

Effectiveness of Behaviour Therapy in Management of Internalizing Problem Behaviour of Primary School Children

Gopal Ch. Mahakund

University of Delhi, South Campus, New Delhi

The effectiveness of behavior therapy for the management of internalizing problem behavior in school going children is found across many studies. The present study was planned to investigate the effects of behavior therapy such as the Token economy, Stimulus control, Modeling, Storytelling, Jacobsen progressive relaxation technique for the management of internalizing problem behavior on 30 school going children from Delhi NCR, India. The participants of the present study were selected using purposive sampling technique. The assessment and intervention were conducted on a small group comprising of 4-5 children in one group. All the participants were free from mental retardation, which was pre-diagnosed by their school counselor. The internalizing problem behavior was assessed using Conner's Teachers Rating Scale (Conner, 1990), Child Behavior Rating Scale (Cassel, 1962) and Problem Behavior Checklist (Veeraraghavan & Dogra, 2000). The results of the present study indicate a significant difference in problem behaviors - Classroom Behavior ($P=0.019^*$); Attitude towards Authority ($P=0.004^{**}$); Home Adjustment ($P=0.018^*$); Physical adjustment ($P=0.026^*$) and total adjustment ($P=0.026^*$) between genders. The result also confirmed an improvement in internalizing problem behaviors ($P=0.000^{**}$) because of behavior therapy. Hence, it can be concluded that behavior therapy is one of the effective techniques for the management of internalizing problem behavior in school going children.

Keywords: Internalizing problem behaviour, Stimulus control, Storytelling, Modeling, Token economy.

Behavioral Intervention for the management of problem behaviour especially in management of internalizing problem behaviour found effective in many studies. Therefore, the application of behavioral intervention is one of the major techniques in the field of psychological intervention for the management of problem behaviour and other psychological disorders. Although there are different techniques of behavioral intervention in management of problem behaviour especially internalizing problem behaviour, some of the components of behavioral intervention like Token economy; (Reppucci, & Saunders, 1974; and Zlomke, & Zlomke, 2003); Storytelling, (Painter, Cook, & Silverman, 1999), Modeling, (Dishion, McCord, & Poulin, 1999; and Mackinnon, Griffiths, & Christensen 2008) Jacobson's Progressive Muscle Relaxation (JPMR), (Borkovec, & Sides,

1979) and stimulus control techniques, (Ainslie, 1975) found more effective in management of the problem behavior in school going children. Some studies (e.g. Zlomke, & Zlomke, 2003; Antshel, & Barkley, 2008, and Boone-Thornton, 2008) have illustrated the effectiveness of token economies and contingency plans with behaviorally and /or emotionally disordered youth for a variety of target behaviors, including aggression, on-task behavior, and social skills.

The other frequently used behavioral intervention in the treatment of internalizing problem behavior is modeling. Some researchers (e. g. Graziano, DeGiovanni, & Garcia, 1979; and Morris & Kratochwill, 1983) conducted a study using modeling-based interventions in the treatment of internalizing problem behavior of the school going children. The study includes multiple models (Graziano, DeGiovanni, &

Garcia, 1979); participant modeling (Rosenthal & Bandura, 1978); and 'coping' models, in which the child originally demonstrates fear, then gradually masters the problem (Meichenbaum, 1971).

Researchers (e.g. Runyon, Basilio, Van Hasselt, & Hersen, 1998; and Berking, Ebert, Cuijpers, & Hofmann, 2013) affirmed that JPMR helps to reduce the number of internalizing problem behaviors such as anxiety, phobia, aggression, sadness etc by reducing muscle tensions. Lopata, (2003) implemented (JPMR) to manage the aggression in elementary school children and found it is effective in the management of internalizing problem behavior. Studies (e.g. Webster-Stratton, 2005; and Meichenbaum, 2007) found the effectiveness of storytelling in the management of internalizing problem behavior such as aggression, stress, anxiety, and depression especially in school going children. Some of the researchers (e.g. Prochaska, DiClemente, & Norcross, 1992; and Cooper, Heron, & Heward, 2007) confirmed the effectiveness stimulus control in the management of internalizing problem behavior in children.

