

The Impact of Cognitive-Behavioral Counseling Program on Improving Academic Achievement in Children with Oppositional Defiant Disorder: A Case Study

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Abstract:

The aim of this study was to enhance the academic achievement of a child with Oppositional Defiant Disorder (ODD) through a cognitive-behavioral counseling program. The program was implemented on a single case, a 9-year-old school child with low academic achievement diagnosed with Oppositional Defiant Disorder according to the Diagnostic and Statistical Manual of Mental Disorders (DSM-5). To achieve this goal, a clinical case study approach was utilized, employing observation, clinical interviews, and three measurements of the child's oppositional behavior using pre-test, post-test, and follow-up measurements. The study results confirmed a positive impact of the cognitive-behavioral counseling program on the academic achievement of the child with Oppositional Defiant Disorder. The quarterly average increased from 4.57 to 6.38 in the second quarter, and further to 7.42 in the third quarter of the academic year 2022-2023. Additionally, the child's level of oppositional behavior decreased from high to low.

Keywords: Cognitive-behavioral counseling program, Academic achievement, Child, Oppositional Defiant Disorder.

1- Problem Statement:

Academic achievement receives significant attention from psychologists, researchers, and educators as a fundamental measure of a student's success. It determines whether a child progresses to the next grade level or faces academic setbacks, making it an important indicator for identifying students' academic difficulties. Academic achievement is influenced positively and negatively by several external factors, such as social and economic factors, as well as factors related to the curriculum, teaching methods, and the overall school environment. Additionally, there are internal or intrinsic factors related to the child themselves, such as physical and genetic factors, as well as their cognitive abilities like perception, memory, and recall. Furthermore, psychological factors play a crucial role in the academic achievement process, where the child's personality and psychological and behavioral disorders impact their academic performance. Among these disorders, Oppositional Defiant Disorder (ODD) stands out, characterized by angry mood and quick temper, as well as oppositional behavior or argumentativeness towards adults, whether in the school or home environment.

Also, the retaliatory and disruptive behavior, as the child with oppositional defiant disorder is often argumentative and deliberately annoys others, defies adults, and challenges them. They refuse to follow teacher instructions and may refuse to complete school assignments just to show opposition. They do not adhere to the school's internal rules and cause chaos in the classroom. They do not focus during lesson explanations but rather engage in disturbing their classmates, which negatively impacts their educational process. Their relationship with the teacher, peers, and parents worsens, leading to the child's dissonance with their environment and disruption of their academic and social life. Consequently, their academic achievement decreases, as several studies, including ZOTELL (2005), Said and Fadel (2013), Rahman and Hassan (2003), and Yahya (2000), have found. All of these studies agreed on the decreased academic achievement of students with oppositional defiant disorder, their behavioral disruption within the school, and their poor relationships with peers and adults. This disorder does not only affect the child but also extends to those around them.

Here, the importance of providing appropriate counseling services to address disruptive behaviors becomes apparent in aiding the elevation and improvement of academic achievement while preventing the reinforcement of the disorder. Cognitive-behavioral school counseling offers a better understanding of how

to psychologically manage those with disruptive behavior. It views defiance as a result of illogical and erroneous thoughts the child holds about themselves and others. Cognitive-behavioral counseling aims to address these misconceptions and beliefs.

Based on the above, the following question arises:

Does the proposed cognitive-behavioral counseling program have an impact on improving the academic achievement of children with oppositional defiant disorder?

2- Study Hypothesis:

Based on the research question, the following hypothesis was formulated:

There is a positive effect of implementing the cognitive-behavioral counseling program on improving the academic achievement of children with oppositional defiant disorder.

3- Research Objective:

The main objective of the current study is to develop a cognitive-behavioral counseling program and explore its impact on improving the academic achievement of children with oppositional defiant disorder. It also has specific objectives, including: acquiring effective study methods, gaining time management skills, alleviating exam-related anxiety and fear, reducing negative behaviors associated with oppositional defiant disorder, while enhancing overall academic and social performance.

