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PREFACE

May peace be upon you.
Our gratitude to Allah SWT, for His grace and mercy.

Welcome to International Conference on Community Psychology, Humanization and Religio-Culture (ICCPHR) 2019. It is a great honor to host you all to this international event. Faculty of Psychology is the host of the 2018 of University of Ahmad Dahlan's (UAD) 58th anniversary, and this international conference is the last event of the serial activities in this celebration.

Apart from the annual tradition, this conference is part of the long journey of Faculty of Psychology of UAD in finding its "ideological color" within the field of existing psychology around the world, particularly psychology in Indonesia. As we all know the well known term of "psychology" comes from the tradition of north western, white, industrial countries' perspective. Starting from that awareness, we struggle to find the most appropriate color of "psychology" that grow up from the original setting of culture, norms, beliefs of the people of Javanesse Indonesia. By inviting colleagues from southern countries that already found and develop their own color of psychology that answer the socieatal problem in respective countries, it is hoped that our Psychology will learn and establish its own color, and will steadily to positioning themselves in the field of (Javanese, Moslem) Indonesia Community Psychology. And, we want that all of the particpants and atendees to be part of this process. We hope that the sessions that we provide in several sessions during this two days conference will be a fruitfull knowledge sharing for all of the participants and atendees.

In this occasion, we want to address our appreciation for to our co-host institution, University of South Africa (UNISA) lead by Professor Mohamed Seedat, with his group of researchers of South Africa Medical Research Council (SAMRC), for his insightfull and compassionate guidance to us. Thank you for the mutual collaboration since 2017.

We also want to thank to our international speakers: Professor Husein Bulhan (Frantz Fanon University, Somaliland), Dr. Leigh Coombes (Massey University, New Zealand), Professor Mohamed Seedat, Professor Shahnaaz Sufla, Dr. Naiema Taliep, and Dr. Samed Bulbulia (South Africa Medical Research Council). And, special thanks to our dear colleague Dr. Herlina Siwi Widiana (University of Ahmad Dahlan, Yogyakarta).

Our next big thank you addressed the organizing commitee, coordinated by Ufi Fatuhrahmah, that already hardly working to oraganize all of this to be happened beautifully.

Finally, we thanks to all parteicipants who already presenting their works at this conference. Your knowledge sharing was so invaluable and contribute to the knowledge building of the Indonesia color on Community Psychology.

June, 2019
Dean,

Elli Nur Hayati, M.P.H., Psi., Ph.D

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CULTURAL APPROPRIATE DEPRESSION SCREENING TOOL: DO WE NEED IT ?

Herlina Siwi Widiana
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Depression is a mood disorder that is second prevalent compared to other mental health problems (Kessler et al., 2009; Steel et al., 2014). In 2004, it was the third leading cause in the global burden of disease after lower respiratory infections and diarrheal disease; and by 2030, it is estimated that it will be ranked first (WHO, 2011). In Indonesia, the chairman of Indonesian Psychiatric Association, Eka Viora reported 3.7% of the total population of the country - approximately 9 million people are suffering from depression at any time.[1]

Depression is the leading cause of illness and disabilities worldwide (Gelenberg, 2010; WHO, 2017), and is characterized by such feelings as sadness and difficulty in concentration as core symptoms (Cabelo et al., 2012). Indonesia ranks fourth in the world after India, China and the US on disability adjusted life years (DALYs) because of depression[2]. The DALYs due to depression increased between 1990 and 2010 from 2.3% to 3.2% respectively (Mahendradhata et al., 2017).

Depression may impact on people in relation to their work, their academic performance, relationships, involvement in social activities, home management and ultimately, their quality of life (Fried & Nesse, 2014; Hysenbegasi, Hass & Rowland, 2005; Isacson, Bingefors & von Knorring, 2005; Lam et al., 2012; Roh, Jeon, Kim, Han, & Hahm, 2010; Tse & Bond, 2004; Wang & Gorenstein, 2014).

Recently researchers have suggested variation in the presentation of depression across cultures, and so the value of using culturally appropriate depression assessment tools (Alang, 2016; Brintnell, Sommer, Kuncoro, Setiawan, & Bailey, 2013; Waite, 2006). Changes in temperament, altered cognitions, avoidance and dissociative behaviours, and somatic complaints, have all been described as typical of depression among Afghan refugees in the US (Alemi et al., 2017). For example, somatic complaints including "nerves," unexplainable bodily pain, and lack of energy have also been reported by people with depression in Denmark (Buus, Johannessen, & Stage, 2012). Pain, including headache and musculoskeletal pain, has been reported as prevalent among Turkish women in Iran (Dejman et al., 2011).

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[1] Suryani, A. S., (2017). 9 Million Indonesians suffer from Depression: Report. Tempo. https://en.tempo.co/read/news/2017/05/21/240877277/9-Million-Indoensians-Suffer-from-Depression-Report accessed 1 November 2017.

[2] McPhillips, D. (2016). U.S. Among Most Depressed Countries in the World. U.S.News. https://www.usnews.com/news/best-countries/articles/2016-09-14/the-10-most-depressed-countries accessed 1 November 2017.

Cross cultural & culturally specific tools

Considering the impact of culture in mental health, there are two approaches in developing a mental health assessment. The first is by establishing the cross-cultural validity of western tools, the second by developing culturally specific tools (Miller et al., 2006). Western depression tools studied cross culturally and used in research and clinical practice, in Indonesia, are the Beck Depression Inventory (BDI) II (Beck, Steer, & Brown, 1996), the Center of Epidemiologic Studies Depression Scale (CES-D) (Radloff, 1977), and the Hamilton Depression Rating Scale (HDRS) (Hamilton, 1960). While these tools are used in clinical practice and research in Indonesia, there are limitations in the assessment process.

The Beck Depression Inventory (BDI) consisting of 21 items was developed in 1961 in the US with twice the number of White patients as Black patients (Beck, Ward, Mendelson, Mock & Erbauck, 1961). The Beck Depression Inventory (BDI) was revised into the BDI II at 1996 to align with the criteria of major depression disorder in the DSM IV (Beck et al., 1996). Cross-cultural studies show that BDI II has good construct validity for measuring depression in many countries (Al-Turkait & Ohaeri, 2012; Joe, Woolley, Brown, Ghahramanlou-Holloway, & Beck, 2008; Kapci, Uslu, Turkcapar, & Karaoglan, 2008; Kojima et al., 2002). This includes Indonesia, where BDI II was reported as having good construct validity, good reliability, and discriminative power between general populations, depressed patients, and coronary heart disease patients (Ginting, Naring, van der Veld, Srisayekti, & Becker, 2013). However, some items in the Indonesian BDI II – those that measure loss of pleasure, loss of interest, indecisiveness, and tiredness or fatigue – had difficulty in translation, resulting in sentences that were longer than in the original BDI II. There were also limitations in emotional terms or words, resulting in the need for lengthy explanations to explain the meaning of items (Ginting et al., 2013). This limitation of the use and range of emotion words is a feature whenever direct translation is required.

The Center for Epidemiologic Studies Depression Scale (CES-D) was developed in 1977 and consists of 20 items with good validity and reliability (Radloff, 1977). Studies have supported the use of CES-D cross culturally (Crockett, Randall, Shen, Russell, & Driscoll, 2005; McCallum, Mackinnon, Simons, & Simons, 1995; O'Rourke, 2003; Pretorius, 1991). However, research results show that different factor structures exist in different cultural contexts, indicating that symptoms of depression may present differently across cultures (Demirchyan, Petrosyan, & Thompson, 2011; Kim, DeCoster, Huang, & Chiriboga, 2011; Lee et al., 2011; Losada et al., 2012; Rivera-Medina, Caraballo, Rodriguez-Cordero, Bernal, & Davila-Marrero, 2010). A study among people from three different ethnic backgrounds – White (European), Black (African Americans) and Mexican Americans – found the use of CES-D to result in response bias, with Mexican Americans more likely to endorse more items than White or Black Americans (Kim, Chiriboga, & Jang, 2009). This suggesting that the CES-D items functioned differently among these ethnicities. CES-D was used in several studies in Indonesia (Lu, 2010; Seyle, Widyatmoko, & Silver, 2013; Tampubolon & Hanandita, 2014). A brief ethnographic study, involving interviewing key informants, was undertaken to confirm the appropriateness of the CES-D to measure distress among Javanese (Seyle et al., 2013). However, again there was a problem for administration of item "*I could not get going,*" which was literally translated to *merasa sulit memulai hari,* even though Javanese have a specific term for this condition, *aras-arasen* or

memeng. This indicates a need exists for a comprehensive yet parsimonious measure that captures the nuances of terms used by individuals suffering depression. A more evaluate approach is required to ensure an appropriate tool is available, one which encapsulates culturally appropriate items with reference to local idioms and presentations, rather than adjusting existing instruments.

The Hamilton Depression Rating Scale (HDRS) was developed by Hamilton in 1960 in the UK, with a clinical sample of 49 men diagnosed with depression (Hamilton, 1960). HDRS consists of 21 items, but four items – diurnal variation, depersonalization, obsessional behaviour, and paranoia – are not included in computing the total score (Fava, Kellner, Munari, & Pavan, 1982). A meta-analysis shows HDRS is a reliable measurement of depression with alpha coefficient was .789 and test retest reliability .65-.98 (Trajković et al., 2011). However, a study among psychiatric residents in Indonesia found that training was needed before administration of the HDRS when diagnosing patients, and three items, namely depressed mood, hypochondria and insight, show persistent group bias, indicating low cultural validity in these items within the Indonesian context (Istriana et al., 2013).

Even though universality in symptoms of depression have been found, some cultural symptoms of depression have also been identified, indicating that using western screening tools cross-culturally may not be especially sensitive in evaluating depression (Sweetland, Belkin, & Verdeli, 2014). Considering the variation in expressions of depression, a number of scholars have argued the value of an appropriate local measure (Alang, 2016; Brintnell et al., 2013; Waite, 2006). Assessment tools need to accommodate cultural variation in the presentation of depression. Local idioms of depression need to be translated and included in standard questionnaires (Kleinman, 1987) to correct for possible under-diagnosis. All manifestations of depression need to be identified, otherwise prevalence may be underreported when the concepts and phrases in the assessment tools do not reflect the cultural concepts of the respondent around the disorder (Demyttenaere et al., 2004).

Recently, researchers have paid greater attention to cultural variation, resulting in the development of culturally appropriate assessments (Kaiser, Kohrt, Keys, Khoury, & Brewster, 2013; Masse et al., 1998; Miller et al., 2006; Rasmussen, Katoni, Keller, & Wilkinson, 2011; Thomas, Cairney, Gunthorpe, Paradies, & Sayers, 2010). For example, Wong and colleagues (2012) developed a Chinese American Depression Scale (CADS) by combining an emic approach, interviewing clinicians and patients, with an item response analysis, to construct the scale. Interviews were conducted with 34 Chinese patients with depression and 29 clinicians to gain insight into cultural manifestations of depression among Chinese American immigrants, and based on these results, a culturally sensitive depression assessment was developed. The final brief scale included nine items, of which four items coincided with major depressive symptoms in the DSM IV, while the others were idiomatic expressions and culturally based concepts (Wong, Wu, Guo, Lam, & Snowden, 2012).

Karasz and colleagues (2013) developed a South Asian Tension Scale for Bangladeshi immigrant women in the Bronx, New York, by using a participatory dialogue method through a partnership between researchers, clinicians and community members. Sixteen women from the community were recruited as partners to the researchers in an outreach meeting. These women discussed a common mental disorder (CMD), focusing on their experiences of emotional distress, its social context, its antecedents and potential syndromes. This resulted in "tension" as a syndrome to

describe their emotional distress. Tension consists of emotional symptoms associated with the western concept of CMD; physical symptoms include somatic expressions and culture-specific symptoms. A South Asia Tension Scale was developed based on the results from discussions, consisting of 24 items that described emotional, physical, and culture-specific symptoms; the scale had excellent psychometric properties (Karasz, Patel, Kabita, & Shimu, 2013).

