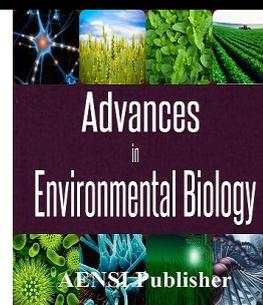




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Managing Aggressive Behavior In Young Children With Mental Rehabilitation Based On Story Telling Method

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ABSTRACT

Children sometimes act aggressively in order that they lose the capability to adjust their feelings. In fact, aggression is a serious childhood problem. According to findings, children can profit from storytelling procedure. This can provide an instant consequence and can also instruct them to calm down themselves. In addition, mental rehabilitation based on storytelling helps children to express their feelings in a secure area. Regarding the fact that expressing feeling decreases aggressive behaviors in children, Cook's Storytelling Method is used to manage children's aggressive problems in this article. Three children were chosen randomly who were brought to three counseling centers for their aggressive behaviors. In William Cook's method, the following five-step process involved in constructing a therapeutic story is identified: Introducing the major personality, talking about the difficulty, speaking to a wise person, trying out a new method and Summing up the lesson. For assessing the changes during the treatment, Child Behavior Checklist (CBCL) was used. By comparing T-score's results in post-test and pre-test of CBCL in terms of social problems, aggressive behavior and law-breaking behavior, children's behavioral problems and aggressive behavior were reduced significantly. In conclusion, mental rehabilitation based on Storytelling decreases children's behavioral problems.

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INTRODUCTION

Aggression is a serious childhood problem which is used for describing many unacceptable behaviors. usually, these problems are sorted in the series of behavioral disorders in DSM-IV. Behavioral disorders consist of constant and earnest aggression and minor antisocial difficulties [9]. School age children sometimes behave aggressively for they lack the capability to regulate their sentimentality. When they are irate they don't learn how to calm down and would lash out. In addition, they may lose the capability to tell, "I'm really irate right now" and may show their irate with their behaviors. Sometimes kids behave aggressively since it actually acts for them. For instance, if a child strong-arm his sister, his sister may give him the thing he wants. This can be correct for pre age children and even younger. Learning how to converse with sibling rivalry efficiently involves getting on with both children to convince that violence does not work [8].

Many children, particularly during the initial phases of treatment, do not desire or do not be aware how to put into words their inner feelings. Likewise, they demand time to make a therapeutic rapport and the accompanying trust that will let them to speak straightly about their feelings. By mental rehabilitation based on storytelling, the children can be aided to express their feelings in a secure area [28].

Story telling allows youngster to express their relation and problems in a safe zone without any menace. Children's cooperation in therapy is a major part in this method [20] which reinforces therapeutic connection between child and counsellor [11].

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Acknowledgment the consistency of child by therapists may promote sense of empowerment and raised self-esteem of children. These capabilities may also be interwoven in the therapeutic storytelling procedure [23]. By identifying with personalities in the story, children are almost able to more easily discuss their own conditions. Additionally, "Storytelling comes naturally to most children and is an efficient method for them to reveal what they are considering and feeling"[23].

When children are encountering problems, they usually do not answer favorably to orations or even specific counsel about how to dissolve the problem and relinquish even the best opinions. However, stories are extremely non-threatening to young children. They would be capable to draw their own results and subsequently build a choice about the foremost way to launch with their own actual-life problems [10].

Storytelling is a procedure to:

- Partake norms and values [4].
- Expand trust and commitment [7].
- Partake tacit knowledge by preparing alternate experience without any resistance (Spender, 1996)
- Simplify unlearning [4].
- Produce Emotional Connection [12].

Though stories have been recognized as a mechanism for supplying learning [24] there are also other strategies or styles which can accomplish analogous results like: Storytelling, Modeling, imagery (role playing), Encoded Resources (manuals, recipes, textbooks) and Symbolic matters.

Storytelling and Modeling contain main roles in subscription norms and values expanding trust and obligation. Storytelling, modeling and role playing are more significant in sharing implicit knowledge. In simplifying non acquisition storytelling, modeling and role playing have salient pattern [30].

In the procedure of storytelling presented by Slivinske, after saying story the child may then write, design, or elicit the termination to the story that the therapist presents to the child. This will then be considered by the therapist and the child, and inquiries may be asked by the clinician. The child may also be invited other appropriate inquiries that suit the situations of the child's therapy needs. In addition, the child is then invited to write, draw or say about a story that she creates apart.