4- Research significance

The importance of the research lies in addressing the gap in studies concerning Oppositional Defiant Disorder (ODD) among children and its impact on academic achievement within the Algerian educational context. Additionally, it is significant due to its endeavor to construct a cognitive-behavioral guidance program aimed at enhancing academic achievement while reducing the level of Oppositional Defiant Disorder in children.

5- Defining the Main Research Concepts:

5.1. Cognitive-Behavioral Guidance Program: Al-Zahrani defines it as 'a structured and organized program based on scientific principles aimed at providing direct and indirect counseling services, whether individual or group, to all individuals within the school community. Its objective is to assist them in achieving holistic growth, making informed choices, and attaining psychological harmony, both within and outside the school environment' (Dawi & Marouf, 2019, p. 61).

5.2. Oppositional Defiant Disorder (ODD): Defined by the American Psychiatric Association in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), as a condition characterized by several symptoms divided into three behavioral categories: angry and irritable mood, argumentative and defiant behaviors (opposition to rules or requests from adults and figures of authority, deliberate annoyance of others, blaming others for mistakes and misbehavior), and vindictiveness. These disruptive behaviors are notably directed towards adults and figures of authority, such as teachers, educators, and especially parents. To confirm the diagnosis of the disorder, the child must exhibit four symptoms out of the possible eight symptoms during the preceding six months before assessment. (Groulx-Swennen, 2017, p. 07).

Procedurally, it refers to the defiant and challenging behavior exhibited by a child characterized by an irritable mood, argumentative behavior, and annoyance towards others, coupled with a tendency to blame them for mistakes or misbehavior and a desire for revenge. These behaviors persist for at least 6 months and adversely affect the child's social and academic performance, consequently reducing their academic achievement. Moreover, the level of oppositional defiance is measured based on the score obtained by the child according to assessments provided by their teacher in the Child Oppositional Defiant Disorder Rating Scale, utilized in the study.

5.3. Academic Achievement: There is no universally agreed-upon definition for academic achievement, despite it being a key concept in the educational process and its core objective. Some associate it with the skills and knowledge acquired by the learner through the learning process, while others view it as the learner's success and academic excellence. Meanwhile, some focus on the concept of achievement by referring to its measurement methodology. (Shaib & Sha'shou, 2022, p. 1027).

Operationally, academic achievement is measured based on the child's semester grades for the academic year 2022-2023, indicating their academic performance level as follows:

- Excellent academic achievement if the semester grade is 8.00 or above.
- High academic achievement if the semester grade falls between 6.00 and 7.99.
- Average academic achievement if the semester grade ranges from 5.00 to 5.99.
- Low academic achievement if the semester grade is below 5.00.

It is measured by the score obtained by the child in the Performance Disruption subscale of the Child Oppositional Defiant Disorder questionnaire, utilized by the researchers (Logan & Mahrazi) in this study.

5.4. Children: Operationally, in this study, the child is defined as a male, aged 9 years, enrolled in the third grade of primary school at Ben Yahia Abbas Elementary School in the Wilaya of Oran, Algeria. He suffers from low academic achievement and has been diagnosed with Oppositional Defiant Disorder according to the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5).

6- Methodological Procedures of the Study:

1. Study Approach: Due to the nature of the study topic, a combination of both quasi-experimental and clinical approaches was employed, focusing on an in-depth case study methodology.

2. Study Boundaries: The study was conducted on a single case of a 9-year-old male child, purposively selected after conducting a survey at Ben Yahia Abbas Elementary School in the Wilaya of Oran, where he is enrolled in the third grade for the academic year 2022-2023.

3. Study Instruments: The following tools were utilized:

1. Clinical Observation: Behavior of the case was observed verbally and non-verbally in both the school environment and outside during interviews.

2. Clinical Interview: The researchers utilized semi-structured interviews as the most suitable method for the study's subject matter, whether with the child or with the teacher.

