holding on' or 'letting go' - the pleasure and control. Is it dirty? Is it okay? Bodily expulsions are the centre of the world, and the pivot around which early character is formed. Am I pleasing my mum and dad? Are they making me feel good or bad about my bottom? Am I okay or naughty? Again the young child's actual experiences through this stage have a deep effect on the unconscious and behaviours as well as preferences in later life.

3. **Phallic Stage** - Phallic is not restricted to boys, this stage is focused on resolving reproductive issues. This is a sort of dry run before the real game starts in adolescence. Where do babies come from? Can I have a baby? Why has dad got a willy and I've not? Why have I got a willy and mum hasn't? Why do they tell me off for touching my bits and pieces down there? Boys imagine: I'm going to marry mum (and maybe kill dad). While Girls may imagine: I'm in love with my dad-Oedipus Complex, Electra Complex, Penis envy, Castration Anxiety, etc. "If you touch yourself down there it will fall off/heal up" Inevitably once more, experiences in this stage have a profound effect on feelings and behaviour and libido in later life.

4. **Latency Stage** - Sexual dormancy or repression: The focus is on learning, skills, schoolwork. This is actually not a psychosexual stage because basically normally nothing formative happens sexually. Experiences, fears and conditioning from the previous stages have already shaped many of the child's

feelings and attitudes and these will re-surface in the next stage.

Freud recognised the importance of anxiety. He was one of the first writers to argue that anxiety was a critical component of neurosis. Freud distinguished between ‘objective’ and ‘neurotic’ anxiety. By objective, Freud meant the reaction we have to external danger or expected injury. Neurotic anxiety was viewed as free-floating and something likely to hinder or even paralyse actions. Freud also wrote about a form of anxiety that was not groundless but was fairly focused on one or more objects or situations. Today, we think of these as phobias.

Freud reasoned that anxiety was largely sexual in origin. Sexual thoughts and impulses were repressed and were then transformed into some symbolic representation. Freud considered the root of problems to exist at early stages of development. At first, Freud used hypnosis in an attempt to uncover early traumatic experiences. Later, he moved away from hypnosis in favor of dream analysis and a technique called ‘free-association’. Dream analysis hinged on the notion that unconscious desires would manifest themselves in dreams in a symbolic way. Freud would encourage the recall of dreams so that he could provide a detailed interpretation. Free association refers to a technique where the patient is encouraged to speak freely about anything that comes into their head, thus revealing preoccupations to which the patient may be unaware.

The problem that so many people have with Freud’s ideas is that they can neither be proved nor disproved. Freud’s approach was to use single case studies as the basis for his own form of self-analysis, which in turn appears to

have been heavily influenced by his relationship with his own father. Although still widely practised, psychotherapy is not regarded as a treatment of choice by most licensed/chartered psychologists. Psychoanalysis is often considered rich in theorising but lacking in science, indeed the historian Edward Boring described it as pre-scientific (healthcentral.com)

Psychoanalytic theory focuses on unconscious factors that motivate behaviour. With the psychoanalytical theory paying close attention to childhood and adolescent factors, it is believed that they are significant in later stages of development while recognizing that the later stages also have their significant crisis. Themes and threads can be found throughout the clients' lives". (Corey 2009).

A Therapy approach will focus on increasing awareness, looking into the client's behaviour, and understanding the meanings of symptoms. There are six basic techniques used in psychoanalytic therapy as follows:

1. Maintaining the analytic framework
2. Free association - Self-discovery enhances feelings of self-control
3. Interpretation - Deficient knowledge or unfamiliarity is a factor associated with fear.
4. Dream analysis - By interpreting the meaning of the behaviour, resistances and dreams will help empower the client.
5. Analysis of resistance-Everyone is resistant at some point in therapy-especially trauma survivors. This is an important step in both therapy as a protective mechanism and self-awareness.

6. Analysis of transference.

c. Free Association

Psychoanalytic therapy is oriented toward achieving insight, not just intellectual understanding; it is essential that the feelings and memories associated with this self-understanding be experienced. (Corey 2009).

In Free association, many times when the client is talking they will "recollect past experiences and times, it may release intense feelings (catharsis) that have been blocked. This is important to listen for, as phobias are a result of intense anxiety, and hidden or blocked emotions.

"Two goals of Freudian psychoanalytic therapy are to make the unconscious conscious and to strengthen the ego so that behavior is based more on reality and less on instinctual cravings or irrational guilt. Successful analysis is believed to result in significant modification of the individual's personality and character structure". (Corey 2009).

2.4.2 Skinner's Operant Conditioning Theory

Skinner was one of the most influential American psychologists, a behaviourist, he developed the theory of operant conditioning -the idea that behaviour is determined by its consequences, either reinforcements or punishments, which make it more or less likely that the behaviour will occur again. Skinner believed that the only scientific approach to psychology was one that studied behaviours, not internal (subjective) mental processes. He believed that behaviour can be learned or unlearned by manipulating the environment through reward and punishment. In operant conditioning, reward refers to

anything that makes behaviour to increase, and punishment is anything that causes behaviour to decrease. To skinner, behaviour is likely going to be repeated, if the environment rewards it, nut when punishment follows the display of a behaviour, that behaviour may likely go into extinction.

Jacofsky, Santos, Khemlani, Patel, & Fuge (2006), explained the principles of operant conditioning that has taught us to recognize how certain coping techniques can reward, and therefore continue anxiety disorders. Two similar coping strategies for dealing with anxiety symptoms are called avoidance and escape strategies.

As the name implies, avoidance refers to behaviours that attempt to prevent exposure to a fear-provoking stimulus. Escape means to quickly exit a fear-provoking situation. These coping strategies are considered maladaptive because they ultimately serve to maintain the disorder and decrease functioning. Operant conditioning enables us to understand the powerful impact of these two coping strategies. Both coping strategies are highly reinforcing because they remove or diminish the unpleasant symptoms. Unfortunately, they do nothing to prevent the symptoms from re-occurring again and again in the future.

Mowrer (1947) proposed his two-factor theory of avoidance learning to explain the development and maintenance of phobias. Mowrer's two-factor theory combined the learning principles of classical and operant conditioning. Based upon the principles of classical conditioning, it was assumed that phobias develop as a result of a paired association between a neutral stimulus and feared stimulus.

The second stage of Mowrer's model attempted to explain why people felt so compelled to avoid anxiety-provoking stimuli; or failing that, escape from the stimuli. The answer comes from Skinner's theory of operant conditioning and the environmental rewards produced by these coping strategies. Mowrer proposed that the avoidance of (or escape from) anxiety-provoking stimuli resulted in the removal of unpleasant emotions. Thus, avoidance becomes a reward and reinforces (increases) the behavior of avoidance. For example, an individual with social anxiety will feel a significant decrease in anxiety once s/he decides to avoid attending a large social event. This avoidance results in the removal of the unpleasant anxiety symptoms thereby reinforcing avoidance behaviour. As such, it becomes the person's preferred method of coping with future social events.

Similarly, suppose this same person attempted to go to a party, despite his/her reservations, and experienced a panic attack while there. If this person immediately exited the party, the panic will subside, and the behaviour of escape will be rewarded by the swift reduction in panic symptoms. Avoidance and escape are called negative reinforcement. The removal of unpleasant symptoms (negative) leads to an increase in that behaviour (reinforcement).

The therapeutic implication of operant conditioning and its relationship to avoidance learning was extremely important. When maladaptive copying strategies that serve to maintain an anxiety disorder are discontinued, these maladaptive behaviors become extinct. The research has demonstrated this to be correct. This understanding formed the foundation for effective treatments (MentalHealthCare 2013).

Skinner's theory is based on operant conditioning. The organism is in the process of "operating" on the environment, which in ordinary terms means it is bouncing around its world, doing what it does. During this "operating," the organism encounters a special kind of stimulus, called a reinforcing stimulus, or simply a reinforcer. This special stimulus has the effect of increasing the operant that is, the behavior occurring just before the reinforcer. This is operant conditioning: "the behavior is followed by a consequence, and the nature of the consequence modifies the organism's tendency to repeat the behavior in the future."

Skinner conducted research on shaping behaviour through positive and negative reinforcement and demonstrated operant conditioning, a behaviour modification technique which he developed in contrast with classical conditioning. His idea of the behaviour modification technique was to put the subject on a program with steps. The steps would be setting goals which would help you determine how the subject would be changed by following the steps. The program design is designing a program that will help the subject to reach the desired state. Then implementation and evaluation which is putting the program to use and then evaluating the effectiveness of it.

a. Schedules of Reinforcement

Continuous reinforcement is the original scenario: Every time that the rat does the behaviour (such as pedal-pushing), he gets a food pellet. The fixed ratio schedule was the first one Skinner discovered: If the rat presses the pedal three times, say, he gets a goodie, Or five times, Or twenty times, Or "x" times. There

is a fixed ratio between behaviours and reinforcers: 3 to 1, 5 to 1, 20 to 1, among others.

The fixed interval schedule uses a timing device of some sort. If the rat presses the bar at least once during a particular stretch of time (say 20 seconds), then he gets a goodie, if he fails to do so, he doesn't get a goodie. But even if he hits that bar a hundred times during those 20 seconds, he still only gets one goodie. One strange thing that happens is that the rats tend to "pace" themselves: They slow down the rate of their behaviour right after the reinforcer, and speed up when the time for it gets close.

Skinner also looked at variable schedules, variable ratio means you change the "x" each time - first it takes 3 presses to get a goodie, then 10, then 1, then 7 and so on. Variable interval means you keep changing the time period - first 20 seconds, then 5, then 35, then 10 and so on. With the variable interval schedule, the rats no longer "pace" themselves, because they can no longer establish a "rhythm" between behaviour and reward. Most importantly, these schedules are very resistant to extinction. It makes sense, if you think about it. If you haven't gotten a reinforcer for a while, well, it could just be that you are at a particularly "bad" ratio or interval, just one more bar press, maybe this'll be the one time you get reinforced.

b. Shaping

A question Skinner had to deal with was how we get to more complex sorts of behaviours. He responded with the idea of shaping, or "the method of successive approximations." Basically, it involves first reinforcing a behaviour

only vaguely similar to the one desired. Once that is established, you look out for variations that come a little closer to what you want, and so on, until you have the animal performing a behaviour that would never show up in ordinary life. Skinner and his students have been quite successful in teaching simple animals to do some quite extraordinary things.

Beyond fairly simple examples, shaping also accounts for the most complex of behaviours. We are gently shaped by our environment to enjoy certain things.

c. Aversive stimuli

An aversive stimulus is the opposite of a reinforcing stimulus, something we might find unpleasant or painful. This leads to another principle of operant conditioning-a behaviour followed by an aversive stimulus results in a decreased probability of the behaviour occurring in the future. This both defines an aversive stimulus and describes the form of conditioning known as punishment. If you shock a rat for doing somethimg, it'll do a lot less of that thing. If you spank Johnny for throwing his toys he will probably throw his toys less and less.

On the other hand, if you remove an already active aversive stimulus after a rat or Johnny performs certain behaviour, you are doing negative reinforcement. If you turn off the electricity when the rat stands on his hind legs, he'll do a lot more standing. If you stop your perpetually nagging when I finally take out the garbage, I'll be more likely to take out the garbage. You could say it "feels so good" when the aversive stimulus stops, that this serves as a reinforcer. Another operant conditioning principle-Behaviour followed by the removal of an aversive

stimulus results in an increased probability of that behaviour occurring in the future.

Skinner did not advocate the use of punishment. His main focus was to target behaviour and see that consequences deliver responses. From his research came "shaping" (described above) which is described as creating behaviours through reinforcing. He also came up with the example of a child's refusal to go to school and that the focus should be on what is causing the child's refusal not necessarily the refusal itself. His research suggested that punishment was an ineffective way of controlling behaviour, leading generally to short-term behavior change, but resulting mostly in the subject attempting to avoid the punishing stimulus instead of avoiding the behavior that was causing punishment. A simple example of this, he believed, was the failure of prison to eliminate criminal behaviour. If prison (as a punishing stimulus) was effective at altering behaviour, there would be no criminality, since the risk of imprisonment for criminal conduct is well established, Skinner deduced. However, he noted that individuals still commit offences, but attempt to avoid discovery and therefore punishment becomes inevitable. He noted that the punishing stimulus does not stop criminal behaviour; the criminal simply becomes more sophisticated at avoiding the punishment. Reinforcement, both positive and negative (the latter of which is often confused with punishment), he believed, proved to be more effective in bringing about lasting changes in behavior.

c. Behavior modification

Behavior modification most times referred to as b-mod is the therapy technique based on Skinner's work. It is very straight forward; it extinguishes undesirable behaviour (by removing the reinforcement) and replacing it with a desirable behaviour through reinforcement. It has been used by therapists on all sorts of psychological problems ranging from addictions, neuroses, shyness, autism, and even schizophrenia, it works pretty well with children. There are examples of back-ward psychotics who haven't communicated with others for years who have been conditioned to behave themselves in fairly normal ways, such as eating with a knife and fork, taking care of their own hygiene needs, dressing themselves, and so on.

There is an extension of b-mod called the token economy, it is used mostly in schools, psychiatric hospitals, rehabilitation centres and prisons. Rules are developed and are made clear enough for inmates or clients, their good conducts are rewarded with some tokens, like artificial money, tickets, poker chips and some other attractive, improvised simple materials that can be used as a system of exchange for the purpose of behaviour modification. Some poor behaviours are also targeted by withdrawing some or all of the previledges given to the individual tokens. The tokens can be traded in for desirable things such as candy, cigarettes, games, movies, time out of the institution, and so on. This has been found to be very effective in maintaining order in these often difficult institutions.

2.4.3 Erikson's Psychosocial Theory

Erikson's model of psychosocial development is a very significant, highly regarded and meaningful concept, it is similar to some theories, like the Freudian

Psychosexual theory, but rather than being sexually driven, he focused on social evolvement, and differed from Piaget's cognitive development, but focused on socialization aspect. To him, life is a series of lessons and challenges which help us to grow; Erikson's wonderful theory helps to tell us why an individual behave in a particular way as against societal expectations, the theory is helpful for child development and adults too. Erikson belives that People experience 'psychosocial crisis' stages in a fixed sequence, but timings vary according to people and circumstances. He divided human lifespan into eight (8) statges, each withnits distinct period and characteristics. This is why the stages and the model are represented primarily by the names of the crises or emotional conflicts themselves, which Erikson referred to as "Identity Crisis" (e.g. Trust v Mistrust) rather than strict age or life stage definitions. Age and life stages do feature in the model, but as related rather than pivotal factors, and age ranges are increasingly variable as the stages unfold. Erikson (1963) does not talk about psychosexual Stages, he discusses psychosocial stages. His ideas were greatly influenced by Freud, going along with Freud's (1923) theory regarding the structure and topography of personality.

