EFFECTIVENESS OF STUDY SKILLS TECHNIQUES ON SCHOOL FAILURE AMONG SECONDARY SCHOOL STUDENTS IN ZARIA EDUCATIONAL ZONE

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Abstract

This study investigated the effectiveness of study skills techniques on school failure among secondary school students in Zaria Educational Zone. Four hypotheses were formulated to guide this investigation. The population was drawn from 49 public secondary schools in Zaria Educational Zone which cut across five Local Government Areas of Kaduna State with a sample size of 100 students. The study employs a quasi-experimental design involving pretest and post-test design, in which were assigned to study skills treatment techniques. The researcher used random sampling technique in the five schools. The instruments used for data collection was School Failure Assessment Scale Revised (SFAS-R) designed by Cruz (2009). Data were analysed using mean, standard deviation and independent t-test. Findings indicate that, significant effect exist in the effectiveness of study skills technique between treatment and control group (t=17.308, p=0.000). This implies that study skill technique of time management, reading, note-taking and study period procedures are effective in reducing school failure between the treatment and control group (t=13.999, p=0.000). There is a significant effect of study skill technique of home work between treatment and control group (t=4.577, p=0.000). This implies that study skills technique is effective between treatment and control group on gender (t=6.126, p=0.000). Based on the findings, it was recommended that psychologists and counsellors should be encouraged to use various study skills training in order to reduce school failure among secondary school students.

Keywords: Study Skills Techniques, School Failure, Secondary School Students.

INTRODUCTION

School failure is the person's inability to meet the minimum academic standard of education. Psacharopoulous (2008) define school failure as when the school system fails to provide services leading to successful student learning or when a student is failing to advance to the next grade and eventually becomes a dropout. Organisation for Economic Cooperation and Development (2010) maintain that school failure is the failure of the educational system which is unable to provide quality education for all. Panayiotis and Estrations (2008) believe that the definition of school failure do no only entails the students' failure but also with that of the educational system as it has not successfully met the learner's needs. It is very important to know that school failure is caused by multiple factors and the evaluations should not stop with one identification or only contributory factors. Some of these factors can be categorized into four factors which include psychological health, social and school factors.

1. Psychological factors

(a) Poor attention is the inability to have mental concentration or sustained concentration on a specific stimulus, sensation idea in an activity enabling one to use information available from the sense organ and memory store (Adeyemo, 2006). He further emphasized that poor attention is associated with lack of interest in the lesson from the learner due to lack of appropriate learning materials, lack of varieties in the method of teaching, lack of good atmosphere for learning and lack of learners of good accommodation from the parents or school and all these are major factors of school failure.

(b) Low Self-esteem is the feeling of individual competence and the ability to succeed at our goals in life (Ciccareli & Meyers, 2006). Inability of competence and achievement of goal, caused by low self-esteem can affect the academic performance of the adolescent will result to school failure.

(c) School absenteeism or truancy is unapproved absence from school, usually without the parent's knowledge (Schelff, 2007). Truancy affects students or learners of all ages. From all types of communities and socio-economic background, it is also connected to family problems including abuse, neglect, physical and mental health disorder and financial difficulties of the parents or care-givers of the child, and all of these result to school failure.

(e) Frustration is the state of emotional tension resulting to repeated failure or blockage on the attainment of desire goal (Good 2006). Good (2006) further explained that frustration lies in individual (internal) and the

(external) environment. These internal factors include elements like physical abnormalities, conflicting desires, inadequacy in the level of aspiration and lack of persistence and sincerity in effort. While external factors may be categorized as physical factors which include natural calamities like floods, droughts, earthquakes, fire incidence and accidents, all these factors can cause frustration to the learners and will lead to school failure.

(f) Drug abuse, according to American Psychiatric Association DSM III in Ehiozuwa (2011) occur the recreational or therapeutic use of psychoactive drug produce chronic changes in behaviour patterns and central nervous system activity that are both personally and socially debilitating. These changes include impaired social functioning, psychological dependence, physical dependence and drug induced organic disorder. All these are major factors of school failure.