Oppositional Defiant Disorder Questionnaire for School-Aged Children: The questionnaire used in this study was developed by Logan Al-Aliyah and Mahrazi Malika in their 2020 study on Cognitive Behavioral Therapy for Oppositional and Defiant Behavior Disorders in School-Aged Children. Its items were formulated after reviewing theoretical aspects and previous studies on the topic, as well as referring to the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), and some scales addressing oppositional behavior. The questionnaire consists of 35 items distributed across 4 dimensions: academic and social performance disruption, argumentative behavior, irritable mood, and vindictive tendency. Respondents answer each item on a 3-point scale: 'Never' corresponds to a score of 1, 'Sometimes' corresponds to a score of 2, and 'Often' corresponds to a score of 3. The maximum hypothetical score is 105, the minimum score is 35, and the hypothetical mean score is 70. The questionnaire's reliability was assessed using inter-rater reliability (judges) by presenting it to 10 expert judges from 4 national universities (see Appendix 1). The table below illustrates the dimensions of the questionnaire and their scores.

Table (1): Shows the dimensions of the stubbornness questionnaire of the school child and its grades

Dimension	Number paragraphs	of	Top grade	Intermediate Grade	Lowest score
Dimension 1: Imbalance in academic and social performance	04		12	08	04
Dimension2: Arguing behavior	20		60	40	20
Dimension 3: Nervous mood	09		27	18	09
Dimension 4: Vengeance	02		06	04	02
Total	35		105	70	35

Psychometric Properties of the Questionnaire:

A. Validity: The validity of the scale was confirmed using the discriminant validity method, yielding the following results:

B. Table (2): Shows the results of the terminal comparison of the stubbornness questionnaire of the school child

Significance level	Value of t	Degree of freedom	Standard deviation	Arithmetic mean	Variables	
0,01	8,48	14	3,25	90,00	Top Group	Defiant stubbornness
			9,67	59,37	Lower Group	

The questionnaire is valid and demonstrates discriminant ability between groups, as evidenced by Table (02), which shows statistically significant differences in the level of opposition between the high and low groups.

B. Reliability: The reliability of the Child Oppositional Defiant Disorder questionnaire was measured using: split-half reliability and Cronbach's alpha coefficient. The reliability coefficients for the dimensions of the questionnaire ranged from 0.91 to 0.93, indicating very high reliability of the questionnaire as a whole. Thus, the results confirm the questionnaire's possession of good psychometric properties.

Cognitive Behavioral Counseling Program:

Firstly, Description of the Counseling Program and Utilized Techniques:

Drawing upon the cognitive-behavioral approach to Oppositional Defiant Disorder (ODD), the researchers devised a counseling program aimed at enhancing academic achievement in children with ODD through 12 counseling sessions (including assessment sessions). This program encompassed the following cognitive-behavioral techniques: relaxation, psychoeducation, cognitive restructuring, modeling, reinforcement, homework assignments, emotional discharge, and time management.

Secondly, Progression of the Counseling Program:

The implementation of the program lasted approximately 5 months, from January 25, 2023, to June 17, 2023. The program comprised a total of 12 sessions, including program assessment and follow-up evaluation sessions. Each session lasted between 30 to 40 minutes.

Case Presentation:

Firstly, Introduction of the Case:

"Salem," a 9-year-old child, slender in build with average height, has a tanned complexion. His attire appears clean but somewhat disheveled. Salem's thoughts are organized, and his speech is articulate. He is enrolled in the third grade of primary school. He has two sisters aged 5 and 7 years old. The family's socioeconomic status is extremely low, as the father has remarried and abandoned them, and the mother (aged 39) works as a cleaner in a household. They reside in a cramped house in a chaotic neighborhood. Salem spends most of his time playing outside in the absence of his mother, who works throughout the day. When she returns home, she does not allocate time for them but rather gets busy with household chores.