However, whereas Freud was an id psychologist, Erikson was an ego psychologist. He emphasized the role of culture and society and the conflicts that can take place within the ego itself, whereas Freud emphasized the conflict between the id and the superego. According to Erikson, the ego develops as it successfully resolves crises that are distinctly social in nature. These involve

establishing a sense of trust in others, developing a sense of identity in society, and helping the next generation prepare for the future.

Erikson extends on Freudian thoughts by focusing on the adaptive and creative characteristic of the ego, and expanding the notion of the stages of personality development to include the entire lifespan. Erikson proposed a lifespan model of development, taking in five stages up to the age of 18 years and three further stages beyond, well into adulthood. Erikson suggests that there is still plenty of room for continued growth and development throughout one's life. Erikson puts a great deal of emphasis on the adolescent period, feeling it was a crucial stage for developing a person's identity.

Like Freud and many others, Erikson maintained that personality develops in a predetermined order, and builds upon each previous stage. This is called the epigenic principle. The outcome of this 'maturation timetable' is a wide and integrated set of life skills and abilities that function together within the autonomous individual. However, instead of focusing on sexual development (like Freud), he was interested in how children socialize and how this affects their sense of self. The difficulty in 'labeling' the first and second dispositions in each crisis is a reflection that neither is actually wholly good or bad, or wholly positive or negative. The first disposition is certainly the preferable tendency, but an ideal outcome is achieved only when it is counter-balanced with a degree of the second disposition. Successful development through each crisis requires a balance and ratio between the two dispositions, not total adoption of the apparent 'positive'

disposition, which if happens can produce almost as much difficulty as a strong or undiluted tendency towards the second 'negative' disposition.

Some of the crisis stages are easier to understand than others, each stage contains far more meaning than can be conveyed in just two or three words. Crisis stage one is 'Trust versus Mistrust', which is easier to understand than some of the others. Stage four 'Industry versus Inferiority' is a little trickier. You could say instead 'usefulness versus uselessness' in more modern common language. Erikson later refined 'Industry' to 'Industriousness', which probably conveys a fuller meaning. Successful passage through each stage is dependent on striking the right balance between the conflicting extremes rather than entirely focusing on (or being guided towards) the 'ideal' or 'preferable' extreme in each crisis. In this respect Erikson's theory goes a long way to explaining why too much of anything is not helpful for developing a well-balanced personality. A well-balanced positive experience during each stage develops a corresponding 'basic virtue' (or 'basic strength - a helpful personality development), each of which enables a range of other related emotional and psychological strengths. For example passing successfully through the Industry versus Inferiority crisis (stage four, between 6-12 years of age for most people) produces the 'basic psychosocial virtue' of 'competence' (plus related strengths such as 'method', skills, techniques, ability to work with processes and collaborations, etc).

Where passage through a crisis stage is less successful (in other words not well-balanced, or worse still, psychologically damaging) then to a varying extent

the personality acquires an unhelpful emotional or psychological tendency, which corresponds to one of the two opposite extremes of the crisis concerned. Neglect and failure at any stage is problematical, but so is too much emphasis on the apparent 'good' extreme.

For example unsuccessful experiences during the Industry versus Inferiority crisis would produce a tendency towards being overly focused on learning and work, or the opposite tendency towards uselessness and apathy. Describing these unhelpful outcomes, Erikson later introduced the terms 'maladaptation' (overly adopting 'positive' extreme) and 'malignancy' (adopting the 'negative' extreme). In the most extreme cases the tendency can amount to serious mental problems. According to the theory, successful completion of each stage results in a healthy personality and the acquisition of basic virtues. Basic virtues are characteristic strengths which the ego can use to resolve subsequent crises. Failure to successfully complete a stage can result in a reduced ability to complete further stages and therefore a more unhealthy personality and sense of self. These stages, however, can be resolved successfully at a later time. Here is each crisis stage in more detail:

1. Trust vs. Mistrust (0-1 year)

During this stage the infant is uncertain about the world in which they live. To resolve these feelings of uncertainty the infant looks towards their Primary caregiver for stability and consistency of care. If the care the infant receives is consistent, predictable and reliable they will develop a sense of trust which will

carry with them to other relationships, and they will be able to feel secure even when threatened.

Success in this stage will lead to the virtue of hope. By developing a sense of trust, the infant can have hope that as its Parents leave, there is a real possibility that other people will be there as a source of support. Failing to acquire the virtue of hope will lead to the development of fear and anxiety. For example, if the care has been harsh or inconsistent, unpredictable and unreliable then the infant will develop a sense of mistrust and will not have confidence in the world around them or in their abilities to influence events, this infant will carry the basic sense of mistrust with them to other relationships. It may result in separation anxiety disorder, heightened insecurities, and an over feeling of mistrust in the world around them.

2. Autonomy vs. Shame and Doubt (1-3 years)

The child is developing physically and becoming more mobile. Between the ages of 18 months and three, children begin to assert their independence, by walking away from their mother, picking which toy to play with, and making choices about what they like to wear, to eat, and so on. The child is discovering that he or she has many skills and abilities, such as putting on clothes and shoes, playing with toys etc. Such skills illustrate the child's growing sense of independence and autonomy. Erikson states it is critical that parents allow their children to explore the limits of their abilities within an encouraging environment which is tolerant of failure. For example, rather than put on a child's clothes a supportive parent should have the patience to allow the child to try until

they succeed or ask for assistance. The parents need to encourage the child to becoming more independent whilst at the same time protecting the child so that constant failure is avoided. A delicate balance is required from the parent -they must try not to do everything for the child but if the child fails at a particular task they must not criticize the child for failures and accidents (particularly when toilet training). The aim has to be “self-control without a loss of self-esteem” (Gross, 1992). Success in this stage will lead to the virtue of Will. If children in this stage are encouraged and supported in their increased independence, they become more confident and secure in their own ability to survive in the world. If children are criticized, overly controlled, or not given the opportunity to assert themselves, they begin to feel inadequate in their ability to survive, and may then become overly dependent upon others, lack self-esteem, and feel a sense of shame or doubt in their own abilities and develop anxiety disorder.

3. Initiative vs. Guilt (3-6 years)

Around age three and continuing to age five, children assert themselves more frequently. These are particularly lively, rapid- developing years in a child’s life. According to Bee (1992) it is a “time of vigor of action and of behaviours that the parents may see as aggressive". During this period the primary feature involves the child regularly interacting with other children at school.

Central to this stage is play, as it provides children with the opportunity to explore their interpersonal skills through initiating activities. Children begin to plan activities, make up games, and initiate activities with others. If given this opportunity, children develop a sense of initiative, and feel secure in their ability

to lead others and make decisions. Conversely, if this tendency is squelched, either through criticism or control, children develop a sense of guilt. They may feel like a nuisance to others and will therefore remain followers, lacking in self-initiative. The child takes initiatives which the parents will often try to stop in order to protect the child. The child will often overstep the mark in his forcefulness and the danger is that the parents will tend to punish the child and restrict his initiatives too much. It is at this stage that the child will begin to ask many questions as his thirst for knowledge grows. If the parents treat the child's questions as trivial, a nuisance or embarrassing or other aspects of their behaviour as threatening, then the child may have feelings of guilt for "being a nuisance".

Too much guilt can make the child slow to interact with others and may inhibit their creativity. Some guilt is, of course, necessary otherwise the child would not know how to exercise self-control or have a conscience. All these contribute to children having separation anxiety disorder.

4. **Industry (competence) vs. Inferiority (6-12 years)**

Children are at the stage (aged 5 to 12 years) where they will be learning to read and write, to do sums, to make things on their own. Teachers begin to take an important role in the child's life as they teach the child specific skills. It is at this stage that the child's peer group will gain greater significance and will become a major source of the child's self-esteem. The child now feels the need to win approval by demonstrating specific competencies that are valued by society, and begin to develop a sense of pride in their accomplishments. If children are encouraged and reinforced for their initiative, they begin to feel industrious and

feel confident in their ability to achieve goals. If this initiative is not encouraged, if it is restricted by parents or teacher, then the child begins to feel inferior, doubting his own abilities and therefore may not reach his or her potential. If the child cannot develop the specific skill they feel society is demanding (e.g. being athletic) then they may develop a sense of inferiority and develop an anxiety disorder. Some failure may be necessary so that the child can develop some modesty.

5. Identity vs. Role Confusion (12-18 years)

Being adolescent (age 12 to 18 years), the transition from childhood to adulthood is most important. Children are becoming more independent, and begin to look at the future in terms of career, relationships, families, and housing among others. The individual wants to belong to a society and fit in. This is a major stage in development where the child has to learn the roles he will occupy as an adult. It is during this stage that adolescent will re-examine his identity and try to find out who he or she is. Erikson suggests that two identities are involved: the sexual and the occupational.

According to Bee (1992), what should happen at the end of this stage is "a reintegrated sense of self, of what one wants to do or be, and one's appropriate sex role". During this stage the body image of the adolescent changes. Erikson claims that the adolescent may feel uncomfortable about their body for a while until they can adapt and grow into the changes. Success in this stage will lead to the virtue of fidelity.

Fidelity involves being able to commit one's self to others on the basis of accepting others even when there may be ideological differences. During this period, they explore possibilities and begin to form their own identity based upon the outcome of their explorations. Failure to establish a sense of identity within society ("I don't know what I want to be when I grow up") can lead to role confusion. Role confusion involves the individual not being sure about themselves or their place in society. In response to role confusion or identity crisis an adolescent may begin to experiment with different lifestyles (e.g work, education or political activities). Also pressuring someone into an identity can result in rebellion in the form of establishing a negative identity, and in addition to these feelings of unhappiness and feeling anxiety to some people.

6. Intimacy vs. Isolation (18-40 years)

This occur in young adulthood (18 to 40 years), they begin to share ourselves more intimately with others. We explore relationships leading toward longer term commitment with someone other than a family member. Successful completion of this stage can lead to comfortable relationships and a sense of commitment

7. Ego Integrity vs. Despair (40^+ years)

As we grow older (65^+ years) and become senior citizens, we tend to slow down our productivity, and explore life as a retired person. It is during this time that we contemplate our accomplishments and are able to develop integrity if we see ourselves as leading a successful life.

Erikson believed if we see our lives as unproductive, feel guilt about our past, or feel that we did not accomplish our life goals, we become dissatisfied with life and develop despair, often leading to depression, anxiety disorder and hopelessness.

Erikson's model of psychosocial development is a very significant, highly regarded and meaningful concept. To him, life is a series of lessons and challenges which help us to grow; Erikson's wonderful theory helps to tell us why. The theory is helpful for child development and adults too.

Summarily, the word 'psychosocial' is Erikson's term, effectively from the words psychological (mind) and social (relationships). Erikson believed that his psychosocial principle is genetically inevitable in shaping human development. It occurs in all people. He also referred to his theory as 'epigenesis' and the 'epigenetic principle', which signified the concept's relevance to evolution (past and future) and genetics.

Erikson explained his use of the word 'epigenesis' thus: "epi can mean 'above' in space as well as 'before' in time, and in connection with genesis can well represent the space-time nature of all development" (Vital Involvement in Old Age, 1989).

In Erikson's theory, Epigenetic therefore does not refer to individual genetic make-up and its influence on individual development, this was not central to his ideas. Erikson, like Freud, was largely concerned with how personality and behaviour is influenced after birth - not before birth - and especially during

childhood. In the 'nature v nurture' (genes v experience) debate, Erikson was firmly focused on nurture and experience.

Each stage involves a crisis of two opposing emotional forces. A helpful term used by Erikson for these opposing forces is 'contrary dispositions'. Each crisis stage relates to a corresponding life stage and its inherent challenges. Erikson used the words 'syntonic' for the first-listed 'positive' disposition in each crisis (e.g., Trust) and 'dystonic' for the second-listed 'negative' disposition (e.g., Mistrust). To signify the opposing or conflicting relationship between each pair of forces or dispositions, Erikson connected them with the word 'versus', which he abbreviated to 'v'. (Versus is Latin, meaning turned towards or against)

Successfully passing through each crisis involves 'achieving' a healthy ratio or balance between the two opposing dispositions that represent each crisis. For example a healthy balance at crisis stage, stage one (Trust v Mistrust) might be described as experiencing and growing through the crisis 'Trust' (of people, life and one's future development) and also experiencing and growing a suitable capacity for 'Mistrust' where appropriate, so as not to be hopelessly unrealistic or gullible, nor to be mistrustful of everything. Or experiencing and growing through stage two (Autonomy v Shame & Doubt) to be essentially 'Autonomous' (to be one's own person and not a mindless or quivering follower) but to have sufficient capacity for 'Shame and Doubt', so as to be free-thinking and independent, while also being ethical and considerate and responsible, etc. Erikson called these successful balanced outcomes 'Basic Virtues' or 'Basic Strengths'. He identified one particular word to represent the fundamental strength gained at each stage,

which appear commonly in Erikson's diagrams and written theory, and other explanations of his work. Erikson also identified a second supporting 'strength' word at each stage, which along with the basic virtue emphasised the main healthy outcome at each stage, and helped convey simple meaning in summaries and charts. Examples of basic virtues and supporting strengths words are 'Hope and Drive' (from stage one, Trust v Mistrust) and 'Willpower and Self-Control' (from stage two, Autonomy v Shame & Doubt). It's very useful however to gain a more detailed understanding of the meaning behind these words because although Erikson's choice these words is very clever, and the words are very symbolic, using just one or two words alone is not adequate for truly conveying the depth of the theory, and particularly the emotional and behavioural strengths that arise from healthy progression through each crisis. More detail about basic virtues and strengths is in the Basic Virtues section.

Erikson was sparing in his use of the word 'achieve' in the context of successful outcomes, because it implied gaining something clear-cut and permanent. Psychosocial development is not clear-cut and is not irreversible: any previous crisis can effectively revisit anyone, albeit in a different guise, with successful or unsuccessful results. This perhaps helps explain how 'high achievers' can fall from grace, and how 'hopeless failures' can ultimately achieve great things. No-one should become complacent, and there is hope for us all.

The crisis stages are not sharply defined steps. Elements tend to overlap and mingle from one stage to the next and to the preceding stages. It's a broad framework and concept, not a mathematical formula which replicates precisely

across all people and situations. Erikson was keen to point out that the transition between stages is 'overlapping'. Crisis stages connect with each other like inter-laced fingers, not like a series of neatly stacked boxes. People don't suddenly wake up one morning and be in a new life stage. Changes don't happen in regimented clear-cut steps. Changes are graduated, mixed-together and organic. In this respect the 'feel' of the model is similar to other flexible human development frameworks (for example, Elisabeth Kübler-Ross's 'Grief Cycle', and Maslow's Hierarchy of Needs). Where a person passes unsuccessfully through a psychosocial crisis stage they develop a tendency towards one or other of the opposing forces (either to the syntonic or the dystonic, in Erikson's language), which then becomes a behavioral tendency, or even a mental problem. In crude terms we might call this 'baggage' or a 'hang-up', although perhaps avoid such terms in serious work. It is issued here to illustrate that Erikson's ideas are very much related to real life and the way ordinary people think and wonder about things.

