

Effect of Rational Emotive Behaviour Therapy on Social Withdrawal among Female Senior Public Secondary School Students in Ibadan Metropolis, Nigeria

¹Teslim Ayobami Hammed and ²Ogundele Caroline Seun

^{1,2}Department of Counselling and Human Development Studies, University of Ibadan, Nigeria

Abstract: This study investigated the effect of Rational Emotive Behaviour Therapy (REBT) on social withdrawal among female senior public secondary school students in Ibadan Metropolis, Nigeria. A quasi-experimental research design involving pre-test, post-test, and control group was adopted. A total of 60 female students identified as exhibiting moderate to high levels of social withdrawal were purposively selected and randomly assigned to experimental (REBT) and control groups. The intervention programme lasted for eight weeks, focusing on cognitive restructuring, disputation of irrational beliefs, and enhancement of adaptive interpersonal skills. Data were collected using a validated Social Withdrawal Scale with a reliability coefficient of 0.84. Analysis of Covariance (ANCOVA) was used to test the hypotheses at 0.05 level of significance. The results revealed a significant main effect of treatment on social withdrawal ($F(2, 57) = 7.833, p = 0.005, \eta^2 = 0.511$), indicating that REBT had a strong effect in reducing social withdrawal among participants. The findings further showed a significant main effect of family dynamics on social withdrawal ($F(1, 57) = 5.051, p = 0.040, \eta^2 = 0.252$), while the interaction effect between treatment and family dynamics was not significant ($F(2, 57) = 1.526, p = 0.249, \eta^2 = 0.169$). It was concluded that REBT is effective in reducing social withdrawal among female adolescents, although family dynamics also play a significant role in shaping outcomes. The study recommended the integration of REBT into school counselling services to enhance students' social adjustment and interpersonal functioning.

Keywords: Rational Emotive Behaviour Therapy, social withdrawal, family dynamics, female adolescents

INTRODUCTION

Social withdrawal among adolescents has become an emerging psychological and educational concern across many societies, particularly among secondary school students who are expected to develop interpersonal competence, emotional stability, and active participation in school activities. Contemporary studies describe social withdrawal, often conceptualised as hikikomori or extreme social withdrawal, as a condition characterised by persistent self-isolation, avoidance of social interaction, and disengagement from school or community life (Muris & Ollendick, 2023; Bellini et al., 2023). Research has further shown that socially withdrawn adolescents may experience loneliness, depression, hopelessness, poor academic engagement, and impaired psychosocial development (Kim et al., 2025; Fong et al., 2024). Among female senior public secondary school students, social withdrawal may be especially problematic because adolescence represents a critical stage for identity formation, peer acceptance, and emotional adjustment. School-related pressures, emotional sensitivity, body dissatisfaction, and poor peer relationships may intensify tendencies toward withdrawal and social isolation among female students (Cerbara et al., 2025). Consequently, increasing attention has been directed toward understanding the causes and management of social withdrawal among young people.

Recent literature has identified several psychosocial and environmental factors associated with social withdrawal among adolescents. Studies indicate that prolonged withdrawal is linked with depression, internet gaming disorder, loneliness, and poor school bonding (Fong et al., 2024; Li et al., 2025). Educational contexts have also been recognised as important contributors to withdrawal tendencies among adolescents, particularly where students experience low social support, academic stress, or poor interpersonal relationships within the school environment (Coeli et al., 2023). In addition, developmental psychopathology perspectives suggest that excessive digital media use, emotional difficulties, and adverse social experiences may predispose adolescents to withdrawal behaviour (Muris & Ollendick, 2023; Hu, 2024). Although global studies reveal growing concerns regarding social withdrawal among young people, evidence from Nigeria remains limited. However, Hassan et al. (2025) found that secondary school adolescents in Ilorin with higher self-efficacy demonstrated lower levels of social withdrawal, thereby suggesting that psychological interventions and school-based counselling programmes may help reduce withdrawal tendencies among students.