Salem's relationships with adults are often fluctuating, ranging from good to bad. He is a defiant child who tends to do the opposite of what is asked of him and challenges the authority and commands of others. For instance, if his mother asks him to buy something or do anything, he only complies after being hit or whenever he wants. He argues loudly and sometimes screams at his mother during conversations with them. He is quick to anger, highly active, and frequently engages in quarrels with his peers. His behavior is disruptive and vindictive, and he does not forgive unless he seeks revenge from those who upset him. He feels jealous of his sisters and frequently disturbs them.

In school, Salem continues to run around the courtyard and play with his classmates, appearing happy in their company. However, he defies the teacher and challenges her commands. He often objects to her words and mumbles in front of her. Sometimes, when he gets upset, he raises his voice with muttering and crying. He refuses to acknowledge his mistakes and does not adhere to the classroom and school rules. He frequently fidgets in his chair, looks around at his classmates, and talks to them. Consequently, his relationship with the

teacher is very poor, and he is often subjected to punishment. Considering his very poor academic performance, he is at risk of repeating the year.

As for Salem, he does not see any problem in his behavior except for his very poor academic performance. Therefore, he wishes to improve his academic achievement and become one of the successful and beloved students by everyone. He also hopes to improve his relationship with the teacher because he loves her.

Secondly, Progression of Counseling Program Sessions:

The counseling sessions were conducted according to the following plan:

Table (3): The outline and contents of the extension program show:

Techniques and techniques used	Session Objectives	Session Duration	Session Number
- Psychological education - respiratory relaxation - reinforcement	- Establishing a mentoring relationship and raising motivation - Definition of the mentoring program and its objectives	35 min	1.
- Respiratory relaxation - modeling - positive reinforcement - Agreeing on a list of negative behaviors within the department to change them with positive ones - Homework	- Strengthening the mentoring relationship - Accept the instructions and instructions of adults and adhere to school and family rules. - Stimulating motivation towards learning and academic success. - Managing tantrums and nervous mood	40 min	2.
- Respiratory relaxation - time management - psychological education - emotional venting - Reinforcement - homework	- Raising academic achievement -Control tantrums and lower nervous mood	40min	3.
Respiratory Relaxation - Reinforcement - Cognitive reconstruction -Homework Psychological education	- Reduce stubborn and defiant behavior and refute irrational ideas related to it. -Identify the relationship (idea-behavior-emotion) - Raising academic achievement	35min	4.
- Respiratory and muscular relaxation (to get rid of exam anxiety) - Psychological education - Homework - Strengthening	- Raising academic achievement and acquiring correct positive behaviors Reduce arguing and challenging behavior and control negative emotions.	45 min	5.
- Respiratory relaxation - reinforcement - Psychological education - modeling- - Homework	- Get rid of vindictive behavior, acquire tolerant behavior, and accept the apology of others. - Improve the child's relationships with adults and peers - Acquire cooperative behavior and integration with others	40 min	6.
-Relax - Cognitive reconstruction -Strengthening -Homework	-Raising academic achievement - Positive reinforcement and raising self-confidence -Reduce arguing and nervous behavior - Admitting mistakes and accepting criticism	40 min	7.
-Relaxation - Psychological education -Cognitive reconstruction -Strengthening -Homework	- Enhance the positive skills and behaviors acquired in the school and home environments -Raising academic achievement -Control negative emotions and thoughts	40 min	8.

- Relaxation - Homework -Reinforcement of positive learned behaviors	- Raising academic achievement and enhancing the acquired study skills	30 min	9.
Relaxation (respiratory, muscular and mental) Cognitive reconstruction Reinforcement of positive learned behaviors Homework	- Raising social and academic performance - Reduce stubborn and arguing behaviors while enhancing self-confidence and controlling anger and nervous mood - Preparation for the end of treatment	40 min	10.
Respiratory Relaxation - Reinforcement Dimensional measurement of the questionnaire of the stubbornness disorder of the school child	- Enhance the positive skills and behaviors acquired in the school and home environments - Evaluation of the effectiveness of the mentorship program	35 min	11.
End of counseling program and assessment of the development of the case Tracking measurement of the stubbornness questionnaire of the school child	- Re-evaluate the effectiveness of the mentorship program (follow-up after a month)	30 min	12.