In comparison to gender difference in problem behavior researchers (e.g. Ge, Lorenz, Conger, Elder, & Simons, 1994; Zahn-Waxler, 2000; Eisenberg, et. al. 2001; Connell, & Goodman, 2002; Pepler, et.al. 2010) confirmed that boys are more prone to show externalizing behavior than girls whereas girls are more prone to internalizing problem behavior. Although there are many studies conducted in the field of problem behavior, but very few studies conducted to find out the effectiveness of behavior therapy in the management of problem behavior and the gender difference in internalizing problem behavior especially in the Indian subcontinent. Therefore, the present study was planned to explore the internalizing problem behavior in school going children and the effectiveness of behavioral intervention comprising token economy, modeling, JPMR, storytelling and stimulus control in the management of internalizing problem behavior of children from Delhi NCR, India.

Objectives:

- 1) To explore the internalizing problem behavior in primary school children.
- 2) To investigate the effectiveness of behavior therapy in dealing with internalizing problem behavior among the primary school children.
- 3) To find out the gender difference in internalizing behavior of the primary school children.

Hypotheses:

- There will be a significant difference in internalizing problem behavior between male and female primary school children.
- Behavioral intervention such as the token economy, modeling, JPMR, storytelling and stimulus control will reduce the internalizing problem behavior in primary school children.

Method

Design:

A small group comprised of 4 to 5 children followed by A1-B-A2 design for the present study, where A1 is the pre-intervention assessment, B is the intervention, and A2 is the post-intervention assessment.

Sample:

A total of (N=30) primary grade school going children aged 6 to 10 years (with the median age of 8 years) having problem behaviors were selected following the purposive sampling. All these participants were already pre-diagnosed having internalizing problem behaviour before they participated in the present study by their school psychologist. Out of the total participants (n1=15 were boys, n2=15 were girls) selected from different school setting of Delhi NCR region. The study followed a purposive sampling technique where all the participants were diagnosed that they are free from the criteria of mental retardation.

Material:

Conner's Teachers Rating Scale (Conner, 1990). For the internal consistency and construct and criterion-related validity of this Scale

emphasis was given to its utility as a measure of Attention-Deficit/Hyperactivity Disorder (AD/HD) and other disruptive behavior disorders. It was conducted and standardized with teachers of 540 boys and girls ages of 5-10 years. The internal consistency of the factors ranged from 0.87 to 0.94. Convergent validity with similar rating scales generally yielded adequacy, but there was no strong, relationships in-between.

Child Behavior Rating Scale (Cassel, 1962): This scale measures the child's condition of behavior and personality adjustment. This instrument was developed by Cassel (1962) and it is an objective assessment of children from preschool through third grade. It consists of 78 brief statements to be rated by someone familiar with the child (such as parent and/or teacher) on a scale of six values ranging from "Yes" to "No." It provides a profile of the child's adjustment in five different areas (self, home, social, school, and physical) along with a single score to indicate total adjustment. The CBRS has a construct validity index of 0.481 with the Vineland Social Maturity Scales. A split-half reliability coefficient of 0.873 was obtained when comparing odd-even items for 800 typical children and 0.589 for 200 maladjusted children.

Problem Behavior Checklist (Veeraraghavan & Dogra, 2000): This checklist was developed by Veeraraghavan and Dogra, (2000) and it is 3-point rating scale ranging from Most often (3) to Never (1). The checklist consists of 58 items. It indicates three conditions of problem behavior i.e. Low problem behavior ranging from the raw score of 58-96, followed by moderate problem behavior ranging from the raw score 97-135 and high problem behavior ranging from the raw score 136-174. The standardization of the checklist is based on test-retest reliability (0.85) and split half reliability (0.81). The validity of the checklist is based on face validity and content validity.

