

AN APPRAISAL OF PRINCIPLES OF BEHAVIOUR MODIFICATION AS PANACEA TO THE CHALLENGES OF STRESS

By

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Abstract

Behaviour Modification is the scientific application of psychological principles especially principles of learning so as to change undesirable behaviours to more desirable behaviours. This is because learning itself is a relatively permanent change in behavioural potentialities as a result of constant interaction with the environment. As a psychological concept, behaviour modification can be used to correct and prevent abnormal behaviour through the use of techniques such as reinforcement, aversive stimulus, modeling, systematic desensitization and relaxation method. Stress on the other hand, is an unpleasant state of emotional and physiological arousal that human being experience in situations that they view as challenging and/or threatening to their lives. Stress, if not well managed can lead to serious health problems such as anxiety disorder, mental illness, heart disease, hypertension (high blood pressure), stomach cramp, suicide, heart diseases and at times life threatening injuries. This paper strongly believes that the systematic application of psychological principles of behaviour modification is capable of reducing stress to the barest minimum and can lead to more harmonious healthful living and form the basis for better coping strategy. In conclusion, causes, prevention and coping strategies were recommended.

Keywords: Behaviour Modification, Stress, Stressors

INTRODUCTION

The application of the principles of behaviour modification appears to be the only relevant counselling model for overcoming a variety of stress-related problems, especially those of them emanating from overwork, tension and anxiety, unhappy home, marital discord, nagging housewife, authoritarian husband, barrenness, unemployment, acute poverty and/or generalized deprivation etc.

According to Egbule (2009), behaviour modification as a psychological concept is a scientific procedure for correcting and preventing an abnormal behaviour through the use of reinforcement, aversive processes such as punishment and even the use of behaviour counseling and modeling. Behaviour modification is a systematic application of psychological principles, especially learning principle to effect behavioural change. In the same vein, Steward and Barlow (1983) had earlier, defined behaviour modification as involving a process through which abnormal behaviour exhibited by an individual can be observed, measured, analysed and modified through the use of scientific and psychological procedures.

Studies by (Agras, 1978; Tylor, 1978; Steward and Barlow, 1983; Ketcham, 1961; Aichorn, 1953; Gran and Walker, 1967; Azrin, 1975; Serenson, 1977) in Egbule (2009) have all shown that a number of behaviour modification therapies are available for use in correcting and preventing all forms of abnormal behaviour, psychological disorders and mental retardations. Some of these techniques of behaviour modification are derived from various theories of learning.

SCHOLARS CLASSIFIED THESE TECHNIQUES INTO FOUR MAJOR CATEGORIES AS SHOWN BELOW.

Techniques of Behaviour Modification

S/N	Classical conditioning Techniques	Operant techniques	conditioning	Modeling techniques	Cognitive techniques
1	Stimulus control	Positive reinforcement		Live modeling	Self managements
2	Proximity Control	Negative reinforcement		Film modeling	Self analysis
3	Relaxation method	Reinforcement schedules		Symbolic modeling	Self-study
4	Systematic desensitization	Premack principle		Role-playing	Self monitoring
5	Assertive training	Punishment		Behavioural rehearsal	Self reinforcement
6	Aversive conditioning	Extinction		Bibliotherapy	Self-punishment
7	Time out (aka) antiseptic bouncing	Planned ignoring			Problem solving
8	Counter-conditioning	Shaping satiation			Other techniques
9	Ear-shooting techniques	Stimulus satiation Contingency contracting Fading techniques Token economy Avoidance condition Escape theory			1. Implosion overflooding 2. Over-correction 3. Warning cues 4. Bio-feedback

Source: Essuman, Nwaogu and Nwachukwu (1990)

