

The Effectiveness of A psychological Well-being Program in Adjusting the Aggressive Behavior of Students of Primary Stage in UNRWA Schools in Gaza

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Abstract: This study investigates the effectiveness of a structured psychological intervention based on enhancing psychological well-being in reducing aggressive behavior among primary school students in a conflict-affected context. Despite the growing recognition of positive psychology frameworks, limited empirical research has examined their applicability among children exposed to chronic socio-political stressors, particularly in the Gaza Strip. Accordingly, this study aims to evaluate the impact of a well-being-based counseling program on modifying aggressive behavior among fifth-grade male students.

A quasi-experimental design was employed using a pre–post–follow-up approach with a control group. The sample consisted of 24 students (aged 10–11 years) selected purposively based on high levels of aggressive behavior and low psychological well-being. Participants were divided equally into experimental and control groups. The intervention comprised a 12-session counseling program integrating self-awareness, emotional expression, social skills, decision-making, and adaptive coping strategies. Data were collected using researcher-developed scales for psychological well-being and aggressive behavior, with established validity and reliability. Statistical analyses were conducted using non-parametric tests, including Mann–Whitney, Wilcoxon, and Friedman tests.

The findings revealed a statistically significant reduction in aggressive behavior among the experimental group in the post-test compared to the pre-test, as well as significant differences between the experimental and control groups in favor of the experimental group. Furthermore, results indicated sustained effects of the intervention at follow-up, although partial regression was observed in physical aggression and aggression toward property. These findings highlight the effectiveness of well-being-based interventions in promoting adaptive behavioral outcomes among children in high-stress environments.

The study contributes to the literature by providing a context-sensitive model for integrating psychological well-being into behavioral intervention programs and offers practical implications for school-based mental health practices in conflict-affected settings.

Keywords: psychological well-being, aggressive behavior, school-based intervention, positive psychology, Gaza Strip, quasi-experimental design.

Introduction: Children exhibiting aggressive behaviors is a serious problem for education and psychology and especially when children grow up under long-term stressful conditions, political upheaval and low levels of social-psychological resources. Under these conditions, children are generally at high risk of being exposed to multiple risk factors that can interfere with their ability to regulate their emotions, adapt socially and maintain control over their behavior. The Gaza Strip provides an extreme example of such a situation. Due to long term exposure to conflict, poverty and lack of infrastructure children growing up in Gaza have experienced significant damage to their psychological health and development (Altawil et al., 2008; Thabet et al., 2018; UNICEF & OCHA, 2016). Moreover, in the case of Gaza aggressive behavior typically develops from a child's complex psychosocial reaction to stressors in their environment rather than simply being an isolated act of misconduct (DeWall et al., 2011; Guerra & Huesmann, 2004).

Theoretical studies have utilized several conceptual frameworks to analyze aggressive behavior in children such as Social Learning Theory, Cognitive-Ecological Models and the General Aggression Model developed by Craig A. Anderson and Brad J. Bushman. All three of these theories demonstrate that aggressive behaviors are produced by the interaction of both individual and environmental factors which include but are not limited to exposure to violence, reinforcement patterns and the lack of effective emotional regulation (DeWall et al., 2012; Anderson & Bushman, 2002; Bjorkly, 2006). Additionally, Cognitive Ecological models also examine how family dynamics, interactions with peers and the climate of schools can produce aggressive responses from children (Chirwa-Mwanza & Menon, 2015; Guerra & Huesmann, 2004). Although all of these models provide a good deal of explanatory power for understanding why some children exhibit aggressive behavior, there exists very little research regarding protective factors or mechanisms that may prevent children from exhibiting aggressive behavior.

To counteract these limitations, researchers are beginning to rely on positive psychology as a methodological approach that may complement traditional methods of examining and reducing behavior problems. The core component of positive psychology is

the concept of psychological well-being. Psychological well-being includes the components of self-acceptance, autonomy, personal growth, having a sense of purpose in life, and being positively engaged with other people (Ryff & Singer, 1996; Ryff et al., 2004), as defined by Carol D. Ryff. Additionally, Martin Seligman's work has provided evidence supporting the existence of five elements: positive emotions, engagement, relationships, meaning, and accomplishment (the PERMA model) that foster healthy adaptation and resilience (Seligman, 2002; Seligman, 2018). Lastly, the self-determination theory created by Edward Deci and Richard M. Ryan defines autonomy, competence, and relatedness as basic psychological needs required for the development of psychological well-being and for controlling behavior (Deci & Ryan, 2001; Deci & Ryan, 2008). Increasing psychological well-being is not just an end result of interventions or treatments to decrease problem behaviors such as aggression. Instead it is one of the many mechanisms used to reduce maladaptive behaviors.