Procedure:

As all the participants were pre-diagnosed by their school psychologist that they were having the internalizing problem behaviour, still it was confirmed by their school teachers and their parents regarding their problem behavior. The researcher administered Conner's Teacher

Rating Scale (Conner, 1990). It is meant to assess the extent of deviant classroom behaviors (e.g., non-participation, inattention). It was completed by each of the subject's class teachers. The researcher used Child Behavior Rating Scale (Cassel, 1962) and Problem Behavior Checklist (Veeraraghavan & Dogra, 2000) to assess the degree of the problems which are related to their children. The data related to Child Behavior Rating Scale and Problem Behavior Checklist were collected from the respective mothers of the participants as Thompson, Acock, and Clark (1985) affirmed that mothers are slightly more accurate about the attributes of their children than to their fathers. In the present study, the researchers have targeted the following behaviors such as shyness, low self esteem, self degradation, withdrawal from social activities, depression and incomplete homework. The researchers used same measures for both pre and post intervention conditions to see the effects of behavioral intervention for the management of problem behavior in the participants.

In the intervention condition, the researcher divided the total participants into 6 major subgroups comprised of 5 participants in each group. The sub-groups were selected randomly. Each subgroup was provided 15 sessions of behavioral intervention components randomly followed by Jacobson Progressive Muscle Relaxation (Jacobson, 1929). The procedure for this was taken from the study of Lopata, 2003. It helps to reduce aggressive behavior among elementary school children using JPMR. Lopata (2003) used JPMR initially by bringing the children to the relaxed state of mood. Thereafter, children were shown a video on good manners and were trained how to behave with others. The procedure for modeling technique in the present study was used from Lonnecker, Brady, McPherson, and Hawkins, (1994). In their study, the researchers used a video on Self-Modeling and Cooperative Classroom Behavior. Besides that, after the video session, a detailed conversation related to the video was held with each participant in each subgroup of the participants. In the present study, the researcher used storytelling technique to manage the problem behavior of

the participants. In the storytelling technique, the researcher narrated the video related story that was displayed in the modeling techniques of behavioral intervention. Participant's behavior was controlled by interrupting them whenever they showed undesirable behavior.

During the intervention program, the researchers used token economy in a way that for every desirable behavior a smiley (or tokens) was given. For 10 smileys or tokens, the researcher converted the token into some reward, according to the participant's preferred objects (e.g. Soft drinks, Chocolate, etc). This is a type of reinforcement system, which was based on the delivery of tokens i.e. "token economy" (Kazdin, 2005). In the present study, the researchers also used stimulus control, especially, the stimulus that influences the problem behavior of the participants. The stimulus control behavioral technique in the present study was taken from Ainslie (1975) to manage the problem behavior in children.

Data Analysis: A quantitative analysis following the measures used in the present study. The researcher critically analyzed the quantitative results using both descriptive and inferential statistics. The inferential statistics followed by the non-parametric test, Mann-Whitney U for comparison between male (n1=15) and female (n2=15). Further, the researcher used dependent (paired) students 't' test to find out the effectiveness of the intervention from the pre-intervention condition to the post-intervention condition as the total sample was (N=30).

Results and Discussion

The results of the present study in regard to Conner's Teacher Rating Scale indicates the mean average percentage of the score of classroom problem behavior at the pre-intervention condition of boys is 70.90 ± 11.57 whereas in girls it is 60.53 ± 7.20 followed by the mean rank 19.27 in boys and it is 11.73 in girls. The comparison result of classroom problem behavior between boys and girls at pre-intervention condition indicates a significant difference ($U=56.000$, $P=0.019^*$) which tells that boys have more internalizing problem behavior than to girls. The mean average

percentage of the score of group participation at pre-intervention of boys is 51.39 ± 21.05 whereas in girls it is 58.89 ± 10.90 having the mean rank of scores 13.47 in boys and it is 17.53 in girls. The comparison result of group participation between gender indicates no significant difference ($U=82.000$, $P=0.217$). The mean average percentage of the score of Attitude towards Authority at pre-intervention of boys is 61.21 ± 7.26 and in girls, it is 51.52 ± 8.73 having the mean rank 20.07 in boys and it is 10.93 in girls. The comparison result of Attitude towards Authority between boys and girls at pre-intervention condition indicates a significant difference ($U=44.000$, $P=0.004^{**}$) which tells that boys have more problem in attitude towards Authority than to girls. At last, the mean average percentage of the score of Conner's total problem behavior at pre-intervention condition indicates an equal score (i.e. 57.72 ± 5.57). The mean rank of Conner's total problem behavior also indicates an equal ranking (i.e. 15.50) of boys and girls. The comparison result of Conner's total problem behavior between boys and girls' participants at pre-intervention condition indicates no significant difference ($U=112.500$, $P=1.000$) that indicates both boys and girls have the same condition of problem behaviors during their early age of life. The results of the present study are similar to the results of Serbin, O'Leary, Kent, and Tonick, (1973).