Two approaches in developing a new scale

Generally, there are two approaches when developing a new scale: "top down" and "bottom up." One psychological construct can be measured through a tool developed by either approach. For example, in assessing personality based on the five factor model of personality theory,[3] instruments have been developed through both approaches (Widiger, 2017). The top down approach is similar to a theoretical-rational or deductive approach to develop an instrument (Achenbach, Dumenci, & Rescorla, 2003), whereby the construct to be measured is conceptualized firstly, and item pools are generated from extant research; item selection and psychometric evaluation are then undertaken (Clark & Watson, 1995). Using components of the DSM to develop an assessment tool is an example of a top down approach (McConaughy, 2001). A bottom up approach is empirically based, and starts with the collection of data on particular behaviour (McConaughy, 2001). This approach is inductive (Achenbach et al., 2003). These different approaches to developing a new scale have been applied in previous research on culturally appropriate tools.

Stages in developing a new culturally mental health instrument

Basically, in developing a new culturally appropriate mental health instrument, two main stages are applied: deriving the items and validating the new instrument. Most studies combined a qualitative approach in deriving items and quantitative analysis in the validation stage (69.70%). Although only four articles directly stated the use of mixed methods (e.g., Miller et al., 2006; Mutumba et al., 2015; Praditsathaporn et al., 2011; Wong et al., 2012), the other articles described a qualitative approach used to derive items and quantitative analysis of the newly developed tool; hence the methods were used in sequence rather than "mixed" with data interacting. In the qualitative stage, data were gathered mainly through interviews and focus group discussions, while in the quantitative stage, psychometric properties of the tool were analysed with particular attention to reliability and validity.

In deriving items, researchers adopted different approaches. The first group of articles relied on the experience of patients (21.21%). These studies drew on Kleinman's (1980) explanatory model of illness (EMs), both of patients and practitioners, to provide explanations of the aetiology of illness and its treatments. In these articles, the experiences were drawn from interviews and focus group discussions with the patients. The second group of articles depended on the opinions of lay people or experts (45.45%). This approach also referred to Kleinman's explanatory model of illness. Even though the explanations from lay people or experts might be different to the explanations of people with lived experiences of depression (Johnson et al., 2017), these two groups of articles used a bottom up approach in developing culturally

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[3] Neuroticism, extraversion, openness, agreeableness and conscientiousness are factor of personality, based on five factor model of personality theory (Widiger, 2017).

appropriate tools. The third group selected items from previous standard assessment tools or from a literature review, with judgement from experts on those items that were relevant with specific populations (27.27%). This group of authors aligned with Kleinman's (1987) suggestion to add local idioms of depression to standard measurement tools. In summary, in developing a culturally appropriate tool, some researchers used a top down approach to generate items based on the published literature, by involving expert panels to ensure the items were appropriate for the target population.

In validating a new scale, psychometric properties including factor structure, reliability, and validity were reported in most studies. Two types of factor analysis - explanatory factor analysis (EFA) and confirmatory factor analysis (CFA) - were conducted with some variation. A substantial number of studies applied EFA (42.42%). Generally, EFA was used when there was little or no theoretical or empirical basis to determine the number of common factors or what specifically observed variable, influenced a particular common factor (Fabrigar, Wegener, MacCallum, & Strahan, 1999), whereby a new theory could be generated from the results of EFA (Henson & Roberts, 2006). In addition, EFA and CFA could be applied in series, by using the result of EFA as a basis of creating a model of factor structure in CFA (Fabrigar et al., 1999). Among these studies, 15.15% applied both EFA and CFA. CFA is used to test whether a model of factor structure could be specified based on either a theoretical or empirical basis (Fabrigar et al., 1999; Henson & Roberts, 2006). Two studies (6.06%) applied CFA only (Kim, 2002; Koh et al., 2007). Kim (2002) developed the Kim Depression Scale for Korean Americans (KDSKA) by conducting focus group discussions to establish an emic understanding of depression, resulting in a scale with 25 items that was analysed with CFA to test the measurement model. Koh and colleagues (2007) reviewed the literature on depression and conducted observations among Asian children as the basis of developing the Asian Children Depression Scale, and then the new tool was analysed with CFA. Drawing on the work of these two studies, CFA could be applied to test the model of a new measurement, whether the model was developed on a theoretical understanding or empirical data.

Reliability is a psychometric property that is characterized in classical test theory as a measurement theory, in which the observed score is a function of the true score and measurement error (Furr & Bacharach, 2014). Of the three methods used to estimate reliability, internal consistency was most frequently reported in research on developing culturally appropriate tools (84.85%). The wide use of internal consistency is influenced by its advantages, including that respondents need only fill out one tool on one occasion, so less effort is required compared to the two other methods (Furr & Bacharach, 2014; Streiner, 2003). The second type of reliability, test-retest reliability was reported in seven studies, in which both internal consistency and test-retest reliability were applied. In measuring mood, internal consistency seems to be more accurate than test-retest reliability as mood changes over time (McCrae, Kurtz, Yamagata, & Terracciano, 2011). None of the studies reported parallel forms of reliability. The problem with the parallel form method is that two different measurements are required to measure the same true score and the same amount of variance is needed (Furr & Bacharach, 2014). In practice, it is difficult to develop two parallel tools.

Validity based on traditional perspectives of psychometry consists of content validity, criterion validity and construct validity (Furr & Bacharach, 2014). Among these three types of validity, criterion related validity was most often reported in the studies (63.64%), including convergent, divergent, concurrent, predictive and discriminant validity. Construct validity and content validity were reported among 30.30% and 21.21% of studies, respectively. From a contemporary perspective, construct validity - indicating how far the test score can be interpreted as a psychological construct – is an essential concept that depends on the content of the test, its internal structure, the psychological process used in test response, the association among test scores and other variables, as well as the consequences of test use (Furr & Bacharach, 2014). It can be said that construct validity is influenced by content validity, factor structure, and criterion validity, therefore validity does not only rely on one single statistic (Coaley, 2010).

Specific symptoms in culturally appropriate depression screening tools

Even though some items in culturally appropriate depression screening tools were similar to items in Western depression screening tools, differences also existed either in the symptoms or in the local idioms and terminology used to refer to these. Among older Caribbean residents in London, UK, for example, different symptoms were identified, including feeling cut off (feelings of social isolation or family alienation); emptiness (coming from inside themselves); feeling fed up; feeling "low;" tiredness; pain all over; feeling pressured; and having fear or palpitations around the heart and having a sensation of gas bubbling in the stomach (Abas et al., 1996). Among Acholi youth in Northern Uganda, three local syndromes - *two tam, kumu* and *par* - were related to the Western concept of depression; however, a culturally specific description of the symptoms also existed - *kumu*, characterized as sitting while holding one's cheek in one's hand and not greeting people (Betancourt et al., 2009). "Feelings of going crazy" is a unique item of the Vietnamese Depression Scale, which is a combination of suffering, desperateness and loss of control, but without psychotic symptoms (Kinzie at al., 1982).

Depression manifested in a social context in some target groups. Among Pakistanis in Peshawar and Lahore, depression manifested through social functioning disturbances rather than their personal feelings (Mumford et al., 2005). However, among Singaporean Chinese children aged 6 to 12 years old, one culturally salient factor - negative social self - was established as one of four factors of the Asian Children Depression Scale (Koh et al., 2007). This was also documented among Asian adolescents in Singapore (Woo et al., 2004), with concern over self-other relationships, reflecting negative social experience. Social items were also present in the culturally appropriate depression screening tool for Chinese American immigrants, relating to interpersonal responsibility, need or problem, and included five items: fear of losing working ability, loneliness, being afraid, nervousness, and worry (Wong, et al., 2012).

Somatic symptoms were established in some of the new tools developed. The Kim Depression Scale for Korean American (KDSKA) has a somatic subscale with four items (Kim, 2002), whereas the Lee and Rhee Depression Scale (LRDS) developed for Koreans in Korea has a somatization dimension with five items that distinguishes it from Western screening tools, especially the Beck Depression Inventory (BDI) (Hwang et al., 2012). Nine of 19 final items of the Dar-es-Salaam Symptom Questionnaire (DSQ), developed for Tanzanian women, also reflect somatic symptoms (Kaaya et al.,

2008). Some items in the depression scale of the Phan Vietnamese Psychiatric Scale (PVPS) combine dysphoric mood and physical symptoms that are meaningful in Vietnamese culture (Phan et al., 2004).

The premise in Western understandings is that depression manifests through internalized emotion; however, in some target groups, depression manifests through externalized emotions. For example, among indigenous Australians, depression arises through anger (Thomas et al., 2010). Anger was also included in the Chinese American Depression Scale developed for Chinese American immigrants in the US (Wong et al., 2012).

Other dimensions that are not included in Western screening tools - such as religiosity – were also found in the culturally appropriate depression screening tools reviewed. For example, in the Pakistan Anxiety and Depression Questionnaire (PADQ), even though some of the 30 final items overlapped with Western questionnaires, the expression of local idioms was more functional, and included two religiously based items (Mumford et al., 2005). Among Chinese American immigrants in the US, two items referred to spirituality and personal relationships in Chinese culture - "face" and "fate" – and both were included in the newly developed tool (Wong et al., 2012).

Local idioms of distress were also found in some cultural groups and included in the culturally appropriate tools developed. In the Afghan Symptom Checklist, four indigenous constructs were found as indicators of distress: *jigar khun* (a form of sadness including grief following interpersonal loss); *asabi* (highly stressed by life stressors); *fishar-e-bala* (emotional pressure and agitation); and *fishar-e-payin* (low energy and motivation) (Miller et al., 2006). In a measurement of psychological distress for Ugandan adolescents living with HIV, two items - "thinking that you are watched or talked about by others" and "thoughts about ending your life" - were characteristic of distress among the target population, although commonly recognized respectively as indicators of paranoia and suicidal ideation by expert panels (Mutumba et al., 2015). Idioms of distress among Haitian Creole were also added in a culturally appropriate depression screening tool, including *de la* (low energy), *ke sere* (constricted heart), and *kalkile twop* (thinking too much) (Rasmussen et al., 2015).

Each culture has different constructs on depression. Darfuris have an idiom *majnun* (literally "madness") referring to depression (Rasmussen et al., 2011). Weaver and Hadley (2011) found that the construct of their Tension Scale developed for Indian women with diabetes type 2 is closer to depression than anxiety, while Masse et al. (1998) identified that in their psychological distress scale, depression and anxiety were merged into one construct.

Understanding local idioms and terminology is important as not all of these expressions can be directly translated into other languages, including into English. Among Sri Lankan Sinhalese, for example, *kala kereema* (roughly translated as loss of hope resulting in depression and lack of energy) and *bahu bootha* (fright arising from seeing a ghost) are examples of local idioms that are not easily translated into English (Fernando, 2008). Some items in the newly developed tool for Chinese American immigrants in the US are also difficult to translate into English, such as item 3 – "troubled" and item 7 – "bored", both of which are considered as indicators of mild distress (Wong et al., 2012). Moreover, each local item has a specific meaning. For instance, among Vietnamese refugees in the US, sadness is characterized through three expressions *huon phien* (sad and bothered), *buc* (bothered), and *bimon* (sad) (Kinzie et al., 1982).

In some target populations, people with depression speak of thinking too much, as already discussed. However, each target group has different local idioms relevant to thinking too much. Among Africans in Zimbabwe, *kufungisisa* is a local idiom of distress related to thinking too much and was included in the Shona Symptom Questionnaire (SSQ) (Patel et al., 1997). Moreover, among Haitian Creole, two different local idioms exist for thinking too much, *reflechi twop,* which was included in the Kreyol Distress Idiom (KDI) (Kaiser et al., 2013), and *kalkile twop,* which was included in the Zanmi Lasante Depression Symptom Inventory (ZLDSI) (Rasmussen et al., 2015). Thinking too much was also found among Afghanis in Kabul, Afghanistan and included in the Afghan Symptom Checklist (Miller et al., 2006) and among Darfur refugees in Chad, Central Africa (Rasmussen et al., 2011). This emphasizes the need for an emic approach in understanding and assessing depression across cultures, whereby a cultural overlay requires inclusion when evaluating depression among susceptible clients.

The Indonesian Depression Checklist

Deriving items of the Indonesian Depression Checklist
Qualitative analysis of data from interviews with people with depression generated six clusters of depression symptoms – Physical Symptoms, Affect, Cognition, Social Engagement, Religiosity and Other. In each cluster, the depression symptoms were ordered according to frequency, enabling us to determine common symptoms of depression (Table 1). The most common symptoms – items reported by at least ten percent of people with depression and confirmed clinical psychologist working in the primary health care centers - were selected as items for the IDC. Items related to suicidal ideation were not selected for the IDC as the clinical psychologists were ambivalent about whether these items should be asked of people with depression for ethical reasons. The IDC consisted of 40 items in six clusters of symptoms, and used a 4-point Likert Scale to identify the level of frequency of the symptoms as experienced by people with depression.

