
Effectiveness of Patience Training On Self-Control and Risk Taking Behavior in Adolescents

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ABSTRACT

Objective: This study was conducted to assess the effectiveness of patience training on self-control and risk taking behavior in adolescents. **Method:** For this purpose skills that according to the theory of theory of gotfredson and hirschi were the components of patience were trained during 8 sessions to 15 girls from welfare Organization who were selected by random sampling. And the rate of self-control and risk taking behavior was assessed through self-control questionnaire of Rosenbaum and risk taking scale of Iranian adolescents IARS. Also 15 people were selected as the control group. After finishing the research, the control group was trained. **Results:** The results of covariance analysis showed that in both experimental and control groups before and after the intervention, significant differences can be seen in terms of self-control and risk-taking ($p < 0.05$). **Conclusion:** The results of the study showed that group training of patience is effective on self-control and risk-taking of girls in welfare organization and this case can be used in all situations that are related to the adolescents, to reduce risky behavior.

Keywords: patience, self-control, risky behaviors

Introduction

Several studies have examined the health-related behaviors in adolescents and its importance, some of them have pointed to the causes and some have pointed to its importance in relation to adolescents engaging in risky behaviors. (Kerkmer et al., 2000) believe that risk-taking is a tendency to engage in behaviors that are intimidating or harming the mental and physical health and can be considered as a anti-social behavior in where risk-taking is a real threat to engage in activities that are inappropriate based on social criteria. (Sarris et al., 2003) used the so-called risky behaviors to behaviors that have a negative effect on the health such as illegal drug use, unsafe sexual behavior, violent behaviors and dangerous driving. So that, this risky behavior is the main cause of death in adolescents and young adults.

The prevalence of high-risk behaviors such as alcohol use and sexual risky behaviors during

adolescence and late teens would be the highest. In 2010, the National Drug evidence showed that alcohol use among teens of 21 to 25 years old is the highest. Alcohol abuse among young adults has a variety of negative consequences such as deaths in traffic accidents, sexual abuse, academic failure, anger and psychiatric problems (Invayron, 2012).

There are different views about risk-taking in adolescents, while some believe that they are required for developing and some others believe that they are perilous for the health of adolescents and many of scholars agree that risk-taking in adolescence not only is natural but also it is essential part for learning and character development. In fact, a decision-making process is the foundation of the selections of adolescent behaviors that provide the various threats to the health adolescent well-being. However, adults are also engage in risky behaviors, but adolescents are engaged in more abundant (Jackson, 2007). The main component of understanding the risky behaviors is the concept of self-controlling. When people practice in self-controlling field, they consult more and act more thoughtful in decision-making process (Aten, 2010). In fact, researches show that self-control is a strong protective factor, especially in adolescence in facing with many of social and health risks. In contrast, low self-controlling is significantly associated with a variety of negative behaviors such as drug abuse, obesity and depression (Gazaniga, 2012).

Risky behaviors in terms of injuries and educational, psychological, medical, social, legal, health and economic impacts, such as dropouts, lack of educational and career success, scientific recession, prevalence more drug use in students and promote a culture of using in the whole society due to the pattern of the educated class, making the risk of unusual behaviors and sexual risk and increased risk of sexually transmitted diseases, especially AIDS and time and money costs is considerable in behavior change measures. (Jasour, 1992, quoted from Mohammadi et al., 2011). Adolescents are engaged in more aggressive, more dangerous and more exciting behaviors and show higher rates of sexually transmitted diseases, criminal behaviors, faster driving and high mortality. But the psychological features that

reflect these behaviors are not indicative of a defect or deficiency in decision-making skills (Gazaniga, 2012). In contrast (Densoun, 2012) in his study concluded that succeed students in school were the ones who had higher scores in high schools and had study habits, tolerance and patience, self-acceptance and self-control. Indeed, people who had high-risk behaviors are in contrast with the people who have patience. Need to delay gratification and impulse control pitch of emotional expression is first and foremost a demand everywhere that children's success depends on a lot of tasks to dominate their life in such self-restraint. Patience is effective on all social and behavioral sciences. Patience makes an umbrella that is the joiner of the concepts and measurements of different disciplines (such as impulsivity, conscientiousness, delaying gratification desires, hyperactivity and lack of attention, executive function, the will, the temporary selection (Maffit et al., 2010).