Consistently across studies, empirical support has been found for the inverse relationship between psychological well-being and aggressive behavior. Higher levels of psychological well-being have been associated with better emotion regulation, less impulsive behaviors and greater prosocial behaviors (Butt et al., 2016; Goli et al., 2016; Sagone & De Caroli, 2014) whereas deficits in well-being were linked to an increased susceptibility to experiencing stress and frustration as well as maladaptive coping strategies (e.g., aggression) (Vázquez et al., 2009; Huppert, 2009). In addition, other research suggests that several positive traits (optimism, resilience, self-esteem) are strongly related to a decrease in aggressive behavior and/or improvement in overall psychological functioning (Lim et al., 2005; Hasnain et al., 2014; Du et al., 2015). However, despite this large body of literature, there is still a significant void in intervention-based research that seeks to enhance well-being as a primary vehicle by which behavioral changes can be produced in children, especially in conflict affected education environments.

Moreover, many established intervention programs have focused primarily upon controlling aggressive behaviors through use of behavioral controls,

restructuring cognitions, or punishing behaviors. Consequently, few of these programs offer avenues toward the personal growth and development necessary to develop healthy levels of psychological well-being (Lozovska & Gudaitė, 2013; Penders et al., 2013). Although such short-term solutions may be effective, it is unlikely that they will sufficiently deal with the inner emotional and cognitive mechanisms which are the basis of aggressive behavior. On the other hand, interventions aimed at enhancing psychological well-being (e.g. Hefferon & Boniwell, 2011) promote awareness of oneself, expression of emotions, developing relationships with others, finding meaning in one's life -- all of which contribute to creating an atmosphere in which long-lasting behavioral change can occur (Salama-Younes, 2015).

In view of the above, the purpose of this study was to fill a void in the research regarding whether a structured counseling program based on psychological well-being would effectively reduce aggressive behavior in elementary school students residing in the Gaza Strip. More specifically, this study employed a quasi-experiment to examine how aggressive behavior changed from pre-testing, to post-testing, to follow-up testing after students participated in a counseling program designed to enhance their psychological well-being. The second goal of the study was to determine whether the effects produced by the counseling program were sustained over time. Since the sample selected for this study consisted of students who exhibited high levels of aggressive behavior as well as low levels of psychological well-being, this study sought to provide an example of how positive psychology-based interventions could be applied in both resource-poor environments and areas affected by ongoing conflict.

This study is significant on both a theoretical and practical level. On a theoretical level, this study provides a framework to integrate Positive Psychology into Behavioral Intervention. Theoretical frameworks such as those developed by Ryan and Deci (2001) and Seligman (2018) have been based upon moving away from reducing deficits to enhancing strengths. In terms of practice, this study has provided educators, school counselors and mental health professionals with an empirically-supported model for developing and

implementing school-based programs that foster psychological wellness while also decreasing maladaptive behavior. Ultimately, this study will contribute to a better understanding of how enhancing students' internal psychological resource can provide a protective function against aggression in general, but especially when students are exposed to high levels of adversity and instability within their environment (Thabet et al., 2018; UNICEF & OCHA, 2016).

Literature Review

1. Conceptualizing Aggressive Behavior in Childhood

The child's aggressive behavior can be defined as multi-dimensional for it includes physical, verbal and relational types of harmful behaviors directed towards others, one-self or property (Craig A. Anderson; Brad J. Bushman, 2002; DeWall et al., 2012). This form of aggression is generally seen as learned, and developed through contextual exposures that are affected by cognitive processing and emotion regulation abilities (Bjorkly, 2006; DeWall et al., 2011). The general aggression model (GAM) provides an extensive framework for understanding the interaction of personal and situational factors which contribute to aggressive behaviors through three paths: affective pathway, cognitive pathway, and arousal pathway.