TSI contains the clinician telling a story and asking the child to imaginatively connect a story's main personality on a trip of self-discovery [9]. This procedure is well embarrassed by young child and treatment completion amounts are very reliable. The treatment does not attempt to clear the problems a particular child is having. Instead, it tries to internalize the concept that everyone has turbulences and problems and that this is what each person's life is all about. In result, while the stories propose models for prevailing the difficulties of life and when a young child does respond and alters his attitudes and manner, it is not for he has been *told* to, but because he *chooses* to [9].

According to clinical research, it is preferable to draw children's attention by saying story instead of attempting to get children to discourse about their difficulties. Telling stories to young children and adolescents is lately considered as a new method and it is applied both individually and as in team work..

MATERIALS AND METHODS

In this study, the effect of william cook's storytelling method on children behavioral problems was studied. In fact, the story thoughts are essentially for typically developing youngsters who are encountering the normal turbulences of everyday living. They are not purposed for children with crucial psychiatric derangements, except when the narrative is incorporated into a throughout treatment program determined and directed by a clinician.

Mental health rehabilitation is a formation of rehabilitation that concentrates on helping people to meliorate lost skills in tackling with the demands of daily life and restoring communications that may have become jaded or damaged as a consequence of problems relevant to mental illnesses or some kinds of substance abuse [27].

In this approach, three children were selected randomly who were brought to counseling center for their behavioral problems.

Measures:

For assessing changes during the treatment, Child Behavior Checklist (CBCL) was used. CBCL is a check list which is filled out by parents and indicates great amount of children's behavioral difficulties and their sufficiency [2]. Test outcomes show T-scores in 8 main parts and 3 sufficiency scales.

Accomplished studies suggest a correlation between CBCL's results and DSM-IV disorders [2]. Minaei [17] reported CBCL's inner parallel coefficient between 0.77 to 0.83. In addition, coefficients of retest validity in all sub factors in with certainty of 0.05 is significant [17].

Procedure:

In this approach, model of pre-test/ post-test without control group was applied. Pre-test included conducting CBCL's parents report form. After performing pre-test and getting memoir and psychotic

examination of each child, storytelling method was conducted in 5 sessions (45 minutes, once a week) based on children's psychotic needs. One week after ending sessions, post-test was conducted.

Therapeutic method was designed based on William Cook's storytelling method. In the method of storytelling which is introduced by William Cook, which should be applied in telling each story. these 5 sub domains are mentioned below:

1. *Introducing the main personality(s):*

This is a simple procedure to get started by selecting a name for the essential character, and briefly describing the perimeter and clarifying his age. The main opinion of telling these matters is to help children to deduce that the main personality is similar to them and they can put themselves in his position.

In some conditions, it can be possible to introduce generic personality who is lovely, but disposed to getting into difficulty. This generic personality could then be used for many narratives rather than just one.

2. *Talking about the difficulty:*

Children require knowing that their difficulty is not completely comprehensive. It is better to allow the child is aware that the main personality in the story is likeable and has much capability which is admirable; however the main personality does have this one fairly less difficult. At this time, Cook often applies some dramatic exaggeration of the difficulty in order to increase humor and assist the child deduce that his problem is not approximately so difficult.

3. *Speaking to a wise person:*

In this step, the main personality goes to meet a wise person who provides unconditioned love and fully accepts the child. This person shows assistance and understanding for the child difficulty and help child to ideate and act in a novel way that may be useful. In fact, he assists the child to remember things that he can do rather than cannot do.

The wise person personality should be specific because he perceives the problem at a very profound level, and want to assist child.

4. *Trying out a new method:*

In this part, the child imagines a great deal concerning what the wise person has said and begins to regard at the issue from different prospects. The main aim of this part is that the main personality listens nearly to what the wise person said and applies them through actual experiment.

Likewise, the child who is heartening to the narrative also tries out new ways of thinking about himself and the problem and starts to rehearse in his mind what it would be similar to try out the narrative methods in order to see if they might really work in actual life.

5. *Summing up the lesson:*

A cheerful ending helps to reinforce the effect of the story. For instance, it can be conceivable to tell the young child that by listening to the wise man opinion, Silly Kate has found a manner to solve his difficulty, and the wise man determines to change his name to Kate Smart. Then everyone is so arrogant of Kate [10].

After the story finishes, it is a good opinion to give the child a fortune to ask questions, make explanations, or give further suggestions [10].