Table 1
Common Depression Symptoms in each Cluster

Cluster	Symptoms	%	Cluster	Symptoms	%
Affect	Feel sad	55	Physical Symptoms	Have a headache	60
	Cry for no obvious reason	50		Difficult to sleep	45
	Feel distressed	35		Have no energy	35
	Feel hurt	30		Loss appetite	35
	Feel hopeless	45		Lose weight	20
	Feel ashamed or embarrassed	25		Easily get tired	15
	Feel disappointed	20		Have chest pain	15
	Feel guilty	20		Feel faster heart beat	15
	Feel lonely	15		Have gastritis	15
	Feel restless	15	Cognition	Feel confused	60
	Feel sorry	15		Think about your problems over and over again	35
	Feel useless	15		Cannot think as usual	20
Religiosity	Have difficulty praying	10		Have difficulty in concentrating	15

	Find not helpful to pray	10		Have an empty mind	15
	Not going to any religious activity in the community	10	Social Engagement	Only stay in your room	50
	Feel not connected with fellow believers	10		Lack motivation to do various activities	40
Other	Feel worried	10		Feel not enthusiast	25
	Feel afraid	45		Want to be alone	20
	Feel irritable	25		Think only about your self	10
	Feel angry	65		Not care for others	10

Validating the Indonesian Depression Checklist

Confirmatory Factor Analysis

We compared correlational and hierarchical models based on several indexes (Table 2). Confirmatory factor analysis indicated that for 19 items of the IDC with a five-factor structure, either using a correlational or hierarchical model, there was good fit for the model. Although the correlational model had a better fit than the hierarchical model, we chose the hierarchical model based on our consideration of reliability, as explained later.

Table 2
Comparison Goodness Fit Index of the Indonesian Depression Checklist

Index	Correlational Model	Hierarchical Model
χ^2	156,404	168,157
P	.163	.091
RMSEA	.031	.036
CI	90%	90%
Lower Value	.000	.054
Upper Value	.000	.058
CFI	.974	.963
TLI	.968	.957

In the hierarchical model, all items loaded significantly in the five factors with factor loading varying from .39 − .82 ($p<.05$). Factor loading ranged from .43 − .82, .61 − .77, .52 − .75, .70 − .81, and .39 − .72 for Physical Symptoms, Affect, Cognition, Social Engagement and Religiosity factors, respectively. In the Physical Symptoms factor, two sub-factors, Energy and Illness, loaded significantly (.58 and .70 respectively). Each factor loaded into a higher order variable. Based on factor loadings, Cognition had the highest factor loading on depression, followed by Affect, Physical Symptoms, Social Engagement and Religiosity factors.

Reliability

Reliability of the IDC was assessed by internal consistency for both correlational and hierarchical models. Using the correlational model, all 19 items were analyzed together, while for the hierarchical model, items were analyzed for each factor. The Cronbach's Alpha coefficient of the IDC for the correlational model was .84, with the corrected item total correlation ranging from .07 to .62. Three items had a corrected item total correlation lower than .3: religious 2 (.07), religious 3 (.24), and physical 2 (.27). The Cronbach's Alpha coefficient of the IDC for the hierarchical model is presented in Table 3.

Table 3
Reliability Analysis of the Indonesian Depression Checklist Hierarchical Model

Factor	Cronbach's Alpha	Corrected Item Total Correlation
Physical Symptoms	.70	.38 to .51
Affect	.79	.53 to .67
Cognition	.69	.40 to .57
Social Engagement	.81	.62 to .71
Religiosity	.62	.34 to .50

As in Table 3, the Cronbach's Alpha coefficient for each factor ranged from .62 to .81, with no item having a corrected item total correlation below .3. Based on reliability analysis, the hierarchical model of the IDC appears to be more appropriate than the correlational model.

Convergent validity
The IDC and the CES-D

The Indonesian Depression Checklist had a high correlation with the CES-D (r_{xy}=.81; p<.001). All factors correlated significantly with the CES-D in the Pearson bivariate correlation. From the multiple regression, all factors except Social Engagement factors contributed significantly to the CES-D. Table 4 indicates that Cognition, Physical Symptoms, Religiosity and Affect factors were related to the CES-D.

Table 4
Correlation and Regression Summary for each Factor of the IDC to the CES-D and Clinical Psychologists' Score

Factors	The CES-D				Clinical Psychologists' Score			
	Zero order correlation	Beta	*T*	*p*	Zero order correlation	Beta	*t*	*p*
Physical Symptoms	.58**	.29	5.36	.00	.42**	.18	2.36	.02
Affect	.61**	.16	2.68	.01	.53**	.20	2.30	.02
Cognition	.78**	.53	8.56	.00	.61**	.40	4.56	.00
Social Engagement	.49**	.07	1.25	.21	.38**	.04	.50	.62
Religiosity	.29**	.15	3.05	.00	.26**	.15	2.13	.04

** Correlation is significant at the .01 level (two tail)

Table 5 describes only three items of the IDC that are similar to items in the CES-D. Seven other items in the CES-D also corresponded with items in the IDC, but these items were deleted from the IDC based on modification indices in the confirmatory factor analysis. Another ten items in the CES-D did not match with any items of the IDC. These items were, in English language version, *I felt I was just as good as other people, I felt depressed, I felt that everything I did was an effort, I thought my life had been a failure, My sleep was restless, I was happy, I talked less than usual, People were unfriendly, I enjoyed life,* and *I felt that people disliked me.*

Table 5
Comparing the IDC Items and the CES-D Items

Factors	Stayed in the IDC	The CES-D	Deleted from the IDC	The CES-D
Physical Symptoms	Go to sleep easily		Have a headache	
	Have no energy		Have a good appetite	I did not feel like eating; my appetite was poor.
	Easily get tired Have chest pain Feel faster heart beat Have gastritis		Lose weight	
Affect & Others	Feel ashamed or embarrassed		Feel sad	I felt sad. I felt that I could not shake off the blues even with help from my family or friends,
	Feel guilty		Cry for no obvious reason	I had crying spells.
	Feel sorry Feel afraid	I felt fearful.	Feel distressed Feel hurt	
			Feel hopeful	I felt hopeful about the future.
			Feel disappointed Feel lonely Feel restless Feel useful Feel worried	I felt lonely.
			Feel irritable	I was bothered by things that usually don't bother me
			Feel angry Ability to think is as usual	
Cognition	Feel confused		Have an empty mind	
	Think about your problems over and over again			
	Have difficulty in concentrating	I had trouble keeping my mind on what I was doing.		
Social Engagement	Only stay in your room		Feel enthusiast	
	Lack motivation to do various activities	I could not get "going."	Think only about your self	
	Want to be alone		Care for others Have difficulty praying	
	Find it helpful to pray			
Religiosity	Go to any religious activity in the community Feel connected with fellow believers			

The IDC and CP score

The Indonesian Depression Checklist correlated strongly (Hills, 2011) with the level of depression of the participant as determined by the clinical psychologist (r_{xy}=.65; p<.001). As illustrated in Table 4, all factors had significant correlation with the level of depression of the participant as determined by the clinical psychologists. All factors except Social Engagement factors contributed significantly to the level of depression of participants, based on the multi regression analyses.

Finalizing the Indonesian Depression Checklist

The Indonesian Depression Checklist was designed to be used by clinical psychologists to screen depression in their patients. Based on confirmatory factor analysis, the IDC consists of 19 items in five clusters. The IDC is a 4-point Likert Scale from Never (0) to Always (3) for favorable items, and is reverse scored for unfavorable items.

Concluding remarks

The IDC shows good psychometric properties, including factor structure, reliability and validity. Therefore, the IDC is an initial contribution working towards managing depression in Indonesia. By using the IDC, people with depression within Indonesia, especially Javanese, have a better chance of getting appropriate diagnostic assessment and treatment.

Considering depression was manifested and experienced differently in different ethnic and cultural groups, a cultural appropriate depression screening tool is needed for better assessment and thus better treatment of depression.

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LITERATURE REVIEW: COGNITIVE BEHAVIORAL THERAPY (CBT) TO LOWER SMARTPHONE ADDICTION OF ADOLESCENT

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Abstract

Smartphones provide many benefits. Yet, its overuse may have certain consequences including addiction, especially for adult, i.e. ignoring surroundings, having sleep disorders, having low self-esteem, decreasing concentration, absorption, and interest in learning. Therefore, intervention is needed to overcome smartphone addiction by using Cognitive Behavioral Therapy (CBT). This article aims to provide an overview of CBT interventions in reducing smartphone addiction in adult. It employed literature review method using Google Scholar database to gather relevant articles. However, I only analyzed 21 articles from 46 articles I found. Findings reveal several themes related to the topic, namely smartphone addiction's causes, symptoms, and impacts and the application of CBT in smartphone addiction. Through of the article review process, it was concluded that less is known regarding interventions to overcome smartphone addiction. Thus, further study in regard to interventions towards smartphone addiction in adult is needed.

Keywords: adult, cognitive behavioral therapy, smartphone addiction

Introduction

Human life is filled with technology. It is certainly near our daily activities, thus we are not recognizing its existence. In the 21st century, technology is significantly established in communication devices, such as various sophisticated technology-based devices called smartphone. With internet connections, smartphone is connecting all parts of the world. This is the essence of the progress of information communication technology (Al-Ayouby, 2017; Sari, 2006).

The number of internet users in Indonesia reached 143 million people in 2017. This number means that more than 50 percent of Indonesian population can access the internet (Bohang, 2018). Thus, Indonesia is the fourth largest active smartphone user country after China, India, and America (Novalius, 2018). The survey of APJII (Pertiwi, 2018) shows that around 89.35% of Indonesian people use internet to chat and around 87.13% use it for social media.

Smartphone is perceived advantageous in various activities. Through social media, students are able to share various educational information with regards to lesson material, school schedules and activities (Firmana, 2016); smartphone is used to explore knowledge and support learning activities (Daeng, 2017); it assists in creating teaching

materials for teachers and completing assignments for students. However, despite its benefits, smartphone is harmful if it is used incorrectly (Widharsa, 2018).

Regardless its benefits, the overused smartphone creates negative impact, namely addiction (Sutanto, 2016). It is often called smartphone addiction which means a habit in using smartphone leading to negative effects (Yuwanto, 2013), and lack of self-control (Kwon, 2013; Park & Lee in Bian & Leung, 2014; Yuwanto, 2013). Excessive smartphone usage cause certain consequences, such as depression feeling if someone is not able to use smartphone, causing individuals to ignore surroundings, decreasing concentration, absorbing and learning interests (Wati, 2017; Tri, 2014, Kwon, 2013) and sleep disorders that decrease sleep quality of adult (Putri, 2018; Nalwa & Anand, 2003; Kwon, 2013). The continuous use of smartphones and increased alertness every night can lead to sleep problems, low self-esteem, anxiety and depression for adults (Widuri, 2010; Woods & Scott, 2016).

The term of smartphone addiction refers to what is called as a cellphone with its various features, especially that with internet connection (Backer, 2010). There has been various researches with regard to this smartphone addiction, or in other terms such as internet addiction, online addiction games, mobile phone addiction, and nomophobia. The definition of smartphone addiction used in this article is based on the term mentioned above. Smartphone addiction is a behavior of smartphone user that leads to social problems such as withdrawal, difficulties in the performance of daily activities, and impulse control disorder to person (Kwon, et. Al, 2013). In the survey conducted by Flurry (in Badariah, 2017), individual is considered suffers smartphone addiction if he/she uses smartphone more than 60 times a day.

Based on this condition, it is important to develop counseling technique to overcome smartphone addiction. Therefore, I develop an approach in counseling, namely cognitive behavior therapy to reduce the level of smartphone addiction. Several studies have proven that cognitive behavior therapy can reduce the level of smartphone addiction.

Cognitive-behavioral therapy provides ways to stop compulsive behavior and changes perceptions about smartphones. Individuals suffering smartphone addiction can also learn better ways to deal with unpleasant emotions, such as stress, anxiety, or depression (Smith, Robinson, Segal, 2018).

