4. Overconfidence and its relationship to the personality type of a sample of anxious teenagers.

5. The effectiveness of a counseling program in reducing emotional bias among a sample of adolescents with attention deficit hyperactivity disorder.

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before and after the program for overconfidence scale.

Results of the fourth hypothesis: There are no statistically significant differences between the average scores of the experimental group in the post and follow-up measurements of the program’s application on the children’s overconfidence scale.

The researcher used Wilcoxon test for the significance of differences between related groups to verify the validity of this hypothesis, as shown in Table (5).

Table (5) Averages and totals of scores, (W) and (Z) values and their significance for the experimental group (n= 10) between the post and follow-up measurements of the program on the children’s overconfidence scale.

<table>
<thead>
<tr>
<th>Measurement</th>
<th>Dimension</th>
<th>Dimensional Measurement</th>
<th>Trace Measurement</th>
<th>Value (W)</th>
<th>Value (Z)</th>
<th>Significance Level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Average Rank</td>
<td>Total Ranks</td>
<td>Average Rank</td>
<td>Total Ranks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emotional Bias</td>
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<td>4.13</td>
<td>16.52</td>
<td>16.52</td>
<td>0.730</td>
</tr>
<tr>
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<td>3.80</td>
<td>19</td>
<td>5.67</td>
<td>17.01</td>
<td>17.01</td>
<td>0.142</td>
</tr>
<tr>
<td>Loss Aversion</td>
<td>4.90</td>
<td>24.50</td>
<td>5.13</td>
<td>20.52</td>
<td>20.52</td>
<td>0.241</td>
</tr>
<tr>
<td>Excessive Impulsiveness</td>
<td>5.40</td>
<td>27</td>
<td>4.50</td>
<td>18</td>
<td>18</td>
<td>0.543</td>
</tr>
<tr>
<td>Total Score</td>
<td>4.75</td>
<td>28.5</td>
<td>5.50</td>
<td>16.50</td>
<td>16.50</td>
<td>0.713</td>
</tr>
</tbody>
</table>

The results of Table (5) showed that there were no statistically significant differences between the average scores of the experimental group of ADHD children in the pre- and post- measurements of the program on the children’s overconfidence scale (emotional bias, overreaction, loss aversion, and excessive impulsivity, and total grade). That ensures the validity of the fourth hypothesis.

This result indicates the effectiveness and sustainability of the program on these children, and that when they possessed the ability to face stressful situations and pressures, take into account the concerns of others, accept gain and loss, as well as realism in judging matters, taking balanced reactions appropriate to the situation, avoiding exaggeration, and practicing positive thinking and self-control when facing challenges and solving them with creativity, confront pressures to overcome emotional bias, aversion to loss, overreactions, and excessive impulsiveness, which contributes to reducing over-confidence, overcoming psychological disturbances and problems, and avoid its impact on their psychological health. It proved to have positive psychological effects on children and their families, enhancing their emotions and be realistic when controlling situations. The researcher presented the program in an easy and simple manner, not complicated, in simple language. Through the program, the researcher provided the children with experiences and skills through activities, workshops and motivational means to enrich the sessions (such as psychodrama- the magician’s shop- drawing- the announcer’s segment- psychological games). The researcher focused on the realistic exercises for the sessions and included behaviors and attitudes for the children and their families so they gained practical experiences and solutions to deal with the different situations of life problems. The researcher also tried to make the homework assignments as easy and accurate. At the same time, contributes to the child’s ability to think outside the box and explore new skills, which supports familiarity and interaction between the researcher and the children.

All these factors contributed to the sustainability of the program after a period of time to reduce overconfidence among ADHD children through training on the elements of overconfidence, as confirmed by (Hui et al., 2019; Erika et al., 2010). As attention and psychological flexibility helps to reduce emotional biases and thus reduce overconfidence.

Through the program’s execution, it was provided that time was appropriate and contributed to achieving its effectiveness.

The researcher presented certificates of appreciation and a gift chosen by the student from the surprise box to each student participating in the sessions for their moral excellence, attendance, and dissemination of good morals within the school with the help of the school principal, which made a positive impact for the students. The researcher ensured the suitability of the tools used in the guidance program.

The researcher also established some extraneous variables that may affect the results of the program, such as age, intelligence, economic, cultural, and social attributes.

All of this is consistent with Beck’s opinion that an individual’s confrontation with stressful life situations depends on his perception of life, his thinking, and his awareness of any stressful event led to a positive decision. (Iman Nabil, 2016).

**Recommendations:**

1. Caring for ADHD children through programs to acquire emotional regulation skills and improve their executive functions.
2. The need to encourage and train ADHD children to make logical decisions, instead of the emotional ones.
3. Encouraging educational curricula and those in charge of the educational process to focus on the emotional side of ADHD children.
4. Enriching educational curricula by including objective issues in taking decisions and the show the danger of emotional bias.
5. Specialists should focus on behavioral therapy when dealing with ADHD children (emotional and social aspects) rather than drug treatment.
6. Preparing preventive programs and training workshops to reduce emotional biases among ADHD children.