Erikson called an extreme tendency towards the syntonic (first disposition) a 'maladapation', and he identified specific words to represent the maladaptation at each stage. He called an extreme tendency towards the dystonic (second disposition) a 'malignancy', and again he identified specific words to represent the malignancy at each stage. More under 'Maladapations' and 'Malignancies'. Erikson emphasized the significance of 'mutuality' and 'generativity' in his theory, the terms are linked. Mutuality reflects the effect of generations on each other, especially among families, and particularly between parents and children and

grandchildren. Everyone potentially affects everyone else's experiences as they pass through the different crisis stages. Generativity, actually a named disposition within one of the crisis stages (Generativity v Stagnation, stage seven), reflects the significant relationship between adults and the best interests of children - one's own children, and in a way everyone else's children - the next generation, and all following generations. Generations affect each other, a parent obviously affects the child's psychosocial development, but in turn the parent's psychosocial development is affected by their experience of dealing with the child and the pressures produced. Same for grandparents, again this helps explain why as parents (or teachers or siblings or grandparents) we can often struggle to deal well with a young person when it's as much as we can do to deal with our own emotional challenges.

In some ways the development actually peaks at stage seven, since stage eight is more about taking stock and coming to terms with how one has made use of life, and ideally preparing to leave it feeling at peace. The perspective of giving and making a positive difference for future generations echoes Erikson's humanitarian philosophy, and it's this perhaps more than anything else that enabled him to develop such a powerful concept.

Age range is just a very rough guide, especially through the later levels when parenthood timing and influences vary. Hence the overlap between the age ranges in the interpretation below. Interpretations of age range vary among writers and academics. Erikson intentionally did not stipulate clear fixed age stages, and it's impossible for anyone to do so. Crisis stages are driven by physical and sexual

growth, which then prompts the life issues which create the crises. The crises are therefore not driven by age precisely. Erikson never showed precise ages, and it will be preferred to state wider age ranges than many other common interpretations. The final three (adult) stages happen at particularly variable ages. It's worth noting also that these days there's a lot more 'life' and complexity in the final (old age) stage than when the eight stages were originally outlined, which no doubt fuelled Joan Erikson's ideas on a 'ninth stage' after Erik's death.

2.4.4 Bowlby's Attachment theory

Mcleod (2007) explained that, John Bowlby (1907 - 1990) was a psychoanalyst like Freud and believed that mental health and behavioral problems could be attributed to early childhood. Bowlby's evolutionary theory of attachment suggests that children come into the world biologically pre-programmed to form attachments with others, because this will help them to survive. Bowlby believed that attachment behaviors are instinctive and will be activated by any conditions that seem to threaten the achievement of proximity, such as separation, insecurity and fear.

He postulated that the fear of strangers represents an important survival mechanism, built in by nature. Babies are born with the tendency to display certain innate behaviors called social releasers which help ensure proximity and contact with the mother or attachment figure (example, crying, smiling, crawling) – these are species-specific behaviors.

During the evolution of the human species, it would have been the babies who stayed close to their mothers that would have survived to have children of their own. Bowlby hypothesized that both infants and mothers have evolved a biological need to stay in contact with each other. These attachment behaviours initially function like fixed action patterns and all share the same function. The infant produces innate 'social releaser' behaviors such as crying and smiling that stimulate care giving from adults. The determinant of attachment is not food but care and responsiveness.

Bowlby suggested that a child would initially form only one attachment and that the attachment figure acted as a secure base for exploring the world. The attachment relationship acts as a prototype for all future social relationships so disrupting it can have severe consequences. Bowlby highlighted some points regarding his theory as follows:

1. A child has an innate that is, inborn need to attach to one main attachment figure (that is monotropy). Although Bowlby did not rule out the possibility of other attachment figures for a child, he did believe that there should be a primary bond which was much more important than any other (usually the mother).

Bowlby believes that this attachment is different in kind (qualitatively different) from any subsequent attachments. Bowlby argues that the relationship with the mother is somehow different altogether from other relationships.

Essentially, Bowlby (1988) suggested that the nature of monotropy (attachment conceptualized as being a vital and close bond with just one

attachment figure) meant that a failure to initiate, or a breakdown of, the maternal attachment would lead to serious negative consequences, possibly including affectionless psychopathy. Bowlby's theory of monotropy led to the formulation of his maternal deprivation hypothesis.

The child behaves in ways that elicits contact or proximity to the caregiver. When a child experiences heightened arousal, he/she signals their caregiver. Crying, smiling, and, locomotion, are examples of these signaling behaviors. Instinctively, caregivers respond to their children's behavior creating a reciprocal pattern of interaction.

2. A child should receive the continuous care of this single most important attachment figure for approximately the first two years of life. Bowlby (1951) claimed that mothering is almost useless if delayed until after two and a half to three years and, for most children, if delayed till after 12 months, i.e. there is a critical period. If the attachment figure is broken or disrupted during the critical two year period the child will suffer irreversible long-term consequences of this maternal deprivation. This risk continues until the age of five. Bowlby used the term maternal deprivation to refer to the separation or loss of the mother as well as failure to develop an attachment. The underlying assumption of Bowlby's Maternal Deprivation Hypothesis is that continual disruption of the attachment between infant and primary caregiver (i.e. mother) could result in long term cognitive, social, and emotional difficulties for that infant.

3. The long term consequences of maternal deprivation might include the following:

a. delinquency

b. reduced intelligence

c. increased aggression

d. depression

e. affectionless psychopathy

Gohal (1996), observed that, attachment theory describes the most important principles that a human needs to develop a secure relationship; in children, this relationship is with their primary caregiver. Attachment theory is the joint work of John Bowlby and Mary Ainsworth. Mcleod (2007) formulated the basic tenets of the theory, and innovated thinking about the child's tie to the mother and its disruption through separation. Ainsworth's innovative methodology and observational studies reinforced the basic concepts of Bowlby's attachment theory.

Attachment theory and the origin of separation anxiety

Attachment theory offers basic explanations for and describes the psychological aspects of separation anxiety. Infants learn how to regulate their emotions through the use of strategies that maintain proximity to the attachment figure. Separation anxiety in infants is a natural development process which aids their survival (Mcleod 2007). Robertson and Bowlby (1952), identified three phases of separation: Protest (related to separation anxiety), Despair (related to grief), and Denial (related to defence mechanisms). Bowlby (1969) noted that two

distinct sets of stimuli elicit fear in children: the presence of unlearned and later culturally acquired clues to danger and/or the absence of an attachment figure. He also considered that a stress-reducing behavioural system (environment and family members) around the child maintains a defined stable relationship. Human is motivated to maintain a dynamic balance between familiarity-preserving and stress reducing behaviours, attachment is a protection.

Ainsworth's observational studies reinforced the basic concepts of attachment theory, she introduced the concept of the 'secure base' and developed a theory about the number of attachment patterns in infants: secure attachment, avoidant attachment and anxious attachment. She used observational research in Uganda on infant-parent pairs during the children's first year. She extended her work to study attachment patterns and unusual situations. The attachment patterns are as follows:

1. Knowledge of the attachment pattern and the stranger situation offers clues to understanding the different experiences of separation anxiety resulting from different attachment styles. Ainsworth studied these by observing children playing while their caregivers and strangers entered and left the room. Four aspects of the children's behaviour were observed**:**

a.The amount of exploration (e.g. playing with new toys) the children engaged in throughout.

b. The children's reactions to the departure of their caregivers.

c. Stranger anxiety (when children were alone with a stranger).

d. The children's reunion behaviour with their caregivers.

On the basis of their behaviours, the children were categorised into groups according to their different attachment relationships with the caregivers.

ii. **Secure attachment:** It was discovered that a child who is securely attached to its mother:

a. Explores freely if the mother is present.

b. Engages with strangers.

c. Is upset when the mother disappears and happy to see her return.

d. Explores when the knowledge of a secure figure will return to in times of need.

Secure attachment is the most adaptive attachment pattern; the sense of security educates the child on how to cope with separation in the future.

ii. Anxious-resistant insecure attachment

A child with this style of attachment is anxious about exploration and strangers, even when the mother is present, s/he becomes extremely distressed if the mother disappears, is ambivalent when she returns, seeks to remain close to the mother but is resentful, is resistant when the mother initiates attention, may be aggressive towards its mother when reunited with her. Ambivalent attachment may indicate maladaptive parenting and the likelihood of attachment problems in the future.

iii. Anxious-avoidant insecure attachment

A child with this style of attachment tends to avoid or ignore the caregiver, show little emotion when the caregiver disappears or returns, will not explore very much regardless of who is there, not treat strangers very differently from the

caregiver. This form of attachment usually develops from a disengaged caregiving style. If the child's needs are not met the child comes to believe that communication of needs has no influence on the caregiver.

iv. Disorganised/disoriented attachment

This fourth category was added by Ainsworth's colleague Mary Main and Ainsworth accepted the validity of this modification. The child may cry when separated from the mother but avoid her when she returns, or may approach the mother, then freeze or fall to the floor. Some children show stereotypical behaviour, rocking to and fro or repeatedly hitting themselves.

2. Strengths and limitations of attachment theory in separation anxiety

a. Strengths

Attachment theory frames the basic principles of the relationship between the child and the caregiver. It also provides some knowledge of the impact of attachment and its effect on human development. The strength of the attachment theory is that it views proximity seeking as a primary strategy for regulating the effect of separation. This strategy is designed to protect individuals from physical and psychological threats and alleviate distress.

b. Limitations

Attachment model is based on behaviors that occur during momentary separations (stressful situations) rather than during non stressful situations. A broader understanding of attachment requires observation of how the mother and infant interact and

what they provide for each other during natural, non-stressful situations' (Field, 1996, p. 543). Behaviours directed towards the attachment figure during departure and reunion cannot be the only factors used when we define attachment.

Another limitation of the attachment model is that the mother is viewed as the primary attachment figure, and it describes separation from the primary caregiver, excluding the father or siblings who can have the same type of attachment with the infant at the same time.

The theory does not focus on how the nature of attachments might change when care giving circumstances change. Rutter (1981) suggests that the effects of separation from a caregiver seem to depend on the broader social circumstances in which it occurs.

3. Prediction of separation anxiety

When an individual is confident that an attachment figure will be available, that person will be much less prone to either intense or chronic fear than will the individual who has no such confidence'(Bowlby 1964).

Sensitive and responsive parenting has been identified as a major contributor to attachment security in infancy and has also been implicated as an important actor in the formation and maintenance of separation anxiety in children.

Negative and poor mother-child relationship quality predicts children's fear of abandonment. Children's separation anxiety is associated with chaotic and

problematic home environments (Egger, Costello, & Angold, 2003; Kearney et al., 2003).

Children with separation anxiety are more likely to have parents diagnosed with an anxiety or major depressive disorder (Biederman, Faraone, Hirshfeld-Becker, Friedman, Robin & Rosenbaum, 2001).

In a prospective, longitudinal study of 99 mother-child, infancy measures of infant-mother attachment security, maternal separation anxiety, and maternal sensitivity were used to predict children's self reported symptoms of separation anxiety at age six.

Insecurely attached children reported more separation anxiety than securely attached children.

Insecure-ambivalent children reported marginally more separation anxiety than securely attached children, but not more than insecure avoidant attached children.

2.4.5 Bandura's Social Learning Theory

In social learning theory, Albert Bandura (1977) states behaviour is learned from the environment through the process of observational learning. Children observe the people around them behaving in various ways. Individuals that are observed are called models, such as parents within the family, characters on children's TV, friends within their peer group and school teacher.

A scary film watched by children may lead to separation anxiety disorder by imprinting fears on the child's mind. It may also be due to teacher inability to behave in a kind and caring manner to provide a tolerant environment and be

sympathetic towards them. Children may also imitate the behaviour of their friends when they see their reaction when they are being separated from their parents, significant others, or their loved one. Some parents pamper their children to the extent that their children develop separation anxiety, other parents stall on leaving the house, while other parents are over-protective, separation anxiety may be the manifestation of the parent's own anxiety, parents and children can feed one another anxieties.

According to Bandura (1983); Mischel & Shoda (1995), believed that people acquire anxiety the same way they acquire other complex forms of social behaviour, either by direct experience or by observing others. Which means individuals can develop anxiety by observing other people who manifest anxiety behaviours. Bandura (1991) also explained how human beings adopt, learn and maintain behaviour patterns that have worked in the past even if they worked occasionally. This means children can develop anxiety by watching their parents and significant others in their communities and school environment. According to him, when a child's initiative behaviour is reinforced by praise and encouragement from significant models, the probability that the behaviour will occur in the future is increased.

Social learning theory explains the acquisition of anxiety behaviours through observational learning processes, and provides a useful set of concepts for understanding and describing the beliefs and expectations that guide social behaviour.

2.5 Review of Empirical Studies

A number of research studies have been carried out by psychologists, counsellors and psychiatrists, using therapies like systematic desensitization and token economy system, to manage or modify different social, physical, emotional and psychological problems. The researcher reviewed the following research works:

Blandin, Panquet and Bally (1994), observed that psychoanalytic theory differ on the nature of anxiety and its place in child development. From this point of view, the fear of loss of mother by separation is not regarded as resulting from a real danger. However, Freud considers the primary experience of separation from protecting mother as the prototype situation of anxiety and compares the situations generating fear to separation experiences. To Blandin et al, separation anxiety may be conditioned or learned.

In the Virginia Twin Study of Adolescents Behavioural Deveopment (VTSABD) carried out by Toplski (1997), he assessed anxiety symptoms through child and parent report in 1417 same sex twin pairs aged 8-16 years. Findings revealed that variance in chid reported separation anxiety were attributable to both shared and non-shared environmental factors with no significant genetic influence. This study has established the exixtence of separation anxiety.

Ventas, Higbee and Murdock (2001), investigated the effectiveness of systematic desensitization for fear reduction, using humorous hierarchy scenes without relaxation was tested. Participants were 40 students highly fearful of spiders. Using a 24 item behavioural approach test with an American tarantula, participants were matched on fear level and randomly assigned to 1 of 3 treatment

groups: (a) Systematic desensitization (b) Humour desensitization, and (c) Control group. Each participant was seen for 6 sessions, including pre-test and post-test. Analyses of covariance of post-test scores revealed that the 2 treatment groups showed greater reduction in fear than the controls on 3 measures but did not differ from each other. Therefore, humour in systematic desensitization reduced fear as effectively as more traditional desensitization.