Based on the background, in this article, I will examine smartphone addiction and CBT intervention to Lower Smartphone Addiction of Adult.

Method

I employ literature review method, which means finding literatures both internationally and nationally through Google Scholar database with "addicted to smartphone", "Intervention for smartphone addiction", and "CBT for addicted "smartphones" keywords. However, the result of this many emerging livelihoods is internet addiction.

The data used in this research is secondary data which was obtained from the results of previous relevant researches. The secondary data sources are in the form of primary or original scientific reports contained in articles or journals regarding smart phone addiction and cognitive behavioral therapy (CBT).

From the search results, I found 46 articles that are considered relevant to the topic. However, there were only 21 articles involved and analyzed.

Result

Based on the literature review of 21 articles on smartphone addiction and CBT, I found four themes related to the topic: the definition of smartphone addiction, the causes of smartphone addiction, the impacts of smartphone addiction, and the application of CBT to smartphone addiction sufferer. Smartphone addiction is defined as an excessive smartphone usage that can affect the user's life as well as an impulse control disorder towards other people. The causes of smartphone addiction in adults include the special characteristics of smartphones, the psychological and emotional characteristics of adult smartphone users, and the social characteristics of adult smartphone users. Smartphone addiction can have an impact on several aspects, such as teenage academic activities, sleep disorders, decreasing ability to concentrate and think deeply as well as creatively. Without any treatment, it can affect the development of adults, both at school and outside of school. One of the counseling techniques that can be used is cognitive behavioral therapy (CBT), because the technique addresses three aspects of individuals, namely cognition, behavior, and emotion.

Discussion

APJII in Mulyana & Afriani (2017) conducted a survey of 42 cities in Indonesia including Banda Aceh. The results showed that 47.9% of smartphone users are Senior High School student, 11.3% of the users are Junior High School students and 7.5% of the users are Elementary School students. It shows that high school students are the highest smartphone users.

Smartphone provide advantages for teenage students as Firmana (2016) suggested that smartphone facilitates students to exchange information such as sharing lesson material, asking about school schedules and other activities through social media; Daeng (2017) added that smartphone is used to explore new knowledge and support learning activities. It also helps teachers to create teaching materials and helps students to complete their assignments. Research conducted by Mardhiyatun (2015) shows that smartphone facilitates communication between students and teachers to hold counseling activities. In addition, through smartphone, information is more quickly accepted and able to increase students' interest in consulting activity as well as helping students in consulting their problems. Many benefits are obtained from smartphone, but if it is incorrectly used, it will provide addiction to its users (Widharsa, 2018).

Smartphone addiction is defined by Sut (2017) as the overuse of smartphone device that affects the daily lives of its users. It has a variety of clinical features, including salience, tolerance, loss of control, mood modification, withdrawal symptoms, and desires. According to Kwon, Kim, Cho, and Yang (2013), smartphone addiction is an attachment behavior to smartphones in everyday life or as an impulse control disorder towards someone. Smith, Robinson, & Seagal (2018) argues that smartphone addiction which is also called as "nomophobia" (fear of being away from cellphone), is often triggered by excessive Internet problems or internet addiction disorders. After all,

it's rare that a cellphone or tablet creates coercion, but games, applications, and the online world that connects us. Smartphone addiction include a variety of impulse control problems, including virtual relationships, information overload, cybersex addiction, and online encouragement. From the definitions above, it can be concluded that smartphone addiction is an excessive use of smartphone that affect daily life of its users and being an impulse control disorder towards someone.

Smartphone addiction is caused by several factors. Kim (2013) stated that smartphone has special characteristics including various facilities that makes it easier to carry in hands and to access the internet connection than PCs; personal psychological and emotional characteristics, generally people who have psychological and emotional characteristics such as depression, loneliness, low self-esteem, social anxiety, and impulsive disorders are easier to become smartphone addicts; and the characteristics of the social environment. For students with poor academic performance, they usually lack of respect for individuals around them. Poor academic performance of students can be related to low self-esteem and various behavioral problems. Such feelings will make students access internet to find sense of belonging and satisfaction. This is in line with what expressed by Khazaal (2012) that smartphone addiction correlates with depression, anxiety, social phobia, loneliness, low self-esteem, hostility, drug use, dangerous alcohol use, and lower frustration discomfort and more high level of impulse.

Young (2007) and Khazaal (2012) argues that the symptoms of smartphone addiction can be obsessive thoughts about smartphones (teenagers who are preoccupied with smartphones) loss of control (inability to control), tolerance, psychological withdrawal, and ignore the consequences of such behavior. In particular, people with "internet addiction" cannot deal with important parts of their live because their activities rely on smartphone. Smartphone addiction has many aspects that are similar to internet addiction. Therefore internet addiction criteria must be considered when developing smartphone addiction criteria. Internet addiction is a general term of five internet related problems, namely cybersexual addiction, cyber addiction, internet needs, excessive information, and addiction to interactive computer games.

Smartphone addiction has several effects. Smith, Robinson, & Seagal (2018) suggest that the effects of smartphone addiction include increasing loneliness and depression, fueling anxiety, increasing stress, exacerbating attention deficit disorders, diminishing your ability to concentrate and think deeply or creatively, disturbing your sleep, and encouraging self-absorption. In addition, mentioned by Khazaal (2012) smartphone addiction impacts time management, family, work, finance, and academic activities. According to Young (2007) smartphone addiction can reduce social support and happiness and increase depression and loneliness. The results of research conducted by Tri (2014) show that teenagers who are already addicted to smartphones are very difficult to divide their time, such as diminishing learning time due to smartphone addiction. Even interactions with families are also affected. Smartphone usage changes interaction pattern between adults and their parents.

Seeing this condition, it is important to develop a counseling technique to overcome smartphone addiction. Several studies have shown that cognitive behavior therapy can reduce the level of addiction. Siregar (2013) proved that the results of the application of CBT to individuals suffering games addiction showed significant changes in the cognition, emotions and behavior of the CBT participants. Through cognitive restructuring techniques, the distorted cognition of the two participants changes to be more rational. It supports what Kim (2013) said that in behavioral care, cognitive

behavior therapy (CBT) is a representative method to change addictive thinking and behavior.

The most important thing in providing care for using CBT to clients is the recognition of problems from clients (in this case the client should acknowledges that there are important missing activities) (Khazaal, 2012). The clients will learn to monitor their minds and identify what things that trigger addictive feelings and actions as they learn new coping skills and ways to prevent symptoms recurrence. This treatment involves assessing the types of distortion, problem solving skills, and training in coping strategies, modeling in therapy, support groups, and journal thinking (Young, 2007).

There are three focuses on CBT, namely cognition, behavior, and emotion. Problems related to cognition are time distortion, excessive worry, internet-related ruminations, depression-related cognitions, denial, expectancies, self-efficacy, obsessive preoccupations-related to the internet, and rejection sensitivity in social situations (Khazaal, 2012). Young (2007) suggest cognitive restructuring counseling techniques to overcome problems related to cognition. While problems related to behavior are escape from reality (behavior avoidance), a deficit in "natural" behavior experiments, operant conditioning, Pavlovian conditioning, impulsivity (lack of control), and loneliness-related behaviors. Finally, issues related to emotions include emotional relief, craving, withdrawal, a feeling of guilt, emotional disturbance related to specific psychopathology (Khazaal, 2012). Some techniques that can be used for behavior management are assertion training, behavioral training, coaching, cognitive restructuring, desensitization, modeling, reinforcement, relaxation methods, self-management, or new social skills (Young, 2007).

There are five stages to change behavior (Kim, 2013), namely pre-contemplation, contemplation, preparation, maintenance, and termination. At the pre-contemplation stage, therapists focus on breaking denials that there are serious problems with smartphone use. At the stage of contemplation, individuals recognize the need for change, but the desire to change may not be substantial and feeling or overwhelming may exist. At the preparation stage, the individual is ready to make a plan to overcome the problem. Maintenance begins when the individual feels he can control over the use of smartphones and puts less energy into behavior change. The last stage, termination has the purpose of preventing recurrence. CBT is not only about making specific changes and identifying thoughts and behaviors but also making clients as their own therapists. This will enable them to apply to learn developed within and between sessions with life in general.

Conclusion

The phenomenon of smartphone addiction has occurred in many fields. The findings show that smartphone addiction correlates with many psychological disorders such as depression, sleep disorders, anxiety, low self-esteem, and others. However, less is known about research with regards to interventions to overcome smartphone addiction. Thus, further studies to examine interventions to overcome this phenomenon in adults are needed.

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VIDEO AS A STRATEGY FOR SOFT SKILL DEVELOPMENT AT VOCATIONAL SCHOOL

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Abstract

Vocational School is an educational institution which is oriented to providing students who are ready to work. Vocational graduates are expected to have not only good hard skills, but also good soft skills to support their work in being done effectively, productively and in good quality at workplace. Therefore, soft skill development strategy is needed for vocational students so they can prepare themselves to enter workplace. Developing soft skills in vocational schools can be done through video media. Through literature review, it was found that video media is an effective strategy to develop soft skills because it acts as a guidance for students in practicing soft skills. Students can do their exercises independently by returning to see or play in certain parts of the video. Video media is expected to help students predicting soft skills needed in workplace.

Keywords: soft skills, video, vocational school

Introduction

Vocational School (SMK) is an educational institution provided ready-work graduates who are expected to master science and improve skills. According to the regulation of Minister of Education No. 23, vocational school graduates are required to master skills and entrepreneurship program competencies to fulfil the workplace needs and to support their higher education level of study (Permendikbud, 2006). The competency of human resources needed by workplace is not only relying on science and skills but also non-technical skills which are not visible but very important called as soft skills.

Vocational graduates are not enough to only master hard skills, but also need to master soft skills to support their work in being done effectively, productively and in good quality at workplace. Graduates of Vocational school who have soft skills are not only easier to find work but they will also be able to grow well in their jobs. Business or industry workplace also considers the soft skills aspect in recruiting new workers. In addition, most of them (88.9%) stated that soft skills are more needed than hard skills when they are looking for work (Sudjimat, 2017). Entrepreneurs in the industrial workplace value soft skills as an important requirement to get new employees who can be successfully at workplace (Robles, 2012)

In fact, there is a gap between the needs of soft skills in the realm of work and the competence of vocational graduates. Vocational graduates have not been able to

fulfil the needs of the workplace, especially in terms of soft skills. This phenomenon is proven by Herren (2006) stated that employees in the United States demonstrated much difficulty in transferring soft skills to their work settings. The problem of transference of soft skills to the work settings is also proven in the local setting of the study, as employers have opined about their disappointment with the employment readiness level of students of a local community college. In addition, Permendikbud (2013) also stated that most SMK (vocational high school) graduates in Indonesia are not only unable to adjust to the development of science and technology, but also are less able to develop themselves and their careers at work. This is caused by an imbalance between hard skill learning and soft skills at school. According to Suryanto (2013) Educational institutions are more focused on developing the ability to master science and technology so that the focus is less on learning soft skills in schools which have an impact on the low soft skills of the vocational school graduates.

The learning of soft skills in schools must be in accordance with the relevance of soft skills needed by the workplace so that there is no gap between the needs in the workplace and the qualifications of vocational school graduates. The development of students' soft skills in schools is the duty of all stakeholders. In accordance with Permendikbud (2013) which says that the development of an education unit curriculum is carried out by involving stakeholders to guarantee the relevance of education to life needs, including community life, the workplace. Therefore, curriculum development needs to pay attention to the balance between hard skills and soft skills in each class between subjects, and pay attention to the continuity of hard skills and soft skills between classes. The increase in soft skills of vocational students is strongly influenced by practical learning which includes learning methods, media, infrastructure and quality of teachers. Because of the importance of soft skills as an effort to prepare students to face the workplace, teachers need to develop learning strategies to improve students' soft skills mastery, one of them is by developing learning media. One of strategies for developing soft skills in vocational schools is through video media. Milwati, et al (2016) found that there was a significant relationship between the use of APD video media and students' attitudes. The students are more interested in video media compared to existing modules. The learning video is intended to make the students have a view of the soft skills needed in the workplace. It is expected that the quality of students' learning practices and soft skills will increase.

Method

The method used in this article was literature review. The steps conducted in the literature review were as follows:
1. Step 1: Read related scientific literatures
2. Step 2: Evaluate all scientific literatures that are read
3. Step 3: Summarize the publications by identifying points, theories or problems raised in the source
4. Step 4: Combine the summary results into a complete literature review of a problem.