Conceptual definition of Stress

Psychological stress is a non desirable state of emotional and physiological arousal that human beings experience in situations that they perceive as dangerous and/or threatening to their well-being. There is no universally accepted definition of the concept of stress, rather some authors define stress as event(s) or stimulus that cause tension, pressure and negative responses such as anxiety and/or anger (Ogbuatu and Maduka, 2014). The Concise Oxford Dictionary defines stress as pressure condition that causes hardship or disquiet. Taber's Encyclopedia of Medical Dictionary defines stress as "an intense force, strain agent or mental condition which produces a defense reaction". This reaction may be physiological or within limits and harmless but if continued or intensified may lead to pathological conditions. Selye (1993) evolved an original concept of stress: "stress is pressure from an adverse force or influence that imposes unusual demand on the organism". Stress occurs when there are demands on the person which task or exceed the person's adjustive resources. Simply put stress is a person's response to events that are threatening or challenging (Fieldman, 2005).

Sources of stress

The circumstances, events and triggers that cause stress are called stressors. Stressors vary in severity and duration. It is important to note that stressors vary from person to person. This is because although certain kinds of happenings, such as the sudden death of a close relation, soldiers going to war, or the diagnosis of terminal sicknesses and diseases, for instance, advanced cancer are generally stressful, other situations may or may not be stressful to a

unique individual. It is upon this background that it becomes necessary that one categorizes these stressors as cataclysmic events, personal stressors, and background stressors. Effort will now be made to discuss these categories one after the other, beginning from the first namely:

1. **Cataclysmic events:** These are strong stressors that occur suddenly, affecting many people at once, for instance, plane crashes, as well as terrorist bomb explosions like those of the Boko-Haram in some states in northern Nigeria. Others include lifethreatening disasters such as kidnapping, armed robbery, rape, ghastly motor accidents, earthquakes, multiple automobile accidents such as happened at Upper Iweka, Onitsha (a town in Anambra State) involving a petrol tanker that had break failure and crash-landed roasting over 100 persons and setting ablaze more than 20 vehicles at once. All these can cause severe stress and take a heavy psychological toil on their surviving victims. Commenting in this regard, Fieldman (2005) observed that “terrorist attacks are deliberate, and victims (and observers) know that future attacks are likely. Government warnings over the mass media may heighten further increase of the stress situation.
2. **Personal Stressors:** These include major life-changing events such as “death of a spouse or family member who is the family bread-winner, sudden divorce and separation of husband and wife, imprisonment of one’s father, mother and/or husband. Losing one’s job, loss of a limb in auto-crash”. For adolescents, according to Ogbuatu and Maduka (2014), the most stressful events are the death of a parent or a close family member who is strong, powerful and influential, divorce of parents and loss of lucrative job. This type of stress fades with passage of time. Some surviving victims of major catastrophes and severe personal stressors can experience flashbacks and horrifying dreams called post-traumatic stress disorder (PTSD) in which there is a re-experiencing of the event in vivid flashbacks. Symptoms of post traumatic stress disorder include emotional numbing, sleep difficulties, re-experiencing the ugly event, having problems relating to others, alcohol and drug abuse, nightmares and in some extreme cases suicide tendencies. (Wilson and Keane, 1996; Mazza, 2000; Orr, Metzger & Pitman, 2002; Ozer, Best & Lipsey, 2003).
3. **Background Stressors:** these are the stress we pass through as a result of daily hassles. Examples of background stressors include demands made on parents by their children, getting stuck with a rickety car in a traffic jam, waiting for hours in a petrol station, living near a school and/or church, disliking a colleague, taking care of an old parent, worrying about debt, searching for job in Nigeria, looking for an important document in a family house. These hassles may appear as minor irritants, but add together over time. They can become sources of stress. Others include long-term, chronic challenges which include dissatisfaction with your work, school and being in an unhappy relationship, or living in ghetto as well as living with a nagging spouse. Indeed, the number of daily hassles people are confronted with is directly related to health problems such as pains, flu, cough, sore throat and low attention span as well as backaches.