In a study conducted by Otta and Ogazie (2014), where they investigated the effects of systematic Desensitization [SD] and Study Behaviour Techniques [SBT] in the reduction of test anxiety among in-school adolescents in Abia State. Five research questions and five hypotheses were formulated to guide the study. The study was quasi-experimental which adopted 3 x 2 factorial designs. The sample size consisted of sixty senior secondary II subjects selected through stratification and random selection. The researchers developed 30-item test phobia diagnostic questionnaire [TPQD] administered to the subjects. T-test and Analysis of covariance [ANCOVA] were used for data analysis. The result of the study shows that the SD and SBT treatment group had therapy effects both at the post and follow up stages.

Egbochukwu & Ogbodo (2005) investigated the effect of Systematic desensitization (SD) therapy on the reduction of test anxiety on some identified test anxious students in Nigerian Schools. A 2×2×2 way factorial design was employed, Systematic Desensitization was found effective in the reduction of test anxiety of the students who were test anxious, with F-ratio= 9.261 with df (1,74). Entry test anxiety level of subjects was found to be significant on the level of

reduction of test anxiety students F= 27.458 with df (1,74). Sex was found to have no significant effect on the reduction of test anxiety of students F = 0.079 with df of (1,74) and p greater than 0.05. There was no significant interaction effect of therapy and secondary independent variables. However, there was a significant interaction effect of entry test anxiety level and therapy at the end of treatment. Since SD has been found to be effective in the reduction of test anxiety among adolescents in Nigerian schools; it is recommended that this therapy be used in the treatment of test anxiety. It should be noted that before the treatment of test anxiety, the entry test anxiety level of subjects must be considered so as to set a baseline for the therapy. (Contains 3 tables.)And this is in line with the outcome of this research work, where systematic desensitization was found to be effective in reducing separation anxiety.

In another study conducted by Karfe and Ntasin (2018), where they investigated the effects of systematic desensitization and study skills counselling therapies on test-anxiety in physics among senior secondary school students in Jalingo, Taraba State, Nigeria. Quasi-experimental research design of non-randomized pre-test/post-test control group was adopted, Purposive sampling technique was used to select a total of seventy-two (72) SS II students comprising of 36 males and 36 females who were found to be anxious and had poor achievement in physics. Two research instruments were used for the study and they were: Test- Anxiety/Study Skills Questionnaire (TAQ) and Physics Achievement Test (PAT) which were used for pre-test and posttest. Four research hypotheses were formulated to guide the study. The hypotheses were tested using

ANCOVA statistics at 0.05 level of significance. The results from the data analysis led to the establishment of a significant effect of systematic desensitisation in the reduction of test anxiety between control and treatment group that were exposed to systematic desensitisation.

In another study conducted by Ifeanyi (2015), who investigated the Effect of Systematic Desensitisation Technique in reducing Test Anxiety among secondary school students. Two research questions were posed and two hypotheses formulated to guide the study. The study is a quasi experimental research and employed a 2x2 factorial design pre test-post test experimental control group, comprising two groups (Experimental group and control) using one treatment group (Systematic Desensitisation Technique {SDT} . The population comprised all the secondary school students in Onitsha urban areas with test anxiety. A total of 75 students were selected from three schools using a standardised instrument titled "Test Anxiety Inventory". The instrument, Test Anxiety Inventory was administered to both the experimental group and the control group before and after treatments, making up the pre test and post test. The data relating to the research questions were analysed using mean scores. The data relating to the null hypotheses were analysed using the Analysis of Co-variance (ANCOVA). The result of the study showed that systematic desensitisation technique was effective and significant in reducing test anxiety. The study further revealed that the difference on effectiveness of systematic desensitisation technique in reducing test anxiety of male and female students is not significant.

Mann & Piorkowski (2006) conducted a study on the effects of Guided Participation and Systematic Desensitization in the treatment of a Paranoid Alcoholic, where a compulsive drinker with severe behavioural problems, diagnosed as paranoid schizophrenic, was treated using several behaviour modification techniques. Guided participation, role-playing and systematic desensitization were used in an effort to reduce inappropriate fears and increase more adaptive behaviours. The alcoholism was not treated directly. Upon termination of therapy (14 sessions), he had an extended period of sobriety and his social-interpersonal situation was greatly improved. In a 12-month follow-up, he continued to remain sober without the emergence of other pathological features. This tally with the fidings of this study, that systematic desensitization has significant effect in reducing behaviour problems.

In another study, Ramaita, Purba and Putri (2018), discovered the effect of economic token therapy for reducing the attachment behaviour among Kindergarten Students in Sumatra, Indonesia. The design of the study was quasi experimental with pre, post and control group. The researchers used multistage random sampling and consecutive sampling techniques with a total sample of 68 pupils who experienced attachment behaviour, and 34 pupils as intervention group while 34 other pupils served as control group. Bivariate analysis using Wilcoxon test and mann-whitney test was adopted. The results showed there were significant differences of attachment behaviour before and after entering the token economy intervention for the intervention group as compared to those in the control group. **It was discovered that** Token EconomyTtherapy has positive effect in reducing

attachment behaviour of kindergarten students at the beginning of learning process in the kindergarten school.

In a related development, Kilmas (2007) evaluates the effects of an individual token economy with a young child with severe behaviour disorder. Three behaviors were recorded; time to completion, the number of assignments completed, and the frequency of inappropriate behavior, data were gathered for 30 minutes each morning. The overall outcomes indicated a decrease in the amount of time required to complete an assignment, an increase in assignment completion, and a decline in the frequency of inappropriate classroom behaviors.

In another study carried out by Otta & Ogazie (2014), where they investigated the effects of systematic Desensitization [SD] and Study Behaviour Techniques [SBT] in the reduction of test phobia among in-school adolescents in Abia State. Five research questions and five hypotheses were formulated to guide the study. The result of the study shows that the SD and SBT treatment group had therapy effects both at the post and follow up stages.

Dummer, Derby, Weber, McLaughlin and Bernetto (2016) assessed the effects of systematic desensitization with a phobic 15-year-old male with autism: A case study with measures of generalization. The child had a specific phobia for persons who coughed or expressed cold symptoms. This study explored how relaxation techniques such as diaphragmatic breathing exercises and hand-held stress reduction coupled with a step-by-step hierarchical desensitization intervention can be used to reduce social anxiety and aberrant behaviours. Both an ABABAB reversal design and a changing criterion design were used to evaluate the

effects of a systematic desensitization, the overall outcomes indicated that relaxation techniques were effective in reducing this phobia.

The above researches reviewed by the researcher, revealed that quite a number of therapies have been adopted by researchers to address one behaviour problem or the other, but none of the ones reviewed by the researcher here adopted the two therapies of systematic desensitization and token economy to address separation anxiety. The research was also carried out in Nigerian Secondary Schools with particular focus on Students in Zaria Metropolis, which is in contrast to other research works on separation anxiety that were mostly carried out in other countries and regions, who have different socio cultural practice, and were also mostly conducted in pre primary and primary schools. The researcher considered the position of Zaria in the area of education, with particular emphasis on the large number of institutions of learning, that pulled different ethno-religious groups together, the researcher saw the need to carry out a study in this area in order to find out the effects of systematic desensitization and token economy on separation anxiety problem in Zaria Metropolis.

2.6 Summary

The chapter explained the various views of scholars and researchers on separation anxiety problem, causes and relationships to other anxiety problems. The literature reviewed factors that cause separation anxiety problems to include genetic, environmental, biological among other factors. The theoretical framework focused on Freud who was among the first writers to establish the

existence of different types of anxieties, his psychoanalytic theory explained how early childhood experiences can affect a person's behaviour later in life. Erickson's psychosocial theory also revealed how separation anxiety could be developed, from his explanations on the different stages of human development. He explained how failure in achieving the desired level at each stage could leave an individual with certain level of frustration that could end up pushing him/her to the other negative side of the stage. Bowlby's Attahment theory on the other hand, explained how attachment is developed, he believes that children are born with innate tendency to form attachments, and the environment nurtures it. Bandura's Social Learning theory explained how Parents or adults feeed their younger ones anxiety, to him, children acquire separation anxiety from their Parents or Caregivers. Skinner's operant conditioning theory explained how anxiety is developed through reward, he also explained how token economy could be employed to increase desired behaviour in students.

Some empirical studies like that of Ventas, Higbee and Murdock (2001), who investigated the effectiveness of systematic desensitization for fear reduction, using humorous hierarchy scenes without relaxation was reviewed. Another related study conducted by Otta and Ogazie (2014), where they investigated the effects of systematic Desensitization [SD] and Study Behaviour Techniques [SBT] in the reduction of test anxiety among in-school adolescents in Abia State was also reviewed. Then Egbochukwu & Ogbodo (2005) work was reviewed, where they investigated the effect of Systematic desensitization (SD) therapy on the reduction of test anxiety on some identified test anxious students.

This study focused on Barewa College and Government Girls' College Zaria (Formerly Women Teachers' College). The study also examined the effects of systematic desensitization and token economy on separation anxiety among secondary school students in Zaria Metropolis. This study becomes unique due to the fact that it employs two techniques: Systematic Desensitization and Token Economy to address Separation Anxiety. The research was also carried out in Nigerian Secondary Schools, in contrast to other research works on separation anxiety that were mostly carried out in other countries with different socio cultural practice, and were also mostly conducted in pre primary and primary schools.

CHAPTER THREE

METHODOLOGY

3.1 Introduction

This chapter gives a comprehensive explanation on the research design, population of the study, sample size and sampling technique, instrumentation adopted for the study and a detailed explanation on how the pilot study was conducted. The chapter also explains the procedure that was employed for data collection.

3.2 Research Design

The researcher adopts the pretest-posttest group design, a quasi experimental design, which was conducted outside the laboratory setting, where the scheduling of the treatment variable was not within the full control of the researcher. The quasi experimental research design is a research design where the researcher deliberately manipulates the experimental situations by controlling who were exposed to certain situations in the study. It is also a research design that examines cause and effect to variables under study, but it does not have the capacity for random assignment of subject groups (Burns and Grove, 2005). The two (2) techniques of systematic desensitization and token economy were used as independent variables to manage separation anxiety (dependent variable) among students so selected for the research. Quasi experimental design involves a precise systematic well planned and rigorous means of revealing truth about nature. The design involved the random assignment of participants to two (2) groups, where one of the groups was exposed to systematic desensitization, and the other group

was treated with token econmy technique. The random assignment of participants was however stratified because the representative sample groups were decided after scoring the pretest.

3.3 Population of the Study

The population for the study consists of all students with separation anxiety in Junior Secondary Schools II (JSS 2) of Barewa College and Government Girls' Secondary School Zaria. But the researcher identified three hundred and ninety students with separation anxiety from scoring of the pretest, which was administered on JS2 students of Barewa College and Government Girls' Secondary School both in Zaria Metropolis. The sample population was drawn after scoring the pre-test instrument, where those who scored 1.5-1.9, were considered as having low separation anxiety, those who scored 2.0-2.5, were considered as having moderate separation anxiety, therefore, the twenty (20) highest scorers who scored 2.6-3.0, were selected for the study, which falls in line with Spence Children's Anxiety Scale (1994). The reason for the selection of these schools is for the fact that there are JS2 classes in the boarding house of the schools. Secondly, it is assumed they have stayed long enough to have adjusted to school environment, and any student who is still finding it difficult to adjust at that stage, may be having some kind of problems.

Kaduna State School Census Report revealed that there are four hundred and eleven (411) public junior secondary schools in Kaduna state, with a total number of one hundred and nine thousand, three hundred and eighty five (109,385) students. Eighty seven thousand, five hundred and eighty seven

(87,587) are males, while seventy thousand, six hundred and eighty seven are females (70,687). (Kaduna State School Census Report 2013/14).

While Kaduna State Ministry of Education has a total number of twelve (12) zonal education offices, which are as follows:

a. Anchau zonal education office
b. Birnin gwari ” ”
c. Zaria ” ”
d. Giwa ” ”
e. Riga Chikun ” ”
f. Kaduna ” ”
g. Sabon tasha ” ”
h. Kachia ” ”
i. Godo-godo ” ”
j. Lere ” ”
k. Kafanchan ” ”
l. Zonkwa ” ”

For the purpose of this research work, the researcher intends to focus on schools in Zaria Educational Zone, that has a total number of forty eight (48) public secondary schools, that are categorized into three (3), namely:

1. The re-articulated secondary schools.
2. Public secondary schools.
3. Public junior secondary school.

These schools cut across five (5) local government areas of the state, which includes Zaria, Sabon gari, Soba and some parts of Kudan and Giwa respectively.

The students in JSII are within the age range of 11 – 15 years. The population is heterogenous because the students have different ethno-cultural backgrounds.

Table 1: Population of Students with Separation Anxiety in Junior Secondary of Barewa College and GGSS Zaria

School	Population in JS II
GGSS (WTC) Zaria	165
Barewa College Zaria	225
Total	**390**

3.4 Sample and Sampling Procedure

The sample for the study was drawn using stratified sampling in selecting male and female students in Juniour Secondary School. Jumare (2017) explained stratified sampling as sampling drawn using levels or groups. Thus a population is divided to either Male/Female, Day School/Boarding, Urban/Rural, senior/Juniour. Each group is given equal chance of selection so as not to deny any group representation. Two (2) schools were sampled out of forty eight (48) public secondary schools in Zaria Educational Zone, using the stratified random sampling method. The use of stratified sampling was necessary because the school standard must be within average and above, and must have student who stay in the hostel, in order to get participants respond appropriately and

communicate effectively, and by so doing the researcher was able to elicit the actual data needed for the research. The categorization of students into the two treatment groups was done through balloting, where the researcher wrote letter A on one paper and B on the other, folded it to avoid been seen, and shook it all. Students picked one squeezed paper each, and were then asked to open it, those students who picked A, made up the first group, and were later on exposed to systematic desensitization, and for those students who picked letter B were grouped under the second group, and were later on exposed to Token economy technique.

The biodata of participants is presented in Table 3.2:

Table 2: Distribution of Respondents by Groups

	Frequency	**Percentage**
SDT (Treatment)	10	50
TE	10	50
Total	**20**	**100**

Field Study 2017

Table 2 indicates the distribution of students into two equal groups, with ten (10) students in each group which is interpreted as a total of 10 students that is 50%. The first ten (10) were exposed to Systematic Desensitization (SDT), and the second ten (10) students which is 50% were exposed to the Token Economy technique. Each group was tested for separation anxiety.

Table 3: Distribution of Participants by Gender

	Frequency	**Percentage**

Male	10	50.0
Female	10	50.0
Total	**20**	**100.0**

Field Study 2017

The distribution of the students on the basis of their gender status showed that ten (10) or 50% of them are male and the remaining ten (10) also representing 50% are female.