Thirdly, Presentation of Case Results:

The case results will be presented first through the techniques used in the program, followed by the results of the three measurements (pre-intervention, post-intervention, and follow-up) of the questionnaire used in the study, and finally, based on the semester average for the case for the academic year 2022-2023.

1) Results of Counseling Program Techniques:

The counseling techniques utilized in the counseling program had a positive impact on enhancing the academic achievement of the case. Below are the results of each technique individually:

- **Relaxation:** This technique was utilized in every session of the counseling program, with a focus on deep breathing relaxation, as it is often the most responsive technique for children. The case was trained to perform breathing exercises daily, especially during moments of emotional distress, to gain control over negative emotions, reduce irritability, and lower the aggressive mood typical of children with Oppositional Defiant Disorder (ODD). This helped the case to relax and remain calm, leading to an improvement in mood, reduction in tantrums and fights, and a decrease in argumentative and disruptive behavior towards the teacher and peers. This positive change was reflected in the case's academic performance, as their academic achievement improved. Moreover, their relationship with classmates and the teacher improved significantly. The teacher even changed their seating position from the back of the classroom to the front, indicating a change in perception and behavior towards the case, and began encouraging them to continue striving for better results.

- **Psychological Education:** This technique aimed to enhance academic achievement, improve overall academic and social performance by teaching the case proper scientific methods for memorization and review. Additionally, it adapted the study time according to the brain activity curve to enhance efficiency and achieve better results. The case was informed about the importance of adhering to rules, instructions, and exhibiting good behavior. They were also educated about the direct negative consequences of defiance, arguing, irritability, and seeking revenge on both their academic achievement and social performance.

- **Reinforcement:** This cognitive-behavioral technique was crucial in stimulating the case's motivation towards studying and maintaining desired behavior. An agreement was reached with the child, their mother, and teacher regarding a variety of moral reinforcements such as praise, encouragement, gratitude, smiles, as well as symbolic reinforcements like sweets, drawing materials, and playing with a set of toys provided by the researchers. Additionally, recreational outings to children's theater and amusement parks were used as rewards for positive behavior. Negative reinforcement, ignoring unwanted behaviors, and deprivation of rewards were also employed to extinguish undesirable behaviors. Both the mother and the teacher were instructed to adhere to these reinforcements outside the sessions. As a result, the case positively responded to

the program, their mood improved, they complied with all assignments, and their academic performance gradually improved due to the efforts invested in studying and the enhancement of their social performance, coupled with the reduction in defiant and argumentative behaviors.

- **Homework:** In each session, previous homework assignments were reviewed, and new homework tasks were assigned to align with the case's progress and the goals of the session and program as a whole. The case was tasked with several assignments, such as practicing breathing relaxation at home daily, practicing study review methods at home, adhering to the time schedule set with the researchers, following adult instructions, and completing a self-assessment grid. Alongside the mother, stars were placed on the grid for every improved behavior, and after accumulating five stars, the case received a symbolic reward. Additionally, a visit to an amusement park was promised after an increase in their semester average. The case adhered to these assignments due to their satisfaction with the gradual improvement observed in their academic and social life, including reduced conflicts, improved scores in assignments and exams, increased self-confidence, decreased argumentation with adults, improved relationships with their teacher, peers, and younger brother, increased happiness, reduced anxiety, changed attitude towards studying, and increased motivation for academic success. Moreover, they were pleased with all the reinforcements used.

- **Cognitive Reformulation:** The case was assisted in understanding the relationship between thoughts, behaviors, and emotions, exploring misconceptions and distortions about academic achievement and underachievement, arguing and being stubborn with adults, especially the teacher, acknowledging mistakes and asking for forgiveness, vengeful behavior, mood swings, school rules, and adult instructions. Then, these thoughts and beliefs were discussed in terms of their accuracy and inaccuracy, as well as their positive and negative aspects, to enhance positivity and replace negativity with more effective and positive alternatives. As a result, the child realized that behaviors of oppositional defiance, arguing, and mood swings had a negative impact on their academic achievement. Consequently, they gradually began to abandon these behaviors, and as the sessions progressed, their academic performance started to improve gradually.

