

Effectiveness of Emotion Regulation Training on Risky Behaviors, Academic Procrastination, and Fear of Success among Students

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Abstract

Background: According to the community conditions and the success rate of high school students, emotion regulation is one of the effective factors in coping with high-risk behaviors and fear of success among students.

Objectives: The present study aimed to assess the effectiveness of emotion regulation training in risky behaviors, procrastination, and fear of success among students.

Method: The pretest, posttest, control group design, and two-month follow-up were used in this quasi-experimental investigation. In the academic year 2019-2020, the research population included all-female high school students in Joghatai. This study used a convenience sampling strategy to choose 30 students who were then randomly allocated to one of two groups: experimental or control. The academic procrastination questionnaire, the fear of success scale, and the youth risk behavior survey were used to collect data. The analysis of covariance was used to examine the data in the SPSS program (version 25).

Results: The results demonstrated that emotion regulation training was effective in the mitigation of risky behaviors ($P<0.01$), procrastination ($P<0.001$), and fear of success ($P<0.001$) among students.

Conclusion: As evidenced by the results of the present study, it can be stated that emotions have a major role to play in the mitigation of high-risk behaviors and fear of success among students. Therefore, emotion regulation training lays the ground for the reduction of high-risk behaviors and fear of success among the students by reducing negative emotions and replacing them with positive ones.

Keywords: Procrastination, Emotional regulation, Achievement, Fear, Students

Introduction

In recent years, educational procrastination has been introduced as a kind of "defect in self-regulation" (i.e., one's inability to control his thoughts, emotions, emotions, and performance following his or her desired criteria) (1). One of the manifestations of the lack of self-discipline in educational procrastination is the tendency to "temporary degradation" in which a person prefers small but accessible rewards to large but out-of-reach rewards (i.e., reducing the value of rewards) (2). When adolescents cannot successfully overcome developmental crises and challenges, they will experience psychological distress and considerable disruption in the norm of daily life, as well as emotional, social, and cognitive aspects, followed by disturbance of their personality (3). One of the subjects investigated in this period is the occurrence of high-risk behaviors. Many adolescents, in the face of difficulties and crises during adolescence, engage in behaviors that threaten their present and future health. Drug abuse, violence, and high-risk sexual behaviors are the causes of death in adolescence (4).

Students who are afraid of failure do their best and work hard; nonetheless, their attempts do not always succeed. On the other hand, we have the concept of "fear of success". Although this factor may seem a little strange and unbalanced, many students do not feel good about being taken into account and defined by individuals (5). The employment of behavioral and cognitive strategies to regulate the duration or strength of emotion is known as emotional regulation (6). People utilize various emotion regulation tactics to correct or change their emotional experiences when confronted with stressful events, according to research (7).

Emotion regulation via cognitive methods is one of the most prevalent strategies. Cognition, or cognitive processes, assists people in controlling their emotions and avoiding becoming overpowered by them (8). In their study, Deacon and Abramovitz (9) examined extra-sensitive dimensions in people with anxiety disorders (social anxiety, obsessive-compulsive disorder, generalized anxiety, and panic) and normal individuals. They stated that people with anxiety disorders reported higher extra-emotional aspects than normal individuals, and those with panic

and social anxiety reported the highest extra-emotionality.

In the same context, Rector, Shimizu, and Liebman (10) assessed different aspects of meta-emotional in patients with meta-anxiety. They reported that people with meta-anxiety experience more general and social anxiety, those with social anxiety experience more social sensitivity, and those with generalized anxiety experience more cognitive sensitivity than the other two groups. They also pointed out that people with anxiety disorders and major depression experience more cognitive sensitivity, as compared to their counterparts with anxiety disorders without major depression.