2. Health Factors

(a) Mild visual and hearing disorder: Mild or partial sight (low vision) describes people who are unable to use their vision as primary sources of learning (Baraga, 2006).

(b) Mild hearing or conductive loss: according to Garwood (2007), conductive hearing losses result from poor conduction or sound along the passages leading to the sense organ (inner ear). The loss may result from a blockage in the external canal, as well as from an obstruction interring with the movement of the eardrum, or ossicle, inability to tackle mild or conductive loss and mild visual problems can lead to school failure.

(c) Sleep disorder or insomnia: Robert (2008) states that sleep disorder or insomnia may result from clinical syndromes, biological factors, drug abuse, or environmental issues, and this lead to the individual to have impaired functioning if the problem persists. Lack of sleep is associated with day time sleepiness, irritability, and problems with attention and concentration on learning and this can be a major cause of school failure.

(d) Autism: Autism is a developmental disability significantly affecting verbal and non-verbal communication and social interaction, generally evidenced before the age of three years and adversely affects educational performance (U.S. Department of Education, 1991). Autism is also characterized by irregularities and impairment in communication, engagement in repetitive activities and stereotyped movement, resistance to environmental change in daily routines, and unusual responses to sensory experience (Cullbery,

2010).

(e) Malnutrition and nutritional deficiencies: Malnutrition is termed as illness or weakness caused by not having enough food to eat or by not eating good food (Longman 1995). Nutritional deficiencies are contributing factors for high rates of morbidity mortality and disabilities in learning. Malnutrition is a pathological condition brought about by the inadequacy of over-consumption of one or more of the essential nutrients necessary for survival, growth and learning activities (UNICEF 2001).

These deficiencies are in protein food, vitamin A, iron, iodine and zinc. Vitamin A deficiency has been attributed to respiratory infection and diarrhoea, iron deficiency cause impaired mental development, impeded cognitive functioning and also affect learning activities. Iodine deficiency makes cognitive and intellectual functions vulnerable, encourage slow learning and zinc deficiency also cause poor mental development (UNICEF, 2001). Improper intake of food causes school failure.

3.   Social Factors

(a) Divorce: Sellgren (2010) states that poorly managed conflict between parents that lead to divorce increased children's risk of behaviour problems, which include depression, substance abuse, dependence, poor social skills and academic failure and this a major contributor of school failure.

(b) Unemployment: Unemployment occurs when people who are without work are actively seeking for paid work. It is also include workers sacked due to economic crisis, industrial decline, company bankruptcy or organizational restructuring (Ashley, 2007). High and persistent unemployment, in which economic inequality increases, has a negative effect on economic growth and children education. It leads to homelessness, increased susceptibility to cardiovascular disorder, anxiety disorder, depression and cases of suicide (Ashley 2007).

(c) Peer Pressure: Peer pressure or social pressure is commonly associated with episodes of adolescent risk-talking because these activities commonly occur in the company of peers (Laurence & Monahan 2007). Speer (2011) also states that affiliation with friends who engage in risk behaviour has been shown to be a strong predictor of an adolescent's own behaviour and also have negative effect, which include occultic activities, low academic performance, truancy, smoking, alcohol intake, armed robbery, prostitution and even death and all these are evidences of low academic

performance that lead to school failure.

(d) Teenage pregnancy: Teenage pregnancies are often associated with social issues including lower educational levels, high rates of poverty. It is usually outside marriage, and carries a social stigma in many communities and culture (Hamilton & Ventura, 2012). According to the United Nations Population Fund (UNPFA) (2013) teenage pregnancy affect the girl-child education and income potential as many of them are forced to drop out of school will ultimately threatens future opportunities and economic prospect, which can be a major evidence of school failure.