- **Emotional Outlet:** The case was allowed to release negative energy related to their emotions and negative feelings, which often caused their angry mood and inappropriate behavior towards others.

- **Time Management:** Through this technique, the child was trained to effectively manage their time in a way that improves their academic performance, especially after learning the best times and methods for studying and reviewing, thanks to the psychological education technique. This enabled the child to change their study habits and rearrange their time accordingly.

- **Modeling:** This technique worked on increasing the motivation of the child to learn and invest more time and effort in studying, as well as abandoning negative behaviors indicative of oppositional defiant disorder. This was achieved by presenting models of positive and successful individuals, whether academically, socially, or religiously, using examples and stories about failures to deter him from undesirable behaviors.

2) Presentation of the case results based on the three measurements (pre-intervention, post-intervention, and follow-up) of the Oppositional Defiant Disorder questionnaire for the enrolled schoolchild (Oppositional Defiance):

To assess the impact of the program, two measurements were taken before and after the intervention. To confirm the results of the post-intervention measurement, a follow-up measurement was conducted three months after the completion of the counseling program, during which the case transitioned to the school. The teacher and the mother were interviewed, and the case's behavioral progress after the program was discussed, followed by re-administering the questionnaire and observing the case in the schoolyard. The results were as follows:

Table (04) represents the results of the case "Salim" in the three measurements (pre, post, and tracking) of the questionnaire of the stubbornness disorder of the school child (defiant stubbornness):

Measurement Tracking	Telemetry	Pre-measurement	Variables
05 (Low)	05 (Low)	12 (High)	Impaired academic and social performance
33 (Average)	29 (Low)	57 (High)	Arguing behavior
15 (Low)	15 (Low)	24 (High)	Nervous mood
03 (Low)	03(Low)	06 (High)	Vengeance

56 (Low)	52(Low)	99 (High)	Overall result of dimensions
low	low	High	Level of disorder

The table (04) reveals differences among the results of the three measurements. The case scored high in the pre-intervention assessment, indicating a high level of disorder characterized by argumentative behavior, vindictiveness, and negative mood, which adversely affected the case's academic and social performance, resulting in decreased academic achievement. However, both the post-intervention and follow-up assessments showed a decrease in the levels of disturbance across all dimensions, positively impacting the case's performance with an increase in academic achievement. Furthermore, the follow-up assessment indicates the case's sustained reduction in disturbance levels even one month after the conclusion of the counseling program.

3) Presenting the results according to the results of the semester average of the case for the academic year 2022-2023.

Table (05) represents the results of the case for the semester averages for the academic year 2022-2023

Third Semester	Second Semester	First Semester	
7.42	6.38	4.57	Semester average

Through table (05), we observe that the case's academic performance was weak in the first semester (4.57). However, there was a significant improvement in the second semester following the initiation of counseling sessions. Specifically, the case benefited from relaxation techniques to alleviate exam anxiety, psychological education to learn effective study methods, cognitive restructuring to change misconceptions, and increased motivation towards studying. As a result, the case's average grade increased to 6.38, indicating above-average performance, which pleased the case and motivated them to exert more effort and adhere more to the program. Additionally, the decrease in the number of subjects in the curriculum for the third term contributed to the continued improvement, with the case's average rising to 7.42 by the end of the academic year 2022-2023. These results demonstrate a significant improvement compared to the case's previous academic performance, highlighting the positive impact of the counseling program.

Discussion of the case results in light of the hypothesis:

The case, Salim, a 9-year-old child, was revealed through diagnostic interviews and direct clinical observations in his school environment (classroom, playground) to suffer from Oppositional Defiant Disorder (ODD), which negatively impacted his academic achievement, which was low to the extent of being at risk of repeating the year. The case exhibited erroneous study habits, misconceptions about his ability to keep pace with diligent peers.