Literature about self-resistance represents a negative image of people who have few resources of self-resistance. These individuals compared with persons of higher resources of restraint break their regime more (Vehs et al., 2000), they are more easily attracted to alcohol use (Murawn et al., 2002), they cheat more, they control their emotions less efficient (Murawn et al. 1998), they act weaker in the intellectually assignments (Eschimichel et al., 2003) and they spend more money for their impulses. The literature of psychology note that failure in self-restraint plays an important role in many personal and social problems such as obesity, drug use, anger, unwanted pregnancy or crime (see Bouwmeester Hesertun et al., 1994; Vehs et al, 2011).

There are studies that have shown self-control and self-restraint have the same nature (Qadiri, 2010). (Elisu, 2011) studied practices of parents as the primary source of developing of self-controlling, that in turn leads to deviant behaviors. This study conducted on a sample of 278 Spanish young students from two high schools. The findings show that familial factors are not in effective in the development of self-controlling. Further analysis shows that other factors like neighborhood environment is known as an important source of self-controlling. Although the findings show that poor self-control over different types of wrongful behaviors have significant reciprocal effect. Young people with poor self-controlling are faced with risk of failure that is consistent with the predictions of the theory. (Mirang, 2009) conducted a study entitled "family experience, tendency to parents and poor self-controlling in violence in America and Korea. The aim of this study was to identify the

related theoretical parameters that are associated in some cases with family roots and makes it possible to crime in different cultures. The findings by two samples of 1400 Korean students and 1,500 American students show that experimental abused children, their poor self-controlling, serious and high-risk sexual relations have a significant impact on crime in the two countries. Many murders and assaults are impulsive and are focused on opportunities rather than pre-programmed (Eric Warren, 2014).

Jeffrey (2015) conducted a research titled as "the relationship between risk-taking, protection, self-control and reversibility". The findings show that the results of logical reverse that includes interactions between different risk-taking and protection and self-controlling had a significant role in anticipation of some results. Self-controlling is the predictor of the rate of violations, but the interactions between risk-taking and high protection reduces the impact of self-restraint in certain fields. Also, internal researches acknowledge the relationship between religiosity, self-resistant and drug use. The results showed that there is a significant inverse relationship between self-restraint and level of religiosity with drug use among students. Among these, self-restraint rather than religion was more important in predicting drug use (Kazemi and Nikmanesh, 2009). Also Jason Ford (2013) studied self-control and drug abuse among students and the results of his study showed that the use of marijuana and drug abuse was significantly associated with self-restraint. Little research evidence in this area in the country necessitates further study on the effectiveness of self-restraint on reducing risky behavior.

Method

To do this study, researcher first selected four welfare centers of girls in Tehran randomly and then presented the self-restraint to 15 to 19 years girls and among the top 30 scores, two groups of experimental (n = 15) and control (n = 15) group were randomly assigned, then self-control questionnaire of Rosenbawm and Iranian adolescent risk-taking scale were distributed in two pre-test and post-test periods between the experimental and control groups.

Psychometric properties of the questionnaires are as follows:

Self-control questionnaire: Researcher-made self-restraint questionnaire which was developed by Yahya Kazemi and Nikmanesh (2010) is made based on the theory of Gottfredson and Hirichii (1990) in the field of low self-resistant which has

six components of impulsivity, physicality versus mentality, performing simple tasks, risk-seeking, selfishness and nervousness. To obtain its validity and reliability by using experts for content validity, the validity of questionnaires was obtained by internal correlation (Cronbach's alpha). Its alpha coefficient with 60 participants and 21 items show 80 % that represents its validity.

Rosenbawm self-control questionnaire: This scale has been developed by Rosenbawm (1980). It includes 36 items. The validity of this test is obtained by calculating the correlation coefficient with checklist of daily self-reported scores. And its amount was 0.73. Test-retest reliability of this tool was obtained equal to 0.92 (Abedi, 2004) and in many researches this questionnaire is used to measure self-controlling.

Iranian adolescent risk-taking questionnaire: The psychometric properties of this scale were developed by Mohammadi et al (2011) in Iran. The exploratory factor analysis with principal components showed that IARS is a six-dimensional measure; it determines 64.84% of the variance. Also, Cronbach's alpha of the scale and subscales were 0.94 and 0.93 and -0.74, respectively. In determining IARS to assess the vulnerability of adolescents in Iran in six high-risk behaviors (dangerous driving, violence, smoking, drugs, alcohol and sexual risk-taking), 50 items were set and assessed by the experts. Responding was performed on a five-grade scale of one (strongly disagree) to five (strongly agree). All items had the same direction, there was no need to score inverse investment and therefore higher scores indicate the risk was higher (Zade Mohammadi et al., 2011).