School-aged aggressive behavior is typically evidenced by observable actions that include violent physical attacks, verbal hostile or aggressive statements directed at others and/or destruction of property (Murlidhar & Shastri, 2016; Rahman & Nahar, 2013). Social problem solving difficulties, lack of ability to emotionally regulate oneself appropriately, and the presence of a dysfunctional environment in their family/school/community have been linked to aggressive behavior exhibited in youth (Chirwa-Mwanza & Menon, 2015). Youth residing within conflict areas experience an increased level of aggression because they have had constant exposure to violence and chaos over time which has taught them that using aggressive means can be used as a way of dealing with those things (Altawil et al., 2008; Thabet et al., 2018).

2. Psychological Well-Being: Theoretical Foundations and Dimensions

Positive psychology's focus on optimal human functioning, rather than just being free from mental illness, is an important area of study for understanding what it means to have good mental health. According to Carol D. Ryff's "eudaimonic" theory of psychological well-being, there are six dimensions that make up a person's overall sense of well-being: self-acceptance, autonomy, mastery over one's environment, having a purpose in life, growing and developing as a person, and forming strong relationships with others (Ryff & Singer, 1996; Ryff et al., 2004). These dimensions highlight how our own inner strengths contribute to our ability to cope successfully and adaptively.

The two models are linked in a complementary way. The PERMA Model was created by Martin Seligman. It is made up of five elements: positive emotions, engagement, relationship, significance and accomplishment (Seligman, 2011; Seligman, 2018). The Self-Determination Theory, on the other hand, provides a theoretical basis to understand how psychological well-being can be achieved through satisfying three basic psychological needs: autonomy, competence and relatedness. As such, it serves as an important base to understand how people regulate their behavior (Deci & Ryan, 2001; Deci & Ryan, 2008).

Studies have shown that there is a strong correlation between the variables of psychological well-being and emotional stability, adaptive coping strategies and prosocial behavior (Huppert, 2009; Vázquez et al., 2009). People who report having high levels of well-being tend to show better resilience, better social skills and the ability to handle stressful situations. These factors help reduce aggressive behavior (Butt et al., 2016; Sagone & De Caroli, 2014).

3. The Relationship between Psychological Well-Being and Aggressive Behavior

There is increasing evidence supporting a negative association between psychological wellbeing and aggression. Lowered wellbeing in children contributes to increased likelihood of exhibiting poor emotional regulation, increased frustration, and use of maladaptive strategies for coping leading to an increase in aggressive behaviors (Du et al., 2015; Hasnain et al., 2014). On the other hand, higher levels of wellbeing

have been linked to increased self-control, empathy, and social competence, all of which protect against aggressive behaviors (Poormahmood et al., 2017; Lim et al., 2005).

Additionally, theoretical frameworks support that the influence of psychological wellbeing on aggressive behavior can occur through multiple pathways. The first pathway occurs when wellbeing increases emotional regulation skills and abilities thereby allowing individuals to successfully control their anger or frustration. Secondly, wellbeing allows individuals to cognitively restructure their interpretations of social events into positive ones. Finally, wellbeing helps establish stronger social connections, therefore lessening the probability of engaging in hostile or confrontational behaviors (DeWall et al., 2011; Guerra & Huesmann, 2004).

Psychological wellbeing is a major issue when it comes to young people growing up in an environment with many stressors including poverty, conflict or unstable families. These repeated stressors have been shown to affect wellbeing and increase aggression in young people (Thabet et al., 2018; UNICEF & OCHA, 2016). This means that improving wellbeing through intervention has potential to be a successful way to reduce aggressive behaviors among these groups.

4. Intervention Approaches to Reducing Aggressive Behavior

Traditionally, most of the aggressive behavior has addressed through behavioral modification techniques such as; reinforcement, punishment, or cognitive-behavioral strategies (Penders et al. 2013) although some research shows these types of interventions can be effective in specific environments many focus on reducing symptoms versus understanding what is driving those symptoms. More recent research trends in the area of aggression has moved from a more traditional symptomatic approach toward more integrated approaches which include an individual's emotional, cognitive, and social development. Positive Psychology programs aim to increase overall well-being by creating opportunities for individuals to develop their own self-awareness, express their emotions appropriately, use positive social skills and build

resiliency (Boniwell & Hefferon 2011, Salama-Younes 2015) . These types of interventions are typically associated with significant improvement in both the individual's overall well-being and the reduction of problem behaviors.

