



**GLOBAL JOURNAL OF ADVANCED RESEARCH**  
(Scholarly Peer Review Publishing System)

# STUDENTS' BEHAVIORAL PROBLEMS FROM THE SCHOOL COUNSELORS' PERSPECTIVES: A SAUDI ARABIAN EXPERIENCE

**Ahmed Al Hariri,**

Department of Psychology,  
Taif University, Taif,  
Saudi Arabia  
[a.hariri@tu.edu.sa](mailto:a.hariri@tu.edu.sa)

**Eman Faisal**

(Correspondence Author),  
Department of Curriculum &  
Instruction, King Saud University,  
Riyadh,  
Saudi Arabia  
[esahan@ksu.edu.sa](mailto:esahan@ksu.edu.sa)

**Rasha Al Harthi,**

Department of Psychology,  
Taif University, Taif,  
Saudi Arabia

**Fozeah Al Harthi,**

Department of Psychology,  
Taif University, Taif,  
Saudi Arabia

**Amal Hamed Al Harthi,**

Department of Psychology,  
Taif University, Taif,  
Saudi Arabia

## ABSTRACT

This study investigated students' behavioral problems from the perspective of their school counselors in Saudi Arabia. We used a mixed methodology with two sequential stages of explanatory design. A questionnaire was administered on a simple random survey sample of 211 participants, and the interviews were conducted on a purposeful sample of thirteen participants. All the participants were Saudi male school counselors in Taif. The quantitative data were analyzed using Excel, SPSS, and JASP, whereas the qualitative data were analyzed using ATLAS.ti. Results showed that bullying and weapon-carrying are the most common behavioral problems among students. All the behavioral problems were significantly correlated with each other, but the largest association was between having guns, and violence and stealing. There were significant differences reported in the students' behavioral problems based on the school counselors' demographic information. The most considerable difference was between counselors with two or fewer years of experience and their peers who have been in the field for ten years or more. There is a need for further research to investigate students' behavioral problems and to conduct a comparison based on gender. More research is also needed to study the behavioral problems in other Saudi schools outside of Taif.

**Keywords:** behavioral problems; school counselors; Saudi school students

## 1. INTRODUCTION

Behavioral problems among children and adolescents are of global concern<sup>1-3</sup> and they can occur at any school level, i.e. elementary<sup>4,5</sup>, intermediate<sup>6</sup>, and secondary school<sup>7-9</sup>. Although the worldwide prevalence of behavioral problems among children and adolescents has been reported as being between 10% and 20%<sup>10</sup>, this figure is more prominent in Saudi Arabia. Recently, the Saudi national report on mental health revealed that 40% (ratio = 2:5) of children and adolescents suffer from behavioral problems and

disorders<sup>11</sup>. Such problems include smoking<sup>12, 13</sup>, bullying<sup>14</sup>, possession of pornography<sup>15</sup>, drug use<sup>16, 17</sup>, and being violent and stealing<sup>18</sup>. This may eventually lead to problems with learning, emotions, and social interaction<sup>19, 20</sup>, which may develop later in life into mental illness.

School counselors can explore such problems, mostly because they can work at any school level, and some have considerable experience<sup>21</sup>. Some of them work in small schools, whereas others work in schools with over 1000 students<sup>22</sup>. They often seek and receive information from multiple stakeholders about students' behavior<sup>23</sup>, and hence exhibit more compassionate helping behaviours; can reduce stress; and are associated with increased student attention<sup>24</sup>. Therefore, counseling services can provide clinically meaningful care to learners and modify students' negative behaviours<sup>25, 26</sup>. However, none of the studies in this paragraph targeted school counselors in Saudi Arabia.

There is a paucity of research about school counselors in Saudi Arabia and their role in exploring students' behavioral problems. The current research team only found two studies<sup>27, 28</sup> that both investigated the school counselors' role generally at only one school level: intermediate school. Therefore, the current study aimed to extend the literature by exploring the prevalence of students' behavioral problems (bullying, smoking, possessing pornography, weapon-carrying 'white weapons', having guns, being violent and stealing, and drug use) from the perspective of school counselors. It also aimed to investigate the correlation between these behavioral problems and the school counselors' demographic information (experience, school level, and the total number of students in the school where the counselors work). Furthermore, the study aimed to explore the reported differences in students' behavioral problems based on the school counselors' demographic information – and for all school levels.

## 2. MATERIALS AND METHODS

### 2.1. Study Design And Procedure

This mixed-method (quantitative/qualitative) research adopted two sequential stages of explanatory design, as shown in Figure 1.

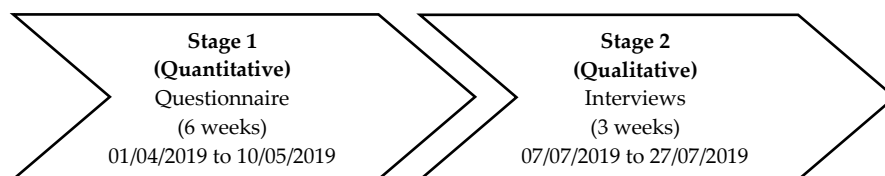


Figure 1. The research design

In stage 1, quantitative data were collected from a randomly selected sample of school counselors. This stage explores the prevalence of the students' behavioral problems, investigates the relationships between them, and assesses the differences between behavioral issues based on the counselor's demographic information. After analyzing the quantitative data, which took two months, a convenience sample of school counselors was interviewed to explain the findings of stage 1. This design's benefit is that using a combination of quantitative and qualitative data helps answer complex research questions more adequately than using a monomethod approach<sup>29</sup>. This gives a more holistic picture of the elements under investigation, such as psychological problems<sup>30</sup>. Furthermore, the sequential design is appropriate as it increases the validity of the quantitative data<sup>31</sup>.