**Further Reading:**

1. The effectiveness of a play-based program to reduce overconfidence among a sample of behaviorally and emotionally disturbed children.
2. Emotional bias and its relationship to anxiety among a sample of secondary school students.
3. The effectiveness of a program based on mindfulness in reducing excessive confidence among a sample of adolescents with hyperactivity and attention deficit disorder.
attention and processing of negative or threatening stimuli.

Actually, the researcher provided a realistic example so that the child could obtain sufficient information in realistic rules and guidelines to form his awareness and acquire life skills when facing different situations, which ensures the program’s success in achieving its goals.

Results of the third hypothesis: There are no statistically significant differences between the average scores of the control group of ADHD children in the two measurements before and after the program on the children’s overconfidence scale.

The researcher used Wilcoxon test for the significance of differences between related groups to verify the validity of this hypothesis, as shown in Table (4).

Table (4) Averages And Total Scores, (W And Z) Values And Their Significance Among The Control Group (N= 10) In The Two Measurements Before And After The Program For The Overconfidence Scale For Children

<table>
<thead>
<tr>
<th>Measurement</th>
<th>The Dimension</th>
<th>Pre- Measurement</th>
<th>Dimensional Measurement</th>
<th>Value (W)</th>
<th>Value (Z)</th>
<th>Significance Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional Bias</td>
<td>1.5</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>zero</td>
<td>Non-Functional</td>
</tr>
<tr>
<td>Overreaction</td>
<td>2</td>
<td>2</td>
<td>2.67</td>
<td>8.01</td>
<td>2</td>
<td>1.134</td>
</tr>
<tr>
<td>Loss Aversion</td>
<td>5</td>
<td>5</td>
<td>2.5</td>
<td>10</td>
<td>5</td>
<td>0.707</td>
</tr>
<tr>
<td>Excessive Impulsiveness</td>
<td>3.5</td>
<td>3.5</td>
<td>2.17</td>
<td>6.51</td>
<td>3.5</td>
<td>0.557</td>
</tr>
<tr>
<td>Total Score</td>
<td>5</td>
<td>5</td>
<td>2.5</td>
<td>10</td>
<td>5</td>
<td>0.674</td>
</tr>
</tbody>
</table>

The results in Table (4) showed that there were no statistically significant differences between the average scores of the control group of ADHD children in the two measurements before and after the program on the children’s overconfidence scale (emotional bias, overreaction, loss aversion, and excessive impulsivity). Which ensures the validity of the third hypothesis.

This may be due to the effectiveness of the program on the experimental group rather than the control one, because they were excluded from the activities, workshops, and program sessions of the four components (emotional bias, overreaction, loss aversion, and excessive impulsivity) and that the overconfidence of ADHD children leads to many psychological and behavioral disorders. This is consistent with many previous studies, as there is a positive correlation between emotional bias, stress, and social anxiety disorders, as indicated by a study by (Erika et.al., 2010), as well as a positive correlation between emotional bias and emotional reactivity (Fisheh et al., 2012). The study by Seymour, et al., (2015) which indicated a positive correlation between emotional bias, poor emotional processing, and poor emotional regulation, and a positive correlation as well between overconfidence and problems of aggression and depression (Hoza, et al., 2010, feelings of loneliness, and low self-concept in them) (Capodieci, et. al, 2019); which contributes to the social and emotional problems associated with ADHD (Schulz et al., 2014).

These children experience many emotional problems. They have severe mood swings, so their behavior is unpredictable. Many of them overreact unusually (Wender & Tom, 2017, 28).

The success of the program may be for the techniques and strategies which helped to rebuild knowledge for the children and deal with humility, the ability to balance emotions when facing stressful situations, accept loss, and not overreact, such as modeling, role-playing, psychodrama, relaxation, emotional venting, and positive self-talk and cognitive reconstruction. The control group was excluded from these activities, which indicates that they suffer from emotional problems.

According to Rogers’ theory of self, every individual needs to receive positive consideration, to enhance self-awareness, emotional warmth, and social acceptance, and to have realistic self-concepts (Mohamed Al-Hassan, 2015) that make him avoid bias towards negative matters, obtain social acceptance, form a positive perception and not feeling lonely. This is consistent with the study by (Capodieci, et al., 2019), which indicates overconfidence in ADHD children due to feelings of loneliness and low self-perception.

The program validity may be resulted from the applied method and its suitability to the nature and characteristics of the sample age, feeling of a friendly relationship, cooperation and warmth, personal and social value, and the ability to rebuild their knowledge by replacing negative thoughts with positive ones. They can achieve balance in their lives when experiencing negative and stressful situations and to overcome this negative perspective towards life and people, using logical thinking when making decisions, and balancing fairly between emotion and reason in the fateful choices.

The program is also effective due to its different, organized, and flexible sessions and using counseling strategies as presented in group counseling sessions, which led to the acquisition of positive skills reducing their emotional bias and acquire new caring skills, think rationally, avoid haste, and think about consequences.