Article search was done by using the Google Scholar database. The keywords used in the search were "the development of soft skills at Vocational school", "video for the development of soft skills", "The strategies for developing soft skills" and "soft skill

needs in vocational schools". Search by using these keywords found 19 articles which were considered relevant. In accordance with the title, it was found 25 relevant articles. According to the research, it showed 8 relevant articles. While based on the content, it was found 17 relevant articles.

Result

Based upon the review process from 25 literatures about soft skill, we found 3 themes related to soft skill: the definition of soft skill, The Importance of Developing Soft Skill at Vocational school and Video as Media to Develop Soft Skill. Soft skill aspect has an important role in vocational education nowadays. Graduates of vocational students who have good soft skills are not only easier to find work but will also be able to develop well in their jobs. Learning soft skills in schools must be in accordance with the relevance of soft skills needed by the industrial world to prevent gap between the needs in the industrial world with vocational graduate qualifications. Given the importance of soft skills in an effort to prepare students to face the workplace, school needs to develop learning strategies to improve students' soft skills mastery. One of them is by developing learning media through video media. Video acts as a guide for students to learn material. Then students can exercise independently outside the learning process. Students can practice skills by repeating the video continuously and can play on certain parts of the video as desired.

Discussion

The Definition of Soft Skill

Soft skill has a broad definition. Klaus in Sudjimat (2017) defined soft skill as a form of individual behavior management. Based on the definition mentioned by Klaus, Perreault (Robles, 2012) explained more deeply that soft skill is special characteristics and abilities that distinguish individual from other individuals who have similar background and professional experience. This statement is supported by Seetha (2014) which revealed that soft skill includes character, behavior and attitudes in individuals that can be used as a basis for determining someone to be superior to other people in the workplace. Cho et al (2015) agreed that soft skill is one of ways to describe the ability of someone who will be brought to the workplace.

The explanation of the definition of soft skill revealed by some of the experts above completes each other. It can be concluded that soft skill is skill possessed by individual to support his personality development in a variety of life settings, especially in the workplace as soft skill leads to improvement in individual interactions, performance, and career prospects in the future.

The Importance of Developing Soft Skill at Vocational school

Vocational school is an educational institution which is oriented to prepare its graduates to work and is expected to produce human resources who are capable of mastering science and improving skills. The ability that is developed is not only the cognitive and psychomotor domains but also the realm of students' personality. One of the students' personality domains is soft skills. The entrepreneurs in the industrial workplace assume that the responsibility for developing soft skills is part of responsibility of the employee instead of the employers. Beyond the individual responsibility, 67% of entrepreneurs believe that the education system has an important role in the development of soft skills (Pritchard, 2013). Heckman, (2006) supported Pritchard's response that educational institutions are the most important institutions to develop soft skills of prospective employees in an effort to increase human resources that are also related to their income in the company.

Various opinions state that the improvement of ability and skills for the prospective young workers is the school's responsibility. Schulz (Sudjimat, 2017) stated that educators have a big responsibility in developing soft skills. Furthermore, Morandin (Cimatti, 2016) stated that educational institutions especially the vocational schools do not only have to form students who are clever in science but also students who are able to participate actively and positively in the work environment. According to Astuty (2010) students do not only compete against various problems in the academic field, but also require self-development when going into the workplace. So, the enhancement of the students' competencies supported by soft skills is an urgent need. The absence of soft skills results the graduates who do not have the confidence to show their abilities and compete in the workplace. Arnata & Surjoseputro (2014) added that the development of soft skills for students is very important in order to produce good graduates, not only in terms of hard skills but also soft skills so that the graduates can be accepted in the workplaces. Based on the statement above, it can be concluded that the soft skills of the employees need to be developed starting from school so that vocational high school graduates are expected to have soft skills qualifications that are appropriate to the needs of the workplace.

The stakeholders must realize how students prepare themselves for the. In addition, the students' awareness is also needed in understanding the importance of developing soft skills during their study as it will increase the employment opportunities for them when they graduate. Therefore, SMKs need to hold soft skills training in order to develop students' soft skills (Williams, 2015). Utaminingsih (2011) recommended that SMKs should have a certain pattern or design to develop soft skill competency development models, so that they can continuously develop soft skill competency models to accompany hard skills.

Soft skills development can be integrated into curriculum through organizing seminars, coaching and structured guidance (Cimatti, 2016). Through those activities, teachers play an important role in teaching the students about the importance of perseverance, being polite, having integrity, being able to adapt, solving problems effectively, showing self-confidence and humility, being leaders, maintaining optimism, and to be involved in conflict resolution where those things are included in soft skills Lafrance in Paolini (2015). Therefore, the teachers need to incorporate soft skills learning into their programs to help the students succeed after they graduate and enter college or start their careers.

Through coaching and learning of soft skills to the students, the teachers play role to help the students recognize their personalities, encourage them to build their potential, identify skills and traits which need to be developed (Paolini, 2015). Furthermore, the teachers can implement interventions to help the students develop these skills so that they have the opportunity to reach their potential and develop in a competitive workplace after graduating from school.

Video as Media to Develop Soft Skill

Soft skills is important to prepare students to face industrial workplace It requires the schools to design learning strategies in order to improve the students' mastery of soft skills. One of the ways is by developing learning media. The increase in soft skills of the vocational students is strongly influenced by practical learning which includes methods, media and infrastructure. So far, the development of soft skills has been done through training in a short period of time. The training system seems less effective in forming someone's soft skills for long term. This is supported by an evaluation conducted by Astuty (2010) found that the impact of soft skills training did not affect in a long time, because the application of soft skills from training decreased in the third week after training. Other research also shows that soft skills are not easily taught through training (Pritchard, 2013). The training needs to be supported by media or sustainable practices that are integrated into the curriculum in schools. Thus, the additional media is needed as a tutorial that the students can access at any time to practice. They also can practice the material after they attend soft skill training.

Tutorial video can support the students to practice soft skill material they get from training. According to the Big Indonesian Dictionary, the video is a motion picture display accompanied by sound. According to Riyana (2007) learning video media presents audio and visual which contains good learning messages with concepts, principles, procedures, theories of application of knowledge that help students to understand the instructional material. Videos are very useful to support the soft skills training, because such skills are difficult to teach in the classroom due to limited time of teaching activities (Mitrovic et al, 2016). Zaenal (Purwanto, 2015) explained that by using video media, the students tend to easily remember and understand material as they do not use one type of senses. The results of research conducted by Zaenal revealed that audio visual learning can increase memory of 14% to 38%.

Videos can make the students easier to understand soft skill material given during training and it is suitable as an additional tool given after conducting soft skills training (Wilson et al, 2012 & Pritchard, 2018). Video media can visualize subject or the messages of learning materials. Therefore, video media plays pivotal role as it is used as a medium to help students developing their soft skills. Milwati et al (2016) added that learning media using video can act as a guidence for the students in practicing soft skills. Then the students can do the soft skill exercises independently. They can practice skills continuously and can review or replay on the certain parts of the video. Anderson (1987) suggested several objectives of learning media through video, which included cognitive, affective, and psychomotor goals. Cognitive Objectives 1) Can develop cognitive abilities involving the ability to recognize and the ability to provide stimulus in the form of motion and sensations, 2) Can show a series of motionless images without sound as photo media and film frames although less economical, 3) Videos can be used to show the examples of ways of acting or behaving in an appearance, especially concerning the human interaction. The affective purpose of

video is that it can be medium to influence attitudes and emotions. The third goal is psychomotor: 1) video is the correct media to exemplify the skills related to motion, 2) through video, the students immediately get a visual picture of a skill.

Video as a learning media has its advantages and disadvantages. According to Agustiningsih (2015) the advantages of video learning media are, as follows: a) It is as the motion media that combines images and sounds, b) it is able to influence the human behavior beyond the printed media, c) it can be used instantly, d) it can be used repeatedly, e) it can present the materials which cannot be physically brought into class, f) it can be slowed or accelerated, g) it can be used for classical or individual. Sanaky (2011) added the advantages of learning in the form of videos that are, 1) presenting the objects of learning in concrete or learning messages in a realistic manner, so that it is very good for learning experiences, 2) its audio-visual nature, so it has its own interest and it can be a trigger and motivating the students to learn, 3) it is very good for achieving psychomotor learning goals, 4) increasing the endurance of memory or the retention about learning objects learned by the learners, and 5) it is portable and easily distributed (Milwati et al., 2016). Mitrovic et al, (2016) added that the videos with short duration are more attractive than longer durations. In addition to the advantages, video also has disadvantages, namely the existence of expensive costs, depending on electricity so that it cannot be turned on in all places and the nature of communication is unidirectional so it cannot provide the opportunities for feedback (Purwanti, 2015).

Choosing video media as learning material requires teachers to understand the steps of video making and the characteristics of video. Milwati et al (2016) explained that teachers as communicators and facilitators must have the ability to understand their students. In the learning process, the teachers must understand what the students need in the training so that the material delivered is appropriate to the needs. Purwanti (2015) added that all components that are active in the video making must understand the theory and the techniques of screenplay writing, so that what the screenwriter says can be understood where the direction is actually going to. The scenario plays more as a work script in the field, so the description sentences must be short to make it easy to understand and immediately be able to project the film's scene to the reader's imagination.

Video media has important components in it. According to Riyana (2007), those components in making videos consist of making a video framework and teamwork. While the video framework consists of the opening shows, the introduction, the video content and the closing, teamwork is the development of learning videos as an activity that involves several skills (Course Team Approach) that synergistically produce the video media products, according to the needs of the design.

Besides its important components, making video must not escape from its production procedure. According to Daryanto (2010) the procedures for making learning videos are:

1. Determine the ideas
   A good idea usually arises from a problem. The problem can be formulated as a gap between the existing realities. In this case, the idea of making videos is based on the need to provide medium of the soft skills training.
2. Formulate the goals
   The goals are the competencies of the students. Thus, after watching this program the students really master the competencies we expect before. In addition, we need to determine who the targets are.

3. Conduct a survey

   This survey is conducted with the intention to gather information and materials which can support the program.

4. Make an outline of the contents

   The material / the information / the data which has been collected through a survey must be closely related to the objectives which have been formulated. In other words, the materials which will be presented through our program must be able to support the achievement of the objectives. For this purpose, it is needed to arrange the materials in out-line form. It is certainly by paying attention to whom our targets are, what their characteristics are, what abilities they already have and haven't.

5. Make a synopsis

   Synopsis is an overview of stories which describes the contents of the program.

6. Make a treatment

   Treatment is a further development of the synopsis which has been prepared previously. In contrast to the synopsis whose narrative is still literal, treatment is arranged more closely to a series of movie scenes. They are more chronologically visible or the sequence of events is more clearly seen, so that those who read the treatment can already imagine the visualization that will appear in the program.

7. Create a story board

   Storyboard should be made on sheet-by-sheet, where in each sheet contains one scene and setting. However, for those who are still amateurs, each sheet can be filled with 2 to 3 scenes/settings. This story board includes visual and audio elements, as well as the terms contained in the video.

8. Write a script

   The manuscript is basically not much different from the storyboard. The only difference is that the order of visualization and audio presentation in manuscript is certain and the narrative is more detailed.

Based on the explanation above, it can be seen that to be able to produce good videos, it is necessary to pay attention to the implementation of procedures and the important components needed in making the video so that the video which is created can represent soft skill materials from the teachers.

Conclusion

The soft skill aspect has an important role in vocational education today. Based on the demands of soft skills in vocational students as the preparation to face the workplace, learning strategies to improve the soft skills of the vocational students are needed. The role of video media is to facilitate students in learning and developing soft skills. The content in the video must be able to represent the soft skill materials that is relevant to the needs of the workplace. Therefore, it is important to properly design the video creation process ranging from the planning to the stage of the video creation.