### 2.2. Population And Samples

The population chosen for the study was male student counselors in (elementary, intermediate, and secondary) schools in Taif, Saudi Arabia. Males were selected because they demonstrate more behavioral problems (19%) compared with females (4%)<sup>16</sup>. In addition, counseling services can provide clinically meaningful care and can modify the negative behaviors, especially among male students<sup>25, 26</sup>.

The quantitative stage sample was determined as 201, based on a 5% margin of error, 95% confidence interval, a population size of 419 student counselors, and a 50% response distribution. We distributed the questionnaire to around 250 counselors, of which 211 gave consent and completed it, and facilitated the recording of their demographic information, giving a response rate of 84.39%.

For the sample of the qualitative stage, 20 school counselors working in Taif schools (at elementary, intermediate, and secondary schools; with experience ranging between less than two years to over ten years; and in schools with between 200 and 1200 students) were invited to participate. Thirteen of them agreed to participate in the qualitative stage, noting that having 12 interviewees is an adequate number of qualitative data saturation<sup>32</sup>, i.e. reaching a point in the data analysis where no new categories emerge<sup>33</sup>.

The participants of the qualitative stage are not drawn from the quantitative stage. The current participants were selected as the Taif Education Administration directed the research team.

## 2.3. Research Instruments

### 2.3.1. Structural questionnaire

After careful and prolonged deliberation, the authors developed an initial draft of the structural questionnaire to measure the students' behavioral problems using the Classifications of Mental and Behavioural Disorders (ICD-10) as according to the World Health Organization<sup>34</sup>, and Diagnostic and Statistical Manual of Mental Disorders (DSM-IV and DSM-5) as according to the American Psychiatric Association<sup>35, 36</sup>. A committee of seven independent experts consisting of four skilled and experienced psychologists and three school counselors was established to review the questionnaire for content and face validation. As the expert committee advised, three inappropriate items were deleted. The final, approved version of the questionnaire consisted of two sections. The first section included three demographic questions: the school where the counselor works (elementary, intermediate, or secondary); the total number of students in the school (200 or less, 201 – 400, 401 – 600, 601 – 800, 801 – 1000, or 1001 – 1200); and his experience (two years or less; two to less than four years; four to less than six years; six to less than eight years; eight to less than ten years; and ten years or more). The second section included seven five-point Likert items, i.e. the response scale ranged between 1 = strongly disagree and 5 = strongly agree. The items targeted seven behavioral problems: bullying, smoking, possessing pornography, weapon-carrying (white weapons), having guns, violence and stealing, and drug dealing. The online Arabic questionnaire – which was developed and administered using Qualtrics – took about five minutes to complete.

### 2.3.2. Semi-structured interviews

Face-to-face, in-depth, semi-structured interviews with A.H. were conducted and digitally recorded with the school counselors' permission. The interview's questions guide were developed based on the quantitative survey results from stage 1. Participants were interviewed in Arabic to reflect upon the findings from the quantitative data using open-ended questions such as "How often do you find the students smoke?", "How long have you been working as a school counselor in this school?", "What are the behavioral problems that you find in the students?", and "Is it likely for students to have more than one behavioral problem?". Follow-up questions arose from the participants' answers, and probing questions elicited further information if required. Each interview was recorded using Express Dictate software (version 5.82) and lasted between 20 and 30 minutes.

## 2.4. Ethical Statement

The study was conducted according to the guidelines of the Declaration of Helsinki and approved by the Taif Education Administration (letter number 25894, dated 1st March 2019). Consent was obtained from the participants, who were assured that their participation would be voluntary and anonymous. Quantitative data were collected through online surveys, whereas qualitative data were recorded, and the audio transcribed into text, and all data were stored in the principal investigator's personal computer that has no public access and is password secured.

## 2.5. Data Analysis

The raw quantitative data were stored in Microsoft Excel, version 2002. Data analysis was conducted using two programs. First, IBM SPSS Statistics for Windows, version 27 (IBM Corp., Armonk, NY, USA) was used to carry out the questionnaire's validity using Spearman's Correlation Coefficient, and reliability using Cronbach's Alpha ( $\alpha$ ). SPSS was also used to investigate descriptive statistics: frequency, percentage, minimum, maximum, mean, standard deviation, and the Kolmogorov-Smirnov Test (K-S) for normality of data distribution. Pearson's Correlation Coefficient ( $r$ ) was used to investigate the relationship between two variables that are measured on the same interval scale, and Spearman's Rank-Order Correlation ( $\rho$ ) was used to assess the relationship between two variables when one of them is measured on an ordinal scale. One-way analysis of variance (ANOVA) was used to investigate if there are differences, and the post-hoc test – Tukey HSD – was used to identify where these differences are. Second, JASP, version 0.11.1.0 was used to conduct McDonald's Omega Coefficients ( $\omega$ ) reliability. Graphs were obtained using Microsoft Excel, version 2002.

Regarding the qualitative data, the interviews were transcribed verbatim, anonymized, and entered into the qualitative data software ATLAS.ti (version 9.0.18), because it is compatible with Arabic. The researchers met regularly to discuss the developing coding schema and resolve discrepancies to reduce the possibility of researcher bias. Data were then coded by E.F. using a deductive approach and analyzed using thematic analysis<sup>37, 38</sup>. The interviews were read and re-read, and the codes were read against each of the behavioral problem themes to ensure a coherent pattern, and the same process was followed for the whole data set<sup>37, 38</sup>.