(e) Child neglect and Abuse: According to Child Study Center (2006), child neglect and abuse is the maltreatment which involves any act of commission or omission – which endangers or impairs a child's physical or emotional health and development. This type of maltreatment includes physical abuse, sexual abuse, emotional or psychological abuse and neglect. Smith and Segal (2013) further explained that all types of child neglect and abuse leaves a lasting scar, but psychological or emotional scars have a long lasting effect throughout life, and these include the following.

(f) Cognitive development or deficit, language development, depression, panic disorder, attention deficit and hyperactivity disorder and attachment disorder.

4. School Factors

According to Abolarin (2006), school factors are used by:
- Unstable curriculum structure
- Lack of fund by the government
- Lack of adequate learning materials by the government
- Inadequate classroom accommodation
- Lack of quality of teaching by the teachers
- Lack of concern about individual differences by the teachers.
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- Lack of using proper reinforcers by the teachers.
- Lack of security in the school environment.

School failure is a more persistent problem that might be characterized by some of the following signs:
- Avoidance of school work and home work
- Lack of attention and concentration in the classroom
- Lack of interest in the classroom activities
- School refusal
- Truancy

- Anxiety
- Somatic complaints, that is, diarrhea, irritable bowel, fatigue, headache and stomach
- Drug and alcohol use
- Aggression
- Poor academic result
- Social withdrawal

The home is the first agent of socialization through the parents, so the problem of school failure starts from the home because of the parental attitudes. This parental attitudes include poor parental supervision of school work, harsh parental discipline, marital conflict in the presence of children, inability to pay school fees and provide adequate study or school materials to the child, poor communication between the children and the parents, parental mental illness, unemployment of parents are all associated with school failure and affect the academic performance of the learner (Bryd, 2005).

The breakdown of communication between the learners and teachers, over-population of the learners in classroom, shortage of teachers and undue application of corporal punishment as well as peer influence at school, illness of the child, high cost of school materials, the location of school, that is, (when the school is too far from where the learner live), inability of the learner to understand the language of communication in the school are all evidences of school failure (Ubogu 2004).

In spite of the various efforts by teachers, school psychologists, counsellors in the use of punishment, shaping, token economy modelling, time out and various techniques, in addressing school failures, the problem among secondary school students continue to be on the increase. The use of study skills techniques may be effective in reducing the problem of school failure. Study skills techniques (SST) are approaches applied to learning and are generally critical to success in the school (Contribution of Study Skills to Academic Competence, 2009). SST is considered to be essential for acquiring good grades and useful for learning throughout one's life. SST is also effect in improving the academic performance of the learner (Duru 2001).

Kiewsa (2012) assert that students fail in examination simply because they lack study skills or examination simply because they lack study skills or examination techniques. SST boosts the learner's ability to study, retain and recall information which assists the learner in passing their examination and also provide different techniques that can be learned in a short time and can be applied in all or most fields of study (Management, Reading, (Note-taking and Home Work) (Carey, 2015). SST involves teaching students to utilize a process for thinking,

usually in steps (Corey 2015). It requires the students to "recognize, recall, and execute the particular steps in the study skills". By mastering these skills, the students are equipped with the tools to learn, and these make it effective to tackle the school failure among secondary students. It is against this background that this study seeks to investigate the effectiveness of study skills techniques on school failure among secondary school students in Zaria educational zone, Kaduna State, Nigeria.

Research Questions

This study will provide answers to the following research questions:

1. What is the effectiveness of study skills techniques (SST) on school failure among secondary school students in Zaria Educational Zone?
2. What is the effectiveness of study skills techniques (SST) of time management, reading, note-taking and study period procedure on school failure among secondary school students in Zaria educational zone?
3. What is the effectiveness of study skills techniques (SST) of home work on school failure among secondary school students in Zaria educational zone?
4. What is the effectiveness of study skills techniques (SST) on school failure between male and female among secondary school students in Zaria educational zone?