In Child Behavior Rating Scale, the mean average percentage of the score of Self Adjustment at the pre-intervention condition in boys is 43.39 ± 7.00 and in girls, it is 42.44 ± 14.80 having the mean rank of 18.07 in boys and 12.93 in girls. The comparison result of Self Adjustment between boys and girls at pre-intervention condition indicates no significant difference ($U=74.000$, $P=0.116$). The mean average percentage of the score of Home Adjustment at the pre-intervention condition in boys is 44.33 ± 8.50 and in girls, it is 49.06 ± 8.76 having the mean rank of 13.37 in boys and 17.63 in girls. The comparison result of Home Adjustment between boys and girls at pre-intervention condition indicates a significant difference ($U=80.500$, $P=0.018^*$) which means that at the pre-intervention condition, girls are

more adjusted in the home environment than boys.

In the subscale of social adjustment, the mean average percentage at the pre-intervention condition in boys is 54.94 ± 14.96 and it is 60.89 ± 10.75 in girls having the mean rank of 13.07 in boys and 17.93 in girls. The comparison result of Social Adjustment between boys and girls at pre-intervention condition indicates no significant difference ($U=76.000$, $P=0.137$). The mean average percentage of the score of School Adjustment at the pre-intervention condition in boys is 38.80 ± 7.71 and in girls, it is 57.22 ± 27.74 having the mean rank of 13.40 in boys and 17.60 in girls. The comparison result of School Adjustment between boys and girls at pre-intervention condition indicates a significant difference ($U=81.000$, $P=0.002^{**}$) which means

that girls are more adjusted to school than boys. The sub-scales of Physical Adjustment have a mean average percentage of the score at the pre-intervention condition in boys as 83.15 ± 11.23 and in girls, it is 68.52 ± 17.21 having the mean rank of 19.07 in boys and 11.93 in girls. The comparison result of Physical Adjustment between boys and girls at pre-intervention condition indicates a significant difference ($U=59.000$, $P=0.026^*$) which shows that boys are more physically adjusted than girls. Finally, the mean average percentage of the score of Total Child Behavior Rating score at the pre-intervention condition in boys is 48.95 ± 3.06 and in girls, it is 53.15 ± 6.16 . Further, the mean rank of Total Child Behavior Rating score is 11.93 in boys and 19.07 in girls. The comparison result of Total Child Behavior Rating score between boys

Table 1: Comparison of pre-intervention Problem Behavior Variables

Parameters	Categories	Mean \pm SD	Mean Rank	Sum of Ranks	U- Value	P-Value
Conner's Classroom Behavior	Boys	70.90 ± 11.57	19.27	289.00	56.000	0.019*
	Girls	60.53 ± 7.20	11.73	176.00		
Conner's- Group Participation	Boys	51.39 ± 21.05	13.47	202.00	82.000	0.217
	Girls	58.89 ± 10.90	17.53	263.00		
Conner's Attitude Towards Authority	Boys	61.21 ± 7.26	20.07	301.00	44.000	0.004**
	Girls	51.52 ± 8.73	10.93	164.00		
Conner's Total	Boys	57.72 ± 5.57	15.50	232.50	112.500	1.000
	Girls	57.72 ± 5.57	15.50	232.50		
Child Behavior Rating scale – Self-Adjustment	Boys	43.39 ± 7.00	18.07	271.00	74.000	0.116
	Girls	42.44 ± 14.80	12.93	194.00		
Child Behavior Rating scale - Home Adjustment	Boys	44.33 ± 8.50	13.37	200.50	80.500	0.018*
	Girls	49.06 ± 8.76	17.63	264.50		
Child Behavior Rating scale - Social Adjustment	Boys	54.94 ± 14.96	13.07	196.00	76.000	0.137
	Girls	60.89 ± 10.75	17.93	269.00		
Child Behavior Rating scale -School Adjustment	Boys	38.80 ± 7.71	13.40	201.00	81.000	0.002**
	Girls	57.22 ± 27.74	17.60	264.00		
Child Behavior Rating Scale -Physical Adjustment	Boys	83.15 ± 11.23	19.07	286.00	59.000	0.026*
	Girls	68.52 ± 17.21	11.93	179.00		
Child Behavior Rating scale - Total	Boys	48.95 ± 3.06	11.93	179.00	59.000	0.026*
	Girls	53.15 ± 6.16	19.07	286.00		
Problem Behavior Checklist	Boys	62.53 ± 8.52	15.63	234.50	110.500	0.935
	Girls	61.38 ± 10.03	15.37	230.50		