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RELIGIOSITY WITH ALTRUISM BEHAVIOR OF STUDENT ISLAMIC BOARDING SCHOOL HIDAYATUL HIKMAH MOJOSARI

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Abstract

Altruism is a voluntary action by a person or group of people to help others without expecting anything in return. Religiosity is a belief of someone who has lived and internalized religious teachings so that it influences all actions and views of his life. This study aims to examine the relationship between religiosity and altruism behavior of students of Islamic Boarding School Hidayatul Hikmah Mojosari. This research is a quantitative method using correlational research. The subjects in this study were 60 students consisting of 23 male students and 37 female students. The sampling technique used in this study is Purposive Sampling, and uses data collection techniques in the form of religiosity scale and altruism behavior scale. The data analysis technique is the product moment. Based on the results of data analysis showed that the correlation coefficient of 0.453 with a significance of 0,000 because the significance is <0.05 so it can be said that there is a relationship between religiosity and altruism behavior of the students of the Islamic Boarding School in Hidayatul Hikmah Mojosari.

Keywords: altruism behavior, religiosity, student

Introduction

Social beings need each other with one another, which always socialized and interacted with people around them. Every human being needs other people in terms of help, community service, security, and work. Helpful behavior is commonly encountered in community life, including neighbors, relatives and friends. Everyone has experienced disaster, things that are not expected often occur so that people need help from others around Widyastuti (2014).

At this time santri behavior in helping one santri with another sometimes santri helped by asking for reciprocity and giving help only to friends who were close to him. Some santri help each others because they did have social souls, some were helpful because indeed it had become a habit that was done by the Islamic boarding school.

The social psychology study of helping behavior is called altruism behavior, Altruism (Altruism) is voluntary action to help others selflessly, or wants to do good deeds (Sears, 2009). Myers's opinion on altruism also defines it as a desire to help others without prioritizing their own interests (Sarwono, 1999).

Helping is an integral part of people's lives. There are times when we are faced with the condition of giving help and the next time we are in a condition of needing help. Sincerity and sincerity of help are something that everyone needs help expects (Taufik, 2012).

Life is closely related to helping behavior, namely the life of boarding schools. According to Ali, identifying some characteristics that characterize Islamic boarding school is the close relationship between santri and kiai, this is because they live in the hut, submission of santri to kiai, living frugally and modestly, independent spirit, helping soul and brotherly atmosphere are coloring association in Islamic boarding schools, disciplined life is very emphasized, daring to suffer to achieve a goal is one of the education obtained by students in boarding schools, good religious life can be obtained by students in boarding schools. (Ni'mah, 2014).

Studies on the practice of religious teachings can be studied in religiosity. Ancok and Suroso mentioned that religiosity is manifested in various aspects of life in the form of activities that are visible and can be seen by the eye, as well as invisible activities that occur in one's heart. The level of religiosity is seen from the individual's attachment to his religion. This refers to the individuals have lived and applied the teachings of their religion, so that it influences all actions and views of their lives (Ghufron & Risnawita, 2012).

Equipped with Islamic knowledge which is taught every day, students are expected to be able to understand, appreciate and apply their knowledge in everyday life. Islam teaches many things so that santri can apply Islamic teachings that they have learned in their daily lives. Islamic teachings also become the foundation for santri in behaving and becoming people who hold fast to the Islamic Shari'a that they believe in.

Altruism behavior can be caused by several factors both externally and internally, one of which is religious factors, the practice of religious teachings can be studied in religiosity. According to Nashori and Mucharam (Haryati, 2013) religiosity is interpreted as how far the knowledge, how firm the beliefs, how the implementation of worship and rules and how deep the appreciation and application of Islam.

Based on the explanation above, the researcher wants to examine the relationship between religiousity and altruism behavior because in Islam teaches us to help voluntarily. In Islam we also have to relate well to God and have good relations with fellow human beings (Hablumminallah wa hablumminannas).

Altruism behavior is a concern that is not selfish but for the good of others (Baron & Byrne, 2005). It can be concluded that altruism is voluntary behavior that is carried out voluntarily to meet the needs of others regardless of self-interest and selflessness in others. Altruism in the Islamic Perspective that everyone has a love for others, the expression of love is to give something to other people both in material form, attention, and all kinds of goodness, and do not expect anything but good for others (Nashori, 2008).

According to Cohen (Nashori 2008) revealed there are three altruism characteristics, namely: (1) Empathy, the presence of sympathy and attention to others, and someone who is very concerned with others will always feel the feelings of others when joy and sorrow. (2) The desire to give, be generous to others, give voluntarily some of the items to other people even though the person does not ask for it. (3) Voluntary, what is given is solely for other people, there is no desire to get compensation.

According to Sarwono (1999) Helping behavior is triggered by factors from outside and within a person. (A) The influence of the situation (1) Bystander, The effect of helping or unhelpful behavior is that there are other people who happen to be with us at the scene (bystanders). The more other people, the smaller the tendency of people to help. (2) Helping if other people also help, In accordance with the principle of reciprocity in social norm theory the presence of someone who helps others will trigger us to also help. (3) Time pressure, busy and hasty people tend not to help, while relaxed people are more likely to give help to those who need it. (4). Ability possessed, If a person feels capable, he will tend to help, whereas if he feels unable, he will not help. (B) Internal Influence (1). Feelings, feelings from within a person can influence helping behavior. (2). Trait factors, people who have high self monitoring will tend to be more helpful because by being a helper he gets higher social rewards. (3) Religion, religious factors can also influence helping behavior. According to Sappington & Baker's research, the effect on helping behavior is not how strong religious obedience itself is, but rather how the beliefs and beliefs of the people concerned about the importance of helping the weak as taught by religion (Sarwono 1999).

Religiosity comes from the religious word in Latin "religio" whose root is religure which means binding. Thus it implies that religion or religion in general has rules and obligations that must be obeyed and carried out by their followers. All of that functions to bind a person or group of people in their relationship with God, their fellow human beings and their natural surroundings. (Ghufron & Risnawita, 2012).

The level of religiosity is one of the factors for someone to act altruism. Thus religiosity is related to the application of an understanding of one's Islamic teachings which then becomes the foundation of a person in terms of helping his life on the basis of Islamic teachings. A strong religious basis makes Islamic teachings as a guide for his life in carrying out daily activities and an understanding of Islamic teachings can direct someone to behave well in society in accordance with social norms and religious norms. (Ghufron & Risnawita, 2012).

Method

This type of research uses a quantitative approach to the type of correlation approach. Population is a generalization area consisting of objects / subjects that have certain qualities and characteristics determined by researchers to be studied and then conclusions drawn (Sugiyono, 2011).

The population in this study were 60 santri Islamic boarding schools in Hidayatul Hikmah Mojosari consisting of 23 male students and 37 female students. The sampling technique used in this study was purposive sampling technique, which is with the requirement to take student > 2 years. Data collection techniques used in this study to obtain data are using a psychological scale. There are two types of scale used in this study, namely, the scale of altruism behavior and the scale of religiosity.

The data analysis used in this study is correlation. Correlation test and linearity test to determine whether the variable religiosity and altruism behavior have linear relationships. The analysis technique used in this study is Kendall's Tau.

Results

Linearity test aims to determine whether two variables have a linear or not significant relationship. This test is used as a prerequisite in correlation analysis. Testing on SPSS using Test For Linearity with a significance level of 0.05. Two variables are said to have a linear relationship if the significance (linearity) is less than 0.05.

The following is a table of results from the linearity test of religiosity variables with altruism behavior

Table 1.1
Data Linearity Test

Variable	Significant
Religiosity with Altruism behavior	0,000

Based on table 1.1 above the relationship between religiosity and altruism behavior is linear. This can be seen from the significance value of linearity of 0,000. because the significance is less than 0.05, it can be concluded that between the variables of religiosity and altruism behavior there is a linear relationship.

Hypothesis testing is done by using the Kendall correlation hypothesis test and it has been estimated that the hypothesis proposed in this study is that there is a relationship between religiosity and the altruism behavior of santri in the Hidayatul Hikmah Mojosari Islamic boarding school. To test the hypothesis, data analysis was performed using the Kendall's correlation test using the SPSS program assistance.

The following is a table of the results of the Kendall test to know religiosity with altruism behavior.

Table 2.1
Hypothesis Test

Variable	Correlation Coefficient	Significant
Religiosity with Altruism behavior	0,453	0,000

Based on table 4.1 above obtained a correlation coefficient of 0.453 with significant 0,000, obtained a correlation coefficient of 0.453 indicates that there is a positive relationship between religiosity and altruism behavior.

Religiosity possessed by santri has a positive relationship with altruism behavior. This means that the relationship between the two variables (religiosity with altruism behavior) is unidirectional, which is in the same direction as the relationship between the two variables is directly proportional. The higher religiosity will be followed by the higher altruism behavior.

The results obtained are 0.453 means that there is a significant positive relationship between religiosity and altruism behavior, meaning that the relationship between variables is directly proportional and in the same direction. The higher religiosity will be followed by the higher altruistic behaviour and vice versa.

Discussion

Based on the results of the above analysis, it shows that there is a relationship between religiousness and santri altruism behavior that the santri religiosity of the Islamic boarding school Hidayatul Hikmah has a positive relationship with altruism behavior, which means that the relationship between religiosity and altruism behavior is directly proportional to the higher religiosity held by Islamic boarding schools. it will be followed by the high santri's behavior of altruism.

This was also explained by Sappington et al (1995) that religion has a relationship with helping behavior. What influences helping behavior is not how strong religious observance itself is but how the beliefs and beliefs of the people concerned about the importance of helping the weak as taught by religion (Sarwono 1999). This means that all the teachings of Islam that are believed by every santri will become the foundation of the santri when helping someone in need.

Altruism in social psychology is called helping behavior without expecting any reward, as the results of the study show that the higher the religiosity of the santri, the higher the behavior to help someone. Altruism is a positive behavior that must exist in each individual to be able to live in a society. Altruism or helping behavior is to do an action that is beneficial to others and ease the burden of others (Prasetyo, 2014).

As with the dimensions of religiosity, the dimensions of practice emphasize the extent to which the implications of religious teachings influence a person's behavior in social life. Helping behavior to others is a behavior that is needed in social life as Islamic teachings teach to help each other with fellow brothers.

Helping behavior in the Islamic perspective is a worship that has been embedded in each individual. Worship is carried out with a sense of sincerity without expecting anything in return except for Allah alone (lillahita'ala) (Prasetyo, 2014). In this case in accordance with the results of research conducted by researchers that the high religiosity possessed by santri provides its own benefits in social life as well as the santri's altruistic behaviour is a form of Islamic teachings held by santri Islamic boarding schools hidayatul hikmah Mojosari.

After (Ghufron & Risnawati, 2012) The level of religiosity is seen from the individual's attachment to his religion. This shows that the individual has lived and applied the teachings of his religion, so that it influences all actions and views of his life. Based on the explanation above, it can be concluded that there is a relationship between religiosity and altruism behavior of Islamic boarding school students hidayatul hikmah Mojosari. This means that santri boarding schools in Hidayatul Hikmah Mojosari on average have high religiosity and high altruism behavior.

Conclusion

The results of this study indicate that there is a significant positive relationship between religiosity and altruism behavior, the higher the santri religiosity, the higher the altruism behavior of santri, and vice versa the lower the religiosity, the lower the altruism behavior.

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THE COGNITIVE THERAPY TO REDUCE NAIL BITING BEHAVIOR FOR A XII GRADE STUDENT IN FACING SCHOOL MAJORS

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Abstract

Nail biting is a habit by bitting nail done by most people when they are nervous, stressed, hungry, bored or trying to distract attention. When this habit is done, just to distract from boredom or nervousness, it is still considered natural. However, if these nail-biting habits are excessive until the skin of the finger is peeled off and bleeding, it becomes a serious matter. Besides being harmful to health, it can also be a symptom of psychological health problems, namely anxiety disorders. This research aims to decrease nail-bitting habit done by one of XII grade students of SMA XXX in Sidoarjo due to anxiety in facing class placement. It is a qualitative research using study case approach with descriptive analysis to collect the current situation. Data collection methods used are observation, interviews and documentation. The intervention provided is in the form of cognitive therapy, which is done once a week for 12 weeks. The results of the intervention showed that there were nail-biting behavioral changes before and after the intervention. Before the intervention, subjects bit their nails until red rashes appeared at several fingertips. After the intervention, the subjects are gradually able to reduce nail biting habits, until the nails grow and come out. This shows that the Cognitive Therapy can reduce nail biting behavior in students who experience anxiety in facing school majors

Keywords: cognitive therapy, nail biting, school majors, student

Introduction

Nail-biting habit is caused by stress, anxiety, or even just because of boredom. It is done because you feel enjoy doing it. It can also be caused by the behavior done by other family members. It is usually done out of consciousness, such as when watching television, reading, or calling. The nail-biter not only bits the part of the nail, but also the cuticle and soft part at the base of the nail. When this habit is done, just to distract from boredom or nervousness, it is still considered natural. However, if these nail-biting habits are excessive until the skin of the finger is peeled off and bleeding, it becomes a serious matter. Besides being harmful to health, it can also be a symptom of psychological health problems, namely anxiety disorders. As written by Ridwan, (in pojoksatu.id, 2015), saying that people who have biting nail habit are indicated as: 1) Easy to frustrate; 2) Impatient; 3) Not satisfied when unable to reach goals; 4) Get bored quickly; 5) Easily being anxious and tense; 6) Feel loneliness. Yoshika (2015) wrote

that nail biting habits are common in women. About 33% of this habit is found in children aged 7-10 years. Then around 50% occur in children aged 10-18 years, because they are entering puberty. Around 23% occur in young adult groups are 18-22 years old. Most nail biting habits are caused by stress or under certain pressure. In some people, this habit lasts up to the age of 20 and stops at the age of 30 years.