## 3. RESULTS

### 3.1. Demographic Information

Table 1 shows the demographic data of the study participants. In the qualitative stage, there were 13 school counselors – most of them working in an intermediate school (46.15%), in schools with between 401 to 600 students (30.76%), and with experience of six to less than eight years (38.46%). In the quantitative stage, there were 211 school counselors – most of them working in an intermediate school (39.81%), in schools with between 601 and 800 students (22.29%), and with experience of eight to less than ten years (29.38%).

**Table 1.** Demographic information of the participants

<b>Demographic details of the participants of the qualitative stage (n = 13)</b>			
<b>School counsellors based on ...</b>	<b>Group</b>	<b>Frequency</b>	<b>Percentage</b>
The school they are working in	Elementary	3	23.07
	Intermediate	6	46.15
	Secondary	4	30.76
The total number of students in school	200 or less	1	7.69
	201 – 400	1	7.69
	401 – 600	4	30.76
	601 – 800	3	23.07
	801 – 1000	2	15.38
	1001 – 1200	2	15.38
	Their experience	Two years or less	1
Two to less than four years		1	7.69
Four to less than six years		3	23.07
Six to less than eight years		5	38.46
Eight to less than ten years		1	7.69
Ten years or more		2	23.07
<b>Demographic details of the participants of the quantitative stage (n = 211)</b>			
The school they are working in	Elementary	56	26.54
	Intermediate	84	39.81
	Secondary	71	33.65
The total number of students in school	200 or less	19	9.01
	201 – 400	37	17.5
	401 – 600	36	17.02
	601 – 800	47	22.29
	801 – 1000	41	19.46
	1001 – 1200	31	14.72
	Their experience	Two years or less	12
Two to less than four years		23	10.90
Four to less than six years		40	18.96
Six to less than eight years		37	17.54
Eight to less than ten years		62	29.38
Ten years or more		37	17.53

n = sample size

## 3.2. Descriptive Statistics

### 3.2.1. Questionnaire's validity and reliability

The seven-item questionnaire's validity was checked using Spearman's Correlation Coefficient between each item and the scale in total, and then the correlation coefficient was checked after the deletion of the item. All the correlations are large, as shown in Table 2, reflecting the questionnaire's validity.

**Table 2.** Items' correlations in the behavioral problems' questionnaire

<b>Type of behavioral problems' items</b>		<b>Correlation with the scale*</b>	<b>Correlation with the scale if item deleted*</b>
1	Bullying	.825	.977
2	Smoking	.856	.975
3	Possessing pornography	.951	.969
4	Weapon-carrying	.959	.968

5	Having guns	.919	.971
6	Being violent and stealing	.919	.971
7	Drug use	.914	.969

\*  $p < .05$

The questionnaire’s reliability was checked using Cronbach’s Alpha and McDonald’s Omega Coefficient, which were both identical, i.e.  $\alpha$  and  $\omega = .966$ .

### 3.2.2. Interview’s credibility and consistency

To ensure consistency in data, the interviewer, A.H., took notes directly after each interview and discussed these notes with the research team extensively. The discussions included the interviewees’ body language, reactions, and the main points they stressed. In addition, the research team listened to the recorded interviews and transcribed them. Similar thoughts and sentences were categorized together, e.g., cases of bullying, students with guns, and drug use among students.

Regarding credibility, two validity types were used. Descriptive validity was used as the research team listened two times to the audio recorded interviews to follow the wording and confirm the transcription accuracy. Evaluative validity was also used as all the research team members, except one, are experts in the field of educational psychology, and all of them have experience with working with students and learners of all ages.

### 3.2.3. Prevalence of behavioral problems from the school counselors’ perspectives

The second part of the questionnaire focused on behavioral problems. The school counselors were asked about the prevalence of the seven problems: bullying, smoking, possessing pornography, weapon-carrying, having guns, being violent and stealing, and drug use. As can be seen in Figure 2, behavioral problems that are either very likely or have an above-average likelihood cannot be overlooked.

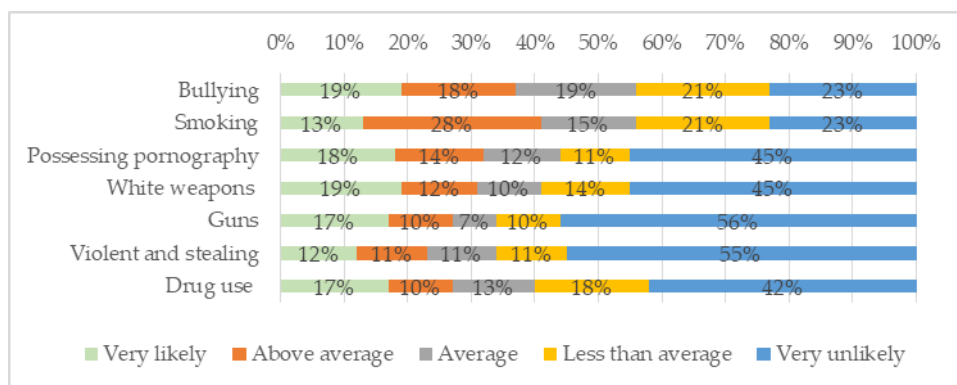


Figure 2. Responses of counselors regarding the students’ behavioral

Regarding the very likely responses, 19% of the counselors found that bullying and weapon-carrying were possible behavioral issues. Additionally, 18% of the respondents reported that it was very likely that students would carry pornography. Similarly, 17% reported that it was very likely that students would have guns and use drugs. Although 13% of the counselors found that smoking is a likely issue, 28% agreed that it is an above-average problem. Being violent and stealing was the least likely issue, as only 12% agreed that it is very likely.