Finally Osuafor (1997) articulated other causes of stress to include the following:

- Overwork
- Tense anxious people
- Unhappy home and marital discord especially if there is a handicapped child (say with brain damage), nagging housewife, fastidious husband, infertility and other problems of marital incompatibility.
- Financial worries

- Poor availability of basic necessities of life such as, motorable roads, erratic electricity supply, potable water, food at affordable prices and social injustice.

Effects of Stress

Before discussing the effects of stress, it seems pertinent to pause a little to make a brief clarification on specifying the effects of stress. This is because what constitute a stressor to one person will probably be a funfare to another. Events such as the death of a loved spouse or participation in terrorist attack, kidnapping and/or armed robbery attack are generally stressful. For people to regard an event as stressful, they must have perceived it as not only challenging but also as life-threatening and must have exhausted all resources to resolve the threat and may have gone into learned helplessness.

The effects of stress include the following:

Direct Physiological effects: According to the American Academy of Family Physicians, stress is now known to be a major contribution either directly or indirectly to “coronary heart disease, cancer, lung disease, high blood pressure and liver cirrhosis” (Osuafor, 1997). Others include elevated blood pressure, decrease in immune system functioning, increased hormonal activity, psychophysiological conditions (Fieldman, 2005).

Harmful behaviours: Increased smoking, gum-chewing, alcohol use, decreased nutrition, decreased sleep, increased drug use and dependence.

Indirect health-related behaviours: decreased withdrawal syndrome, emotionally unstable, easily startled, phobia, panic disorder, temper-tantrum, non compliance? with medical advice, increase in delay in seeking medical advice, decrease in likelihood of seeking medical advice, depression of the body immunity, sleeplessness, sleeping on the chair but awake while on bed. **Pleasure-induced effects:** It is important to note that not all stressful events are unpleasant: for instance, doctorate degree thesis defense, marriage ceremony, packing into a new house, preparation for Christmas, flying in the air-plane for the first time etc.

Digestive Disorders: these include peptic ulcer, irritable bowel cramp, constipation and diarrhea. The complaints by people with stress can be summarized as follows.

- a. Palpitation (awareness) of the beating of the heart.
- b. Hypertension from effects of prolonged adrenaline secretion.
- c. Sudden death syndrome.
- d. Skin diseases.
- e. Diabetes mellitus.
- f. Cancer.
- g. Liver cirrhosis.
- h. Poor concentration leading to accidental injuries.
- i. Bronchial asthma.
- j. Poor vision.
- k. Staying awake at night etc.

COUNSELLING APPROACH TO STRESS MANAGEMENT

The ultimate end of all counselling functions is to facilitate coping strategies. Many people manage and cope with stress much better than others. This is based on their personality. People who cope well with stress appear to believe that they can control and influence what affects them. They usually make more positive statements than negative statements about

themselves, avoid frustration, be optimistic, forward-looking and have the capacity not to give up easily even in extreme hopeless circumstances.

There are personalities that believe in themselves as having the capacity to make something out of a seemingly hopeless situation. They are essentially very creative, emotionally stable and possess the capacity for unhostile sense of humor. On the other hand, people who cannot cope with stress appear to be people with negative personality characteristics, such as low self-esteem and negative confession and outlook.

a. Coping Strategies

Counselling psychologists, for purposes of clarity, distinguish two categories of coping strategies: they are problem-focused coping and emotion-focused coping. Problem-focused coping is where the stressed person attempts to change the stressful challenge or source of stress. It can lead to changes in behaviour. An example is where, in examination- induced stress, students start a study group to improve underachievement in classroom test performance. The ultimate target is to minimize negative emotions by taking some action to modify, reduce, and circumvent the life-threatening situation. In emotion-focused coping, the stressed human person tries to directly moderate or eliminate unpleasant emotions. Examples of emotion-focused coping include accepting sympathy, rethinking the situations cognitive restructuring in a positive way, relaxation, denial as a defense mechanism, wishful thinking, hoping for miracles. Emotion-focused coping is a short-term measure, which usually leads to problem-focused strategy which involves taking the necessary action to overcome or eliminate the problem that generated the stress.