and girls at pre-intervention condition indicates a significant difference ($U=59.000$, $P=0.026^*$) which means that girls are more adjusted overall than boys. The result of the present study is supported by the study of Morrongiello and Rennie (1998).

The scale of Problem Behavior Checklist has the mean average percentage of the score at the pre-intervention condition in boys as 62.53 ± 8.52 whereas in girls it is 61.38 ± 10.03 followed by the mean rank of 15.63 in boys and it is 15.37 in girls. The comparison result of Problem Behavior Checklist between boys and girls at pre-intervention condition indicates no significant difference ($U=110.500$, $P=0.935$) (Table-1). The first hypothesis of the present study-there will be a significant difference in problem behavior between male and female participants is partially accepted.

Further, the result of the present study at post intervention condition in regard to Conner's Teacher Rating Scale indicates that the mean average percentage of the score of Classroom problem behavior of boys is 43.60 ± 6.70 and in girls, it is 39.58 ± 8.77 followed by the mean rank of 17.70 in boys and it is 13.30 in girls. The comparison result of Classroom problem behavior between boys and girls at post intervention condition indicates no significant difference ($U=79.500$, $P=0.174$). In this context, it can be said that post intervention influences similarly to both boys and girls to manage their problem behavior. The mean average percentage of the score of Group Participation of boys is 31.94 ± 8.13 whereas in girls it is 41.11 ± 9.03 followed by the mean rank of Group Participation is 11.80 in boys and it is 19.20 in girls. The comparison result of Group Participation between boys and girls has a significant difference ($U=57.000$, $P=0.021^*$) which shows that girls have more problem behavior than boys which indicates a low influence of intervention in girls than boys. The mean average percentage of the score of Attitude towards Authority of boys is 34.74 ± 5.59 whereas in girls it is 32.12 ± 2.98 followed by the mean rank of 17.30 in boys and it is 13.70 in girls. The comparison result of Attitude towards Authority between boys and girls indicate no significant difference ($U=85.500$, $P=0.267$). At

last, the mean average percentage of the score of Conner's total problem behavior of both boys and girls is 37.83 ± 4.73 followed by the mean rank of Conner's total problem behavior is 15.50 in both boys and girls. The comparison result of Conner's total problem behavior Conner's total between boys and girls indicates no significant difference ($U=112.500$, $P=1.000$). In this context, it can be said that at the post intervention condition both boys and girls have the same condition of problem behaviors indicating that the intervention influence both boys and girls in the similar degree.