The interviewed participants discussed the seven behavioral problems, as can be seen in the following examples:

Table 3. Examples of behavioral problems mentioned during the interviews

Behavioral problem	Example
Bullying	“Bullying is common among teenagers. Most of the cases I deal with talked about the times when someone makes fun of them.”
Smoking	“After school, I see a number of students gather in the parking spaces to smoke.”
Possessing pornography	“Some boys bring with them photos of naked women.”
Weapon-carrying	“You will see knives with some students.”
Having guns	“It happened that we found a gun with a student.”
Being violent and stealing	“I saw students in fights, and they hit each other.”

Drug use *“During exams, we see students who use drugs like Fenethylline and Amphetamine.”*

### 3.3. Correlations Between Behavioral Problems From The School Counselors’ Perspectives

Table 4 shows the mean of the various behavioral problems, using a range between one and five. The highest mean was for bullying (M = 2.89; SD = 1.44) and the lowest mean was for being violent and stealing (M = 2.12; SD = 1.476). The bivariate correlations between the behavioral problems were significantly positive at  $p < .001$  and all were large as all of them ranged between  $r = .64$  (between bullying and being violent and stealing) and  $r = .94$  (between having guns, and being violent and stealing).

**Table 4.** Descriptive statistics and items’ correlations in the behavioral problems’ questionnaire

	Min	Max	M	SD	r						
					1	2	3	4	5	6	
1. Bullying	1	5	2.89	1.440	-						
2. Smoking	1	5	2.87	1.387	0.74	-					
3. Possessing pornography	1	5	2.49	1.594	0.74	0.85	-				
4. Weapon-carrying	1	5	2.45	1.601	0.77	0.8	0.93	-			
5. Having guns	1	5	2.19	1.587	0.66	0.65	0.82	0.87	-		
6. Being violent and stealing	1	5	2.12	1.476	0.64	0.66	0.82	0.87	0.94	-	
7. Drug use	1	5	2.39	1.521	0.71	0.76	0.88	0.85	0.9	0.9	

Min = minimum; Max = maximum; M = mean; SD = standard deviation; All correlations at  $p < .001$

The correlations between each of the demographic information and the behavioral problems as total (not as one type of the behavioral problems) were all significantly positive: the total number of students in school ( $\rho = .481$ ;  $p < .001$ ), the counselors’ experience ( $\rho = .321$ ;  $p < .01$ ), and the level of school they are working in ( $\rho = .249$ ;  $p < .05$ ).

Qualitative data were in agreement with these statistical findings as a number of the interviewed counselors discussed many behavioral problems as a complicated and intertwined matter:

*There are over a thousand students in the school where I work. I believe that one behavioral problem leads to another. I saw students who were smokers. Then, they were found with photos of naked women. They became violent and easily got into trouble. (Counselor who has worked in an intermediate school with between 1001 and 1200 students, for eight years.)*

*The regular pattern with behavioral problems is to find a student who breaks the rules, smokes, bullies others, and gets involved in fights. (Counselor who has worked in a secondary school with between 801 and 1000 students, for over ten years.)*

### 3.4. Differences In Students’ Behavioral Problems Based On The School Counselors’ Experience, School Level, And The Total Number Of Students In The School Where They Work

There were significant differences in the students’ behavioral problems based on the student counselors’ demographic information, i.e. the level of school where the student counselor works, the total number of students in that school, and his experience. However, the eta-squared values ( $\eta^2$ ), range between .01 and .03, which in Cohen’s terms is considered a small to medium effect size<sup>39</sup> – see Table 5.

**Table 5.** Significant differences in the students’ behavioral problems based on the student counselors’ demographic information

Variable	Variance	Sum of squares	df	Mean square	F	p-value	$\eta^2$
The school where the student counselor works	Between groups	201.812	2	100.906	1.321	.01	.01
	Within groups	8669.031	208	107.025			
	Total	8600.401	210				
The total number of students in school	Between groups	302.610	5	60.522	0.657	.04	.01
	Within groups	8911.041	205	114.244			
	Total	10933.714	210				
Student counselor’s experience	Between groups	391.401	5	78.280	0.744	.04	.03
	Within groups	9024.710	205	115.701			

Total 9512.572 210

df = degree of freedom; F = one-way analysis of variance (ANOVA);  $\eta^2$  = effect size  
 The post-hoc test (Tukey HSD) showed where these differences were – as shown in Table 6.

**Table 6.** Multiple comparisons using the post-hoc test – Tukey HSD – based on the student counselors’ demographic information

Variable	Group	n	M	SD	Mean differences					
					1	2	3	4	5	
The school where the student counselor works	1 Elementary	56	2.87	0.843	-					
	2 Intermediate	84	3.44	0.657	.57	-				
	3 Secondary	71	3.76	0.765	.89*	.32	-			
The total number of students in school	1 200 or less	19	1.598	0.076	-					
	2 201 – 400	37	1.513	0.098	-.08	-				
	3 401 – 600	36	1.621	0.180	.023	.108	-			
	4 601 – 800	47	1.831	0.176	.233	.318	.21	-		
	5 801 – 1000	41	2.199	0.222	.601	.686	.578	.368	-	
	6 1001 – 1200	31	2.432	0.346	.834	.919*	.811	.601	.233	-
Student counselor’s experience	1 Two years or less	12	1.299	0.059	-					
	2 Two to less than four years	23	1.387	0.238	.088	-				
	3 Four to less than six years	40	1.399	0.096	.1	.012	-			
	4 Six to less than eight years	37	2.156	0.198	.857	.769	.757	-		
	5 Eight to less than ten years	62	2.583	0.187	1.284*	1.218	1.184	.427	-	
	6 Ten years or more	37	2.598	0.198	1.299*	1.211	1.199	.442	.015	-

n = sample size; M = mean; SD = standard deviation; \* p-value was significant at < .05