Hypotheses

1. There will be no significant effect of study skills techniques (SST) on school failure among secondary school students in Zaria educational zone.
2. There will be no significant effect of study skills techniques (SST) on school failure (time-management, reading, note-taking and study period procedure) among secondary school students in Zaria educational zone.
3. There will be no significant effect of study skills techniques (SST) on school failure (home-work) among secondary school students in Zaria educational zone.
4. There will be no significant effect of study skills techniques (SST) on school failure (male and female) among secondary school students in Zaria educational zone.

METHOD

The study was executed using a quasi-experimental design, involving pretest-post-test design. The population of the study comprises all government senior secondary school (SS II) students in Zaria educational zone, Kaduna "State. The sample was drawn from 49 public secondary schools in Zaria educational zone which cut across five local government areas of Kaduna State, namely: Zaria, Sabon Gari, Soba, Giwa and Kudan respectively.

The sample of the study consists of 100 identified school failures in SS II from four schools in Zaria educational zone. To compose this sample, the researcher used random sampling in the five schools from Zaria educational zone which include one school in Zaria, Soba, Giwa, Sabon Gari and Kudan. The researcher assigned the five schools into the treatment group and control group.

The instrument tagged SFAS-R (School Failure Assessment Scale Revised) developed by Cruz (2009) was adapted and used for this study. The scale ranges from Strongly Agree (5), Agreed (4), Undecided (3), Disagreed (2) and Strongly Disagreed (1).

The SFAS-R was face-validated by three experts in educational psychology, guidance and counselling of the Department of Educational Psychology and Counselling, Ahmadu Bello University, Zaria for their criticism and inputs relating to the appropriateness of the items and clarity of the language.

An internal consistency reliability estimate was obtained through the Cronbach Alpha method at 0.78. A test retest reliability to determine the stability of the instrument over time was conducted. In order to achieve this, second administration of SFAS-R was conducted after two weeks and the scores obtained from both administrations were correlated using Pearson correlation formula. This yielded a test-retest reliability estimate of 0.81. Data were analysed using mean, SD and independent t-test.

Procedure for Data Analysis

The basic premise of study skills theory is to prepare students for specific skills such as organizing, listening and retaining information that can be applied in a variety of settings and situations which will encourage good school behaviour and discourage school failure.

Pre-treatment

Before the commencement of the treatment, the researcher will take time to familiarise him/herself with the students to ascertain their competency, interest and the academic problems they encountered in school. This will help the researcher in determining how best to motivate the students to acquire new skills immediately after assigning the classes to treatment and control groups and the SFAS-R will be administered to them. In order not to disrupt the school activities, SST will be done during free periods. The experiment was designed to task for six weeks.

Treatment Phase

Study Skills Techniques (SST)
Week 1
Session 1: Establishing the relationship
Session 2: Nature, purpose and process
Session 3: Visual imagery: Clients are

taught to have a visual learning style that will benefit them greatly from taking information from their studies which are verbal and using visual imagery techniques to help encode and retain it in memory.

Week 2

Session 4: Time management: The therapist teaches the clients on how to manage time that is by following a schedule of study in order to organize and prioritize study in the context of completing activities of class work at the appropriate time.

Sessions 5 and 6: Reading – Reading is done in a skilful manner and could be very profitable. Effective reading techniques include major headings or the points in the syllabus.

Question: The client formulated questions to be answered following a thorough examination of the topic.

Read: The client reads through the related materials, focusing on the information that best relates to the questions formulated earlier.

Summary: The clients summarize the topic by bringing his or her own understanding in the process.

Test: The client will answer the questions drafted earlier, avoiding or adding any questions that might distract or change the subject.