For instance, Goli et al. (2016) demonstrated that group-based therapeutic interventions significantly reduced aggressive behavior while simultaneously enhancing psychological well-being among participants. Similarly, mindfulness-based and emotion regulation programs have been found to decrease aggression by improving self-control and emotional awareness (Goyal et al., 2014).

5. Research Gap and Study Contribution

Although it has been increasingly recognized that psychological wellbeing plays an important part in regulating behaviors, currently there is little empirical research examining how it can be utilized as the main mechanism of intervention in programs aimed at reducing aggression amongst children specifically within conflict-impacted environments (i.e., Gaza Strip). While most previous studies have either been correlational or have taken place in non-conflict impacted socio-cultural environments making them less applicable to high-risk groups, very few studies have included long-term measures of change, which include longitudinal evaluations of the sustainability of interventions. Therefore, this study fills a gap in research by developing a structured counseling program based on psychological wellbeing, assessing its efficacy utilizing a quasi-experimental design with a pre-test/post-test/follow-up evaluation process; thereby contributing to both theory and practice development regarding the promotion of psychological wellbeing as a method to reduce aggressive behaviors in highly vulnerable child populations.

Methodology

Research Design

This investigation used a quasi-experimental design which utilized a pre/post/follow-up format along with an experimental group and a control group. A quasi-experimental design was chosen because it is better suited than a randomized controlled trial (RCT) for

educational or psychological research when true randomization isn't possible. It also permits researchers to examine cause-and-effect by examining differences in the outcome measure among the two treatment groups that were exposed to an intervention and weren't, while ensuring that baseline scores are equalized.

Population and Sample

The entire participant pool for the research comprised of all 5th grade boys attending a UNRWA Primary School located within the Gaza Strip. There are approximately 320 boys in the entire school population. Screening procedures using standardized assessment measures identified 60 students as exhibiting both exceptionally aggressive behaviors and very low levels of psychological wellbeing.

Using a Purposive Sampling method, a sub-sample of 24 boys ranging from age 10-11 was selected. The purposeful selection of these 24 boys was based upon them having demonstrated the most extreme behaviors, i.e., they had demonstrated the highest level of aggression and lowest level of psychological wellbeing. Therefore, providing maximum discrimination between the experimental and control conditions. The 24 boys were randomly assigned to either an experimental condition (n=12) or a control condition (n=12).

Sampling Criteria

The participants for this study were identified based on their compliance with very specific inclusion criteria which would result in a homogeneous group of students that met the objectives of the study. The criteria used to select the participants in this study included being enrolled in the fifth grade; being ten to eleven years old; being male; having no previous experience participating in counseling or psychology intervention programs; and having documented aggression (as reported by teachers). Prior to beginning data collection, verbal assent had been received from all parental/guardian representatives of the participants.

Group Equivalence

To ensure the internal validity of the research, it is

necessary for researchers to establish equivalence between an experimental group and a control group at the point of intervention. Psychological well-being and aggressive behavior scores from the two groups were compared using the Mann-Whitney U test to determine whether there are differences in these areas. There were no statistically significant differences ($p > .05$) found between the two groups on these measures at baseline. This establishes similarity among the groups prior to the development of the program and increases the credibility of any subsequent comparison. Therefore, any differences that may be noted after developing this program can be attributed to the program itself rather than differences existing prior to its development.

Instruments

Two key research tools that were used to collect data were created by the researcher: A Psychological Well-being scale and An Aggression Behavior Scale. The scales were built upon large amounts of information from various psychological and education sources. They were also specifically tailored to meet the needs of the young learners in primary schools.

The Psychological Well-being scale contained 24 questions with six sub-scales; Self-Awareness, Social Interaction Skills, Decision Making Ability, Positive Citizenship, Goal Setting and Growth and Development. Each item contained five possible responses which were assessed using a Likert-type response format suitable for the targeted age group of participants.