Tables 5 and 6 illustrate that there were statistically significant small differences at the  $p < .01$  and  $p < .4$  levels in the students’ behavioral problems, based on the school counselor’s school and the total number of the students in that school:  $F(2, 208) = 1.32$  and  $F(5, 205) = .657$ , respectively. The difference was between school counselors working in elementary schools ( $M = 2.87$ ,  $SD = .84$ ) and in secondary schools ( $M = 3.76$ ;  $SD = .76$ ), with a mean difference  $\Delta M = .89$ . Regarding the total number of students in school, the difference was between school counselors working in schools with 201 – 400 students ( $M = 1.51$ ;  $SD = .10$ ) and those who work in schools with between 1001 and 1200 students ( $M = 2.43$ ;  $SD = .35$ ), with a mean difference  $\Delta M = .92$ . Concerning school counselors’ experience, there was a statistically significant medium difference at  $p < .04$  level in the students’ behavioral problems:  $F(5, 205) = .744$ . Both counselors with experience of ten years or more ( $M = 2.59$ ;  $SD = .20$ ) and counselors with experience ranging between eight years and less than ten years ( $M = 2.58$ ;  $SD = .19$ ), showed a higher mean compared with counselors with less than two years ( $M = 1.29$ ;  $SD = .06$ ) of experience, with mean differences  $\Delta M = 1.29$  and  $1.28$  respectively.

The qualitative data were in line with these statistical findings. For example, counselors who work in secondary schools stressed more behavioral problems than their peers in elementary schools, as shown in the following extracts from the interviews:

*Although I always clarify the behavioral regulations to students – I mean the acceptable behavior in school and what they have to do and what they are not allowed to do, I see that many teenagers form gangs and be violent with others. Some students don’t respect the rules. (Counselor who has worked in a secondary school for six to less than eight years.)*

*I had a student doing drugs, and I sent him to a mental health hospital. Smoking was also a widespread problem. I hosted the anti-smoking clinic in the school for a week to explore the smoker students and treat them. (Counselor who has worked for more than ten years in a secondary school.)*

*Some students bring illegal materials to schools such as drugs, white weapons, and pornography. (Counselor who has worked for four to less than six years in a secondary school.)*



Concerning the total number of students in school, it is not easy to regulate students in crowded schools as some of the school counselors discussed:

*There are 1000 students in the school. I cannot meet every one of them and deal with each of the problems. (Counselor who works in a school with between 1001 and 1200 students.)*

*There are many gangs, and they are making many problems for other students and even for their teachers. I remember that I sent many students out of my office because I could not deal with their issues. They are too many. (Counselor who works in a school with between 1001 and 1200 students.)*

Regarding the school counselors' experience, counselors with more experience discussed that they become more professional in exploring and dealing with students' behavioral problems.

*I have been a student counselor for many years. From the first session with a student, I can tell if he has an issue or not. (Counselor has experience of ten years or more.)*

*I had a case [a student], and I had to ask the teachers about him. I had to talk to his father as well. I wasn't sure if he was taking drugs. (Counselor with experience of two years or less.)*

*I met many students during my work, and I became experienced in figuring out who has serious mental problems and who has not, and who has behavioral problems and who has not. (Counselor who has experience of ten years or more.)*

#### 4. DISCUSSION

This research used a mixed methodology approach to study the students' behavioral problems (bullying, smoking, possessing pornography, weapon-carrying, having guns, being violent and stealing, and drug use) from the school counselors' perspective. We also used the school counselors' experience, school level, and the total number of students in the school where the counselor works, to explore the correlations and differences in the students' behavioral problems.

The prevalence of some behavioral problems reported in this study is relatively high. For example, we found that 19% of the students are very likely to bully their peers. This is similar to what Al-Yousaf and Karim found, that 24.3% of Saudi students were bullied [40]. Similarly, with smoking, school counselors showed that 13% of the students smoke and about 28% are likely to smoke, which is in line with other studies like Al-Yousaf and Karim, and like Fida who concluded that between 37% and 40% of Saudi students smoke cigarettes<sup>40, 41</sup>. School counselors also believed that 17% of the students use drugs and 10% are likely to do so. In line with this, Alsanosym Mahfouz, Gaffar, and Maruyama found that 23% of Saudi students chew Khat<sup>42</sup>; and Al-Musa and Al-Montashri found that 8.8% of secondary school students do drugs<sup>43</sup>. Concerning weapon-carrying and having guns, Skiba, Simmons, Peterson, McKelvey, Forde, and Gallini found that 2.82 and 1.5 (out of 5) of the students in intermediate and secondary levels, respectively, have seen a knife or a gun at school; although it is worth noting that this study did not include any Saudis<sup>44</sup>. The current study, however, showed that some Saudi students carry weapons (19%;  $M = 2.45$ ) and have guns (17%;  $M = 2.19$ ). Additionally, our findings were from the perspective of school counselors, whereas all the studies in this discussion targeted the perspective of the students themselves, which raises the issue of self-reporting. Studying behavioral problems requires gathering data from experts in the field, like school counselors particularly, because they often collect their information from multiple sources about students' behaviors<sup>23</sup>.