Due to rapid societal changes, the prevalence of high-risk behaviors has recently been deemed one of the most serious health-threatening issues by health organizations, law enforcement, and social policymakers as one of the most serious challenges in society. For example, it is estimated that by 2030, the number of individuals dying from tobacco usage will have risen to 10 million each year. The harms will be exacerbated if the physical, psychological, and social implications of other high-risk activities, such as drug use, aggression, and hazardous sexual conduct, are also included (11). Although none of the sections of society are safe from adverse consequences of health-threatening behaviors, adolescents are at greater risk so that many victims of high-risk behaviors will be among today's adolescents in the future. Therefore, it is necessary to investigate the high-risk behaviors of adolescents to develop preventive programs.

Objectives

The present study aimed to assess the effectiveness of emotion regulation training in risky behaviors, procrastination, and fear of success among students.

Methods

This quasi-experimental study was conducted based on a pretest-posttest control group design with a two-month follow-up. The study population included all female secondary school students in Joghatai, Iran, from 2019-2020. The statistical sample consisted of 30 female students from Hazrat Zeinab School who were selected via the convenience sampling method. The required sample size was calculated based on 0.40, 0.95, 0.80 test power, and 10% sample attrition for each group and a similar study. The inclusion criteria entailed high school education and the age range of 16-17 years. On the other hand, the exclusion criterion was the absence from treatment sessions more than twice. The following ethical issues were observed in this study: 1. All subjects were given written information about the study and participated in the research in case of their willingness. 2. Individuals were offered assurances that all information would be kept private

and utilized solely for research purposes. 3. The participants' names and surnames were not recorded to protect their privacy.

Academic Procrastination Questionnaire

Solomon and Ruth Bloom's Academic Procrastination Scale (1984) was designed to measure academic procrastination. The first component of "preparing for exams" consists of eight questions, such as "I dream regularly when studying for exams" and "It's hard for me to concentrate". The second component, "Preparing for Assignments", consists of 11 items, such as "I postpone assignments from one session to another". The third component, "Preparing for end-of-term papers", includes eight items, such as "When I have to prepare an article, I delay it regularly". On this scale, items 2-3-59-11-15-13-21-16-23-25 are scored inversely. The reliability of the academic procrastination scale was confirmed rendering a Cronbach's alpha coefficient of 0.64. Solomon obtained a coefficient of 0.84 for the validity of the scale using internal consistency validity. The reliability of the scale was 0.92 in the study by Jokar and Delavarepur (12). The reliability coefficients of this questionnaire were calculated at 0.79 and 0.75 by Cronbach's Alpha and test-retest methods, respectively.

Zuckerman and Allison Fear of Success Scale

This questionnaire was built on Horner's comments in 1976 by Zuckerman and Allison (13). This scale consists of 27 items which are rated based on a 7-point Likert scale (1=I completely disagree to 7= I fully agree). Cronbach's alpha of this scale is 0.69 for men and 0.73 for women, and this scale is negatively correlated with the motivation for progress. Shahraray and Abdi (14) in a study on engineering students, obtained Cronbach's alpha coefficients of 0.66 and 0.71 for women and in men, respectively. Spearman-Brown and Guttman's methods were used to obtain the reliability coefficients. The calculated coefficients were reported as 0.80, 0.82, and 0.82 using Cronbach alpha, Spearman-Brown, and Guttman method, all of which are desirable in terms of psychometric values. The reliability coefficients of this questionnaire were calculated at 0.74 and 0.71 using Cronbach's Alpha and retest methods, respectively.

Youth Risk Behavior Survey (YRBSS)

This scale which was designed and adjusted based on the Risky Behaviors Questionnaire of the American Centers for Disease Control and Prevention (CDC) in 2010 is used to assess high-risk behaviors (15). The validity of this questionnaire was calculated using the structural correlation method to assess the correlation between each item and the total score of the questionnaire, and the reliability of this questionnaire was reached at 0.64 using Cronbach's

alpha coefficient method. The findings revealed that all items had a substantial association with the questionnaire's overall score.