In the theory of self-mirror, Cooley believes that an individual's harmony is badly affected when he experiences a negative view of himself and his life, focusing on his weaknesses, failures, and despair. However, when focusing on strengths, he develops a sense of self-acceptance (Mohamed Al-Behairy, 2011).

Therefore, the researcher limited the effectiveness of the program to the experimental group rather than the control one, as the experimental group practiced the activities, skills, instructions, and dramatic scenes that helped to reduce overconfidence.

As the control group didn’t participate in these sessions, skills, activities, workshops and experiences, not applying psychological counseling in different situations, so there is no statistically significant differences between the averages of their scores in both measurements...
The results in Table (3) showed that there were statistically significant differences between the average scores of the experimental group of ADHD children in the two measurements before and after the program for the children’s overconfidence scale (emotional bias, overreaction, loss aversion, and excessive impulsivity, and total grade); as for the pre- measurement, Which ensures the second hypothesis validity.

The reason for this may be the activities, educational stories, and cartoons that were used to reduce overconfidence and its symptoms (emotional bias-overreaction- aversion to loss- excessive impulsivity), whether through the story of the Arrogant Rooster (which tells about arrogance and that overconfidence may lead us to. To lose our lives and reach the wisdom that if you are better than your friends in things, they are better than you in other things), and the story of Thomas the Brave, which tells about the importance of positive speech in our lives in order to get rid of negative thoughts and feelings. The researcher also relied on the use of cartoons, as it is one of the most influential methods for children, it is beloved by them and touches their senses, such as the sense of sight, due to the effects of movement and colors, as well as the characters that attract their attention, including a cartoons made by Karim, Gana, and Rana, and their story with anger which tells about how to control overreactions that lead to reducing excessive confidence in ADHD children. And the story of (Salwa And The Flower Seller) about being calm when faced with angry situations, self- control, balance in the face of things, offering an apology when making a mistake, and refraining from responding. Also there is the story of (Laila and her Colleagues) about the virtue of giving and the necessity of accepting others and avoiding selfishness in order to reduce aversion to loss. Again, the story of Thomas Edison, about accepting failure and challenging it, not despairing and getting frustrated with the first experience. Finally, Art of Decision- Making, about how to make decisions wisely and without fear.

In addition, the researcher applied some dramatic scenes (Wani’s Diaries- Take Care of Zizi- Child of the Ghamam Island Series- Sesame World- Ihab’s Family and Self- Control), which is considered one of the most influential methods that greatly impact children’s awareness, emotions, and thinking, and thus change their actions and behaviors. It is a popular and interesting method. Which was based on characters that help reduce overconfidence, stay away from arrogance, be realistic in dealing with life situations, stay away from overreactions, accept loss, deal calmly when faced with stressful situations, balance, and stay away from excessive impulsiveness without thinking about the consequences, which contributed to reducing overconfidence for ADHD Children.

Through these videos and activities, the researcher focused on providing children with different skills such as (positive and negative thinking activity- emotion recognition activity- emotion control activity).

Atropine test was used to help stimulate the brain, increase concentration, and regulate nervous responses. It is considered as one of the important tools to measure emotional bias.

The researcher also used psychological games (the feelings game- the magician’s shop). Playing helps the child to be free when solving his problems, be responsible for his friends, in addition to fun and enjoyment. (Christine McIntyre, 2008: 7)

The researcher presented some purposeful songs like (Hold on to your dreams- No to anger- I know that I am different (We are capable of being different)), which is consistent with the study of Zhang et.al. (Zhang, etal., 2020), and indicated the effectiveness of games in modifying emotional biases and that by targeting emotional biases, This improves the basic symptoms of irritability and quick anger among these children and thus reduces overconfidence.

The researcher was interested in involving a personality for the session through the various educational elements presented within the educational and family surrounding the child and may have a negative or positive impact on him if they understand the nature of this child through (the school principal- the Arabic language teacher- the physical education teacher- the agriculture teacher- the psychologist-Social worker- peer group- mother).

The researcher also concentrated on performing a continuous, direct evaluation of each session, which enabled the researcher to determine the goal of each activity and if it could limit the related problem, through discussing the stories with the children, having them represent the goals of the sessions, drawing and coloring characters, and using drawing to learn many skills. In addition, the researcher focused on the continued effect of the activity until the next session, especially through homework. It has been proven that recognizing and managing overconfidence and emotional biases can affect our critical thinking ability and making decisions. Being aware of these biases and actively required some perspectives to mitigate their impact and promote more objective decision- making. Emotional biases are commonly shown in disorders such as depression and anxiety. They may show faster