3.5 Control of Intervening Variables

One aspect of importance in experimental research studies is the ability to control intervening variables. Intervening variables are those variables that can prevent researcher from attributing changes observed in the dependent variables completely on independent variables. It is in line of this, that the researcher puts some strategies in place, in order to control some perceived traits to the validity of the research, which are as follows:

3.5.1 Selection Bias:

The researcher uses the pre – test scores in selecting participants, the result of the pre test was categorized into those with low, moderate and high separation anxiety. At the end of the categorization, only those students with separation anxiety were considered in the study. Participation was voluntary, in order to rule out being bias in the selection.

Experimental Mortality:

There are times when participants will withdraw abruptly from a research or seize to participate for a reason or just like that, the researcher selected more members in order to replace lost members.

Absenteeism:

The treatment sessions was conducted during school hours in order to have full participation of members, and to rule out the problem of absenteeism. In the event of absenteeism, the researcher used appropriate measures in tackling the observed cause.

Absent mindedness:

There are times when participants will be present at the venue of the research but may not be paying attention, the researcher made sure that the sessions were very interesting and mind capturing.

Language Problem:

The researcher constantly made explainations at each step clearly for better understanding, and interpretation was made where and when necessary.

3.6 Instrumentation

Instrumentation is the process of selecting or developing measuring devices for gathering desired data. An instrument that focuses on questions about thoughts, fears, and behaviours, which is referred to as Spence Children's Anxiety Scale (SCAS) was used in identifying and selecting students with separation anxiety.

The Spence Children's Anxiety Scale (SCAS) was developed by Susan H. Spence (1994), in order to ascertain/identify children with anxiety problems. The

scale measures a wide range of anxiety symptoms, has a specific factor/scale, assessing separation anxiety symptoms, and provides information about other anxiety disorder symptoms. The subscales include: separation anxiety, panic/agoraphobia, social anxiety, generalized anxiety, obsession/compulsion and fear of physical injury. The six subscales of the SCAS has been established by confirmatory factor analysis (Spence 1997; Spence 1998). The instrument has been modified by the researcher in such a way that only items that address separation anxiety problems were selected from the original instrument, some questions were also modified in order to really ascertain those who will benefit from the treatment. The instrument was divided into two sections: the first section focuses on gathering background data about the respondents, which includes age and sex of the respondents. The second section focuses on gathering information about thoughts, feelings and behaviours of the respondents in relation to separation anxiety.

3.6.1 Scoring Key of Instrument

The SCAS was designed with Never, Sometimes, Often and Always. The responses was scored as follows:

Never = 0

Sometimes = 1

Often = 2

Always = 3

Students who scored 1.5-1.9 were considered as having low separation anxiety, those who scored 2.0-2,4, were considered as having moderate separation

anxiety, those who scored 2.5 and above were considered as having high separation anxiety, and were therefore selected for the study. The individual score was arrived at by dividing the total final score by fourteen (which is the total number of items on the instrument).

3.6.2 Validity of the Instrument

The concept of validity is a check of test efficiency and stability to measure what is expected to be measured, so as to minimize some errors and misinterpretations. It is in line of the above definition, that face and content validity was used by the researcher, where the drafted questionnaire was presented to my three (3) supervisors and two (2) internal supervisors, for their vetting and guidance, with the view of establishing a valid instrument for the study. The researcher relied on the assertions made by Kerlinger (2013) who believed that validation by specialists and experts is an effective method for content validation of research instruments.

3.6.3 Pilot Testing

In order to ascertain the validity and reliability of the instrument, the researcher tested the instrument in Government Commercial College, Sabon gari, Kaduna State which did not form part of the actual research, and the school happened to be co-educational. The same instrument for the study was used in the pilot study, but the number of participants were twelve (10), five (5) in each of the groups (treatment group1- systematic desensitization, treatment group 2 – token economy). The researcher used two weeks for the pilot study, Statistical tools were applied which scientifically confirmed the reliability of the instrument. The

term pilot study refers to mini version of a full-scale study (also called feasibility studies), as well as the specific pre-testing of a particular research instrument such as a questionnaire or interview schedule. Pilot studies are a crucial element of a good study design. Since pilot testing is a small-scale trial, where a few examinees take the test and comment on the mechanics of the test, the researcher focused on understanding problems that may likely arise from the test instrument, instances where items are not clear, formatting and other typographical errors and/or issues were corrected before the actual study was conducted.

3.6.4 Reliability of the Instrument

The reliability of the instrument was achieved through the pilot study that was conducted by the researcher in Government Commercial College Zaria. The selection of the school was based on the fact that the school is co-educational, therefore the issue of gender has been taken care of, and it is also a boarding school. Another reason is for the factthat, the school will not be used for the actual study.

The result of the pilot study where pre test and post test was carried out in order to ascertain the reliability of the instrument, where Cronbach Alpha was employed, and the instrument Spence Children Anxiety Scale (SCAS) for Separation Anxiety was found to have the reliability coefficient of 0.931. This shows that the instrument was reliable for data collection in this study for it has high reliability result. Find attached the result output in List of Appendices.

3.7 Procedure for Data Collection

The researcher followed a laid down guideline for obtaining data used for the study, permissions from appropriate authorities were obtained, and the explanation is as follows: The researcher submitted an introductory letter to the schools, which was drafted, signed and stamped by Department of Educational Psychology and Counseling Ahmadu Bello University Zaria. The letter was taken to Kaduna State Ministry of Education, Zaria Zonal Office, and rapport was established from there. Another letter was also given to the researcher to take to the individual schools where the study will be conducted. The researcher identified students for the study through the use of an instrument reffered to as Spence Children's Anxiety Scale (SCAS), which was administered to all the JSII students, with the view of identifying students with separation anxiety. The researcher treated the groups independently, where the first group received Systematic Desensitization Treatment, and the second group received Token Economy Treatment.

3.7.1 Pre Experimental Phase

The researcher started by obtaining a letter of introduction from Educational Psychology and Counseling Department, Ahmadu Bello University Zaria, addressed to Kaduna State Ministry of Education, Zaria Zone. Another letter of introduction was given to the researcher by Kaduna State Ministry of Education, Zaria Zonal Office to the schools that were used in the study. The individual schools were later contacted with the letter of introduction as obtained from the Educational Zonal office.

3.7.2 Treatment Phase

The researcher administered two treatment packages of systematic desensitization and token economy technique to Barewa College, Zaria and Government Girls' Secondary School (WTC) respectively. The researcher paid multiple visits to the schools.

First Visit: The researcher first of all visited the schools and submitted the letter obtained from the Educational Zonal Office, where the principal referred the researcher to the vice principal. The vice principal assigned a teacher to support the researcher in her work.

Second Visit: The researcher met the teacher assigned to support the programme, and the she explained how the selection of students will be done and solicited for the teacher's full support for the success of the research work. The teacher took the researcher to JSII block and introduced her to the students, the researcher explained to the students the purpose of her visit and how the programme will be carried out, though information concerning how the study will be carried out was not given in details, in order not to affect the outcome of the pre-test. The pre-test was successfully administered to the whole students in JSII. The interaction lasted for about 60 minutes in each of the schools.

iii) Scoring of Test and Sample Selection: The researcher after administering the instrument scored the test to determine students who are eligible for the programme and to prepare for the next return in order to administer the treatment and post-treatment. The point scored by each student depended on the

options s/he selected, since the instrument had a gradational scoring points attached to each option. The scoring procedure is exemplified in table 4:

Table 4 Example of Pre-test Calculation: This table shows an insignificant separation anxiety

Option Value	No. of Choice	Added Option Value	Final Score
Always-3	1=1*3	3	3
Often-2	2=2*2	4	7
Sometimes-1	6=6*1	6	13
Never-0	5=5*0	0	13
Total		13	13/14=0.9

Description of Pre-test Post-test Result

Table 5: Criteria for having separation anxiety: This table shows moderate separation anxiety

Option Value	No. of Choice	Added Option Value	Final Score
Always-3	4=4*3	12	12
Often-2	2=5*2	10	22
Sometimes-1	5=5*1	5	27
Never-0	3=3*0	0	27
Total		13	27/14=1.9

Presence of Separation Anxiety

Table 6: Criteria for selection: This table shows high level separation anxiety

Option Value	No. of Choice	Added Option Value	Final Score
Always - 3	8=8*3	24	24
Often - 2	5=5*2	10	34
Sometimes-1	1=1*1	1	35
Never - 0	0=0*0	0	35
Total		13	**35/14=2.5**

Eligible for Selection

The criteria for selection is based on the individual score mark after calculating the average, and students that scored 1.5-1.9, were considered as having low separation anxiety, those who scored 2.0-2.4, were considered as having moderate separation anxiety, and for those students who scored 2.5-3.0, were considered as having high separation anxiety. However, only those with

high separation anxiety were selected for the study, but for students who scored less than 1.5, were not considered as having separation anxiety, and therefore did not form part of the programme. From the examples in Table 3.2, the students did not meet the criteria for selection, as the final score was 0.9, which is less than 1.5. The second student was also not selected because he was considered as having low separation anxiety, with score of 1.93, which has fallen a little above low separation anxiety group. The third student was selected for the study because he scored 2.5, and has fallen within students with high separation anxiety. The selection was strictly determined by the outcome of the test which determined who was selected for the treatment, the students' willingness to participate was also considered by the researcher.

3.7.2 Treatment Phase

Each of the treatment lasted for six (6) weeks, and each session lasted for between twenty to thirty (20-30) minutes. Two groups were treated in each of the schools, one group received a treatment (systematic desensitization/token economy), and the other group served as a control group, which received no treatment.

Experimental Group: Systematic Desensitization (SD)

Systematic desensitization (SD) was administered to students in Barewa College Zaria, within ten (10) sessions. Each of the sessions lasted for twenty to thirty (20-30) minutes. The first session focused basically on introduction and understanding of each person's responsibilities. The second session was used to explain the meaning of separation anxiety and how systematic desensitization

could be used to effectively reduce some unwanted behaviours associated with the anxiety to the barest minimum or eliminate it completely. In the third and fourth sessions, the researcher introduced the concept of relaxation, students were guided on how to practice muscle relaxation. The fifth session was used in getting the participants to list out fear provoking feelings that affect them whenever they face the issue of separation, and they rearrange it in order of severity, (in hierarchy). The sixth and seventh sessions dealt with the introduction and explanation of Subjective Unit of Discomfort (SUD), the researcher gave examples on how to put the SUD into practice using the list developed by the participants,. They were guided on pairing the anxiety provoking situation to relaxation process, with the view of desensitizing them of the anxiety provoking event. Desensitization of the anxiety provoking situations continued into the eighth session.

The researcher used the Spence Children Anxiety Scale (SCAS) to assess changes observed, as regards to the feelings and responses associated with separation anxiety, which is regarded as the post-test in this research.

Relevant issues, such as participants' experience during the programme were discussed, and questions were answered. The researcher brought the programme to an end by thanking the participants and teachers who supported the field work throughout the sessions.

The researcher in the third session, together with the participants, explored some of the negative behaviours manifested by students during classroom or school session as a result of separation from attachment figures. Some of the problems they highlighted were as follows:

a) Withdrawal from classroom activities.

b) Absent mindedness

c) Nightmares

d) Poor performance

The researcher used fourth to eighth week in observing and reinforcing targeted behaviours using tokens in the form of pieces of cardboard paper cut to denote different money denominations, and made available, some tangibles in the form of writing materials (exercise books of different sizes, pens and eraser) were later exchanged using the tokens obtained by the participants.

3.7.3 Post Treatment Phase

The researcher used the ninth and tenth sessions to assess the level of changes in the participants' behaviours as regards to separation anxiety feelings, using the post-test instrument, which is exactly the same instrument used in the pre-test. The data collected were compared with that of pre test in order to assess the difference in outcome. The programme was brought to an end by discussing the experiences of the participants, alongside the supporting teacher during the course of the programme, questions raised were also answered, and the researcher thanked them for their time and cooperation.

3.8 Procedure for Data Analysis

The collected data was analyzed with the Statistical Package for the Social Sciences (SPSS), which was carried out by experts in the field of computer analysis. Mean and Standard Deviation were used for answering the research

questions and for data presentation. Paired sample t – test was used in analyzing the first and second hypotheses, because the researcher tested the effect of the treatment on the same group of students but at different interval (pre test and post test), and Analysis of covariance (ANCOVA) was employed to compare the two (2) variables. The models were used in testing the hypothetical statements that based on the objectives that form the focus of the study. It also enhanced the effective analysis of the interaction between the pre test and post test.

CHAPTER FOUR

RESULTS AND DISCUSSIONS

4.1 Introduction

This study is aimed at primarily assessing the effects of Systematic Desensitization and Token Economy Technique on separation anxiety among junior secondary school students in Zaria Metropolis. A total of twenty (20) students were selected and divided into two (2) equal groups who were exposed to Systematic Desensitization and Token Economy Technique. The Statistical package IBM version 23 was used for the analysis. The first section analyzed the presentation of the bio data variables using frequencies and percentages distribution by treatment groupings, gender and tests. The second section presents the research questions using mean statistics, the research hypotheses were tested using the inferential statistics of Analysis of Covariance and the Independent t test statistics, each hypothesis wass tested at 0.05 alpha level of significance. The summary of major findings were also presented at the end of the chapter.

4.2 Answering Research Questions

There are five (5) research questions raised for the purpose of this study, and the followings are the result of the data collected:

Question One: What is the effect of Systematic Desensitization on separation anxiety of junior secondary school students in Zaria Metropolis?

The researcher analysed the effect of systematic desensitization on separation anxiety among juniour secondary school students in Zaria Metropolis and the mean effect is presented in Table 4.2:

Table 7 Mean and standard statistics on the effect of Systematic Desensitization on separation anxiety among junior secondary school students in Zaria Metropolis

Subject		Pre-test	Post-test	Mean Effect
SDT (Treatment)	N	10	10	
	Mean	42.90	35.90	7.00
	SD	3.34	6.95	
Control	N	10	10	
	Mean	42.700	41.00	1.70
	SD	5.33	1.76	

Field Study 2017

Results of the descriptive statistics showed that systematic desensitization has effect on separation anxiety among junior secondary school students in Zaria metropolis. The descriptive statistics showed that the mean effect between Pre test and post test scores were 7.000 and 1.70 from using the SD and the control respectively implying that using the SD showed a significant improvement on separation anxiety than the control group.

Question Two: What is the effect of Token economy on separation anxiety among junior secondary school students in Zaria Metropolis?

The following table analysed the effect of token economy on separation anxiety among juniour secondary school students in Zaria Metropolis

Table 8: Descriptive statistics on the effect of Token economy on separation anxiety among junior secondary school students in Zaria Metropolis

Subject		Pre-test	Post-test	Mean Effect
Token Economy (Treatment)	N	10	10	
	Mean	42.60	33.70	8.90
	SD	3.33	7.93	

Field Study 2017

The outcome of the descriptive statistics showed that Token Economy has a positive effect on separation anxiety among junior secondary school students in Zaria metropolis. Because descriptive statistics showed that the mean improvement between Pre test and post test scores were 8.90 implying that using the Token Economy showed a significant effect on separation anxiety than the control group.