Post-test was done after meetings between the two groups. To analyze the data, SPSS software was used. To evaluate the hypotheses, after checking the assumption of homogeneity of variances and Kolmogorov-Smirnov, and also the results of F tests approximation through four characteristic test, analysis of covariance and multivariate analysis of covariance was chosen as a proper statistical test.

Results

The mean score of the control group that was not under self-restraint skills training in the pre-test and post-test of control group was 68 and 68.28, respectively. Also, the mean score of self-control group that was under training in pre-test and post-test of the experimental group was 78.87 and 73.08, respectively. Also, the mean score of high risk behaviors group that was not under self-restraint skills training in the pre-test and post-test of control group was 20.53 and 20.33, respectively. Also, the

mean score of high risk behaviors group that was under training in the pre-test and post-test of control group was 19.33 and 20.54, respectively.

Homogeneity of variance was evaluated through Kolmogorov-Smirnov test and it turned out that the assumption of similarity of variances was not met and therefore to test the hypotheses, we used analysis of covariance.

Self-restraint skills training on "self-controlling" and "risky behaviors" affects the welfare organization girls.

Results of F test approximation through four characteristics of statistical test was showed the amount of F in all four tests at level higher than 99% is significant. So, independent variable significantly has been able to affect the dependent variables.

The results of the multivariate regression analysis of MANCOVA. As it can be seen, it can be claimed with 99% of confidence that people who have been trained in the skills of self-restraint, self-control has increased to a significant extent in them. It also can be claimed with 95% of confidence that training of self-resistant skills have been able to reduce risky behaviors. According to the results of MANCOVA, the effect size in the self-control is (0.3) and in risky behaviors is (0.176) and show that self-restraint skills training are more effective on self-control than risky behaviors. So as significantly, self-restraint skills could increase self-control and lead to decrease risky behaviors.

Discussion and Conclusion

The results showed that the average of self-control and risk-taking behaviors before and after training was significantly different. So we can say that learning self-restraint has been effective on self-controlling and risky behaviors. These results are consistent with the theory of self-resistant of Gottfredson and Hirichii. For Gottfredson and Hirichii this question not arises that why the man convicts a crime or same tasks but this question arises that why all people do not commit crimes or similar acts? They believe that the individual's inability in controlling impulses is natural and stems from the pleasure. They separate their theory from descriptions of genetic and biological and tend to socialization. Failure in creating self-restraint is defined as the primary factor of socialization (2011). Also this theory moves from emphasizing on the idea of social control towards emphasizing on self-controlling. The theories that have responsibility laid on the role of social control

mechanisms, Hirichii and Gottfredson emphasize on the internal self-restraint (Nakahi et al., 2000).

So, we can say that the present study is consistent with previous studies abroad (Murawn, et al., 2002), (Eschimichel et al., 2003), (Hesertun et al. 1994); (Vehs et al., 2011); (Elisu, 2010); (Mehring, 2009); (Jeffrey, 2010); (Ford, 2013) and internal studies (Kazemi and Nikmanesh, 2009).

In short, the theory of self-restraint rather than to follow certain crime during the life, it speaks about engaging of the person. According to this theory, aggressors and offenders committing range of criminal acts and offenses without any desire to prosecute crime or misdemeanor or a particular pattern or criminal offenses. People with low self-control are oriented to acts that provide immediate satisfaction, it needs to a little map and provide pleasure or avoid from pain. In order to diversity and stability, crime is not the only respond of diversion that could be the result of low self-control, but also there are a variety of similar actions they are offset and the result of low self-control. For example, accidents, traffic accidents or dangerous driving, alcohol and drug use, rape, idle and marital discord and conflict. The rate of deviation is clearly depends on the position and opportunities in the life (Lowe, 2011). According to this theory, the difference between social classes, gender, race or character does not exist in criminal acts, but also the difference arises from the difference in the level of self-restraint. Self-restraint is a skill that enables adolescent does not carry unwanted and bad behaviors and acts in approved routes of society and decide how to behave and choose a course of action.

Children are not born with self-restraint and self-control is an acquired skill. Many children learn self-restraint from other children by observing but a significant number of them through direct instruction will have more effective training using prizes and consequences. In the field of growth and development most of the emphasis is on self-development, creativity, positive thinking and sensitivity to others and their rights. Attention to reinforce how to accept different forms, how to increase adaptive forms of behavior, how to deal with stress that leads to seemingly uncontrollable behavior control are also considered ways of development of self-restraint (Majidi, 2013). According to the results obtained in this study, by teaching these skills to adolescents we can help them dominate their thinking and their ideas. If attention to the behaviors of rational logic can be combined with the will, it can lead to intended goal. At the end, we thank and appreciate from the work

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