<table>
<thead>
<tr>
<th>Measurement</th>
<th>The Dimension</th>
<th>Pre-Measurement</th>
<th>Dimensional Measurement</th>
<th>Value (W)</th>
<th>Value (Z)</th>
<th>Significance Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional Bias</td>
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<td>Total Ranks</td>
<td>Average Rank</td>
<td>Total Ranks</td>
<td></td>
</tr>
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<td></td>
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<td>0</td>
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<td>0.01</td>
</tr>
<tr>
<td>Overreaction</td>
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<td>Average Rank</td>
<td>Total Ranks</td>
<td>Average Rank</td>
<td>Total Ranks</td>
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<tr>
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<td>zero</td>
<td>0</td>
<td>0</td>
<td>0.01</td>
</tr>
<tr>
<td>Loss Aversion</td>
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<td>Average Rank</td>
<td>Total Ranks</td>
<td>Average Rank</td>
<td>Total Ranks</td>
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<td>0.01</td>
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<tr>
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<td>Total Ranks</td>
<td>Average Rank</td>
<td>Total Ranks</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
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<td>Average Rank</td>
<td>Total Ranks</td>
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<tr>
<td></td>
<td></td>
<td>5.50</td>
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<td>0</td>
<td>2.810</td>
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<td>0</td>
<td>0</td>
<td>0.01</td>
</tr>
</tbody>
</table>

(The Effectiveness Of A Counseling Program ...)
The results of Table (2) indicates statistically significant differences
between the average scores of the experimental and control groups
of ADHD children in the measurement after applying the program on
the children’s overconfidence scale (emotional bias, overreaction, loss
aversion, and excessive impulsiveness. and total score); as for the
control group, Which ensures the validity of the first hypothesis.

The table shows the averages and total score, (U) and (Z) values and their significance between the experimental and control groups after applying the program on the overconfidence scale for children.

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Average Rank</th>
<th>Total Ranks</th>
<th>Average Rank</th>
<th>Total Ranks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional Bias</td>
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<td>15.35</td>
<td>153.5</td>
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<tr>
<td>Overreaction</td>
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<td>56</td>
<td>15.40</td>
<td>154</td>
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<tr>
<td>Loss Aversion</td>
<td>5.50</td>
<td>55</td>
<td>15.50</td>
<td>155</td>
</tr>
<tr>
<td>Excessive Impulsiveness</td>
<td>5.60</td>
<td>56</td>
<td>15.40</td>
<td>154</td>
</tr>
<tr>
<td>Total Score</td>
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<td>55</td>
<td>15.50</td>
<td>155</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Value (U)</th>
<th>Value (Z)</th>
<th>Significance Level</th>
</tr>
</thead>
<tbody>
<tr>
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<td>3.700</td>
<td>0.01</td>
</tr>
<tr>
<td>one</td>
<td>3.724</td>
<td>0.01</td>
</tr>
<tr>
<td>zero</td>
<td>3.810</td>
<td>0.01</td>
</tr>
<tr>
<td>one</td>
<td>3.729</td>
<td>0.01</td>
</tr>
<tr>
<td>zero</td>
<td>3.794</td>
<td>0.01</td>
</tr>
</tbody>
</table>

The results of Table (2) indicates statistically significant differences
between the average scores of the experimental and control groups
of ADHD children in the measurement after applying the program on the
children’s overconfidence scale (emotional bias, overreaction, loss
aversion, and excessive impulsiveness. and total score); as for the
control group, Which ensures the validity of the first hypothesis.

The difference between the two groups may be resulted from the
activities that were used to reduce overconfidence and its
consequences (emotional bias- exaggerated reaction- loss aversion-
excessive impulsivity) in ADHD children, which led to the difference
between the scores of the two groups on the confidence scale, as the
program’s sessions and various activities were only applied to the
experimental group, while the control group was excluded.

This indicates the effectiveness of the program in reducing
overconfidence among these children. This may happen due to the
activities, educational stories, and cartoon films that were used to
reduce overconfidence and its components. The researcher focused on
the activities that could provide children with joy and happiness and to
motivate them, so they continue in the sessions and encourage
achievement. The researcher also provided reinforcements to the
children to support their positive behaviors, they were (candy and toys,
and also in some moral reinforcements such as encouraging words of
praise and thanks. They were actually useful in supporting behavior,
joy and pleasure, improved the child’s self- confidence, avoided
overconfidence and also motivates them to complete the sessions.

The success of the program is due to the diversity of activities among
group, narrative, artistic and movement activities, and its effective role
in reducing overconfidence and its symptoms (emotional bias-
overreaction- loss aversion- excessive impulsivity). The program
achieved its purposes as it was based on integrative counseling,
cognitive- behavioral therapy, rational- emotional therapy, selective
consulting, and preventive orientation. It could help the individual
change his ways of thinking and achieving his emotional balance so he
can adopt positive behaviors in dealing with life crises. The flexibility
of the program and the connection of its attitudes and activities to the
children’s lives provided the opportunity for them to express their
feelings without fear, anxiety, or despair, and helping them to be able
to change their negative views, the ability to regulate emotions, and
deal realistically with different life situations, and to give them new
traits such as humility, calmness, self- control, the ability to make
decisions, self- awareness, establishing serious relationships with
others, and understanding the feelings of others.

In addition, the program used different techniques in the session, such
as modeling, relaxation, storytelling, emotional venting, discussion,
cognitive restructuring, positive self- talk, and self- awareness.