In Child Behavior Rating Scale, the mean average percentage of the score of Self Adjustment at post intervention of boys is 55.10 ± 9.48 and in girls, it is 64.06 ± 12.46 followed by the mean rank of Self Adjustment is 13.27 in boys and 17.73 in girls. The comparison result of Self Adjustment between boys and girls indicates no significant difference ($U=79.000$, $P=0.174$). The mean average percentage of the score of Home Adjustment in post intervention of boys is 54.28 ± 5.60 and in girls, it is 58.17 ± 6.83 followed by the mean rank of Home Adjustment is 12.87 in boys and 18.13 in girls. The comparison result of Home Adjustment between boys and girls at post intervention condition indicates no significant difference ($U=73.000$, $P=0.106$). In the subscale of Social Adjustment, the mean average percentage in post intervention in boys is 60.28 ± 14.43 and it is 69.11 ± 12.22 in girls followed by the mean rank of Social Adjustment is 12.83 in boys and 18.17 in girls. The comparison result of Social Adjustment between boys and girls at post intervention condition indicates no significant difference ($U=72.500$, $P=0.098$). The mean average percentage of the score of School Adjustment in post intervention of boys is 30.89 ± 3.73 and in girls, it is 43.89 ± 12.26 followed by the mean rank of School Adjustment is 11.07 in boys and 19.93 in girls. The comparison result of School Adjustment between boys and girls indicates a significant difference ($U=46.000$, $P=0.005^{**}$) which means that girls are more adjusted in schools than boys which means the effects of the behavioral intervention is quite better on girls than boys. In the subscale of Physical Adjustment, the mean average percentage

of the score of Physical Adjustment in post intervention of boys is 96.30 ± 5.11 and in girls, it is 89.07 ± 8.36 followed by the mean rank of Physical Adjustment as 19.43 in boys and 11.57 in girls. The comparison result of Physical Adjustment between boys and girls at post intervention condition indicates a significant difference ($U=53.500$, $P=0.013^{**}$) which shows that even at post intervention condition boys are more physically adjusted than to girls. At last, the mean average percentage of the score of Total Child Behavior Rating score in post intervention of boys is 59.06 ± 5.30 and in girls, it is 67.17 ± 6.83 followed by the mean rank of 10.50 in boys and 20.50 in girls. The comparison result of Total Child Behavior Rating score between boys and girls at post intervention condition indicates a significant difference ($U=37.500$, $P=0.001^{**}$)

which shows that girls are better adjusted than boys after getting the behavioral intervention.

The scale of Problem Behavior Checklist has the mean average percentage of the score in post intervention of boys as 54.18 ± 8.15 whereas in girls it is 54.48 ± 5.67 followed by the mean rank of 13.57 in boys and it is 17.43 in girls. The comparison result of Problem Behavior Checklist between boys and girls at Post Intervention condition indicates no significant difference ($U=83.500$, $P=0.233$) which shows that at post intervention condition, the influence of intervention is similar for both boys and girls (Table-2).

The comparison results of the present study of different variables between pre and post intervention followed by dependent

Table 2: Comparison of Post Intervention, Problem Behavior Variables

Para meters	Categories	Mean \pm SD	Mean Rank	Sum of Ranks	U-Value	P-Value
Conner's Classroom Behavior	Boys	43.60 ± 6.70	17.70	265.50	79.500	0.174
	Girls	39.58 ± 8.77	13.30	199.50		
Conner's- Group Participation	Boys	31.94 ± 8.13	11.80	177.00	57.000	0.021*
	Girls	41.11 ± 9.03	19.20	288.00		
Conner's Attitude Towards Authority	Boys	34.74 ± 5.59	17.30	259.50	85.500	0.267
	Girls	32.12 ± 2.98	13.70	205.50		
Conner's Total	Boys	37.83 ± 4.73	15.50	232.50	112.500	1.000
	Girls	37.83 ± 4.73	15.50	232.50		
Child Behavior Rating scale – Self-Adjustment	Boys	55.10 ± 9.48	13.27	199.00	79.000	0.174
	Girls	64.06 ± 12.46	17.73	266.00		
Child Behavior Rating scale - Home Adjustment	Boys	54.28 ± 5.60	12.87	193.00	73.000	0.106
	Girls	58.17 ± 6.83	18.13	272.00		
Child Behavior Rating scale - Social Adjustment	Boys	60.28 ± 14.43	12.83	192.50	72.500	0.098
	Girls	69.11 ± 12.22	18.17	272.50		
Child Behavior Rating scale - School Adjustment	Boys	30.89 ± 3.73	11.07	166.00	46.000	0.005**
	Girls	43.89 ± 12.26	19.93	299.00		
Child Behavior Rating Scale - Physical Adjustment	Boys	96.30 ± 5.11	19.43	291.50	53.500	0.013**
	Girls	89.07 ± 8.36	11.57	173.50		
Child Behavior Rating scale - Total	Boys	59.06 ± 5.30	10.50	157.50	37.500	0.001**
	Girls	67.17 ± 6.83	20.50	307.50		
Problem Behavior Checklist	Boys	54.18 ± 8.15	13.57	203.50	83.500	0.233
	Girls	54.48 ± 5.67	17.43	261.50		