The Aggressive Behavior scale contained twenty items assessing four sub-scales including Verbal Aggression, Self-Directed Aggression, Physical Aggression and Aggression towards Property. It was intended to measure as many forms of aggressive behavior that could be observed within school settings.

Validity and Reliability

The two assessment tools were validated for use via several methods. Content validity was confirmed based upon input from an interdisciplinary group of experts including psychologists and educators. This group of ten reviewed each item individually to determine if it represented relevant information clearly and

completely. Feedback from this process led to modifications that enhanced the quality of the assessment tools.

Internal consistency measures were used to assess construct validity; the Pearson r correlation values were computed for all items within each scale as well as for each scale with its corresponding total score. Each of these correlation values was significantly different at $p < .05$. These results indicate good construct validity.

Cronbach's alpha values were also computed to assess reliability. The Psychological Well-being Scale had a Cronbach's alpha value of .95 and indicated very reliable data. The Aggressive Behavior Scale produced a Cronbach's alpha value of .98 which is considered almost perfectly reliable. Split-half reliabilities were also computed using the Spearman-Brown Formula for both scales.

Intervention Program

The Intervention involved a Structured Counseling Program to increase the participants' psychological wellbeing and decrease their aggressive behavior. The program comprised of 12 Sessions that averaged approximately 50 Minutes in length and took place within a specific time frame at the School.

All of the content of the Program was based on Positive Psychology Principles; therefore, it is concerned with the development of core competencies (e.g., Self-Awareness, Emotional Expression, Anger Management, Social Communication, Decision-Making, Conflict Resolution and Goal Setting). In addition to Group Discussion, Role-Playing, Guided Reflection and Relaxation Exercises, there were Interactive Activities used in each Session which were based upon the Cognitive/Emotional Level of each participant.

Each session built progressively on previously developed Skills through sequential organization from Foundational Concepts (i.e., Emotional Awareness) to More Advanced Skills (i.e., Conflict Resolution and Self-Regulation); thereby providing a basis for continued reinforcement of positive behaviors and encouraging Sustained Behavioral Change.

Data Collection Procedures

Phase one was the administration of pre-test data (psychological well-being and aggressive behavior) to both treatment and control groups. These assessments provided the base level for each group. Phase two included administering the intervention to the experimental group alone; at that time, the control group continued as they normally would in their daily routine. After the intervention had been completed by all participants, the final measurements (post-tests) were taken from both the treatment and control groups. The final phase of the study was an evaluation two months after the intervention ended. That is referred to as a follow-up.

Statistical Analysis

The Statistical Package for the Social Sciences (SPSS) software was utilized to statistically analyze the data collected from this research study. Non-parametric statistical methods are preferred when the sample size is small or the data do not exhibit normal distribution characteristics. A Mann-Whitney U Test was employed to evaluate differences between experimental and

control group participants. Additionally, a Wilcoxon Signed-Ranks Test evaluated participant responses before and after the intervention on an individual basis. Lastly, a Friedman test was utilized to evaluate participant responses over time at three different intervals; i.e., pre-testing, post-testing, and follow-up testing. Descriptive statistics such as means, standard deviations, frequency distributions, and percentage distributions were computed to describe the nature of the data collected. Utilizing both descriptive and inferential statistical analysis allowed for the researchers to accurately interpret their findings and support the primary purpose of the study which was to determine if the treatment program resulted in improved outcomes for the participants.

Results

Baseline Levels of Psychological Well-Being

To address the first research question concerning the level of psychological well-being among the study sample prior to the intervention, descriptive statistics were calculated, including means, standard deviations, and relative weights.

Table 1. Descriptive Statistics for Psychological Well-Being Dimensions (Pre-Test, N = 24)

Dimension	Mean	Std. Deviation	Relative Weight (%)	Rank
Self-awareness	1.18	0.479	39%	5
Social interaction skills	1.60	0.493	53%	1
Decision-making ability	1.20	0.531	40%	4
Positive citizenship	1.08	0.450	36%	6
Goal setting	1.22	0.416	41%	3
Growth and development	1.50	0.551	50%	2
Total Score	1.33	0.401	44%	—

The results indicate that the overall level of psychological well-being among participants was low ($M = 1.33$; 44%), with the highest dimension being social interaction skills (53%) and the lowest being positive citizenship (36%). These findings confirm the presence of a deficit in well-being prior to the intervention.