There are several forms of nail biting habits. The first form is seen during childhood and this habit will disappear by itself. The second form is more chronic behavior. It can become a daily habit. When this habit is first seen in children, it is difficult to predict the shape of the nail-biting habit. Usually, parents only let and warn when it is often done.

Based on the observations in the field, the way to nail done by nailbitters is to bring the fingernail to the teeth, then the nail is bitten until it is cut off. If the fingernails are in a short condition, then the perpetrators bite the nails while pressing the finger so that the nails can be biting until cut. From this habit, the nail appearance looks strange and slightly jagged, even the skin around the nail is peeled off, because not only biting the nail, the nail-biter sometimes bites or skins the skin in the nail area.

As written by Siahaan (2016), that someone with repetitive behavior (such as nail biting) tends to be a perfectionist, in the sense that they are unable to relax more and finish a job at a normal pace. According to O'Connor (2013) people who have nail-biting habits tend to be more easily frustrated, impatient, and dissatisfied when their goals are not achieved. So that people who have nail-biting habits experience anxiety more often when doing work, because they think that the work must be completed perfectly.

This research uses the case study of one of the XII grade students in Sidoarjo XXX High School. The subject is the second child of three siblings. According to information from the subject's parents, the subject are strong-willed and perfectionis person. The subject has strong desire to enter one of the military academics. Since he was in junior high school, he focused on physical activities that supported his goal. Moreover, he more focused after entering the selected high school. Academically, he showed good results. He followed any extracurricular activities, namely Flag Lifters, Scouts, Swimming and Music Forces. But there is a habit that makes his parents worried about him. Almost on every occasion, he always bites his nails, until the shape of the nails turns strange and causes red rashes on several fingertips of his hand. According to his parents, the nail biting habits began to appear when he was at X grade of Sidoarjo XXX High School. Initially, his parents were not worried because it was considered normal. However, when the habit was more often done and is bad for his fingers, his parents begin to worry and try to eliminate the habit.

Based on the observation and the interviews conducted to the subject, he is very optimistic and has strong determination to achieve something. He chose to enter Sidoarjo XXX High School, because he wanted to realize his dream of becoming a cadet. In Sidoarjo XXX High School, many were forged and trained on activities related to the military. He was more convinced after receiving the results of the psychological examination conducted by the school at the beginning of entering X grade. From the results of psychological examinations, based on general abilities and intelligence, he was advised to enter the science class group. However, in the final results, the school placed him in social studies class on the grounds that the quota of the science class has been fulfilled. Of the 462 students, 160 students entered the science class, the rest included subjects in the social studies class. He perceived that as a failure because he

was failed to fulfill his dream of entering a military academy. Since then, he often unwittingly bits his nails at every opportunity. Until the research is done, his fingers are only half and the tips of the fingers appear reddish. According to him, he was not aware of the habit and did not feel any pain, even though the skin of his fingertip had turned red and the nails were half.

There are several ways you can do to eliminate nail biting habits. According to Nabilla (Kompas.com, 2018), she said that there are four ways to eliminate this habit, namely; 1) Cut nails so short that no nails can be bitten; 2) Paint nails. Stern (2011) explained that nail paint contains components that taste bad, namely denatonium benzoate and sucrose octachetate; 3) Habit reversal. It is a treatment intended to help eliminate bad habits such as nail biting. The principle of reversal habit is to learn what causes nail biting habits, then switch when the trigger comes with a game using a stress ball, fidget cube or spinner fidget and rubber band. Stern's study in 2011 stated that the reversal habit was effective in interfering with the habit of nail biting and other habits; 4) Therapy. If there is anxiety or other psychological components behind nail-biting habits, the offender needs to see a psychiatrist or therapist to identify the stress factors experienced.

One effective therapy used for clients who experience psychological disorders such as anxiety, self-distrust, mood disorders, obsessive-compulsive disorder, post-traumatic stress disorder and so on, is cognitive therapy (Shives, 2005). Cognitive therapy is a system of psychotherapy that is based on emotional disturbances (Beck, 1979). It is applied to depression problems and other psychiatric problems such as panic, anger control problems and drug users, low self-esteem, suicide risk, helplessness. It is also effective in eating disorders (bulimia, anorexia nervosa), personality disorders (Stuart & Laraia, 2005). Cognitive therapy is a short-term structured therapy that uses active collaboration between patients and therapists, to achieve therapeutic goals. This therapy is oriented towards the current problem and its solution. Focus on understanding deviant beliefs, and using techniques to change maladaptive thinking. Through cognitive therapy, clients can be trained to change the way to interpret and view things, when clients experience disappointment, so they feel better and can act more productively. Cognitive therapy was developed by Aaron Beck. The purpose of cognitive therapy is to change negative thoughts to be positive, to know the causes of perceived negative feelings, to help control oneself, prevention and personal development (Burns, 1998), obtain symptom relief as quickly as possible, to help the client in identifying dysfunctional patterns of thought and action and to guide the client to evidence and logic that effectively tests the truth of dysfunctional thingking. Therapy focuses on changing "automatic thinking". (Townsend, 2008). Changing beliefs (presuppositions) is illogical, wrong reasoning, and negative statements that underlie behavior problems (Stuart & Laraia, 2005). Through this therapy, individuals are taught or trained to control the distortion of thoughts, by really considering the factors developing and the persistence of mood disorders. (Townsend, 2008).

Maladaptive responses come from cognitive distortions, which originate from logical errors, errors in looking for reasons or individual views that do not describe reality. The kinds of cognitive distortions (Stuart & Laraia, 2005) are among others:
1. Overgeneralization: Overestimating or exaggerating about a single event.

2. Personalization: Relates to external events that are transferred to oneself (itself as the cause of a negative external event) which in reality is actually not the first to be responsible for it.
3. Dichotomous thinking: Think of all things good or all bad.
4. Catastrophizing: Think bad things about other people and events.
5. Selective abstraction: Focuses on details but without relevant grounds.
6. Arbitrary inference: Inference of the negative without basic support.
   a. Mind reading: believe that someone knows the thoughts of others without validation.
   b. Magnification / Minimization: exaggerates or understates an important event.
   c. Perfectionism: the need to do perfectly to feel good / comfortable about him.
   d. Externalization of self worth: Determining self-worth based on acceptance of others

Based on this, it can be concluded that the maladaptive behavior of the subject was caused by cognitive distortion of catastrophizing in which the subject thinks badly about the events that happened to him. From these bad thoughts, to divert disappointment and anxiety, he does nail-biting habits. Departing from the problems that occur, this research uses cognitive therapy as a way or technique to handle this case. He is gradually trained to change the way to interpret and view everything that causes disappointment, change negative thoughts to be positive, know the causes of negative feelings that are felt and help control themselves, so that he feels better and can act more productively.

The indicator of success in this research is when he is able to understand the causes of perceived negative feelings, change the understanding and negative interpretation of the causes of his disappointment into positive thinking, and gradually being able to release nail biting habits, so that the nails can grow back to normal.

Method

The study was conducted at Sidoarjo XXX High School. The subject is a XII grade student who has nail-biting habit that results in the emergence of red rashes on all nails, shortening the nails to almost the base of the nail and peeling the skin around the nail due to frequent biting. This research is a qualitative research with descriptive approach. This type of research is a single case study. Surakhmad (1982) limits the case study approach as an approach by focusing attention on a case intensively and in detail. The method of data collection is done through interviews, observation, document review to describe a case in detail (Mulyana, 2004). The intervention provided was in the form of cognitive therapy, carried out once a week for 12 weeks, divided into four sessions. Session I, meeting 1-2; Session II, meetings 3-5; Session III, 6-10 meeting; and Session IV, meetings 11-12. The data is presented in the form of verbal words (descriptive), not in the form of numbers (Muhadjir, 1996, h.2). The data presented is about the general description of the object of the research. The sampling technique uses purposive sampling technique, because this research wants to identify specific things according to the research. Purposive sampling is sampling based on certain considerations such as the characteristics of the population or characteristics that have been previously known (Notoatmodjo, 2010). In this case, the source of data really

understands, knows and experiences about the case study. The sources of data are obtained from the subject, informants (the subject's parents), written data (results of psychological examinations) and unwritten data (rashes and sores on the nails). Data analysis techniques are carried out after the data collection process is obtained, through descriptive analysis. This descriptive analysis technique describes the therapeutic process that has been carried out on the subject, then compares to the conditions of the subject before and after the therapy.

In the process of implementing cognitive therapy, according to Stuart & Laraia (2005), therapists help clients to do cognitive restructuring by:
1. Monitoring thoughts and feeling (monitoring thoughts and feelings): using a specific format / daily record of dysfunction thought form. Consists of 5 boxes: situation, emotional, automatic mind, rational response and expected outcome (outcome).
2. Questioning the evidence
3. Examining Alternatives (examining alternatives) are explored based on the strengths and sources of coping with the subject.
4. Decatastrophizing: Also called "what if" technique helps the subject to evaluate the situation. Researcher's question: "what is the worst thing that will happen?" "How do other people deal with such situations?"
5. Reframing: is a strategy that modifies or changes the subject's perception of existing situations or behaviors by looking from a different perspective.
6. Thought Stopping (stop thinking): this technique is very well used when the dysfunctional subject identifies thoughts about the problem and talks about problems (through imagination), the researcher will say STOP after that the subject needs to practice this on his own.

Doyle, 1998 (in Erford, 2017) describes a specific seven-step procedure for using cognitive therapy with cognitive restructuring techniques, namely:
1. Gather background information to reveal how clients deal with problems in the past and present.
2. Help the client become aware of the thought process. Discuss real life examples that support the client's conclusions and discuss different interpretations of the evidence.
3. Check the client's rational thinking process, which focuses on how the client's mind influences his welfare. Counselors can exaggerate irrational thoughts to make their points more visible to clients.
4. Provide assistance to clients to evaluate client beliefs about the patterns of logical thinking of clients themselves and others.
5. Helping clients change their internal beliefs and assumptions.
6. Repeat the rational thought process once again, this time by teaching about important aspects to the client using real life examples. Help the client form a reasonable goal, which the client will be able to achieve.
7. Combine "thought stopping" with simulation, homework and relaxation until logical patterns are truly formed

According to Setyoadi, et al. (2011) cognitive therapy is the main capital in changing symptoms. Therapy takes place between 12-16 sessions, with the following steps:
1. Initial phase (sessions 1-4)
   a. Establish a therapeutic relationship with the client.

     b. Teach clients about the wrong cognitive forms and their influence on emotions and physical.

     c. Determine the purpose of therapy.

     d. Teach clients to evaluate automatic thoughts.

2. Mid phase (sessions 5-12)

     a. Changing gradually false beliefs.

     b. Helping clients recognize the roots of self-confidence. Clients are asked to practice their skills in responding to things that cause depression and modify them.

3. Final phase (13-16)

     a. Prepare clients for termination and predict high-risk situations that are relevant for recurrence.

     b. Consolidate learning through self-therapy tasks.

In this study, the procedure of implementing cognitive therapy was carried out based on the development module from the Specialist Therapy (Psychotherapy for Individuals) module, which was compiled by Ns. Ni Made Dian Sulistiowati, M. Kep., Sp.Kep.J. (2016), which is adapted to the research needs.