b. Social support

Support from friends, relations, church members, study groups, peer members, and cliques do provide the necessary shoulders upon which the stressed person can lean. It goes a long way in assisting people carry on with life when it appears that things have fallen apart and the centre cannot hold. People require social support to comfort as well as cajole the stress victim. This is because according to Ogbuatu and Maduka (2014) “people with social support feel cared about and valued by others and feel a sense of belonging to a larger social network”.

c. Biofeedback

This is a psychogenic and biogenic technique in which individuals learn voluntary health control skills that will assist them in the management of stress-related physiological responses such as body temperature, tension in the head muscles, palpitation, hand-twitching, irritation, nagging, headache, blood pressure. Ordinarily, we cannot control these responses voluntarily. However, through the instrumentality of skill acquisition in biofeedback, we can now connect to an instrument or special machine that measures a particular physiological response, such as rate of palpitation, and feeds that measurement back to the user in a readable way. For, instance, the machine might show the rate of heart beats per minute on a digital screen. Besides one can learn to be sensitive to little changes in one's body that can affect the response under examination. Hence they can breathe in and out in order to lower the rate of heartbeat. The technique of biofeedback has led to the learning how best to lower muscle tension in the forehead, eyes, neck and scalp. It has led to reduction of enduring headaches.

PSYCHOLOGICAL COUNSELLING TECHNIQUES

A. Systematic Desensitization

People who experience neurotic anxiety or excessive phobic state in the presence of certain environments, or certain objects are helped to get rid of such learned fears by counterconditioning process referred to as systematic desensitization (Nwoye, 1990).

According to Essuman et al. (1990), it is a behaviour modification technique in which situations that whip up anxiety are presented to a client who is physically relaxed. Desensitization is the effect one makes through relaxation to reduce fear (stress) in a person in the presence of the stress-producing stimuli. It is called systematic desensitization because it involves taking a client through a series of processes or steps so that the individual's phobias are removed partially and gradually until completely removed.

B. Relaxation Method

This technique is used by Counselling Psychologist to induce physical, and in the process, mental relaxation in a person passing through stress. Relaxation occurs when all the muscles and senses of the human anatomy are made inactive, loose and calm so as to overcome stress and other mild forms of depression. Relaxation is predicated on the principles that when muscles are tensed and then released, they can be lured into relaxation and consequently slower rate of heartbeat and finally induced into sleep which on its own reduces stress.

C. Aerobic Exercise

Aerobic exercise includes such routine exercise as walking, running, dancing, vibrant prayers, and for those living in Europe and North America, biking and skiing can be exercises par excellence that bring down stress level. This is because aerobic exercise increases the endurance of the heart and lungs. An individual who is fit will have slower rate of heartbeat at rest and lower blood pressure. Higher self-esteem, confidence and inner peace can be attained through aerobic exercise.

D. Music and Entertainment

Music and entertainment, especially classical music, blues, acapella and reggae are different types of music that can assist the muscles in relaxation. In all, people who are equipped with innate ability towards music are associated with lower rate of stress-related illnesses. This involves commitment to one's duty, challenge which involves the belief that change is very important and those who try to be in control of their lives are better equipped in coping with stress.

Conclusion

Stress appears to be part of existence and not necessarily an outright negative challenge. This is because without stress we may not be sufficiently gingered to kick-start a given task. However, too much stress can activate a whole lot of other health challenges. Hence, there is need for moderation in all human endeavours.

Recommendations

The following recommendations are hereby made:

- Stress-Coping strategies should be taught by counselling psychologists quarterly in all levels of governments and non-governmental agencies to create awareness.

- Persons under stress can turn the situation into a challenge and match same with corresponding actions.
- Finally, all workers including those in private business should be compelled to take annual leave and have good rest during such period to avoid sudden tension and other health complications.

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