The researchers expected to see large correlations between the behavioral problems. Indeed, having guns, and being violent and stealing was the largest association ( $r = .94$ ). This is consistent with the previous discussion by Kleck, that having guns is related to violent behavior<sup>45</sup>. Handgun carrying was correlated with drug use ( $r = .90$ ), which agrees with the logistic regression models of Vaughn, Perron, Abdon, Olate, Groom, and Wu that indicated that adolescents between the ages of 12 and 17 who use drugs were robustly associated with an increased probability of carrying a handgun<sup>46</sup>. Drug use was also linked to violence and stealing ( $r = .90$ ). Similarly, Sousa, Correia, Ramos, Fraga, and Barros found that cannabis use was associated with all types of violence among adolescents aged 15 to 19 years old<sup>47</sup>.

Students' behavioral problems were also linked to the demographic information of the school counselors. For example, the most considerable correlation was with the school's total number of students ( $\rho = .481$ ). Indeed, in a high school of 1000 students, 6.3% reported having made a suicide attempt in a 12-month period<sup>22</sup>. West and Meier found that overcrowded schools experience more behavioral problems<sup>48</sup>. Regarding the counselors' experience<sup>48</sup>, we found that it is related positively to exploring students' behavioral problems. Hodges and Hodges discussed that school counselors with experience can investigate and deal with the students' problems better than new workers in the field<sup>49</sup>.

The behavioral problems were greater among secondary students than at elementary level ( $\Delta M = .89$ ). This was expected as behavioral problems like smoking<sup>13</sup>, drug use<sup>17</sup>, weapon-carrying, and having a gun<sup>44</sup>, which represent the majority of the current



behavioral problems, were studied on samples of secondary school students. Another expected finding is that school counselors who work in overcrowded schools with between 1001 and 1200 students reported more behavioral problems among students, compared with counselors in schools of between 201 and 400 students ( $\Delta M = .92$ ); this is consistent with West and Meier<sup>48</sup>. We also found that school counselors with more experience, i.e. eight to less than ten years, and ten years or more, are more likely to explore more behavioral problems than their peers who have two years' experience or less ( $\Delta M = 1.28$  and  $1.3$ , respectively). This is in agreement with Goodman-Scott's discussion that school counselors with many years of experience have the professionalism to recognize the cases with behavioral problems<sup>21</sup>.

In addition to our findings, we noticed other issues regarding the school counselors that may increase the students' reported behavioral problems. For example, not all the schools in Taif have counselors. In addition, if a counseling service exists in a school, it will be provided by one school counselor only – regardless of the number of students in the school. These school counselors will be, by default, burdened with large caseloads of students in need of assistance<sup>50, 51</sup>. They will therefore experience stress<sup>52</sup>, burnout<sup>53</sup>, and exhibit higher levels of emotional exhaustion<sup>54</sup>.

The current research team believe that to reduce the number of behavioral problems among school students, the quality of counseling services should be improved. This can be done by, for instance, having more than one school counselor in a school, and enrolling newly graduated school counselors in training courses, and making them work with senior counselors to learn faster and become more professional. Furthermore, having smaller schools with a limited number of students will help control the cases of behavioral problems, which will lead to better academic performance and wellbeing for the students and their school counselors.

Although this research accomplished its aims, a number of limitations need to be acknowledged. First, this study is a cross-sectional study; therefore, causality cannot be implied. Through the analysis, we could not conclude that, for example, having a large number of students in a school causes them to have behavioral problems. The current findings solely revealed significant and non-significant relationships and differences. The qualitative data helped explore the causality between the studied aspects, but this was at the individuals' level of the interviewees. Second, this study did not investigate behavioral problems among girls and did not explore the differences in behavioral problems based on gender. The current research team focused on boys' schools because Arabic studies have shown that such behavioral problems, e.g. weapon-carrying, having guns, being violent and stealing, and drug use, are more common among males than females. Third, the current study targeted school students in Taif only. In addition, the study questionnaire was distributed conveniently, and hence, the results are not generalized. However, the findings of this study can be investigated in different Saudi cities.

## 5. CONCLUSIONS

Behavioral problems like bullying and weapon-carrying were the most common issues experienced among students. All the behavioral problems were primarily associated with each other, but the largest correlation was between having guns, and violence and stealing. There were significant differences in the students' behavioral problems based on the school counselors' demographic information. Indeed, the most considerable difference was between counselors with two or fewer years of experience and their peers who have been in the field for ten years or more. Overall, the results confirm the existence of behavioral problems among school students and highlight the vital role of school counselors in exploring and dealing with students with such problems. This study could also serve as enrichment for local studies as one of the first studies that address students' behavioral problems from the school counselors' perspective.

**Acknowledgments:** We would like to thank Taif University and its Deanship of Scientific Research. Our grateful also goes to the Administration of Education in Taif. We thank all those who volunteered their time to participate in this study.

**Conflicts of Interest:** The authors declare no conflict of interest.

## REFERENCES

- [1] Maughan, B.; Collishaw, S.; Meltzer, H.; Goodman, R., Recent trends in UK child and adolescent mental health. *Social Psychiatry and Psychiatric Epidemiology* **2008**, *43* (4), 305-310.
- [2] Tick, N. T.; van der Ende, J.; Verhulst, F. C., Twenty-year trends in emotional and behavioral problems in Dutch children in a changing society. *Acta Psychiatr Scand* **2007**, *116* (6), 473-482.
- [3] Eppelmann, L.; Parzer, P.; Lenzen, C.; Bürger, A.; Haffner, J.; Resch, F.; Kaess, M., Stress, coping and emotional and behavioral problems among German high school students. *Mental Health & Prevention* **2016**, *4* (2), 81-87.
- [4] Javier, J. R.; Coffey, D. M.; Schragar, S. M.; Palinkas, L. A.; Miranda, J., Parenting Intervention for prevention of behavioral problems in elementary school-age Filipino-American children: A Pilot study in churches. *Journal of Developmental and Behavioral Pediatrics* **2016**, *37* (9), 737-745.