Baseline Levels of Aggressive Behavior

To examine the second research question regarding the level and types of aggressive behavior, descriptive statistics were computed.

Table 2. Descriptive Statistics for Aggressive Behavior Dimensions (Pre-Test, N = 24)

Type of Aggression	Mean	Std. Deviation	Relative Weight (%)	Rank
Physical aggression	2.422	0.283	80%	1
Verbal aggression	2.317	0.246	77%	2
Aggression toward property	2.250	0.349	74%	3
Self-directed aggression	2.216	0.376	73%	4
Total Score	2.203	0.239	73.5%	—

The findings demonstrate a high level of aggressive behavior across all dimensions, with physical aggression being the most prominent. These results justify the need for intervention.

Hypothesis 1: Differences between Pre- and Post-Test in the Experimental Group

To test whether there were statistically significant differences in aggressive behavior before and after the intervention within the experimental group, the Wilcoxon signed-rank test was used.

Table 3. Wilcoxon Test Results for Pre–Post Differences in Aggressive Behavior (Experimental Group)

Dimension	Z-value	Significance (p)	Result
Verbal aggression	2.29	0.003**	Significant reduction
Self-directed aggression	2.95	0.003**	Significant reduction
Physical aggression	0.00	1.000	Not significant
Aggression toward property	2.95	0.003**	Significant reduction
Total Score	3.06	0.002**	Significant reduction

$p < 0.05$, $p < 0.01^*$

The results indicate statistically significant reductions in aggressive behavior across most dimensions following the intervention, except for physical aggression, which showed no significant change.

Hypothesis 2: Differences Between Experimental and Control Groups (Post-Test)

To examine differences between the experimental and control groups after the intervention, the Mann–Whitney U test was applied.

Table 4. Mann–Whitney Test Results for Post-Test Differences Between Groups

Dimension	Z-value	Significance (p)	Result
Verbal aggression	3.26	0.010*	Significant (Experimental ↓)
Self-directed aggression	4.05	0.000*	Significant (Experimental ↓)
Physical aggression	0.06	0.060	Not significant
Aggression toward property	0.17	0.858	Not significant
Total Score	3.47	0.001*	Significant (Experimental ↓)

The findings reveal that the experimental group exhibited significantly lower levels of aggressive behavior compared to the control group in the post-test, particularly in verbal and self-directed aggression.

Hypothesis 3: Differences between Post-Test and Follow-Up (Experimental Group)

The Wilcoxon test was used to assess whether the effects of the intervention were sustained over time.

Table 5. Wilcoxon Test Results for Post–Follow-Up Differences (Experimental Group)

Dimension	Z-value	Significance (p)	Result
Verbal aggression	0.367	0.713	Not significant
Self-directed aggression	0.835	0.404	Not significant
Physical aggression	2.99	0.003**	Significant relapse
Aggression toward property	2.53	0.010*	Significant relapse
Total Score	1.19	0.235	Not significant

The results indicate that the overall effect of the intervention was sustained over time, although some regression was observed in physical aggression and aggression toward property.

Hypothesis 4: Differences across Pre-, Post-, and Follow-Up Measurements

To examine changes across all three time points, the Friedman test was conducted.

Table 6. Friedman Test Results for Repeated Measures (Experimental Group)

Measurement Time	Mean Rank
Pre-test	2.91
Post-test	1.62
Follow-up	1.45

Statistic	Value
Chi-square	16.3
Degrees of freedom	2
Significance (p)	0.000*

Statistically significant differences were found between each of the three measurement times. This indicates that the intervention had been successful in decreasing aggressive behaviors during this period.

Collectively, the data demonstrated that the child's psychological well-being-based intervention program resulted in a reduction of aggressive behaviors in the experimental group. The effect of the intervention was maintained throughout the duration of the study; however, some degree of regression was noted on a few of the measurement components.

These findings are a powerful demonstration of how a psychological well-being-based approach can be used as an intervening variable to modify behavioral responses associated with increased exposure to stressful stimuli.