student's 't' test indicate a significant difference between pre and post intervention stage of all parameters except Social Adjustment domain of Child Behavior Rating scale ($p=0.057$) although there is an improvement in post-intervention condition. The mean average score of classroom behavior of Conner's teacher rating scale at pre-intervention condition is 65.72 ± 10.84 and at the post-intervention condition is 41.59 ± 7.94 . The pre and post-intervention comparison of Conner's Classroom Behavior indicates a significant difference ($df=29$, $t= 9.84$, $P= 0.000^{**}$). The mean average score of Conner's Group Participation at pre-intervention condition is 55.14 ± 16.91 and at post-intervention condition is 36.53 ± 9.64 . The comparison results of pre and post intervention score of Conner's Group Participation indicates a significant difference ($df=29$, $t= 5.24$, $P= 0.000^{**}$). The mean average score of Conner's Attitude towards Authority at pre-intervention condition is 56.37 ± 9.30 and at the post-intervention condition is 33.43 ± 4.60 . The pre and post-intervention comparison of Conner's Attitude towards Authority indicates a significant difference ($df=29$, $t= 12.10$, $P= 0.000^{**}$). Lastly, the mean average score of Conner's total score at pre-intervention condition is 137.04 ± 52.74 and at the post-intervention condition is 80.03 ± 34.40 . The pre and post-intervention comparison of Conner's total score indicates a significant difference ($df=29$, $t= 4.96$, $P= 0.000^{**}$). In other words, it can be stated that Conner's Classroom Problem Behavior is minimized from pre-intervention condition to post-intervention condition because of behavioral interventions.

The mean average score of Child Behavior Rating scale – Self-Adjustment at pre-intervention condition is 42.92 ± 11.39 and at the post-intervention condition is 60.03 ± 11.62 . The pre and post-intervention comparison of Child Behavior Rating scale - Self-Adjustment indicates a significant difference ($df=29$, $t= 5.76$, $P= 0.000^{**}$). In other words, it can be stated that Child Behavior Rating scale – Self-Adjustment is improved from pre-intervention condition to post-intervention condition due to the effects of the behavioral intervention. The mean average score of Child Behavior Rating scale - Home Adjustment at pre-intervention condition is

46.69 ± 8.81 and at the post-intervention condition is 56.22 ± 6.45 . The pre and post-intervention comparison of Child behavior rating scale - Home Adjustment indicates a significant difference ($df=29$, $t= 4.78$, $P= 0.000^{**}$). In other words, it can be stated that Child behavior rating scale - Home Adjustment is improved from pre-intervention condition to post-intervention condition due to the behavioral interventions.

In addition, the mean average score of Child behavior rating scale - Social Adjustment at pre-intervention condition is 57.92 ± 13.15 and at the post-intervention condition is 64.69 ± 13.89 . The pre and post-intervention comparison of Child behavior rating scale - Social Adjustment indicates a significant difference ($df=29$, $t= 1.94$, $P= 0.057^*$). In other words, it can be stated that Child behavior rating scale - Social Adjustment is improved from pre-intervention condition to post-intervention condition because of the behavioral intervention. The mean average score of Child behavior rating scale - Physical Adjustment at pre-intervention condition is 76.02 ± 16.42 and at the post-intervention condition is 95.74 ± 8.93 . The pre and post-intervention comparison of Child behavior rating scale - Physical Adjustment indicates a significant difference ($df=29$, $t= 5.78$, $P= 0.000^{**}$). In other words, it can be stated that Child behavior rating scale - Physical Adjustment is improved from pre-intervention condition to post-intervention condition due to the effects of the behavioral intervention.