Question Three: What is the relative effect of Systematic Desensitization and Token Economy Technique on separation anxiety among junior secondary school students in Zaria Metropolis?

The analysis of the relative effect of Systematic Desensitization and Token Economy Technique on separation anxiety among junior secondary school students in Zaria Metropolis is presented in the table as follows:

Table 9 Mean statistics on differential effect of Systematic Desensitization and Token Economy Technique on separation anxiety among junior secondary school students in Zaria Metropolis.

Subject		Pre-test	Post-test	Total	Mean Effect
SD	N	10	10		
	Mean	42.90	35.90	39.4000	7.0
	SD	3.34	6.95		
Token Economy	N	10	10		
	Mean	42.60	33.70	38.1500	8.9
	SD	3.33	7.93		

According to the outcome of the descriptive statistics, there is no differential effect of Systematic Desensitization and Token Economy Technique on separation anxiety among junior secondary school students in Zaria Metropolis. . The descriptive statistics showed that the mean effect between Pre test and post test scores were 7.0 and 8.90 from using the Systematic Desensitization and Token Economy Technique respectively, implying an insignificant mean difference of 1.9 between them.

Question Four: What is the differential effect of Systematic Desensitization on separation anxiety of Male and Female students in Zaria Metropolis?

Analysis of the differential effect of Systematic Desensitization on separation anxiety of Male and Female students in juniour secondary schools of Zaria Metropolis is presented in table 4.2.3 as follows:

Table 10: Descriptive statistics on differential effect of Systematic Desensitization on separation anxiety of Male and Female students in Zaria Metropolis

Variable	Gender	Mean	Std dvt	Std Er Mean	Mean Diff	Remarks
Score	Male	5	36.40	8.23	3.68	1.00
	Female	5	37.40	5.94	2.65	

Field Study 2017

The descriptive statistics showed that there is no differential effect of Systematic Desensitization on separation anxiety of Male and Female students in Zaria Metropolis. The computed scores are 36.40 and 37.40 by male and female students respectively when Systematic Desensitization technique is used on separation anxiety. Implying an insignificant mean difference of 1.00 in favour of female. This insignificant mean difference confirmed that there is no significant differential effect of Systematic

Desensitization on separation anxiety of Male and Female students. Which is to say systematic Desensitization has the same effect on male and female students.

Question Five: What is the differential effect of Token Economy on separation anxiety of Male and Female students in Zaria Metropolis?

Analysis of the differential effect of Token Economy on separation anxiety of Male and Female students in Zaria Metropolis is presented in a table as follows:

Table 11: Descriptive mean statistics on differential effect of Token Economy on separation anxiety of Male and Female students in Zaria Metropolis

Variable	Gender	Mean	Std Dev	Std Er Mean	Mean Diff	Remarks
Score	Male	5	35.40	8.23	3.68	1.60
	Female	5	37.00	5.94	2.65	

Field study 2017

Results of the descriptive statistics showed that there is no significant differential effect of Token Economy on separation anxiety of Male and Female students in Zaria Metropolis. The computed scores are 35.40 and 37.00 by male and female students respectively, when Token Economy technique is used on separation anxiety. Implying an insignificant mean difference of 1.60 in favour of female students. This insignificant

mean difference confirmed that there is no significant differential effect of Token Economy on separation anxiety of Male and Female students. Therefore the null hypothesis which state that there is no significant differential effect of Token Economy on separation anxiety of Male and Female students in Zaria Metropolis, is hereby accepted and retained. This means token economy has the same effect on male and female students.

4.3 Hypotheses Testing

In testing the null hypotheses, the inferential statistics of the Analysis of covariance (ANCOVA) and the Paired sample t test statistics were used. Decision to accept or reject the mull hypotheses in each case was based on the 0.05 confidence level.

Hypothesis One: The null hypothesis states that there is no significant effect of Systematic Desensitization on separation anxiety among junior secondary school students in Zaria Metropolis

Hypothesis One: There is no significant effect of Systematic Desensitization on separation anxiety of junior secondary school students in Zaria Metropolis.

Table 12: **Paired sample t test statistics on the difference, before and after students' exposure to Systematic Desensitization Technique**

This table analysed the paired sample t test statistics on the difference, before and after students' exposure to Systematic Desensitization Technique.

Variable	Tests	N	Mean	Std.dv	Std.ER	Mean Diff.	df	t	P
Separation Anxiety	Pretest	10	42.00	11.13	2.101	10.00	9	4.6	0.001
	Posttest	10	32.00	12.00	1.404				

P calculated < 0.05, t computed > 1.96 at df 9

The results of the above Paired sample t test statistics revealed that significant difference exists between the pre test and post test scores of Systematic Desensitization (t=4.6, p=0.001). This is because the calculated p value of 0.001 is lower than 0.05 alpha level and the computed t value of 4.6 is higher than the t critical value of 1.96 at df 9. The computed mean anxiety are 32.00 and 42.00 in post test and pretest respectively , with a mean difference of 10.00 in favour of the post test after exposure. This shows that students' anxiety has significantly reduced as a result of exposure to the treatment. Therefore the null hypothesis which states that there is no significant effect of Systematic Desensitization in the mean anxiety scores is hereby rejected.

Hypothesis Two: There is no significant effect of Token Economy on separation anxiety among Juniour Secondary School Students in Zaria Metropolis.

Table 13: This table analysed the difference between the situation of separation anxiety before and after students' exposure to Token Economy Technique using paired sample t test.

Variable	Tests	N	Mean	Std.dev	Std.ERR	Mean Diff.	df	t computed	P
Separation Anxiety	Pre test	10	40.5	10.00	2.235	15.00	9	6.40	0.002
	Posttest	10	25.50	12.11	1.659				

P calculated < 0.05, t computed > 1.96 at df 9

The results of the above Paired sample t test statistics revealed that significant difference exist between the pre test and post test scores of anxiety as a result of students' exposure to Token Economy (t=6.40. p=0.002). This is because the calculated p value of 0.002 is lower than the 0.05 alpha level and the computed t value of 6.40 is higher than the t critical value of 1.96 at df 9. The computed mean anxiety are 22.50 and 40.50 in posttest and pretest respectively, with a mean difference of 15.00 in favour of the post test after exposure. This shows that students' anxiety scores has reduced significantly after the treatment, which signifies a positive effect of the Token Economy on separation anxiety. Therefore the null hypothesis which states that there is no significant effect of Token Economy on separation anxiety among junior secondary school students in Zaria Metropolis, is hereby rejected.

Hypothesis Three: The null hypothesis states that there is no significant differential effect of Systematic Desensitization and Token Economy Technique on separation anxiety among junior secondary school students in Zaria Metropolis.

Analysis of covariance statistics was employed to find out the differential effect of Systematic Desensitization and Token Economy Technique on separation anxiety among junior secondary school students in Zaria Metropolis and the result is presented in table 1:

Table 14: Analysis of Covariance statistics on differential effect of Systematic Desensitization and Token Economy Technique on separation anxiety among junior secondary school students in Zaria Metropolis

Hypothesis Three: Sysytematic Desensitization and Token Economy have no significant differential effect on separation anxiety of Juniour Secondary School Students in Zaria Metrolpolis

Test Between Subjects Effect

Dependent Variable: Scores

Source	Type II Sum of Squares	df	Mean Square	f	p value
Corrected Model	656.675[a]	3	218.892	6.554	.001
Intercept	60140.025	1	60140.025	1800.749	.000
Groups	15.625	1	15.625	.468	.498
TESTS	632.025	1	632.025	18.924	.000
Groups * TESTS	9.025	1	9.025	.270	.606
Error	1202.300	36	33.397		
Total	61999.000	40			
Corrected Total	1858.975	39			

a. R Squared = .353 (Adjusted R Squared = .299) Field Study 2017

According to the outcome of the Analysis of Covariance (ANCOVA), it shows no significant differential effect of Systematic Desensitization and Token Economy Technique on separation anxiety among junior secondary school students in Zaria Metropolis.

Reason being that the calculated p value of 0.606 in the groups versus Tests analysis is greater than the 0.05 alpha level of significance. And the computed F value of 6.554 is lower than the F critical value of 0.270.

Table 15: **Mean statistics on differential effect of Systematic Desensitization and Token Economy Technique on separation anxiety among junior secondary school students in Zaria Metropols**

Subject	Pre-test	Post-test	Total	Mean Effect
	N	10	10	
SDT				
	Mean	42.90	35.90	39.4000 7.0
	SD	3.34	6.95	
Token Economy	N	10	10	
	Mean	42.60	33.70	38.1500 8.9
	SD	3.33	7.93	

Field Study 2017

The descriptive statistics showed that the mean effect between Pre test and post test scores were 7.0 and 8.90 from using the Systematic Desensitization and Token Economy Technique respectively, implying an insignificant mean difference of 1.9 between them. Therefore, the null hypothesis which states that there is no significant differential effect of Systematic Desensitization and Token Economy Technique on

separation anxiety among junior secondary school students in Zaria Metropolis, is hereby retained

Hypothesis Four: The null hypothesis states that there is no significant differential effect of Systematic Desensitization on separation anxiety of Male and Female students in Zaria Metropolis.

Analysis of the null hypothesis that states there is no significant differential effect of Systematic Desensitization on separation anxiety of Male and Female students juniour secondary school of Zaria Metropolis is presented in table 4.2.6:

Table 16: Independent t test statistics on differential effect of Systematic Desensitization on separation anxiety of Male and Female students in Zaria Metropolis

	Gender	N	Mean	Std dev	Std Er Mean	Mean Diff	df	t cal	p
SCORES	Male	5	36.40	8.23	3.68	1.00	8	0.66	0.50
	Female	5	37.40	5.94	2.65				

Calculated p > 0.05, computed t < 1.96 at df 8 **Field Study 2017**

Results of the Independent t test statistics showed that there is no significant differential effect of Systematic Desensitization on separation anxiety of Male and Female students in Zaria Metropolis (t=0.66, p=0.50). Reason being that the calculated p value of 0.50 is higher than the 0.05 alpha level of significance. And the computed t value of 0.66 is lower than the 1.96 t critical value at df 8. The Male mean score is 36.40

and 37.40 by female students mean score respectively when Systematic Desensitization technique is used on separation anxiety. Implying an insignificant mean difference of 1.00 in favour of female. This insignificant mean difference confirmed that there is no significant differential effect of Systematic Desensitization on separation anxiety of Male and Female students. Therefore the null hypothesis which state that there is no significant differential effect of Systematic Desensitization on separation anxiety of Male and Female students in Zaria Metropolis, is hereby retained..

Hypothesis Five: The null hypothesis states that there is no significant differential effect of Token Economy on separation anxiety of Male and Female students in Zaria Metropolis.

Table 17: Independent t test statistics on differential effect of Token Economy on separation anxiety of Male and Female students in Zaria Metropolis

	Gender	N	Mean	Std dev	Std Er Mean	Mean Diff	df	t cal	P
SCORES	Male	5	35.40	8.87	3.96	1.60	8	1.38	0.20
	Female	5	37.00	5.95	2.6				

Calculated p > 0.05, computed t < 1.96 at df 8 Field Study 2017

Results of the Independent t test statistics showed that there is no significant differential effect of Token Economy on separation anxiety of Male and Female students in Zaria Metropolis (t=1.38, p=0.20). Reason being that the calculated p value of 0.20 is higher than the 0.05 alpha level of significance. And the computed t value of 1.38 is lower than the 1.96 t critical value at df 8. Their computed scores are 35.40 and 37.00 by

male and female students respectively when Token Economy technique was used on separation anxiety. Implying an insignificant mean difference of 1.60 in favour of female students. This insignificant mean difference confirmed that there is no significant differential effect of Token Economy on separation anxiety of Male and Female students. Therefore the null hypothesis which states that there is no significant differential effect of Token Economy on separation anxiety of Male and Female students in Zaria Metropolis, is hereby retained..

4.4 Summary of Findings

The findings from the study are summarized as follows:

1. Significant effect exists in using systematic desensitization on separation anxiety among juniour secondary school students in Zaria metropolis.
2. The study revealed a significant effect of Token Economy on separation anxiety among junior secondary school students in Zaria metropolis.
3. The study discovered no significant differential effect of Systematic Desensitization and Token Economy Technique on separation anxiety of junior secondary school students in Zaria Metropolis.
4. The study out that there is no significant differential effect of Systematic Desensitization on separation anxiety of Male and Female students in Zaria Metropolis ($t=0.66$, $p=0.52$).
5. There is no significant differential effect of Token Economy on separation anxiety of Male and Female students in Zaria Metropolis.

4.5 Discussions

One of the most effective tools used in attaining educational goals and objectives is the use of tests in educational research. The findings of this study revealed that the two techniques used (systematic desensitization and token economy) were effective in reducing separation anxiety among students in junior secondary schools of Zaria Metropolis. The findings of this study discovered a significant effect between the pre test and post test scores of systematic desensitization (t=4.6, p=0.001), which is in line with the findings Ventas, Higbee and Murdock (2001), who investigated the effectiveness of systematic desensitization for fear reduction, using humorous hierarchy scenes without relaxation. The analyses of covariance of post-test scores revealed that the 2 treatment groups showed greater reduction in fear than the controls on 3 measures but did not differ from each other. The findings of the study revealed that humour in systematic desensitization reduced fear as effectively as more traditional desensitization. Therefore, systematic desensitization can be used in the school to reduce separation anxiety in order to enhance students' performance in the class.

The findings of this study revealed a significant effect of Token Economy on separation anxiety among junior secondary school students in Zaria metropolis, where (t=6.40. p=0.002), thereby rejecting the null hypothesis. Even though the researcher could not find literatures that employed the use of token economy on separation anxiety directly, the researcher was able to tie the findings to the explanations made by Mirzamani, Ashoori & Sereshki (2011) in their investigation on the effect of social and token economy reinforcements on academic achievement of 9th grade boy student with intellectual disabilities in an

experimental science class in Tehran Province, the result indicated Token economy and social reinforcements increased the academic achievement of students with intellectual disabilities in the science class; and also the effect of token economy reinforcements was more than social reinforcement on the subjects. The findings of Chevelier (2012), who investigated the effect of token economy as an intervention to reducing disruptive and off-task behaviour of third grade students in an open concept setting, where students received tokens on an intermittent reinforcement schedule for being on-task, displaying compliant behaviour, or for the completion of academic assignments. The results indicated a significant decrease in disruptive behaviour in both classes.

The present study also confirmed the effect of token economy technique on separation anxiety of ten (10) students who were exposed to token economy treatment, where the study also rejected the null hypothesis that states no significant effect of token economy on separation anxiety among junior secondary school students in Zaria Metopolis.