Homework contributes to many psychological treatments. It has a
significant role in increasing the effectiveness of treatment and
improving awareness of automatic thoughts and their relationship to
emotional reactions. It helps the individual identify his dysfunctional
and illogical thoughts and try to modify them. They are an integral
part of the treatment or counseling process. Encouragement through
providing support to them also contributed greatly to overcoming the
problem of emotional bias and overreactions, as well as loss aversion
and excessive impulsivity, which leads to emotional imbalance and
reduces overconfidence.

The researcher concentrated on the diversity of the child’s roles
according the activity. Sometimes by helping him organize the activity
room and arranging the tools, materials, or may be a primary assistant
by hearing a story and say it again. After that, the researcher did not
allow the child to have a passive role by listening to the session’s
procedures or the story only by the researcher, but he was very
interactive in the sessions, whether with psychodrama, discussion,
role- playing, or drawing tasks asked by the researcher.

The small sample size helped the children to practice the program’s
positions and activities, as all children had the opportunity to
participate with each other and to participate in the activities they were
asked to perform.

According to the aforementioned, involving the experimental group in
different activities of the program, while excluded the control group,
led to improvement in the scores of experimental group regarding
overconfidence scale, with a lower score in overconfidence, while the
control group remained with the same score.

Results of the second hypothesis: There are statistically significant
differences between the average scores of the experimental group of
ADHD children in the two measurements before and after the
program on the children’s overconfidence scale, as for the pre-
measurement.

The researcher calculated the Wilcoxon test for the significance of
differences between related groups to verify the hypothesis validity,
results are shown in Table (3).

(The Effectiveness Of A Counseling Program ...)

Childhood Studies Apr.2024
Raven Color Progressive Matrices Test: It was implemented by Raven and modified by (Imad Hassan, 2020). It is considered one of the non-verbal tests with no cultural restrictions to measure intelligence level for children from 5 years until old age. It is merely a set of designs and consists of 3 sections of varying difficulty, which are (A, AB, B), each section includes 12 items, and the test includes 36 matrices or a design with one of its parts missing. The participant should select the missing part from among 6 given alternatives, and there is only one correct alternative, then a score is given. One for the correct answer, and zero for the incorrect one, and total score is 36 points. The reliability of this test on the Egyptian samples was calculated using the Kuder-Richardson equation with the value 0.85. As for its reliability, the correlation coefficients ranged between the test and some subscales of the Wechsler test. The Porteus maze and the Segan interface ranged between (0.28- 0.52). Correlation coefficients were calculated between the subsections of the scale and ranged between (0.45- 0.73), and correlation coefficients were calculated between the subsections of the scale and the total score and ranged between (0.87- 0.93), all of which are statistically significant at 0.01 level.

Measure of economic, social and cultural level: It was conducted by Muhammad Saafan and Duaa Khattab (2016). It consists of 26 items to estimate the economic, social, and cultural level. The research applied this measure to exclude people whose economic, social, and cultural level is below the normal average, and to calculate the parity between male and female children with ADHD at the economic, social and cultural level. Muhammad Saafan and Doaa Khattab calculated the reliability using Cronbach’s alpha methods, and the coefficients ranged between (0.61/ 0.85). The split- half reliability coefficients after correcting the length of the scale with the Spearman-Brown equation ranged between (0.63/ 0.86). As for validity, they calculated the internal consistency and its coefficients were (0.41/ 0.82).

ADHD Test: It was conducted by Gilliam and Arabized by Abdel Raqeeb Al-Beheiri for the Egyptian Research (2011). It consists of three dimensions (hyperactivity, and impulsivity). The stability of the test was calculated by re-administering the test, the value of the coefficient 0.95, the value of the alpha coefficient 0.75. While the validity of the test was estimated by calculating correlation validity with the Conners Teacher Rating Scale for assessing the behavior of children and adolescents in its short and long forms (0.29/ 0.28), respectively (Abdul Raqeeb Al-Buhairi, 2011) and the Conners Parents’ Rating Scale in its short and long forms (0.93/ 0.48), and correlation validity was calculated with the children’s attention and compatibility scale (Abdul Raqeeb Al-Buhairi and Afaf Ajan, 2004) in both school and home.

A guidance program to reduce overconfidence among children with hyperactivity and attention deficit (prepared by: the researcher): With the aim of reducing overconfidence among a sample of ADHD children (experimental group), it is a set of procedures, organized steps, and psychological games based on the scientific principles, techniques and theories of counseling, and provides counseling services to the experimental group of ADHD children in accordance with the characteristics of the age from (11- 12) years through counseling sessions within a specific time in a safe relationship. It enables the participants to share in order to reduce the symptoms of overconfidence and consequently reduce mood swings and impulsivity.

Statistical Methods:
In order to reach the objectives of the research and calculate the psychometric efficiency of the overconfidence Scale for ADHD children, and to verify the validity of hypotheses and study sample, the researcher used the following statistical methods: Mann- Whitney (U) test to calculate the differences between independent groups, to verify the validity of the first hypothesis, Wilcoxon test to calculate the differences between related groups, to verify the validity of the second, third, and fourth hypotheses, Averages, Standard Deviation, Parametric t- test to calculate the differences between independent groups, Cronbach’s Alpha, and Split-Half Method.