The mean average score of Child behavior rating scale - Total at pre-intervention condition is 51.07 ± 5.24 and at the post-intervention condition is 63.35 ± 7.48 . The pre and post-intervention comparison of Child behavior rating scale - Total indicates a significant difference ($df=29$, $t= 7.36$, $P= 0.000^{**}$). In other words, it can be stated that Child behavior rating scale - Total is improved from pre-intervention condition to post-intervention condition due to the effects of the behavioral intervention.

The mean average score of Problem Behavior Checklist at pre-intervention condition is 61.95 ± 9.16 and at the post-intervention condition is 54.32 ± 6.90 . The pre and post-intervention comparison of Problem Behavior Checklist indicates a significant difference

Table 3: Comparison of parameters between pre and post conditions of participants (df=29)

Parameters	Conditions	Mean	Std. Deviation	t = Value	P = Value
Conner's Classroom Behavior	Pre-intervention	65.71	10.84	9.84	0.000**
	Post-intervention	41.59	7.94		
Conner's - Group Participation	Pre-intervention	55.14	16.91	5.24	0.000**
	Post-intervention	36.53	9.64		
Conner's Attitude Towards Authority	Pre-intervention	56.37	9.30	12.10	0.000**
	Post-intervention	33.43	4.60		
Conner's Total	Pre-intervention	137.04	52.73565	4.96	0.000**
	Post-intervention	80.03	34.40		
Child Behavior Rating scale - Self Adjustment	Pre-intervention	42.92	11.39	5.76	0.000**
	Post-intervention	60.03	11.62		
Child Behavior Rating scale - Home Adjustment	Pre-intervention	46.69	8.81	4.78	0.000**
	Post-intervention	56.22	6.45		
Child Behavior Rating scale - Social Adjustment	Pre-intervention	57.92	13.15	1.94	0.057
	Post-intervention	64.69	13.89		
Child Behavior Rating scale - School Adjustment	Pre-intervention	48.06	22.10	2.71	0.009*
	Post-intervention	62.32	18.48		
Child Behavior Rating Scale-Physical Adjustment	Pre-intervention	76.02	16.42	5.78	0.000**
	Post-intervention	95.74	8.93		
Child Behavior Rating scale - Total	Pre-intervention	51.07	5.24	7.36	0.000**
	Post-intervention	63.35	7.48		
Problem Behavior Checklist	Pre-intervention	61.95	9.16	3.64	0.001**
	Post-intervention	54.32	6.90		

(df=29, $t = 3.64$, $P = 0.001^{**}$). In other words, it can be stated that Child Problem Behavior Checklist is minimized from pre-intervention condition to post-intervention condition due to the effects of the behavioral intervention (Table-3). In this context, the third hypothesis of the present study - The behavioral intervention will reduce the internalizing problem is accepted. In this context, the results of the present study are supported by the results of Reppucci, & Saunders, (1974); Zlomke, & Zlomke, (2003); Painter, Cook, & Silverman, (1999); Dishion, McCord, & Poulin, (1999); MacKinnon, (2008); Borkovec, & Sides, (1979) and Ainslie, (1975).

Conclusion

The consequences of problem behavior whether internalizing or externalizing are

equally dangerous for the overall development of children. In this regard, internalizing behavior like depression, shyness, anxiety, stress and withdrawal from social situations and feelings of isolation contribute a negative academic, social and psychological future of the children. In this concern, early intervention at the school age can help the children suffering internalizing problem behavior. From the present study, it is confirmed that there is a significant difference in internalizing problem behavior between school going boys and girls. After all behavior therapy is one of the effective techniques for the management of internalizing problem behavior in school-aged children. The other important advantage of the present study can be stated that it is conducted by following small group design comprising 4-5 children in one group that can be easily managed by the researcher.

Besides, that the researcher used a small group design which will save the time and cost of the study. Although the study is conducted on a small sample (N=30), still it proved the effectiveness of behavior therapy followed by the components of modeling, storytelling, stimulus control, JPMR and token economy in India to manage the internalizing problem behavior in school-aged children. But still, a further study on a large population comprising the above components of behavior therapy could be suggested.

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Gopal Chandra Mahakund, PhD, Assistant Professor, Department of Applied Psychology, University of Delhi, South Campus, New Delhi-110021.