In comparing the differential effect between systematic desensitization and token economy techniques, the researcher looked into the work of Ventas, Higbee & Murdock (2001), where they investigated the effectiveness of systematic desensitization on fear reduction, using humorous hierarchy scenes with relaxation. Analyses of covariance of post-test scores revealed that the 2 treatment groups showed greater reduction in fear than the controls on 3 measures but did not differ from each other, and humour in systematic desensitization reduced fear as effectively as traditional desensitization. The current study also revealed no

significant differential effect of Systematic Desensitization and Token Economy Technique on separation anxiety among junior secondary school students in Zaria Metropolis, but disagrees with the findings of Wincze & Caird (1976) study, who carried out a study on the effects of systematic desensitization and video desensitization in the treatment of essential sexual dysfunction in women, where twenty one women essentially complaining of sexual dysfunction were treated by either systematic desensitization or video desensitization. Seven subjects experienced a no treatment control phase before receiving therapy. Video desensitization was found to be more effective than systematic desensitization, and both desensitization procedures resulted in significant reduction in heterosexual anxiety compared to no treatment control subjects. The current study further accepted the null hypothesis that states no significant differential effect between systematic desensitization and token economy on separation anxiety among junior secondary school students of Zaria Metropolis. (p=0.606). The research findings of this study, also revealed no significant effect of gender on separation anxiety, which made the researcher accept the null hypothesis that states no significant differential effect of the two techniques on male and female students in juniour secondary schools of Zaria Metrolpolis (t=0.66, p=0.50), which is in line with the findings of Bakori (2014), who revealed that gender difference did not affect the treatment of the subjects in his investigation on the effect of cognitive restructuring and systematic desensitization in controlling high stake anxiety among final year secondary school students in Kaduna metropolis.

And the findings of Falaye (2010), who acknowledged that gender difference of his test anxious respondents did not relate to difference in cognitive test anxiety.

The findings of this study established the effectiveness of systematic desensitization and token economy in reducing separation anxiety of juniour secondary school students (0.20). Therefore, the two techiniques can be used to enhance students' participation in school activities, which can invariably lead to improved academic performance.

CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.1 Introduction

This chapter discussed the summary of findings of the whole research work, the conclusion drawn from the study and recommendations were presented, as well as suggestions for further study.

5.2 Summary

This study assessed the effects of systematic desensitization and token economy on separation anxiety junior secondary school students in Zaria metropolis. Separation anxiety was used as the dependent variable, which is considered normal at certain development stages, for example, when a little child is separated from his/her mother or other primary caregivers, he/she may experience distress, which is normal. Separation anxiety is often not recognized by parents, teachers and caregivers, but this study established the fact that it does exist among children in our schools; therefore came the need for careful observation, identification and careful treatment for children experiencing separation anxiety.

The first part of this research work provided a general background to the study; a clear statement was made on the problem of absenteeism, withdrawal from classroom activities, aggressive behaviours that bring about poor performance as a result of separation from home. The study addressed five (5) research questions of what is the effect of systematic desensitization on separation anxiety, what is the effect of token economy on separation anxiety, what is the differential effect of systematic desensitisation and token economy on separation

anxiety, what is the effect of systematic desensitisation on Male and Female separation anxiety, what is the effect of token economy on Male and Female separation anxiety of Juniour Secondary School Students in Zaria Metropolis. Five research hypotheses of there is no significant effect of systematic desensition and token economy on separation anxiety, a no significant differencial effect of systematic desensitization and token economy on separation anxiety and no significant effect of systematic desensitisation and token economy on separation anxiety of Male and Female in Juniour Secondary Schools of Zaria Metropolis were also tested, and the hypotheses like in other research works were constructed in order to give the study clear direction.

The researcher also assumed that systematic desensitization and token economy have significant effect on separation anxiety, there is a significant differential effect between systematic desensitisation and token economy on separation anxiety, it also assumed that both systematic desensitisation and token economy have significant effect on separation anxiety of Male and Female students in Juniour Secondary Schools of Zaria Metropois. The sudy is significant to Teachers, School Pschologists, Counselors and Policy Makers.

The study focussed on Students with separation anxiety in barewa College and Government Girls' Secondary School Zaria, and is limited to only those students identified with high separation anxiety, which is invariably the scope and delimitation of the study. Literatures were also reviewed based on the major variables of the study which includes concepts of separation anxiety which is the excessive worry and distress shown by persons who anticipate separation from

loved ones. Token economy which was explained as the reinforcement given to a child in order to increase the occurrence of a certain behaviour, and systematic desensitization is the gradual exposure of an individual to fear provoking object or situation using relaxation until that fear is reduced to barest minimum.

The researcher analyzed some theoretical frame works associated with the study, such as psychoanalytic theory by Freud where psychosexual development is a central element of psychoanalytic sexual drive theory. He believes that human beings right from birth, possess instinctual libido (sexual drive) that develops in five (5)stages, namely: Oral, Anal, Phallic, Latent, and Genital stages. Each of these stages is characterized by erogenous zone that is the source of libidinal drive. Freud further proposed that, if a child experiences sexual frustration in relation to any of the psychosexual stages, he or she would experience anxiety that would persist into adulthood as neurosis. Operant conditioning by Skinner who believes that behaviour is determined by its consequence as either reward or punishment, which makes it more or less likely to reoccur. Attachment theory Developed by Bowlby, he believes that human beings right from birth are pre programmed to form attachment with people close to them, and any threat to this bond, can activate separation anxiety in the individual.and social learning theory developed by Erikson who believes that human beings pass through a series of developmental stages, and each stage has two conflicting extremes (a positive and negative). To Erikson, ego develops as individual successfully resolves crisis that are distinctly social in nature. To him, the unsuccessful balancing in the two

extremes of each stage may expose the individual to psychological problems such as anxiety.

The researcher also reviewed some empirical studies related to the major variables of the study like the work of Ventas, Higbee and Murdock (2001), who investigated the effectiveness of systematic desensitization for fear reduction, using humorous hierarchy scenes with relaxation and the findings revealed a significant reduction of fear among the participants and the work of Waggy (2002), who investigated the effects of a token economy system in comparison to social praise on the manifest behaviours of learning disabled students at an elementary school in West Virginia, both techniques revealed a significant improvement in the learning of the participants.

This study also explained the research design used, which is pre test, post test quasi experimental design, where the two (2) techniques of systematic desensitization and token economy were used to treat separation anxiety among students so identified with the problem. The use of quasi experimental design is useful in this case because the researcher pre-tested and post-tested the participants. The population of the study comprises of 8,566 junior secondary school students in Zaria Metropolis**.** The sample of the study consists of 20 students, where 10 students formed the group for systematic desensitization and 10 students formed the group for token economy in the two schools, giving us a total of twenty students in the two groups.

The research findings from the study revealed that there is significant effect of systematic desensitization on separation anxiety among junior secondary

school students in Zaria Metropolis, therefore, it can be used in the school/classroom to reduce the problems associated with separation anxiety in order to bring about improvement in students' academec performance. And token economy also has a significant effect in the treatment of separation anxiety among junior secondary school students of Zaria Metropolis therefore teachers and counselors can use it to increase desired behaviour in the classroom.

It also discovered there is no significant differential effect of systematic desensitization and token economy on separation anxiety among junior secondary schools in Zaria metropolis, therefore teachers can use the two techniques to help students with separation anxiety improve their academic pursuit. The study also arrived at no significant differential effect of Systematic Desensitization on separation anxiety of Male and Female students in Zaria Metropolis, therefore, teachers and counselors can use systematic desensitization and token economy on students irrespective of gender, because the result of this study revealed a no significant difference between male and females who were exposed to the two treatments. The study also confirmed there is no significant differential effect of Token Economy on separation anxiety of Male and Female students in Zaria Metropolis. The findings of the study revealed the existence of separation anxiety in Nigerian schools as one of the problems affecting the academic struggle of students, therefore the general need to understand the problem and the therapeutic techniques of systematic desensitization and token economy as revealed in this study, the sole aim is to make the learning environment and teachers' strategy very effective in helping students achieve their academic goals and objectives.

5.3 Conclusion

Based on the findings of this study, it is concluded that systematic desensitization and token economy techniques can be used to treat, manage or modify the behaviours of students with separation anxiety. The study discovered the effect of systematic desensitization and token economy techniques in reducing separation anxiety of students in Juniour Secondary Schools.The study also concluded that the two techniques (systematic desensitization and token economy) were effective in treating separation anxiety of the students who were exposed to it, therefore the two techniques share similar strength and can be used in reducing separation anxiety of students identified with the problem. The study also revealed that gender plays no role in aiding or abating responce to the two techniques.

The study was only carried out in Juniour Secondary Schools of Zaria Metropolis, two techniques of systematic desensitisation and token economy techniques were used in treating students identified with separation anxiety. The study did not cover students in primary and seniour secondary schools.

Other treatment techniniques like cognitive restructuring, social praises among others, have not been explored in this research work, separation anxiety could also be present among Primary School Pupils which this research work did not cover. The conclusion is that students (both male and female) with separation anxiety can benefit from the two techniques, and researchers can also explore other areas that have not been covered by the present study.

5.4 Contributions to Knowledge

The study has contributed to the body of existing knowledge in the following areas:

1. It has discovered the existence of separation anxiety among Secondary School Students in Zaria Metropolis.
2. A therapeutic technique of Systematic Desensitization has been discovered to be effective in treating separation anxiety of Juniour secondary school students in Nigerian Schools.
3. Token Economy technique can also be used to reduce students' separation anxiety in secondary schools because this study has proven it to be a good technique in reducing separation anxiety among secondary school students.
4. Both Systematic Desensitization and Token Economy can be employed interchangeably to reduce student's separation anxiety in secondary schools, as revealed in this study, the two techniques were found to be effective in reducing separation anxiety among secondary school students.
5. That the use of systematic desensitization and token economy technique has no significant effect on the gender of students with separation anxiety.

5.5 Recommendations from the Study

Based on the findings and conclusions of the study, the following recommendations are offered:

1. That systematic desensitization should be employed to manage separation anxiety among students with separation anxiety in Nigerian Secondary Schools. This can be achieved through workshops that could be organized by Parent Teachers' Association at least once in every session, to expose teachers

and other staff to the use of systematic desensitization in reducing and eliminating separation anxiety among juniour secondary school students in Zaria Metropolis.

2. Token economy should be used to manage separation anxiety in Nigerian secondary schools. Provision for reinforcements in the form of tokens for teachers and school counselors to use on students with separation anxiety, by the school administrators/authority will go a long way in reducing separation anxiety.
3. Either of the two therapies (systematic esensitization and token economy technimique can be used by teachers and counselors to manage separation anxiety in Nigerian Secondary Schools.
4. Systematic Desensitisation should be employed by Teachers and School Counsellors to treat both Male and Female Students with separation anxiety in Nigerian Secondary Schools.
5. Token Economy should be employed by Teachers and School Counsellors to treat both Male and Female Students with separation anxiety in Nigerian Secondary Schools.

5.6 Suggestions for Further studies

The following spheres may provide a rewarding research experiences if explored:

1- Assessing the Effect of Systematic Desensitization and Token Economy on Separation Anxiety of Primary School Pupils.

2- Analysis of the Efficacy of Systematic Desensitization and Token Economy on Students with Separation Anxiety of Pre-Primary schools.

3- Finding out the Effect of Systematic Desensitisation on students with separation anxiety in Tertiary Instiutions.

4- Exploring the effect of systematic desensitization on students with separation anxiety in other states of the federation.

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Appendix A
Letter of introduction

Appendix B

SPENCE CHILDREN'S ANXIETY SCALE

Gender: **Date:**

PLEASE TICK AROUND THE WORD THAT SHOWS HOW OFTEN EACH OF THESE THINGS HAPPEN TO YOU. THERE ARE NO RIGHT OR WRONG ANSWERS PLEASE.

S/N	STATEMENT	Never	Sometimes	Often	Always
1	I worry about so many things related to me and my family.				
2	When I have a problem, I get a funny feeling in some part of my body, e.g stomach, leg				
3	I would feel afraid if left alone at home				
4	I worry about being away from my parents				
5	I worry that something awful will happen to someone in my family				
6	I feel scared if I have to sleep alone in a room				
7	I have trouble going to school in the mornings because I feel nervous or afraid				
8	I worry that something bad will happen to me				
9	I would feel scared if I had to sleep away from home				
10	I frequently check on the whereabouts of my parents or siblings				
11	I hate to leave home				
12	I suddenly begin to feel dizzy, headache or stomachache whenever I am about to travel				
13	Loss of appetite disturbs anytime I am about to travel				
14	I suddenly begin to have nightmares (bad dreams) when I am away from home				

Is there something else that you are really afraid of? YES OR NO (Circle as appropriate)

Please write down what it is

	How often are you afraid of this thing?				

C 1994 Susan H. Spence

Appendix C

Reliability Coefficient Case Processing Summary

	N	%
Case Valid	10	100
Excluded	0	.0
Total	10	100

List wise deletion based on all variables in the procedure

Table 5 Reliability Statistics

Cronbach's Alpha	Cronbach's Alpha based on Standardized Items	No. of item
.932	.931	14

Appendix D

Treatment Sessions

Treatment One: Token Economy

Session 1:

I. The participants will be gathered together in the same venue for formal introduction of each other.

II. Teachers and participants will be brought together and will be welcomed to the program by the researcher.

Session 2: Nature and Purpose of the Treatment

I. The researcher will explain how the treatment and the sessions will be carried out within the weeks as planned.

II. The researcher will explain how the tokens will be rewarded for any appropriate behavior exhibited during lesson.

III. The participants will also be informed on how they can exchange tokens for tangibles.

IV. The researcher will explain to the participants how the program will help in improving their behavior.

V. Remarks will be made on repeated complaints of physical symptoms, refusal to go to school, poor school performance, failure to interact in a healthy manner with other children and violent, emotional temper tantrums, by the researcher.

Session 3: Exposure to Regular School Attendance

I. Regular school attendance will be explained to the participants, they will be informed on how regular school attendance can affect their learning positively.

II. Researcher will give lesson on a chosen topic.

III. The researcher will reinforce positive behavior exhibited with a token.

Session 4: Exposure to Classroom Activities

I. Engaging in classroom activities will be explained to the participants.

II. Benefits of engaging in classroom activities to the learner will be explained.

III. The researcher will inform the participants how to avoid withdrawing from classroom activities and its negative effect on their performance.