Results of the study:
Results of the first hypothesis: There are statistically significant differences between the average scores of the experimental and control groups of ADHD children after applying the program on their overconfidence scale, as for the control group. The researcher calculated the Mann- Whitney U test for the significance of differences between independent groups to verify the validity of the hypothesis; results are displayed in Table (2).
indicator of positive imaginary bias on their social skills. However, this phenomenon did not give them a higher self-concept, which was the same problem to children with poor social skills, while it was lower in ADHD children, and they had a high feeling of loneliness.

**Commentary On Literature Review:**

1. The lack of studies on overconfidence among ADHD children in the Arab community- however the foreign community focused on this discipline due to its negative impact on the mental health of ADHD children. In addition, there are many studies that recommended conducting more studies on overconfidence.


3. The study by (Capodiecital, 2019) also indicated that there is a significant relationship between positive delusional bias (overconfidence) and ADHD, and a positive correlation between positive delusional bias, increased feelings of loneliness, and poor social skills.

4. The positive correlation between overconfidence (positive illusion bias), aggression, depression, stubbornness, and poor recognition of emotions (Ohan & Johnston, 2002; Scholtens, et. al., 2012; Hoza, et. al, 2010; Capodiecital, 2019; Basile, 2016).

**Hypotheses of the Research:**

In accordance with the studies mentioned above and the theoretical background, the researcher concluded her hypotheses as follows:

1. There are statistically significant differences between the average ranks of the scores of the experimental and control groups of ADHD children in the post-program measurement of the overconfidence scale for children, as for the control group.

2. There are statistically significant differences between the average ranks of the scores of the experimental group of ADHD children in the two measurements- before and after the program on the children’s overconfidence scale- as for the pre-measurement.

3. There are no statistically significant differences between the average scores of the control group of ADHD children in the two measurements before and after the program on the children’s overconfidence scale.

4. There are no statistically significant differences between the average ranks of the scores of the experimental group of children with attention deficit hyperactivity disorder in the program’s post and follow-up measurements on the children’s overconfidence scale.

**Methodology& Procedures**

**Methodology:**

In this research, the researcher applied the experimental method and experimental design with experimental and control groups and pre-, post- and follow-up measurements.

**Sample of the study:**

The research sample consisted of (n= 20) children, divided equally and randomly into two groups (n= 10) children as an experimental group (n= 5) males and (n= 5) females and the other group (n= 10) children as a control group, (n= 5) males and (n= 5) females. They were selected intentionally as ADHD children.

To ensure the equivalence between the experimental and control groups, the researcher calculated the equivalence between the two groups regarding their intelligence, age, degree of ADHD, economic, social and cultural level, and the pre-measurement of overconfidence by calculating the non-parametric Mann- Whitney U test coefficient to indicate the differences between the independent groups, as shown in Table 1.

**Tools of The Research:**

In order to reach the objectives of the study and verify the validity of its hypotheses, the researcher used the following tools:

- List of primary data (prepared by the Researcher): It was prepared by the researcher for the purpose of collecting information about the child, it included (the child’s name, gender, age, grade at school, their problems, and telephone number, …), and it was applied to both the child and his guardian. The list was peer-reviewed by the supervisors.

- Overconfidence scale for children (prepared by the Researcher): It consists of 32 items, stability of the scale was calculated using two split-half method after modifying the length of the scale and Cronbach’s alpha coefficient, and the validity of discrimination between the different groups was calculated between the two samples of ADHD children and normal children. The average was 72.801 for hyperactivity children and the standard deviation was 4.085, the average for normal children was 46.971 and standard deviation 4.225.
a. Reducing excessive confidence may contribute to alleviating the symptoms of hyperactivity, attention deficit, and impulsivity in these children.

b. Overconfidence can be included in future theoretical models for children with Attention Deficit Hyperactivity Disorder.

c. The research presents a new tool to measure overconfidence in children with Attention Deficit Hyperactivity Disorder.

Procedural Definitions of the study:

Program: It is a set of procedures, organized steps, and psychological games constituted according to scientific foundations based on the principles, techniques, and theories of counseling, and providing counseling services to the experimental group of ADHA children at the age of (11-12) years through counseling sessions during a specific time based on a safe mentoring relationship that allows members to participate with the aim of reducing symptoms of overconfidence and thus reducing mood swings and impulsivity (prepared by the researcher).

Overconfidence: The (11-12) year old child with Attention Deficit Hyperactivity Disorder (ADHD) exaggerates his own abilities, skills, and talents, has an excessive sense of self-worth, and thinks he is better than he actually is.

Children with Attention Deficit Hyperactivity Disorder: This is a child aged between (11-12) years who suffers from a neurodevelopmental condition characterized by certain differences in brain activities that make him suffer from difficulty in concentration and controlling his impulsive behaviors, resulting in excessive social, psychological, cognitive and emotional problems (prepared by the researcher).