In this part of treatment, parents should try to memorialize the story for the young child. If the child is starting to have a provisional tantrum, they might tell, "We should recall what happened to Kate Smart in the story."

sometimes, parents may provide a key term to assist the child remember a major point from the narrative. These are all methods to have the story maintain to be outstanding in the child's thought in real world positions where it's significant to remember the remarkable details [10].

Results:

Children's scores in CBCL's parents form indicate that social problems, aggressive behavior and disobedient behaviour scores are so high in pretest. The results are shown in table 1. T scores indicate that a significant decrease has occurred in social problems, aggressive behaviour and disobedient behaviour's scores after treatment. T score in aggressive behavior post-test decreased significantly (33 points in Ali's post-test, 39 points in Arash's post-test and 27 points in Sina's post-test).

According to parents form, significant decrease is indicated in pertinacity and disobedience score after therapy.

Discussion:

Although investigation in storytelling methods is wholly new, researchers' affirmation is on the conclusions of storytelling on sick with psychotic disorders [16].

As children cannot recognize and express their ideas and feelings, the relics of storytelling are so outstanding especially among young children. because of this fact storytelling is offered as a perfect procedure for psychotherapy and counseling [19]. When young children are listening to the story, they put themselves in the shoes of the hero. Indeed, they encounter their conflicts [21].

Table 1: Scores are based on T-score in pre-test and post-test of CBCL in therapy based on William Cook's storytelling on three subject children.

subjects	Aggressive behavior		Disobedient behavior		Social problems	
	Pre-test	Post-test	Pre-test	Post-test	Pre-test	Post-test
1	89	56	88	63	73	32
2	69	30	72	52	77	61
3	72	45	75	56	70	54

There are many investigations done on the effect of storytelling on young children's behavioral problems. Wilson made use of written and spoken narratives as effective methods for engaging young children in treatment [30]. Pursuant to Clarkson and Phillips, Therapeutic Storytelling Intervention (TSI) between other things proposes a means for enhancing individual therapy to family therapy without amplifying scapegoating. Harland thought of storytelling to a team of children with learning disabilities. Arad explained a story-telling procedure in family therapy asking young children what animals they would select to represent their family members. This helps parents to see dynamics in a more symbolic procedure and through children's perspective. Arad described that this type of storytelling was impressive for children with conduct disorders and children of divorced parents [3]. Duffy used storytelling within play therapy for children with psychotic problems.

Pursuant to Favara-Scacco's studies, using storytelling within painful procedures across young children can be so useful. Plaisant applied storytelling robot for Pediatric Rehabilitation in young children [6]. Storytelling helps curing orphan children to express their impressions [1]. Harvay used storytelling and drawing in family therapy to aid family members gain a better conception of each other's opinions, and individual impressions of safety to understand each other's feeling. Crenshaw applied storytelling methods and projective drawing within therapeutic play and used symbols in therapy with young children and adolescents who were cut off from their feelings or had large difficulty verbalizing their troublesome emotions [18]. Storytelling is so useful to decrease anxiety and enhance self-control, self-sufficiency and expectancy in children [22].

The results indicate that using mental rehabilitation based on storytelling is so helpful in treating children behavioral problems.

The key reason for learning to tell stories is that each child is unmatched. If the child is recognized well, you are in the best situation to tell the correct story at the correct time to aid with a particular psychological topic [9].

Children are not fault finders. They don't await us to make a master story, a Grimm's fairy tale that will stand the remains of centuries. Rather, they search for the tranquility of your voice partaking with them what you can only partake, i.e., attention, and time [9].

This kind of storytelling tries to decline the limitations of other kinds of storytelling like not having diverse types of stories for young children with various ages and problems.

Although telling story and drawing pictures based on children's problems enhance therapy's effectiveness, it needs a creative and good drawer therapist. As a result, the therapist who have these features can be more successful in applying this kind of storytelling.

Conclusion:

Creating stories can increase therapeutic potential by using a young children's friendly cant. The energetic involvement of the therapist in creating and offering a story to family members may itself increase rapport and inner motivation during therapeutic process [30].

Mental rehabilitation based on storytelling provides a major learning and enriching experiment both for the therapist and client. storytelling is an devious method that supplies a chance for the therapist to seek young children's life [15].

In conclusion, mental rehabilitation based on Storytelling decreases children's behavioral problems and aggressive behavior significantly and it can be used as a sufficient method of managing aggressive behavior in children.

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