One therapeutic approach that may be useful in addressing social withdrawal among female students is Rational Emotive Behaviour Therapy (REBT). REBT, developed to challenge irrational beliefs and maladaptive thinking patterns, focuses on helping individuals replace unhealthy cognitions with rational and adaptive thoughts that promote healthier emotions and behaviours. According to King et al. (2024), REBT interventions have generally demonstrated effectiveness in reducing irrational beliefs and improving various mental health outcomes across numerous studies. Similarly, Eseadi (2023) reported that religious variants of REBT contributed positively to mental health outcomes such as depression reduction, improved self-esteem, and reduced family distress. Since socially withdrawn adolescents often experience negative self-perceptions, fear of social evaluation, and emotional distress, REBT may assist such students in restructuring irrational beliefs associated with social interaction, rejection, and self-worth. Although studies have

examined REBT in relation to several psychological conditions, there remains limited empirical evidence specifically investigating its effectiveness in reducing social withdrawal among adolescents, particularly within secondary school settings in Ibadan (Gouda, 2025; King et al., 2024).

Apart from therapeutic intervention, family dynamics may also play a significant role in influencing social withdrawal among adolescents. Existing studies have emphasised that adverse family processes, poor parenting practices, parent–child conflict, and emotionally detached home environments contribute substantially to withdrawal behaviour among young people (Muris & Ollendick, 2023; Hu, 2024). Zhang and Wang (2025) further observed that parental phubbing contributed to children’s social withdrawal through increased parent–child conflict and negative emotional experiences. Conversely, positive family environments and stronger family relationships have been found to serve as protective factors against persistent withdrawal tendencies (Li et al., 2025). Family dynamics such as cohesion, communication patterns, parental support, emotional warmth, and conflict management may therefore influence how adolescents respond to psychological interventions. Consequently, the effectiveness of REBT in reducing social withdrawal among female senior public secondary school students may vary depending on the nature of family interactions and emotional support available within the home.

Despite the growing global concern regarding social withdrawal among adolescents, there is still a scarcity of empirical studies focusing on female senior public secondary school students in Ibadan. Existing studies have largely concentrated on the prevalence, correlates, and psychological consequences of withdrawal behaviour, with limited attention given to therapeutic interventions targeted at reducing such tendencies. Furthermore, although REBT has shown effectiveness in improving mental health outcomes, no known study has directly examined its effectiveness on social withdrawal among female senior public secondary school students within Ibadan metropolis. Similarly, few studies have investigated the moderating influence of family dynamics on the effectiveness of REBT in managing social withdrawal. It is against this background that this study seeks to examine the effect of Rational Emotive Behaviour Therapy on social withdrawal among female senior public secondary school students in Ibadan, while also investigating the moderating influence of family dynamics on the treatment outcome.

Hypotheses

The following null hypotheses will be tested in this study at 0.05 level of significance:

1. There is no significant main effect of Rational Emotive Behaviour Therapy (REBT) on social withdrawal among participants.
2. There is no significant interaction effect of family dynamics on social withdrawal among participants.
3. There is no significant interaction effect of Rational Emotive Behaviour Therapy (REBT) and family dynamics on social withdrawal among participants.

Theoretical Framework

The theoretical framework for this study is anchored on Vygotsky’s Sociocultural Theory (1978), which explains that human behaviour, emotional development, and social functioning are shaped through continuous interaction within the social and cultural environment. Vygotsky emphasised that learning and development occur through interaction with significant others such as parents, teachers, and peers, through which adolescents acquire behavioural patterns, emotional responses, and coping skills. In relation to social withdrawal, the theory suggests that limited social interaction, weak family support, and negative peer relationships may contribute to withdrawal tendencies, especially among adolescents who require strong peer acceptance and social bonding. The theory is relevant to this study as it explains how Rational Emotive Behaviour Therapy (REBT) and family dynamics may influence social withdrawal among female senior secondary school students in Ibadan. REBT, through cognitive restructuring and guided interaction, can help students challenge irrational beliefs and improve social confidence, while positive family dynamics characterised by warmth and effective communication may enhance social adjustment and responsiveness to intervention. Conversely, negative family environments may sustain withdrawal behaviours. Thus, the theory provides a basis for understanding how therapeutic and family influences jointly affect social withdrawal reduction among female students.