However, after implementing the counseling sessions of the cognitive-behavioral program, which aimed to improve his academic achievement by reducing the level of his oppositional defiant behavior through diminishing argumentative and retaliatory behaviors, enhancing his mood, and teaching him proper study methods, his academic performance increased in the second semester. This improvement continued into the third semester, coinciding with the conclusion of the counseling program, gradually transitioning from a poor to a good level. This was also evident in clinical observations, teacher and parent reports, as well as the case's self-assessment. The results of the three measurements of the Oppositional Defiant Disorder questionnaire used in the study were consistent with the theoretical framework and previous research findings.

Accordingly, it can be concluded that the application of the cognitive-behavioral counseling program had a positive impact on raising the academic achievement level of the case.

Conclusion

In conclusion, oppositional defiant disorder negatively impacts a child's academic achievement, as well as their adaptation and overall performance. Thus, this study aimed to develop a counseling program incorporating cognitive-behavioral techniques to enhance academic achievement by reducing the negative symptoms of the disorder and correcting misconceptions about academic performance and effective study methods. To assess the program's impact, it was applied to a single case, a 9-year-old student in the third grade with low academic performance. After implementing the program, the student's academic achievement improved significantly, transitioning from a semester average of 4.57 at the beginning of the academic year

to 7.42 by the end of the 2022-2023 school year. Additionally, the case's overall academic performance improved, demonstrating greater adherence to classroom rules, reduced conflict with the teacher, and increased positive interaction. The student became more engaged in class, his seat moved closer to the teacher's, and his positive changes were reinforced. Moreover, he exhibited calmer behavior with both adults and peers, learned new study methods, and managed his time more effectively. Therefore, the results indicate a positive impact of applying the cognitive-behavioral counseling program on enhancing academic achievement in the case.

Study Recommendations:

Based on the study results, we suggest the following:

1. Implementation of the Cognitive-Behavioral Counseling Program: Further application and effectiveness testing of the cognitive-behavioral counseling program on a larger sample within the educational environment.
2. Development of Counseling Programs for Academic Achievement Enhancement: Constructing and implementing counseling programs aimed at enhancing academic achievement.
3. Increase in Research on Oppositional Defiant Disorder (ODD): Conducting more research on ODD, including epidemiological studies to measure its prevalence and the development of a precise measurement tool adapted to the Algerian educational environment.
4. Utilization of Psychological Education Techniques: Utilizing psychological education techniques to raise awareness among educators about disorders that affect academic achievement and how to assist children in overcoming them.
5. Education of Children and Educators on Effective Study Methods: Providing education to both children and educators, including teachers and parents, on effective study methods.

REFERENCES:

- Al-Nuhaie, Saham, Fatima Ismail, Saadia Rajab, and Nahid Arfa. (n.d.). Lectures on Scientific Research Methodologies. Ain Shams University.
- Shaib, Fatiha, and Abdelkader Shaishou. (December 2, 2022). Academic Achievement Level Among Bachelor's Degree Students at Ibn Khaldun University of Tiarat's Faculty of Social Sciences Concurrent with the COVID-19 Pandemic. *Al-Mouitar Journal*, 13, pp. 1023-1040.
- Dawai, Fatiha, and Lamnawar Ma'rouf. (2019). Proposal for a Counseling Program (Cognitive-Behavioral) to Reduce Psychological Stress Among Academically Outstanding Students. *Ansana Journal of Research and Studies*, 02, pp. 58-72.
- APA. (2013). *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, DSM-5*. Washington, DC, London, England: American Psychiatric Association. New School Library.
- www.mothakirat-takharoj.com
- Ellis, A., & Bernard, E. (1985). *Clinical Application of Rational-Emotive Therapy* (1st ed.). New York and London: Plenum Press.
- Groulx-Swennen, C. (2017). *Family Variables Associated with Oppositional Defiant Disorder in Children*. Master's Thesis, Department of Psychoeducation, University of Sherbrooke, Canada.