The findings revealed that all items had a significant association with the questionnaire's total score ($P < 0.01$). In addition, correlation coefficients range from 0.26-0.47 (16). The reliability coefficients of this questionnaire were 0.81 and 0.76 using

Cronbach's Alpha and retest methods, respectively. The educational program was conducted for the experimental group based on interventions related to emotion regulation skills. Emotion regulation training was developed by Gratz and Gunderson (17). This method was presented in eight sessions (every session: 90 min). Table 1 shows a summary of the emotion regulation treatment sessions.

Table 1. Summary of emotion regulation therapy sessions

Session	Content
First	Creating a strong therapeutic coalition, providing a safe environment for couples, discovering the reason for referral and the tendency to treatment, discovering interactions between spouses
Second	Continuing assessment, as well as individual meetings, identifying interactions in negative relationship cycles, identifying attachment styles of spouses, including discovering attachment barriers and emotional involvement, determining couples' goals
Third	Discovering, describing, and clarifying negative interactive cycles, strengthening continuity, concentration, and identifying damaged emotions and attachment needs and fears of spouses, trying to achieve infrastructure emotions
Fourth	Intensifying emotional experiences, increasing acceptance and accountability of spouses, re-framing the problem, achieving a new meaning of experiences to achieve the first emotions
Fifth	More precise tracking of interactions, paying attention to the aspects of experience that have not yet been absorbed into their construction, identifying denied attachment needs, combining needs with interactions
Sixth	Contributing to a deeper experience, increasing the acceptance of spouses, highlighting and re-describing the innate needs of attachment, and pointing out that they are healthy
Seventh	Expressing attachment needs and desires by each spouse, focusing the spouse on the undiscovered elements that lie in each couple's experience, creating re-attachment with positive emotional nodes
Eighth	Teaching a clear and direct retelling of needs and desires among spouses, transforming new emotional experiences into new and special responses that challenge the old interaction pattern.

Mean, standard deviation, Leven's test, as well as Skewness and Kurtosis tests, are descriptive approaches (to observe the normality of distributing scores). SPSS software (version 22) was used to test the hypotheses using analysis of covariance.

The mean age scores of subjects were obtained at 17.43 ± 5.02 and 17.86 ± 5.71 in the experimental and control groups, respectively. Table 2 displays the mean scores of risky behaviors, procrastination, and fear of success in the experimental and control groups.

Results

Table 2. Mean scores of risky behaviors, procrastination, and fear of success in the groups

Variables		Pre-test		Post-test		Follow-up	
		M	SD	M	SD	M	SD
Risky behaviors	Experimental	39.73	10.53	26.27	8.37	25.15	8.10
	Control	41.33	12.82	40.67	12.44	39.42	12.01
Academic Procrastination	Experimental	27.27	8.16	19.33	6.74	18.71	6.45
	Control	28.33	7.88	27.53	7.85	27.39	7.01
Fear of success	Experimental	63.40	15.20	58.73	14.56	57.16	13.89
	Control	65.00	16.14	64.27	15.35	64.87	15.14

The mean scores of study variables in the experimental and control groups are displayed in Table 2. The requirement of homogeneity of variance-covariance matrices was appropriately observed since the M-box test was not significant for any of the research variables. The absence of

significance for any of Levene's test variables suggested that intergroup variances were identical. All groups had the same level of variance in the dependent variable. Finally, Mauchly's sphericity test findings revealed that this test was significant for all variables, indicating that the equality of variances

assumption (Sphericity assumption) was not

met (Mauchly's $W = 0.45$; $P < 0.001$). For intragroup effects and interactions, the Greenhouse Geiser test was employed to examine the univariate test results.

The results of multivariate analysis of covariance analysis indicated that there is a significant effect on the "variable" group factor after removing the pre-test effect by multivariate analysis of covariance ($P < 0.001$).