Discussion

The current research study assessed the impact of a psychological well-being-based intervention on decreasing aggressive behaviors from children attending primary schools in the Gaza strip; a region with significant social political instability. These results also represent substantial evidence supporting the hypothesis that enhanced psychological well-being may be used as an efficient means to modify aggressive behaviors within regions experiencing chronic levels of stress due to ongoing social or political turmoil.

Interpretation of Psychological Well-Being Levels

The overall lower than average scores on the pretest for this group's psychological wellbeing support existing literature from other parts of the world that have experienced ongoing periods of conflict and stressors (i.e. economic hardship, lack of safety/ security, family instability) that negatively affect children's mental health and psychological functioning (Altawil et al., 2008; Thabet et al., 2018; UNICEF & OCHA, 2016).

From a theory-based perspective, this data is consistent with the conceptual framework provided by Carol D. Ryff's Eudaimonic Model which focuses on environmental mastery and positive interpersonal relationships as essential components of an individual's sense of well-being (Ryff & Singer, 1996), and therefore suggests that there were limitations or challenges for

individuals within this sample population relative to those two areas.

Additionally, the data collected also supports previous studies demonstrating that children who grow up in environments characterized by extreme levels of stress will often experience difficulty expressing emotions appropriately and/or develop some form of identity that is both stable and socially integrated (Vázquez et al., 2009; Huppert, 2009). When an individual experience these types of limitations it can lead to poor behavioral regulation, making them more susceptible to responding aggressively when they encounter adversity.

Interpretation of Aggressive Behavior Levels

The evidence from the high level of aggressive behavior at the pre-test, supports the association between environmental stress and the outcome of behaviors. In particular, the dominance of physical aggression in the behavior of these children appears to be linked to the widespread use of violent methods for resolving conflicts, where many children have been repeatedly exposed to the aggressive behaviors modeled by others (Bushman, 1998) (Anderson & Bushman, 2002).

Craig A. Anderson's "General Aggression Model," suggests that an individual's repeated exposure to aggressive stimuli will develop or modify their cognitive scripts and emotional responses, thereby increasing the

probability of aggressive behavior (DeWall, et al., 2012).

These results also support social learning theory. Social learning theories suggest that children learn aggressive behavior as a result of observing aggressive behavior in their surroundings and then imitating it and receiving positive reinforcement for such behavior (Huesmann & Guerra, 2004). Thusly, the impact of family dynamics, peer interaction, and classroom climate on sustaining aggressive tendencies among children may be significant.

Effectiveness of the Intervention Program

The statistical results found that there was a reduction in aggressive behaviors as compared to the control group, but especially in verbally or self-directed ways for those in the experimental group who received the intervention. The data also demonstrates that the overall well-being program has shown a high degree of success. As such, this study's findings support prior research that supports the use of positive psychological interventions to enhance behavioral outcomes (Hefferon & Boniwell, 2011; Goli et al., 2016). The improvement in these areas is due to several aspects of the overall design of the intervention. Specifically, it appears that the emphasis on developing awareness and expressing emotion may have allowed individuals to develop an increased level of emotional intelligence. Emotional intelligence allows individuals to recognize and manage their own emotions in order to decrease impulse based aggressive reactions. There is empirical evidence supporting this claim. For example, researchers Edward Deci and Richard Ryan have proposed that two major components of intrinsic motivation are autonomy (the ability to make choices) and emotional competence (ability to understand and express one's feelings) to determine how motivated an individual will be to engage in certain behaviors (Deci & Ryan, 2001; Deci & Ryan, 2008).

Second, developing both social skills and communication techniques likely enhanced the ability to interact with others on a positive level, which would help reduce the opportunity for aggressive actions and conflicts. Children who demonstrate greater social competency are able to develop constructive ways to mediate conflicts and demonstrate less aggressive

tendencies than children lacking this type of competency (Butt et al., 2016; Sagone & De Caroli, 2014).

On the other hand, the lack of statistically significant differences in physical aggression suggest some forms of aggressive action are more difficult to change through an intervention. The potential reasons for this could include that physical aggression is often a deeply engrained behavior in environments like school playgrounds where peer-based activity is driven by competition and social dynamics to promote aggression (Shastri & Murlidhar, 2016). Additionally, it can indicate that longer or more extensive interventions are needed to address issues with regulating one's own behavior within a context of physically engaging activity.