- [5] Ryoo, J. H.; Hong, S.; Bart, W. M.; Shin, J.; Bradshaw, C. P., Investigating the effect of school-wide positive behavioral interventions and supports on student learning and behavioral problems in elementary and middle schools. *Psychology in the Schools* **2018**, *55* (6), 629-643.
- [6] Wang, M.; Dishion, T. J., The trajectories of adolescents' perceptions of school climate, deviant peer affiliation, and behavioral problems during the middle school years. *Journal of Research on Adolescence* **2012**, *22* (1), 40-53.
- [7] Arfasa, A. J.; Dano, J. L., School Administrators and teachers identification mechanism of students with behavioral problems in secondary schools: South West Ethiopia. *International Journal of Multicultural and Multireligious Understanding* **2019**, *6* (3), 854-864.
- [8] Hue, M., Developing resiliency in students with behavioural problems in Hong Kong secondary schools: Teachers' narratives from a school guidance perspective. *Pastoral Care in Education* **2011**, *29* (4), 261-272.
- [9] State, T. M.; Kern, L., Life Satisfaction among high school students with social, emotional, and behavioral problems. *Journal of Positive Behavior Interventions* **2017**, *19* (4), 205-215.
- [10] World Health Organization *The world health report. Mental health: new understanding, new hope*; Geneva, 2001.
- [11] King Salman Center for Disability Research *The Saudi national report for mental health in the Kingdom of Saudi Arabia*; Riyadh, 2019.
- [12] Almutairi, K. M., Smoking among Saudi students: A review of risk factors and early intentions of smoking. *Journal of Community Health* **2014**, *39* (5), 901-907.
- [13] Albangy, F. H.; Mohamed, A. E.; Hammad, S. M., Prevalence of smoking among male secondary school students in Arar City, Saudi Arabia. *The Pan African Medical Journal* **2019**, *32*, 156-156.
- [14] AlBuhairan, F. S.; Al Eissa, M.; Alkufeidy, N.; Almuneeef, M., Bullying in early adolescence: An exploratory study in Saudi Arabia. *International Journal of Pediatrics & Adolescent Medicine* **2016**, *3* (2), 64-70.
- [15] Raheel, H.; Mahmood, M. A.; Binsaeed, A., Sexual practices of young educated men: Implications for further research and health education in Kingdom of Saudi Arabia (KSA). *Journal of Public Health* **2013**, *35* (1), 21-26.
- [16] Al-Asmary, S. M.; Abdel-Fattah, M. M.; Asal, A. A.; Al-Helali, N. S.; Al-Jabban, T. M.; Arafa, M. A., Emotional and behavioral problems among male Saudi schoolchildren and adolescents. *Neurosciences* **2004**, *9* (4), 299-306.
- [17] Alsanosy, R. M.; Mahfouz, M. S.; Gaffar, A. M., Khat chewing habit among school students of Jazan region, Saudi Arabia. *PloS One* **2013**, *8* (6), E65504.
- [18] AlMakadma, A. S.; Ramisetty-Mikler, S., Student, school, parent connectedness, and school risk behaviors of adolescents in Saudi Arabia. *International Journal of Pediatrics & Adolescent Medicine* **2015**, *2* (3-4), 128-135.
- [19] Aylward, G. P., *Practitioner's guide to behavioral problems in children*. Springer: New York, 2003.
- [20] Mundy, L.; Canterford, L.; Tucker, D.; Bayer, J.; Romaniuk, H.; Sawyer, S.; Lietz, P.; Redmond, G.; Proimos, J.; Allen, N.; Patton, G., Academic performance in primary school children with common emotional and behavioral problems. *The Journal of School Health* **2017**, *87* (8), 593-601.
- [21] Goodman-Scott, E., Enhancing student learning by "building a caring climate": School counselors' experiences with classroom management. *Professional School Counseling*, *22*(1), 2156759. **2019**, *22* (1), 1-12.
- [22] Centers for Disease Control and Prevention *Youth risk behavior surveillance - United States - surveillance summaries*; 2010; pp 1-142.
- [23] Nassar-Mcmillan, S. C.; Karvonen, M.; Perez, T. R.; Abrams, L. P., Identity Development and School Climate: The Role of the School Counselor. *The Journal of Humanistic Counseling, Education and Development*, *48*(2), 195-214. *The Journal of Humanistic Counseling - Education and Development* **2009**, *48* (2), 195-214.
- [24] Gutierrez, D.; Conley, A. H.; Young, M. E., Examining the effects of Jyoti meditation on stress and the moderating role of emotional intelligence. *Counselor Education and Supervision* **2016**, *55*, 109-122.
- [25] Salameh, K. A., The Effectiveness of a cognitive-behavioral counseling program in modifying the negative behavior among students of Aqabat Jaber school camp in the governorate of Jericho. *World Journal of Education* **2019**, *9* (3), 105-117.
- [26] Masia, W. C.; Colognori, D.; Brice, C.; Herzig, K.; Mufson, L.; Lynch, C.; Reiss, P. T.; Petkova, E.; Fox, J.; Mocerri, D. C.; Ryan, J.; Klein, R. G., Can school counselors deliver cognitive-behavioral treatment for social anxiety effectively? A randomized controlled trial. *Journal of Child Psychology and Psychiatry* **2016**, *57* (11), 1229-1238.
- [27] Al-Rebdi, S. The role of the school counsellor as perceived by counsellors, principals and teachers in Saudi Arabia. Manchester University, 2004.
- [28] Alghamdi, N. G.; Riddick, B., Principals' Perceptions of the School Counsellor Role in Saudi Arabia. *International Journal for the Advancement of Counselling* **2011**, *33* (4), 347-360.
- [29] Lund, T., Combining qualitative and quantitative approaches: Some arguments for mixed methods research. *Scandinavian Journal of Educational Research* **2012**, *56* (2), 155-165.
- [30] Creswell, J. W.; Plano Clark, V. L., *Designing and conducting mixed methods research*. Sage publications: Thousand Oaks, 2007.
- [31] Campos, M., A constructivist method for the analysis of networked cognitive communication and the assessment of collaborative learning and knowledge-building. *Journal of Asynchronous Learning Network* **2004**, *8* (2), 1-29.