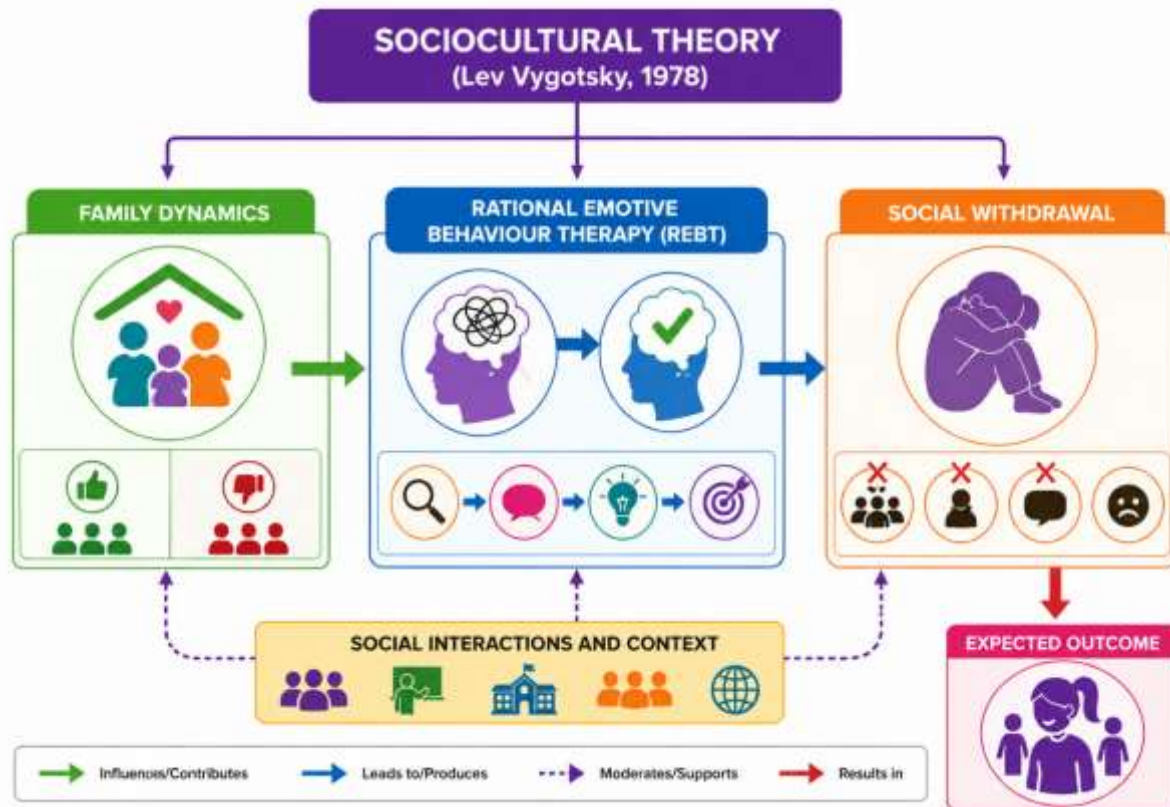


Figure 1: Theoretical Model for the study

Source: Researcher (2025)

METHODS

The study adopted a pretest–posttest quasi-experimental design using a 2×2 factorial matrix. The population for the study comprised female secondary school students exhibiting social withdrawal in public secondary schools in Ibadan. A multi-stage sampling technique was employed in selecting the participants. Three local government areas in Ibadan, namely Ibadan North, Ibadan South-West, and Ibadan South-East, were selected for the study. Thereafter, one public secondary school was randomly selected from each local government area. Participants were screened using the Students Social Withdrawal Tendency Scale (SSWT) and the Student Social Withdrawal Identification Scale (SSWIS), and students who scored 40% or below on the screening instruments were selected for participation. A total of thirty-nine participants were involved in the study, with twenty-one participants assigned to the Rational Emotive Behaviour Therapy (REBT) group and eighteen participants assigned to the control group. The study focused on social withdrawal as the dependent variable, REBT as the independent variable, and family dynamics as the moderating variable. Family dynamics were assessed using the Family Adaptability and Cohesion Evaluation Scales IV (FACES IV), while social withdrawal was measured using the SSWT and SSWIS. The pilot testing of the instruments yielded Cronbach alpha reliability coefficients of 0.82 for the SSWT, 0.84 for the SSWIS, and 0.86 for the FACES IV, indicating adequate reliability for the study.