IV. Researcher will give lesson in a chosen subject, that means, the researcher will deliver lesson in a chosen subject.

Session 5: Engaging in Extracurricular Activities

I. The term extracurricular activities will be explained to the participants.

II. The benefits and examples of extracurricular activities will be explained to the participants.

III. Researcher will give lesson in a chosen topic.

IV. Positive response will be rewarded with tokens.

Session 6: Exercising Patience in Classroom

I. The meaning of patience will be explained to the participants.

II. Participants will be guided on how to exercise patience.

III. They will be informed on how patience can help them to relate with friends peacefully.

IV. Researcher will teach a topic from a chosen subject.

V. Positive behavior will be reinforced using a token.

Session 7: Review of previous activities

I. Previous activities will be reviewed.

II. Participants will answer questions that will be asked.

III. The researcher will thank and appreciate participants for their cooperation.

IV. Participants will be rewarded for their regular attendance and active participation throughout the sessions.

V. Researcher will also show appreciation to school authority for their support and cooperation throughout the sessions.

Treatment 2: Systematic Desensitization

Session 1: Introduction

I. The participants will be brought together for formal introduction.

II. Researcher will formally welcome teachers and participants to the programme, and each person will introduce himself to the audience.

III. The researcher explains to the participants her responsibilities.

IV. The researcher will emphasize the importance of developing a collaborative relationship for the success of the programme.

V. Researcher will appreciate participants for attending the session and give them opportunity to ask questions.

VI. The researcher then announces coming to the end of the session.

Session 2:

I. Researcher welcomes participants to the second session.

II. The researcher explains to the students her responsibilities throughout the session.

III. The researcher will also stress the importance of collaborative relationship for the success of the programme.

IV. The researcher will sought for the students' commitment before proceeding to the next step.

V. The researcher then explains the meaning of systematic desensitization.

VI. The goals of the treatment will be set collectively between the researcher and the students.

VII. The researcher then gives the students homework which will form part of the next session. The students are to list ten negative feelings when they are about to experience separation from a loved one (e.g. parent, siblings, caregivers).

Session 3: Relaxation

I The researcher warmly welcomes the students to the new session.

II The students will then be introduced to Progressive Muscle Relaxation (PMR) and its application on behavioural change in treatment procedure, and how they can be taught to use relaxation process and procedure.

III The researcher then teaches them the procedure for PMR, which involves creating tension on parts of the body and then relaxing to ease the tension.

IV The researcher asks the students what part of their body becomes tense when they experience separation anxiety. It is expected that students will itemize the tensed part of the body.

V The researcher can also add some parts of the body that are likely to get tensed up, and ask for the students' confirmation.

VI The steps and procedures of the relaxation would then be listed out and explained by the researcher, in preparation for practice in the next session. The student is not to practice on his own before practicing it with the researcher.

VII The researcher gives room for questions, and brings the session to the end.

Session 4: Practicing relaxation

I The researcher welcomes the students to another session.

II. The researcher reviews the achievements made in the previous sessions.

III. The researcher will list out parts of the body that will be used during the relaxation session, which includes: Arms, Neck, Hands, Face and Shoulders.

IV. The researcher asks the students to raise their arms on the armchairs and tighten their fists for some moments. The student will be asked to tighten the fists more and more until it becomes very tensed, then they would be asked to release the tension. This would be practiced for some time before to next muscle.

V. The students will be asked to close their eyes tightly, clench their jaws and grimace in such a way that the whole face will feel the tension, then they would be asked to release the tension. They would then be asked to repeat the same thing over and over again, before moving to the next muscle.

VI. The researcher will ask the students to lift their arms until they are almost touching their ears, then tighten their shoulders, until the tension is felt, then they will be asked to release the tension. It will be repeated severally before moving to the next muscle.

VII. While resting their arms on the chair, the students will be asked to tighten their fingers by clenching them tightly together, holding them tightly together until

they can feel the tension, then they will be asked to release the tension. That will be repeated over and over again.

VIII. The researcher will then ask students to relate their feelings from the exercise. After which the session will come to an end with general discussion. The researcher will intimate the students to continue the practice before the next session.

Session 5:

I. The researcher welcomes students to a new session.

II. The researcher will remind students what has been done during the previous session, and asks students how far they have gone with regards to practicing muscle relaxation.

III. The researcher will then inform students the next muscles that will be covered during this session, which will include: Chest, Stomach, Back, Legs and some other body parts.

IV. The student will be instructed to take a long breath until tension is felt in the chest muscles. They would then be asked to release the tension by breathing out. They will be asked to repeat the same process over and over again, before moving to the next muscle.V

V. The researcher will ask the students to take another deep breath, until tension is felt, but the focus will now be on the stomach muscles. This will be repeated severally, before moving to the next muscle.

VI The students will be asked to lift up their toes in the air while they are seated, and ensure they are really in upward position, in such a way that both the upper and lower legs will be tensed up. The legs will be held in that position for a while until tension is felt, they will be asked to release the tension by putting their legs down. This process will be repeated over and over again, before moving to the next muscle.

VI. The students will be asked to Straighten their two hands upwards while they are seated on a chair, the hands will be held up for some time until tension is felt on

the back muscle, then they will be asked to release the tension by bringing down the hands gently.

VII. The researcher will then ask the students if they have discovered any other muscle that has become tensed when they were anxious. Relaxation process should be followed on the newly discovered muscle.

VIII. Students will be asked to practice the processes more and more before the next session.

Session 6:

I.` The researcher welcomes students to another session that will look into anxiety hierarchy. She then explains the meaning of anxiety hierarchy.

II. The researcher explains to students the importance of reporting truthfully what they feels in their minds, as that is what will ensure success at this stage.

IV. The researcher asks the students to mention the events about high-stake separation that makes them anxious.

V. With the successful identification of these events, fifteen most prevailing of the events will be shortlisted. The researcher then teaches the students how to assign Subjective Unit of Discomfort (SUD) to each of the events on the scale of 0-100. The ratings will be collected and organized out of which 10 most anxiety provoking events will be decided. As example, the list may look like the following:

i) Resumption date approaches.

ii) Visiting relations as resumption date closes up.

iii) Shopping for school.

iv) Washing clothes on weekend in preparation for school.

v) Arranging items in the box for school.

vi) Taking bath in preparation for school.

vii) Assembling luggage in the vehicle.

viii) Parents getting ready to accompany him back to school.

ix) Student arriving at the school in company of his parents.

x) Parents waving me goodbye while leaving.

I. The researcher works with the students to develop anxiety hierarchy base on their personal feelings about separation, which will be done during the session, and SUDs will be assigned by the student.

II. The researcher concludes the session by asking students to any observation on the process just concluded.

Session Seven (7): (Desensitization)

I. The researcher welcomes participants to another session, and reviews the previous session's work by asking them to explain what they understand by anxiety hierarchy.

II. Researcher gives more explanations on anxiety hierarchy with some applicable examples.

III. Researcher explains in detail how anxiety hierarchy differs between individuals, as separation clues are more frightening to some individuals than others.

IV. The researcher gives out home work for students to list down events that make them afraid of separating from home/parents/caregivers. They are to present the list in the next session.

V. The students will be given time to ask questions regarding the home work or anxiety hierarchy.

VI. The researcher then introduces the concept of Subjective Unit of Discomfort (SUD), its meaning and rating process.

VII. The researcher concludes the session by asking participants to mention objects that easily scare them. They will then be introduced to imagining that object and also practice rating how comfortable they will feel while imagining the object.

Session 8: (Desesnsitization)

I. The researcher welcomes participants to another session in systematic desensitization.

II. The participants will be asked to visit the list they formed on anxiety hierarchy in the previous session, because that is what they will use for the actual systematic desensitization.

III. The participant will be asked to sit quietly and comfortably on armchair, with his eyes closed, and imagine the first scene from his list. The first scene is thinking about the resumption date approaches. He will be requested to imagine the scene very clearly and to raise his index finger when fully in the scene. The researcher will then stop the participant and

asks him to record his SUD. He will then be asked to repeat the process again and again, until the SUD get to 25.

IV. The next stage will be to imagine visiting relations as resumption date closes up, the participant will be asked to imagine the scene, raise his index when he is fully in the scene, he will then be told to stop, and record his SUD. Then he should deeply relax all parts of his body. He will then be asked to repeat the process until when SUD drops to 25.

V. The participant will be asked to imagine shopping for school; he should raise his index finger when he is fully into the imagined situation. He will then be asked to stop and record his SUD, after which he will relax all his body parts and restart the imagination, he will continue the practice until when the SUD is 25 or below.

VI. The participant will be told to imagine washing his clothes, and raise his index finger when he is fully into the scene. The participant will be asked to record his SUD, and continue the process until when the SUD is 25 or less.

VII. Then the researcher will give the student room to ask questions or put forward any observation.

VIII. The researcher will bring the session to an end by answering questions raised by the students.

Session 9:

I. The researcher welcomes participants to session nine, as desensitization of the anxiety hierarchy they developed will continue.

II. The participant will be asked to imagine arranging his school items in the box, then raise his index finger when he is fully in the imagined situation, and record the SUD. The participant will be asked to repeat the same process until when SUD is 25 or below.

III. Then the participant will be asked to imagine waking up on the resumption day and taking in his bath in preparation for school, and record his SUD when he is fully into the scene. That is how the process will be repeated until when the SUD is 25 or less.

IV. The participant will be asked to imagine assembling his luggages inside the vehicle, and raise his index finger when he is fully into the scene, then record the SUD. He is to repeat the process until when the SUD is 25 or less.

V. The participant will be asked to imagine his parents getting ready to accompany him to school, and raise his index finger when he is fully into the scene, then records the SUD, and continue until when the SUD is 25 or below.

VI. The participant is to imagine his parents arriving at the school with him. He is to raise his index finger when he is fully into the scene, and record the SUD. The same process will be repeated until when SUD is 25 or less.

VII. The researcher will then ask the student to imagine parents waving him goodbye while leaving the school, then raise his index finger and record SUD when he is fully into the imagined situation. This process will be repeated until when SUD is 25 or less.

IX. The session will come to an end by asking the students to freely make their observations on their experiences and the effect the treatment has on their anxious feelings.

Session 10:

I. The researcher welcomes the students to another session which is the final stage of the treatment sessions.

II. The researcher appreciates the cooperative efforts of the participants throughout the period of the programme.

III. The participants will be asked to discuss the effect of the treatment on their anxious feelings.

IV. The participants will be asked to discuss the general aspects of separation anxiety and the treatment sessions that have been followed.

V. The researcher will explain the posttest that is about to be given to them.

VI. The researcher thanks the participants and teachers that assisted her throughout the period of the exercise.

Appendix E

RESULT OF THE PILOT TESTING

Reliability Coefficient

Case Processing Summary

		N	%
Cases	Valid	12	100.0
	Excluded[a]	0	.0
	Total	12	100.0

a. Listwise deletion based on all variables in the procedure.

Reliability Statistics

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.932	.931	14

Research Hypotheses

Hypothesis one

There is no significant difference in the effect of systematic desensitization on separation anxiety of those exposed to treatment and those in control group among junior secondary school students in Zaria Metropolis.

Group Statistics

	GROUP1 (SYSTEMATIC DESENSITIZATIO)	N	Mean	Std. Deviation	Std. Error Mean
SEPARATIONANXIETY	TREATMENT	10	34.9091	8.16645	2.46228
	CONTROL	10	48.4000	3.40588	1.07703

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means						
		F	Sig.	T	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
									Lower	Upper
SEPARATION ANXIETY	Equal variances assumed	7.467	.013	-4.846	19	.000	-13.490911	2.78388	-19.31764	-7.66418
	Equal variances not assumed			-5.020	13.638	.000	-13.490911	2.68753	-19.26947	-7.71234

HYPOTHESIS TWO:

There is no significant difference in the effect of token economy system on separation anxiety disorder of those exposed to treatment and those in control group among junior secondary school students in Zaria Metropolis.

Group Statistics

	GROUP2(TOKEN ECONOMY)	N	Mean	Std. Deviation	Std. Error Mean
SEPARATION ANXIETY	TREATMENT	10	26.7000	4.44847	1.40673
	CONTROL	10	47.0000	4.39697	1.39044

Independent Samples Test

	Levene's Test for Equality of Variances		t-test for Equality of Means						
								95% Confidence Interval of the Difference	
	F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper

SEPARATIONANXIETY	Equal variances assumed	.759	.395	-10.263	18	.000	-20.30000	1.97793	-24.45548	-16.14452
	Equal variances not assumed			-10.263	17.998	.000	-20.30000	1.97793	-24.45553	-16.14447

Hypothesis three:

There is no significant difference in the effect of systematic desensitization in the pre and post-test mean score on separation anxiety disorder among junior secondary school students in Zaria Metropolis.

Group Statistics

	GROUP2(SD)	N	Mean	Std. Deviation	Std. Error Mean
SEPARATIONANXIETY2	PRE-TEST	10	36.9000	4.81779	1.52352
	POST TEST	10	21.2000	4.44222	1.40475

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means						
									95% Confidence Interval of the Difference	
		F	Sig.	T	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper
SEPARATIONANXIETY2	Equal variances assumed	.552	.467	-7.576	18	.000	-15.70000	2.07230	-20.05375	-11.34625
	Equal variances not assumed			-7.576	17.883	.000	-15.70000	2.07230	-20.05580	-11.34420

Independent Samples Test

	Levene's Test for Equality of Variances	t-test for Equality of Means

		F	Sig.	T	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
									Lower	Upper
SEPARATIONANXIETY2	Equal variances assumed	.552	.467	-7.576	18	.000	-15.70000	2.07230	-20.05375	-11.34625
	Equal variances not assumed			-7.576	17.883	.000	-15.70000	2.07230	-20.05580	-11.34420

Hypothesis four:

There is no significant difference in the effect of token economy system in the pre and post-test mean score on separation anxiety disorder among junior secondary school students in Zaria Metropolis.

Group Statistics

	GROUP1(TE)	N	Mean	Std. Deviation	Std. Error Mean
SEPARATIONANXIETY2	Post-treatment	11	28.2727	5.69370	1.71671
	pretest	10	38.1000	3.90014	1.23333

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means						
									95% Confidence Interval of the Difference	
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper
SEPARATIONANXIETY2	Equal variances assumed	2.543	.127	-4.566	19	.000	-9.82727	2.15241	-14.33232	-5.32222
	Equal variances not assumed			-4.649	17.737	.000	-9.82727	2.11382	-14.27297	-5.38158

Hypothesisfive:

There is no significant difference in the effect of systematic desensitization and token economy on separation anxiety disorder among junior secondary school students in Zaria Metropolis.

Group Statistics

	GROUP2(SD)	N	Mean	Std. Deviation	Std. Error Mean
SEPARATIONANXIETY3	Token economy	10	19.4000	4.03320	1.27541
	Systematic desensitization	10	33.7000	4.94526	1.56383

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means						
									95% Confidence Interval of the Difference	
		F	Sig.	T	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper
SEPARATIONANXIETY3	Equal variances assumed	.712	.410	-7.086	18	.000	-14.30000	2.01797	-18.53961	-10.06039

	Equal variances not assumed			-7.086	17.300	.000	-14.30000	2.01797	-18.55193	-10.04807