Week 3

Session 7: Note-taking: The technique involves the therapist teaching the client on note-taking in the classroom. Note-taking helps the client to remember information presented in the classroom or reading from textbook by:

- The client should copy complete notes.
- Use abbreviations that make sense
- Rewrite or recopy your notes to facilitate understanding and to fill in gaps.
- Do not rely completely on your notes, use additional sources.

Week 4

Session 8: Flash card Training.
Flash card trainings are usually cues on cards. Clients often make their own flash cards or more detailed index cards. Cards are designed for filling, often on A5 sizes on which short summaries are written. This allows the client to pick a section to read over, or choose randomly for self-testing.

Session 9: Buzan Mind Maps.
It involves the therapist training the clients on how to remember key factors to develop a mind map, the clients use a sheet of paper and put the topic or subject in the middle of the page with branches, on each branch you only write the key words and for every key word you write, you should put first image that comes into your mind, when you think about the key word.

Week 5

Session10: Rehearsal.

This technique involves the act of memorization which is a deliberate mental process undertaken in order to store in memory for later recall such as experiences, names, appointments, addresses, telephone numbers, stories, poems, pictures, maps, diagrams, facts, and auditory information. These techniques teach the clients how to read over notes or textbooks and re-writing notes.

Week 6

Session 11: Home Work.

The therapist commonly gives assignment to clients to help them learn new ways of dealing with current school problems on their own.

Week 7

Session 12: Revision of SST and re-administration SFAS-R

Post-treatment

The SFAS-R were administered to the subjects in the treatment groups and those in the control group immediately after the treatment is completed.

RESULTS

Research Question 1

Table 1: Mean scores and of students on study skills techniques in Zaria Educational Zone

Group	N	Mean	Std. Deviation
Treatment	50	170.1400	16.3170
Control	50	128.2600	12.2070

The result in table 1 indicates the secondary school students exposed to SST on school failure obtained mean score of 178.1400 with SD 16.3170 and those in control group had a mean score of 128.2600 with SD 12.2070 respectively. This table indicate that, SST techniques on school failure had significant influence on those exposed to treatment had higher mean scores (178.14) while those who were not exposed to it had lower mean scores (128.26).

Research Question 2

Table 2: Mean Score and SD on the Management, Reading, Note-taking and Study Period Procedures

Group	N	Mean	Std. Deviation
Treatment	50	92.6600	9.87185
Control	50	67.2800	8.17922

The result in Table 2 indicates that secondary school students in Zaria educational zone treatment group had a mean score of 92.6600 and with SD 9.87185 and those in control group had mean score of 67.2800 with SD 8.17922. This indicates that students who were exposed to treatment had higher mean scores (92.66) while those who were not exposed to treatment had lower mean scores of (67.28) indicating that students who were exposed to SST on time-management, reading, note-taking and study period procedure had their school failure reduced.

Research Question 3

Table 3: Mean Score and SD on Home Work

Group	N	Mean	Std. Deviation
Treatment	50	20.3400	4.46579
Control	50	17.0600	2.39395

Table 3 reveals that the treatment group had mean score of 20.3400 with SD of 4.46579 on homework, while the control group had mean score of 17.0600 and SD of 2.39395. This indicates that students who were exposed to treatment with SST on home work had higher mean score (20.3400) while those who were not exposed to treatment had lower mean scores (17.0600). This shows that students exposed to SST on home work had their school failure reduced.

Research Question 4

Table 4: Mean Score and SD on Gender

Group	N	Mean	Std. Deviation
Male	25	188.8400	9.4325
Female	25	167.4400	14.7000

Table 4 shows that male students had a mean score of 188.8400 and SD of 9.4325 while the female respondents had mean score of 167.4400 and SD of 14.7000 respectively. This indicates a significant difference on the male respondents showing more gain than the female in the treatment.