Literature Review:

1. The study of Ohan& Johnston's (2002) aimed to test self-protection hypothesis that male children with Attention Deficit Hyperactivity Disorder (ADHD) overestimate their performance to protect a positive self-image. The study investigated the effect of performance feedback on self-perceptions of social and academic performance of 45 ADHD children and 43 non ADHD children aged between (7-12) years. The study used tools such as Self-Esteem Scale, Positive Illusory Bias and the results of the study indicate that male children with ADHD can provide more realistic self-evaluations when their self-image is enhanced. The self-protection hypothesis could explain the overestimation of social performance provided by male children with ADHD, but there are other factors that may better explain the overestimation of their academic performance and leads to overconfidence.

2. Hoza et.al study (2010) aimed to determine the changes in the degree of positive illusory bias (overconfidence) in self-perceptions of ADHD children. The dynamic correlation between biased self-perceptions and dimensional indicators of symptoms of depression and aggression was considered between (8-13) years old, they sample was (797) children. The study used tools such as a diagnostic interview for children, measurement of positive delusional bias, and measurement of aggression and depression. The results of the study indicated non ADHD children showed less bias than ADHD children, and THAT ADHD children showed high levels of self-perception. The study also revealed a bilateral relationship between biases, aggression, and depressive symptoms, which predicts an increase in their overconfidence.

3. The study by Scholtens et.al (2012) aimed to investigate the impact of symptoms of Attention Deficit Hyperactivity Disorder, oppositional defiant disorder (ODD), and cognitive functions on social acceptance and positive illusory bias (overconfidence) among children. The study sample consisted of 86 children 49 girls aged between (7-13) years old; they were selected to reflect a wide range of ADHD symptoms. Parents and teachers reported symptoms of ADHD, oppositional defiant disorder (ODD), and social acceptance. Children reported social acceptance and were given tasks measuring working memory, inhibition, and time variability. The degree of discrepancy between children's and adults' reports of social acceptance was used as a measure of positive illusory bias. The results of the study were that inattention independently explains variation in social acceptance. Cognitive factors (reaction time, inhibition, and working memory) were related to social acceptance and positive illusory bias, but not beyond the symptoms of ADHD and oppositional defiant disorder ODD, and that there is a relationship between positive delusional bias and ADHD.

4. Basile's study (2016) aimed to evaluate performance calibration among ADHD children and a community sample of normal children. Through the fields of general knowledge, feelings, and the valence of social situations using several indicators, such as the bias index, which is a measure of overconfidence. The study sample was 81 children between the ages of (8-12) years, 39 of them were ADHD children and 42 were non ADHD children, the results of the study showed a difference in performance calibration across facial emotion recognition and social emotion interpretation. In addition, and the clinical ADHD group was over confident. The main effect for emotion indicated that the most unpleasant emotion was sadness, followed by anger, fear, neutral, and happiness and their inability to recognize their emotions, and high overconfidence.

5. The study by Capodieciet.al (2019) aimed to find out the effect of positive illusory bias (overconfidence) on the self-concept and feeling of loneliness among children with symptoms of attention deficit hyperactivity disorder? The study sample was (196) children, and the ages of the sample ranged between (7-11) years. The study tools were the social measurement questionnaire, the teacher report scale (SDAI), the teacher report scale for comorbidity (COM), and the multidimensional self-concept scale (MSC). The results of the study indicated a high level of positive imaginary bias among ADHD children and low level of self-esteem. There is also a significant
**Introduction:**

Attention Deficit Hyperactivity Disorder (ADHD) causes emotional, behavioral problems in addition to communications difficulties. Children with this problem experience an abnormal and negative behavior, especially when emotionally compared to others. Actually, emotion is a positive feeling in humans, but when it takes another shape rather than the normal, here is the emotional bias and leads to unacceptable behavior, this is the negative aspect of emotion. It is not possible to separate a person’s mind from his emotions, mood, and psychological state of pessimism, optimism, impulsiveness, overconfidence, and exaggerated reactions, all of which affect the human decisions.

As overconfidence has a great impact on the psychological health of children with Attention Deficit Hyperactivity Disorder and on their relationships with others, especially their families, this study is conducted to investigate the effectiveness of a Counseling Program in reducing overconfidence among a sample of children with Attention Deficit Hyperactivity Disorder.

**Problem of the study:**

Attention Deficit Hyperactivity Disorder is one of the most common disorders among children, with prevalence rates around the world ranging from (3 to 7%) of school-age children (Morii et.al., 2012). Researchers believe that about 20-30% of ADHD children suffer from anxiety or stress disorder, and that about 10-40% of these individuals suffer from mood and emotional disorders. In addition, several studies stated that ADHD children suffer from introversion, passivity, insecurity, and that their social responses are not compatible with the event. They fail to express their own emotions, magnify their self-image, and have high levels overconfidence (Magdy El-Desouki, 2006: 50).