The research procedure was conducted in three phases: preliminary, intervention, and post-intervention phases. During the preliminary stage, permission was obtained from the selected schools, research assistants were trained, and baseline data were collected from the participants. The intervention phase involved the administration of Rational Emotive Behaviour Therapy sessions to the twenty-one participants in the experimental group over a period of eight weeks. Each session lasted approximately 50 minutes and incorporated activities such as guided discussions, behavioural rehearsal, role-playing, and reflective exercises aimed at reducing social withdrawal tendencies among the participants. The eighteen participants in the control group did not receive any therapeutic intervention during this period. At the end of the intervention, post-test data were collected using the same instruments administered at the pretest stage. Data collected from the study were analysed using Analysis of Covariance (ANCOVA) at the 0.05 level of significance to determine the main effect of REBT on social withdrawal, the interaction effect of family dynamics on social

withdrawal, and the interaction effect of REBT and family dynamics on social withdrawal among female senior public secondary school students in Ibadan.

RESULTS AND DISCUSSION

Hypothesis One

There is no significant main effect of Rational Emotive Behaviour Therapy (REBT) on social withdrawal among female senior secondary school students in Ibadan. The outcome of the study is displayed in Table 1

Table 1: ANCOVA Summary Showing Main Effect of REBT, Family Dynamics, and Their Interaction on Social Withdrawal

Source	df	F	Sig.	Partial Eta Squared
Treatment Group (REBT)	2	7.833	.005	.511
Family Dynamics	1	5.051	.040	.252
Treatment × Family Dynamics	2	1.526	.249	.169

The result revealed a significant main effect of REBT on social withdrawal, $F(2, 45) = 7.833$, $p = .005$, $\eta^2 = .511$. Since the p-value is less than 0.05, the null hypothesis is rejected. This implies that REBT had a significant effect on reducing social withdrawal among the participants.

The result revealed that Rational Emotive Behaviour Therapy (REBT) had a significant effect on social withdrawal among female senior secondary school students in Ibadan, $F(2, 45) = 7.833$, $p = .005$. This finding suggests that REBT was effective in reducing tendencies toward social withdrawal among the participants. The outcome can be explained using Sociocultural Theory, which emphasises that behaviour is shaped and reshaped through guided social interaction and cognitive mediation within a supportive environment. REBT, through structured cognitive restructuring, disputation of irrational beliefs, and behavioural rehearsal, provided students with new socially adaptive ways of interpreting peer interactions and reducing avoidance behaviours. This aligns with King et al. (2024), who reported that REBT interventions generally improve maladaptive thinking patterns and enhance psychological adjustment, as well as Eseadi (2023), who noted that REBT-based approaches improve emotional functioning and self-esteem. The finding also resonates with Hassan et al. (2025), who reported that psychological factors such as self-efficacy are inversely related to social withdrawal among Nigerian adolescents, suggesting that interventions that strengthen cognitive control and self-perception can reduce withdrawal behaviour.

Hypothesis Two

There is no significant main effect of family dynamics on social withdrawal among female senior secondary school students in Ibadan.

Using the result presented in Table 1, family dynamics had a significant effect on social withdrawal, $F(1, 45) = 5.051$, $p = .040$, $\eta^2 = .252$. Since the p-value is less than 0.05, the null hypothesis is rejected. This indicates that family dynamics significantly influenced social withdrawal among the students.