Table 3. One-way analysis of covariance analysis in the text of multivariate analysis of covariance

Statistical index/variable	Source of change	SS	Df	MS	F	P	Eta Square
Risky behaviors	Group	691.20	1	691.20	119.27	0.001	0.63
	Error	162.27	28	5.80			
Academic Procrastination	Group	252.30	1	252.30	46.15	0.001	0.54
	Error	153.07	28	5.47			
Fear of success	Group	6946.87	1	6946.87	41.82	0.001	0.68
	Error	6478.19	28	16.11			

As displayed in Table 3, the difference between emotion regulation training and the control group is significant at the significance level of 0.05. Therefore, considering the means, it can be stated that the method of emotion regulation training had a significant effect on the mitigation of risky behaviors, procrastination, and fear of success.

Discussion

The present study aimed to investigate the effectiveness of emotion regulation training in risky behaviors, procrastination, and fear of success among students. As evidenced by the obtained results, emotion regulation training had a significant impact on risky and procrastination behaviors, as well as fear of success, among students. Larsson et al. (6), Bahrami et al. (8), Parker et al. (18), and Trinidad et al. (19) all observed similar findings (19).

Students require psychological interventions, including encouragement, to express feelings and create dialogue. Coping with unpleasant emotions can provide a sense of meaning and purpose, as well as mental calm and hope (14). Emotion is important in many facets of life, including adjusting to changes in one's life and dealing with difficult situations. Emotions are biological reactions to situations observed as important or difficult opportunities, and these biological reactions are accompanied by our responses to those environmental events. Emotional regulation therapies help students overcome high-risk and delaying behaviors, as well as their fear of achievement, resulting in improved academic performance (8).

Adolescence is an age in which different aspects of one's mental health undergo dramatic changes and one of the underlying causes of high-risk behaviors in adolescents is coping with feelings of depression, inefficiency, loss of self-confidence, lack of life satisfaction, and inability to accept oneself. Therefore, emotional intelligence training can reduce risky behaviors in adolescents by teaching emotion control, self-management, and self-awareness (11). It also

seeks to undermine impulsivity and encourage clients to fully

accept their thoughts, feelings, emotions, and impulses, set valuable goals for themselves, and reduce their violence. Furthermore, the process of cognitive faulting and acceptance weakens cognitive fusion in those with high-risk behaviors. Moreover, they have fewer cognitive dysfunctions and better reasoning skills, and pursuing meaningful life goals and taking action to attain them lead to improved performance and less psychological discomfort.

In explaining this finding, it should be noted that the people who are not able to regulate their emotions may resort to procrastinating behaviors since they have difficulty accepting emotional responses, as well as benefiting from targeted behavior, impulse control, emotional clarity, emotional awareness, and access to emotion regulation strategies. Furthermore, since emotions are monitored, evaluated, and corrected in emotion regulation, this can pave the way for avoiding procrastination due to its negative emotional consequences, such as depression. In the case of emotion regulation and procrastination, people use the procrastination strategy to regulate their negative emotions since this strategy helps them to transiently move away from negative emotions and experience better feelings.

Emotion control training urges authorities to treat unfavorable self-assessments as basic thoughts to fix them. It also aims to reduce violence by encouraging clients to completely accept their thoughts, feelings, emotions, and impulses and develop meaningful goals for themselves. Furthermore, the process of cognitive blame and acceptance weakens cognitive fusion in those with high-risk behaviors. In addition, cognitive dysfunctions are reduced; moreover, pursuing meaningful life objectives and taking dedicated action to accomplish these goals lead to improved performance and a reduction in psychological suffering in individuals.

One of the limitations of this research is the use of self-report tools. People's opinions and self-report

about themselves obtained from these tests may be different from their real actions and behavior. Moreover, environmental and familial factors, such as family

circumstances, parental status, and socioeconomic status, were not controlled in this study. Furthermore, it is recommended that further studies benefit from a specialist as a therapist and treatment training to reduce the likelihood of bias in the research.

Conclusion

As indicated by the findings of this study, emotions play a significant role in the prevention of high-risk behaviors and the fear of success among students. As a result, emotion regulation training lays the groundwork for pupils to reduce high-risk behaviors and their fear of success by diminishing negative emotions and replacing them with positive ones.

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