Hypotheses Testing

Hypothesis Testing 1:

Table 5: Independent t-test analysis of difference in SST between treatment and control group

Group	N	Mean	SD	SE	df	t-cal	P (sig)
Treatment	50	178.1400	16.3170	2.30758	98		
Control	50	128.2600	12.2070	1.72634		17.308	0.00

Significance at P>0.05

Table 5 above reveals that calculated t-value is 17.308 and calculated p-value is 0.000. Those exposed to SST on school failure recorded greater improvement than those in control group. As a result of this, the null hypothesis which states that: There will be no significant difference on the effect of study skills techniques (SST) on school failure among secondary school students in Zaria educational zone is hereby rejected.

Hypothesis Testing 2:

Table 6: Independent t-test analysis of difference between the treatment and control group on time management, reading, note-taking and study period procedures

Group	N	Mean	SD	SE	df	t-cal	P (sig)
Treatment	50	92.6600	9.87185	1.39609	98	13.999	
Control	50	67.3800	8.17922	1.15672			0.00

Significance at P>0.05

Table 6 reveals t=13.999, P = 0.000. Those exposed to SST on time management, reading, note-taking and study period procedure recorded greater improvement than those in the control groups. As a result of this, the null hypothesis which states that: There will be no significant effect of SST on school failure (time management, reading, note-taking and study period procedure) among secondary school students in Zaria educational zone is hereby rejected.

Hypothesis Testing 3

Table 7: Independent t-test analysis of difference between the treatment and control group on home work

Group	N	Mean	SD	SE	df	t-cal	P (sig)
Treatment	50	20.3400	4.4579	.63156	3.577		
Control	50	17.0600	2.39395	.33856		17.308	0.00

Significance at P>0.05

The above table reveals t = 4.577, P = .000. Those exposed to SST on homework recorded greater improvement than those in the control group. As a result of this, the null hypothesis which states that: There will be no significant effect of SST on school failure (Home work) among secondary school students in Zaria educational zone is hereby rejected.

Hypothesis Testing 4

Table 8: Independent t-test analysis of difference between treatment and control group on gender

Group	Gender	N	Mean	SD	SE	Df	t cal	P (sig)
Treatment	Male	25	188.8400	9.4325	1.88651	48	6.126	
Control	Female	25	167.4400	14.7000	2.94000			0.00

Significance at P>0.05

Those exposed to SST on gender recorded greater improvement than those in the control group. As a result of this, the null hypothesis which states that: There will be no significance effect of SST on school failure (gender) among secondary school students in Zaria educational zone is hereby rejected.

DISCUSSION

Findings indicate that study skills technique was effective in reducing school failure among secondary school students. This finding is in line with Durul (2001) in which he states that SST is considered to be essential for acquiring good grades and is useful for learning throughout one's life, and also effective in improving the academic performance of the learner. SST has been used as a supporting procedure in the treatment of school failure, poor study habits, examination anxiety, management of time in test and examination, note-taking and reading skills.

The result of the second and third hypotheses revealed that SST was effective in reducing school failure (time management, reading, note-taking, study period procedure and home work. This finding is in line with Carey (2015) in which he states that SST can boost the learner's ability in short time and can be applied in all or most field of study in time management, reading, note-taking and home work.

The fourth hypothesis was significant. Result shows the effect of gender on skills techniques because the male students proved to have better study skills than the female.

Therefore to effectively address or reduce school failure relating to time management, note taking, reading and homework, school psychologist and counsellors need to use effective techniques for learning and retaining information.

Conclusion

Findings indicate that study skills techniques were effective in reducing school failure among secondary school students in time management, reading note-taking and home work. Finally male students have proven to have better study skills than their female counterparts among those who receive treatment.

Recommendations

1. School psychologists and counsellors should be employed in schools and taught how to use various study skills training in order to reduce school failure among secondary schools.

2. Class teachers who notice their students performing very poorly can also adapt the use of various study skills techniques for their students' successes in the classroom.

3. Seminars, workshops and conferences should be organized to trains chool psychologists, counsellors and classroom teachers on the use of SST in reducing school failure among secondary school students.

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