The result showed that family dynamics had a significant effect on social withdrawal among female senior secondary school students in Ibadan, $F(1, 45) = 5.051$, $p = .040$. This indicates that students' family environments significantly influenced their level of social withdrawal. From a Sociocultural Theory perspective, the family serves as a primary socialisation agent where children learn communication patterns, emotional regulation, and social expectations. Supportive, cohesive, and communicative family systems foster confidence and social engagement, while dysfunctional or emotionally distant families may reinforce avoidance behaviours and isolation tendencies. This finding is consistent with Muris and Ollendick (2023), who emphasised the role of adverse family processes in the development of extreme social withdrawal, and Hu (2024), who identified family dysfunction as a key factor influencing withdrawal behaviour. It also aligns with Li et al. (2025), who found that positive family environments act as protective factors against persistent withdrawal, reinforcing the importance of family functioning in adolescent psychological adjustment.

Hypothesis Three

There is no significant interaction effect of Rational Emotive Behaviour Therapy (REBT) and family dynamics on social withdrawal among female senior secondary school students in Ibadan.

From Table 1, the interaction effect of REBT and family dynamics on social withdrawal was not significant, $F(2, 45) = 1.526$, $p = .249$, $\eta^2 = .169$. Since the p-value is greater than 0.05, the null hypothesis is not rejected. This shows that family dynamics did not significantly moderate the effect of REBT on social withdrawal among the participants.

The result revealed that there was no significant interaction effect of REBT and family dynamics on social withdrawal among female senior secondary school students in Ibadan, $F(2, 45) = 1.526, p = .249$. This suggests that the effectiveness of REBT in reducing social withdrawal was not significantly influenced by differences in family dynamics. Theoretically, this may imply that REBT, as a structured cognitive-behavioural intervention, operates primarily at the individual cognitive level and can produce behavioural change regardless of variations in home environment, thereby partially overriding external sociocultural influences as proposed in Sociocultural Theory. This finding may also reflect that while family environment shapes the development of withdrawal tendencies, therapeutic intervention provides direct cognitive restructuring that is less dependent on familial context. This result is somewhat consistent with King et al. (2024), who observed that REBT effects are generally robust across different contextual conditions, although limited evidence exists on moderating variables such as family dynamics. It also reflects the gap highlighted in existing literature, where no strong empirical evidence currently confirms that family dynamics significantly moderate REBT outcomes in relation to social withdrawal (Gouda, 2025).

CONCLUSION

The study concluded that Rational Emotive Behaviour Therapy (REBT) is effective in reducing social withdrawal among female senior secondary school students in Ibadan. It was also concluded that family dynamics significantly influence the level of social withdrawal among the students, indicating that the home environment plays an important role in shaping adolescents' social behaviour. However, the interaction between REBT and family dynamics was not significant, suggesting that the effectiveness of REBT in addressing social withdrawal is relatively independent of variations in family functioning. Overall, the findings established that both psychological intervention and family context are important factors in understanding and addressing social withdrawal, although their combined interaction was not statistically significant.

Recommendations

The following recommendations were made:

1. School counsellors and psychologists should adopt Rational Emotive Behaviour Therapy (REBT) techniques in counselling programmes to help reduce social withdrawal tendencies among secondary school students.
2. School authorities should implement structured guidance and counselling services that promote emotional adjustment, social skills development, and positive cognitive restructuring among students.
3. Parents and guardians should be encouraged to create supportive, cohesive, and communicative home environments that foster emotional security and reduce tendencies toward social withdrawal in adolescents.
4. Educational stakeholders and policymakers should organise regular parent–school collaboration programmes aimed at improving family involvement in adolescents' psychological and social development, thereby reducing the risk of withdrawal behaviours.