The study conducted by (Al- Hammori, 2022) showed a relationship between ADHD and overconfidence, which provides an evidence of positive illusory bias. It has been observed that children with ADHD may show overconfidence in their abilities in multiple areas and skills, which is known as positive delusion bias. Children with ADHD may have a magnified self-perception of their abilities, and overly optimistic expectations about performing tasks and post-performance self-evaluations that match their peers, despite the low effort and persistence when performing the task (Owens et al., 2007). (Emeh, et.al., 2015) also found that when overconfidence was compared to competence reports completed by adults, positive illusory bias extended in self-report measures of both implicit and explicit beliefs about competence in children with ADHD. The study of (Hoza, et.al., 2001) showed that overconfidence may also appear in self-perceived competence in daily activities (such as concentration, dressing, and playing with others) and in academic and emotional tasks. Owens & Hoza (2003) found that children with a combined form of ADHD were more likely to overestimate their competence with respect to academic achievement than their peers with a simple symptom of ADHD and their peers in the control group. In addition, Hoza et.al. (2001) found that people with ADHD may make overly optimistic predictions about their performance on tasks, as children with ADHD were more likely than their peers to exert less effort when performing tasks, they were founded to make fewer tasks, and giving up before completing tasks, even when they were enjoyed with the tasks. In this way, overconfidence leads to poor task performance and low frustration tolerance.

As the mentioned studies (Ohan & Johnston, 2002; Scholtens, et al., 2012; Hoza, et al., 2010; Capodieci, 2019; Basile, 2016) agree on the high level of overconfidence in children with Attention Deficit Hyperactivity Disorder and the possibility of modifying and reducing this problem. As there were no studies that discussed the emotional bias among children with Attention Deficit Hyperactivity Disorder in the Arab and foreign environments according to the researcher’s work and the recommendations presented by foreign studies on the necessity of preparing future research on overconfidence and identifying the best tools for detecting such biases.

The statement of the problem raises the following questions: Are there differences between the average scores of the experimental and control groups of ADHD children in the post-program measurement on the excessive confidence scale for children?

1. Are there differences between the average scores of the experimental group of ADHD children in the two measurements before and after the program on the children’s overconfidence scale?
2. Are there differences between the average scores of the control group of ADHD children in the two measurements before and after the program on the children’s overconfidence scale?
3. Are there differences between the average scores of the experimental group of ADHD children in the program’s post and follow-up measurements on the children’s overconfidence scale?

**Objectives of the study:**

This Study Aims To:

1. Investigating the effectiveness of a counseling program in reducing excessive confidence among a sample of children with Attention Deficit Hyperactivity Disorder.
2. Investigating the continuity of the program’s effect in reducing overconfidence among a sample of children with Attention Deficit Hyperactivity Disorder through follow-up measurement.

**Significance of the study:**

1. Theoretical Significance:
   a. The lack of studies that discussed reducing excessive confidence in children with Attention Deficit Hyperactivity Disorder according to the researcher’s work in both Arab and foreign environments.
   b. The study may provide us with some information about how to reduce excessive confidence in children with Attention Deficit Hyperactivity Disorder.
   c. The study may help in understanding the emotional disorder in children with Attention Deficit Hyperactivity Disorder.

2. Practical Significance:
The Effectiveness of A Counseling Program in Reducing Over Confidence in
A Sample of Children with Attention Deficit and Hyperactivity Disorder: ADHD

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Summary
This study aimed to reduce overconfidence among a sample of ADHD children. The study sample consisted of 20 male and female ADHD children, divided equally into two groups, 10 for the experimental group and 10 for the control group. Their ages were between (11-12) years. The study used the experimental method including the experimental and control groups, the pre-, post-, and follow-up measurement. To ensure the parity between the two groups, the researcher calculated parity in accordance with their intelligence, age, economic, cultural, and social level, and the degree of hyperactivity. And the lack of attention and the pre-measurement of overconfidence by calculating the non-parametric Mann-Whitney U test to indicate differences between independent groups. The study relied on tools that were the list of primary data (prepared by the researcher), the measure of overconfidence for children with hyperactivity and attention deficit (prepared by the researcher), and the confidence-reducing program. Hyperactivity disorder in children with attention deficit hyperactivity disorder (prepared by the researcher), the Raven’s Colored Progressive Matrices test (prepared by Imad Hassan, 2020), the measure of the economic, social, and cultural level (prepared by Muhammad Saafan and Duaa Khattab, 2016), and ADHD Test (Prepared by Abd Al Raheeb Al-Behairy, 2011). To achieve the objectives of the study, calculate the psychometric efficiency of the overconfidence scale, and verify the validity of the study hypotheses and the study sample, the researcher used the following statistical methods: Mann-Whitney U test to indicate differences between independent groups, and Wilcoxon test to measure differences between the related groups, means and standard deviation, parametric t-test for the significance of the differences between the independent groups, the Cronbach’s Alpha, and Split- Half Method. The results of the study indicated the effectiveness of the counseling program in reducing overconfidence (emotional bias - loss aversion - overreaction - excessive impulsivity) among the study sample of ADHD children (the experimental group).

The Effectiveness Of A Counseling Program ...