Sustainability of Intervention Effects

The follow up data showed the long-term impact of the treatment was present but partial regression was present for both physical aggression and property damage. While this indicates that the intervention has some potential to result in long term changes in an individual's behavior, it appears that to maintain those changes there will need to be continued support through positive reinforcement and a supportive environment.

This finding is also supported by previous longitudinal studies suggesting that the sustainability of intervention effects is directly related to whether or not new behaviors are consistently practiced and reinforced within a child's daily routine as well as supported by their environment (Lozovska & Gudaitė, 2013; Goyal et al., 2014).

In addition, from a theoretical perspective, the partial regression experienced in certain areas could be explained by the dynamic relationship between individual and environmental variables discussed in Ecological Models of Behavior (Guerra & Huesmann, 2004), which further emphasizes the need for interventions that focus on a systems-based approach and take into consideration all relevant environments such as home, schools, communities etc.

Theoretical and Practical Implications

The results of this research add to the increasing amount of literature that supports incorporating positive psychology within behavioral interventions. This study shows that psychological well being can be used as a buffer against aggressive behavior. Therefore, this study is contributing to the movement away from deficit based interventions toward strength based interventions (Ryan & Deci, 2001; Seligman, 2018).

In addition, these findings provide an example of how schools could establish programs to develop psychological wellbeing and decrease maladaptive behaviors in students, especially those in under-resourced or conflict zones. Additionally, because this program was specifically designed around specific psychological competencies, and is implemented through a very structured process, it would likely be a model that school counselors or teachers could use.

Limitations and Future Directions

Although this research has made significant contributions it also has some limitations. The limited number of participants and purposeful sampling reduces the ability to generalize the findings. Also, since all data were collected through self-reporting mechanisms there may be an issue with respondent bias. Therefore, researchers should seek out larger, more diverse participant groups as well as assess well-being using multiple reporting sources (e.g., teachers, parents).

Also, the focus of this study was strictly male student participants; therefore, the results cannot be generalized to female participants. Researchers should investigate if there are gender-based differences in how males and females respond to well-being-based interventions.

Additionally, the authors should have incorporated longer time frames during their follow up phases so that they could better understand if the positive effects from these types of interventions can last over extended periods of time.

In conclusion, this research has provided strong support for the use of psychological well-being-based interventions in decreasing aggressive behaviors and also serves as a model for future research and

application in educational and clinical settings.

Conclusion

This investigation investigated whether a psychologically based intervention for improving wellbeing could help reduce aggressive behavior in children in their first years of formal education in the Gaza Strip. Findings from this research suggested that the intervention resulted in a statistically significant decline in aggressive behavior (particularly verbal and self-directed) with clear group differences between the experimental and comparison groups. Also, the effects of the intervention were generally maintained over time but there were some signs of partial regression (that is, an increase in some measures of aggressive behavior) at the later follow-up measurement point in relation to physical aggression and aggression toward objects or property.

The overall findings are consistent with theoretical models in positive psychology. Specifically, they support both theories put forth by Martin Seligman and Carol D. Ryff. Those theories identify psychological well-being as key factors that can influence adaptive functioning and behavioral regulation. The overall findings also provide empirical support for self-determination theory developed by Edward Deci and Ryan. That theory identifies internal psychological resources (such as self-awareness, emotional regulation, and social connectedness) as important factors for reducing maladaptive behavior.

The findings of this study demonstrate the potential for improving the psychological health and well-being of students, with implications for promoting non-violent behaviors in school settings (especially those schools that are located in war zones or have high levels of stress). Developing programs that support children's ability to express their emotions effectively; develop self-regulatory skills; and enhance social skills may be some ways to promote positive relationships among children which could lead to an overall reduction in aggressive behavior.

Although this study contributes to the field of psychology through identifying new avenues to prevent aggressive behaviors among vulnerable populations such as children exposed to violence, there are several

limitations to this study. The most significant limitation of this study was the relatively small number of participants included in the study and that it took place in one specific country. As a result, future studies need to increase the number of participants involved in the study and gather data from a variety of different countries and cultures. Additionally, it would be beneficial if gender differences were compared. Lastly, follow up studies should extend over longer periods of time than just three years so that researchers can determine the long-term effects of these behavioral interventions.

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