References

- Bellini, B., Perrotti, G., Gambold, L., Baglioni, V., Faedda, N., Natalucci, G., Pezzuti, L., Ardizzone, I., & Guidetti, V. (2024). Prolonged social withdrawal during adolescence: Transdiagnostic syndrome or a new psychiatric entity? *Child Psychiatry & Human Development*, 55(6), 1592–1599. <https://doi.org/10.1007/s10578-023-01513-0>
- Benarous, X., Guedj, M., Lomelo, F., Mohamed, F., Teo, A., & Pellerin, H. (2025). Adolescents and young adults with social withdrawal in France: Sociodemographic characteristics and validation of the French version of the Hikikomori Questionnaire-25 (HQ-25). *International Journal of Social Psychiatry*, 71(4), 882–893. <https://doi.org/10.1177/00207640241310191>
- Cerbara, L., Ciancimino, G., Corsetti, G., & Tintori, A. (2025). Self-isolation of adolescents after COVID-19 pandemic between social withdrawal and hikikomori risk in Italy. *Scientific Reports*, 15(1), Article 84187. <https://doi.org/10.1038/s41598-024-84187-5>
- Coeli, G., Planas-Lladó, A., & Soler-Masó, P. (2023). The relevance of educational contexts in the emergence of social withdrawal (hikikomori): A review and directions for future research. *International Journal of Educational Development*, 103(1), Article 102756. <https://doi.org/10.1016/j.ijedudev.2023.102756>
- Eseadi, C. (2023). The impacts of Religious Rational-Emotive Behavior Therapy (RREBT) on mental health: A comparative review. *Islamic Guidance and Counseling Journal*, 6(2), 187–198. <https://doi.org/10.25217/0020236406900>
- Fong, T., Junus, A., Wen, M., & Yip, P. (2024). Comorbidity among symptoms of internet gaming disorder, social withdrawal, and depression in 3430 young people in Hong Kong: A network analysis. *Journal of Affective Disorders*, 365(1), 379–388. <https://doi.org/10.1016/j.jad.2024.05.091>
-

- Gouda, J. (2025). Recent trends in “Rational Emotive Therapy” theory for reducing withdrawal behavior for blind children. *International Journal of Childhood and Women’s Studies*, 7(1), 115–130. <https://doi.org/10.21608/ijcws.2025.445914>
- Hassan, A., Kamil, L., & Akorede, Z. (2025). Influence of self-efficacy on social withdrawal among secondary school adolescents in Ilorin Metropolis, Kwara State, Nigeria. *International Journal of Psychological Science*, 5(3), 85–94. <https://doi.org/10.11648/j.ijps.20250503.11>
- Hu, W. (2024). Social withdrawal: A systematic review of the influencing mechanism, forming reason and discussing the affected groups. *Journal of Education, Humanities and Social Sciences*, 38(1), 214–221. <https://doi.org/10.54097/8yby8004>
- Kim, S., Jang, Y., & Park, E. (2025). Associations between social isolation, withdrawal, and depressive symptoms in young adults: A cross-sectional study. *BMC Psychiatry*, 25(1), Article 92. <https://doi.org/10.1186/s12888-025-06792-6>
- King, A., Plateau, C., Turner, M., Young, P., & Barker, J. (2024). A systematic review of the nature and efficacy of Rational Emotive Behaviour Therapy interventions. *PLOS ONE*, 19(7), e0306835. <https://doi.org/10.1371/journal.pone.0306835>
- Li, T., Zhu, S., & Wong, P. (2025). Young people's social withdrawal intention during COVID-19 in Hong Kong: A three-wave longitudinal study. *Journal of Psychiatric Research*, 186, 314–321. <https://doi.org/10.1016/j.jpsychires.2025.04.034>
- Muris, P., & Ollendick, T. (2023). Contemporary hermits: A developmental psychopathology account of extreme social withdrawal (hikikomori) in young people. *Clinical Child and Family Psychology Review*, 26(3), 459–481. <https://doi.org/10.1007/s10567-023-00425-8>
- Vygotsky, L. S. (1978). *Mind in society: The development of higher psychological processes*. Harvard University Press.
- Zhang, P., & Wang, X. (2025). The impact of parental phubbing on social withdrawal in preschool children: The serial mediating roles of parent–child conflict and negative emotions. *BMC Psychology*, 13(1), Article 236. <https://doi.org/10.1186/s40359-025-02363-2>