- [32] Guest, G.; Bunce, A.; Johnson, L., How many interviews are enough? An experiment with data saturation and variability. *Field Methods* **2006**, *18* (1), 59-82.
- [33] DiCicco-Bloom, B.; Crabtree, B. F., The qualitative research interview. *Medical Education* **2006**, *40* (4), 314-321.
- [34] World Health Organization, *ICD-10 Classifications of mental and behavioural disorder: Clinical descriptions and diagnostic guidelines*. World Health Organisation: Geneva, 1992.
- [35] American Psychiatric Association, *Diagnostic and statistical manual of mental disorders*. 4th ed.; American Psychiatric Association: Washington, DC, 2000.
- [36] American Psychiatric Association, *Diagnostic and statistical manual of mental disorders*. 5th ed.; American Psychiatric Association: Washington, DC, 2013.
- [37] Braun, V.; Clarke, V., Using thematic analysis in psychology. *Qualitative Research in Psychology* **2006**, *3* (2), 77-101.
- [38] Guest, G.; MacQueen, K. M.; Namey, E. E., *Applied thematic analysis*. SAGE: Thousand Oaks, California, 2012.
- [39] Richardson, J. T., Eta squared and partial eta squared as measures of effect size in educational research. *Educational Research Review* **2011**, *6* (2), 135-147.
- [40] Al-Yousaf, M. A.; Karim, A., Prevalence of smoking among high school students. *Saudi Medical Journal* **2001**, *22* (10), 872-874.
- [41] Fida, H. R.; Abdelmoneim, I., Prevalence of smoking among secondary school male students in Jeddah, Saudi Arabia: A survey study. *BMC Public Health* **2013**, *13* (1), 2-5.
- [42] Alsanosy, R. M.; Mahfouz, M. S.; Gaffar, A. M.; Maruyama, S., Khat chewing among students of higher education in Jazan region, Saudi Arabia: Prevalence, pattern, and related factors. *BioMed Research International* **2013**, *2013*, 1-7.
- [43] Al-Musa, H. M.; Al-Montashri, S., Substance abuse among male secondary school students in Abha city, Saudi Arabia: Prevalence and associated factors. *Allied Academies* **2016**, *27* (4), 1364-1373.
- [44] Skiba, R.; Simmons, A. B.; Peterson, R.; McKelvey, J.; Forde, S.; Gallini, S., Beyond guns, drugs and gangs: The structure of student perceptions of school safety. *Journal of School Violence* **2004**, *3* (2-3), 149-171.
- [45] Kleck, G., Regulating guns among young adults. *American Journal of Criminal Justice* **2019**, *44* (5), 689-704.
- [46] Vaughn, M. G.; Perron, B. E.; Abdon, A.; Olate, R.; Groom, R.; Wu, L., Correlates of handgun carrying among adolescents in the United States. *Journal of Interpersonal Violence*, *27*(10), 2003-2021. **2012**, *27* (10), 2003-2021.
- [47] Sousa, S.; Correia, T.; Ramos, E.; Fraga, S.; Barros, H., Violence in adolescents: Social and behavioural factors. *Gaceta Sanitaria* **2010**, *24* (1), 47-52.
- [48] West, J.; Meier, C., Overcrowded classrooms – The achilles heel of South African education? *South African Journal of Childhood Education* **2020**, *10* (1), 1-10.
- [49] Hodges, S.; Hodges, A. S., *101 careers in counseling*. Springer Publishing Company New York, 2012.
- [50] Joyce, L. E.; Frances, L. V., School Counselors' roles in developing partnerships with families and communities for student success. *Professional School Counseling* **2010**, *14* (1), 1-14.
- [51] McCarthy, C.; Kerne, V. V. H.; Calfa, N. A.; Lambert, R. G.; Guzman, M., An exploration of school counselors' demands and resources: Relationship to stress, biographic, and caseload characteristics. *Professional School Counseling* **2010**, *13*, 146-158.
- [52] Mathews, T. F. The school counselors' description of their experiences of emotional exhaustion: A phenomenological study. ProQuest Dissertations & Theses Global, 2012.
- [53] Wilkerson, K., An examination of burnout among school counselors guided by stress-strain-coping theory. *Journal of Counseling and Development* **2009**, *87*, 428-437.
- [54] Bardhoshi, G.; Schweinle, A.; Duncan, K., Understanding the impact of school factors on school counselor burnout: A mixed methods study. *Professional Counselor* **2014**, *4*, 426-443.