Table 1
Draft Intervention (CBT Module)

Session	Objective	Method
1. Introduction to CBT Duration: 90 minutes	- Discussion and formulation of client problems. - Exposure to CBT interventions and setting an intervention schedule. - Children and parents know the relationship between thoughts, feelings, and behavior as a basis for CBT intervention	Discussion - Psychoeducation - Fill in the worksheet 1. "Circle 'Happy'" 2. "Box' Difficult '"
2. Identification: How do I think? Duration: 2x 90 minutes	- Helping children to identify their automatic thoughts and the reason why automatic thoughts appear easily. - Identify emerging events as well as the positive and negative effects of automatic feelings and behaviors that arise - The main purpose: identifying thoughts that can produce emotional changes.	- Discussion - Fill in the worksheet 1. "Daily Notes: My Thoughts and Feelings" 2. "Negative Thoughts?
3. Identification: Why is my mind wrong? Duration: 2x 90 minutes	Knowing some types of thinking errors. - Able to identify and understand the types of thinking errors. - Make the child have the desire to change the wrong way of thinking.	Material error thinking - Worksheet 1. "Identify My Mind" 2. Cases of thinking errors 3. "Daily Note: My Mind"
4. Evaluation: Balanced Thinking Duration: 2x 90 minutes	- Analyze the mind whether it includes mistakes in thinking or not. - Check the evidence that supports or refutes negative thoughts. - Get a more balanced alternative mind and mind.	Read articles of successful figures after several failed attempts Fill in the worksheet. 1. "Diary: Finding Evidence" 2. "Balanced Thinking"

The development is based on Doyle's (1998) cognitive restructuring technique, with consideration in accordance with the grand theory used, namely Aaron Beck's (1967) theory of cognitive therapy as described in the introduction. The therapy takes place for 12 meetings, three times a week, with a description of the activities in the following table.1.

Advance Table 1
Draft Intervention (CBT Module)

Session	Objective	Method
5. Psikoedukasi Orang tua Durasi: 90 menit	Parents understand the cognitive thinking / distortion errors made by children - Parents understand the difficulty of children to change their condition. - Parents can help children reduce nail-biting behavior due to anxiety	-Materials / modules to parents to help children reduce nail-biting behavior due to anxiety
6. Development: How to set my mind? Duration: 90 minutes	- Helping children to realize the wrong thoughts and eliminate the effects that occur afterwards. - Develop and apply balanced thinking through positive self-talk strategies .	Discussion - Meet with idolized figures - Fill in the worksheet 1. "Challenging Your Mind" 2. "See Your Positive" 3. "Positive Self-Talk"
7. Development: How to manage my feelings? Duration: 2 x 90 minutes	- Increase awareness of feelings and describe emotions that make you uncomfortable, such as anger, depression, and stress. - Identify feelings that are felt when thinking about negative things. - Know how to calm down or relax when feeling uncomfortable.	Discussion - Psychoeducation - Fill in the worksheet 1. "What Happened?" 2. "Where's My Feeling?", 3. "Learning for Relaxation" and role-play material
8. Development: Changing Behavior Duration: 90 minutes	- Make steps to change behavior. - Develop more effective problem solving skills.	Discussion and worksheet 1. "Climbing the Ladder" 2. "Rootmap reaches goals" 3. "Talk Yourself

Results

Based on the observation and interviews conducted for two weeks after the cognitive therapy ended, there were significant changes in positive thinking and nail-biting habits of the subject. Gradually, he is able to accept the existing conditions and change the thinking of the situation that occurs, from negative thinking to positive thinking. He begins to change his mind about his ideals, which being a cadet is not the only ability he has. He begins to realize that his abilities are in the fields of management and communication. He was optimistic to enter the Faculty of Law. He begins to think positively that entering Social Sciences was not the initial failure to become a cadet, because there was still a chance to become a cadet in the police force. Slowly, he is able to reduce nail biting habits, so that his nails can grow back naturally. The results of the cognitive therapy can be found in the following Tabel 2.

Table 2
Interventions for C B T

Aspects	Before Intervention	After Intervention
Mind	- S blamed the school for being inconsistent in the class placement - S thinks that he has the ability in the field of exact sciences, mathematics and physics - S prefers to be active in extra-curricular activities because he can forget the disappointment he felt - S thought that his dream was only to become a cadet.	- S tries not to blame anyone and apply positive self-talk - S. begins to realize his abilities in other fields, such as communication and numeracy, S begins to think about trying to pursue other fields, namely law and accounting

Advance Table 1
Draft Intervention (CBT Module)

Session	Objective	Method
Feeling	- S often feels disappointed when remembering the class placement - S often feels failed in achieving his goal of being a cadet - S often feels anxious when thinking the failure he feels	- S tries to accept the class placement - S wants to show to his school that he is able in science lesson by taking Physics and he shows that the reports of mathematic and physics are good.
- Behavior	- When thinking, filling in empty time, watching television or playing cellphones, S always biting the nails to the base of the nail, so that the tips of S's fingers appear red, the skin around the nails peels and the nails cannot grow, even more nearly exhausted	- S begins to be able to accept the results of the majors conducted by the school - S wants to show the school that S is able to learn the exact lesson by taking Physics lessons as a cross request and shown by good learning outcomes in mathematics and physics subjects

Discussion

Based on the process of cognitive therapy in one of the XII grade high school students in determining majors that do nail biting habits, the results obtained that cognitive therapy can reduce or reduce nail biting habits. This can be seen from the results of the data qualitatively showing a significant change in the habits of nail-biting subjects. This change appears in changes in the nail form of subjects who began to grow naturally after getting cognitive therapy.

Based on observations and interviews before undergoing cognitive therapy, as well as the results of qualitative analysis, subjects subjected to nail biting because they felt disappointed, worried and anxious about the situation experienced. Based on the results of the diary report, it appears that the subject has a negative view when facing an unwanted event. When subjects are placed in the social studies class, subjects consider school unfair. Based on the results of psychological examinations, the subjects should enter the science class. Anxiety, d isappointment and the subject's worries about the failure of his dream of entering the military academy, resulted in the emergence of unconscious maladaptive behavior, namely nail biting.

Based on the observations at the beginning of therapy, nail biting habit is often done by the subject, both when playing mobile phones, waiting for therapy and during the therapy process. He is not aware with the habit. He stops when he gets a warning.

Nail biting is considered as behavior that is carried out automatically and unintentionally. Nail biting can sometimes be done by psychologically stable individuals. But usually this activity is a sign of losing control of things that are considered difficult. The psychological factors associated with this behavior are stress, anxiety, and bad mood. Sometimes this habit is difficult to stop because it is habitual and becomes daily routine. Reporting from the Huffington Post, 2014 Torgerson states that habits are a behavior pattern that is repeated and generally is a normal stage of development that occurs naturally and complexly. Everyone who does this habit often does not recognize the habitual behavior. The subject assessed the placement of majors in school as something negative and causing pressure. The pressure experienced is considered as his failure and will damage the future. Nail biting is a refuge to reduce negative things in the subject.

This habit can be changed through a process of therapy, namely cognitive therapy. This therapy teaches clients to have the ability to recognize negative thoughts and evaluate them, so they can turn into positive beliefs (Okun in Haeba, 2011). The objective of cognitive therapy can be optimally carried out by the subject as in the task given in the first session (problem identification), the subject is able to identify the problem and his understanding when facing problems. In the second session (mind capture) the subject is able to identify negative thoughts based on his experience, both during the direct therapy process and when doing homework. In the third session (practicing accepting the incident) the subject began to be able to accept the event with the selected value, so that at the last meeting (commitment and prevent recurrence) the subject was able to manage cognitively to reduce and eliminate negative thoughts and replace them with more positive thoughts so that able to reduce nail biting habits.

Conclusion

Based on the results of the study it can be concluded that:
1. In this study, cognitive therapy was proven to reduce nail-biting behavior in one of the high school XII grade students in the face of majors.
2. The reduction in nail biting behavior is influenced by the learning process carried out by the subject. The seriousness of attending therapy and the exercises performed outside the therapeutic process also determine success.
3. The success of therapy is also influenced by the therapist's ability to deliver material. Based on the evaluation results, the subject stated that he was able to understand easily, because the therapist delivered the material clearly and pleasantly.
4. The subjects' benefit from cognitive therapy is in the form of relief feeling because they can release feelings that have been buried by themselves. Thus, they can think more productively

Some things need to be adjusted so that cognitive therapy in subsequent studies can provide more optimal results. The things are:
1. Provision of cognitive therapy needs to consider the characteristics of the subject. Among others, he has good level of intelligence, which is indicated by a minimum

level of education of high school or equivalent, so that it is easier to understand what is taught.

2. The implementation of cognitive therapy needs to consider therapeutic procedures. It is better not to change the procedure in the order of the therapy session, because in this research multilevel techniques from the beginning help the subject to understand what is being taught as a gradual learning process.

Thank-You Note

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THE EFFECTIVENESS OF DRAWING THERAPY TO REDUCE POST TRAUMATIC STRESS DISORDER (PTSD) FOR SEXUALLY ABUSED VICTIMS BASED ON AGES

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Abstract

The study was aimed to determine the effectiveness drawing therapy for decreasing Post Traumatic Stress Disorder in victims of sexual violence and to find out the difference in the effect of drawing therapy to reduce symptoms of Post Traumatic Stress Disorder viewed from the age of children and adolescents. The method used in this study was a quasi-experimental with one group pretest-posttest design. The subjects used in this study were 8 subjects, consisting of 4 children and 4 teenagers who show symptoms of PTSD height measured using a scale PTSD developed from symptom-symptoms of PTSD, written by the APA (American Psychiatric Association) with the reliability value of 0.939 and validity value more than 0.3. Data were analysed by using the Wilcoxon Sign Ranks Test for the first hypothesis. The results obtained from these calculations are the value of Z-2,552 with a significance level of 0.011 (p<0.05), the hypothesis is accepted and it can be interpreted that there is an effect of drawing therapy on decreasing symptoms of Posttraumatic Stress Disorder in victims of sexual violence. The second data analysis used the Mann Whitney U test with a score of Z - 1.340 with a significance value of 0.180 (p> 0.05). The hypothesis is rejected, which can be interpreted that there is no significant difference in the decline in PTSD among adolescents and children who were victims of sexual violence. So it can be concluded that PTSD can be reduced by using drawing therapy but there is no difference in decreasing PTSD in children and adolescents when given drawing therapy.

Keywords: adolescents, age, children, drawing therapy, post traumatic stress disorder.

Introduction

The phenomenon of sexual violence against children is increasingly common even in various countries. Cases of sexual violence against children and adolescents continue to increase from time to time. The increase is not only in terms of quantity or number of cases that occur, even from quality.

In Indonesia, the number of child violence reported to the Indonesian Child Protection Commission (KPAI) in 2018 was 4,885 cases, an increase of 300 cases more than in 2017. By quality, violence that occurs in children is no longer merely inviting, but has arrived at rape and even accompanied by murder. The culprit is no longer an adult, but a peer.

The nature of the violence occured can be done in various places. Violence that occurs in various kinds and among them are acts of violence and sexual harassment that

leads to rape behaviour. Rape is generally interpreted as a form of sexual relations carried out by coercion by one of the parties and not a common will. According to Poerwandari (in Noviana, 2015), rape is a sexual relationship carried out without mutual will, imposed by one party on the other. Victims can be under physical and / or psychological threats, violence, unconscious or helpless, underage, or mentally retarded and other disability conditions so they cannot be held responsible for what happened to him.

According to the Chairperson of the Child Protection National Commission (KOMNAS), Arist Merdeka Sirait (2015) said there were 4 factors that led to the emergence of many cases of sexual violence and abuse in Indonesia, firstly the existence of children who could potentially be victims of violence. A kid who has the potential is a child who tends to be timid, hyperactive and dressed tightly. The second factor is the presence of children or adults who have the potential to become perpetrators. Potential to be a perpetrator due to consuming pornographic content which is now very easy to access via the internet. The third is the opportunity for violence. This is due to a lack of supervision from parents to children. K fourth is the originator of the victim and the offender, the child who is the originator is usually the child who likes to make physical contact without being able to refuse.

The potential for sexual violence is from children to the elderly, both men and women. In this study, more focus on sexual violence occured in children and adolescents. Children are more likely to harbour feelings and thoughts when they become victims. This happens because the child still does not understand what is happening to him, besides the limitations of the language possessed by the child (Horowitz & Livneh, 2002). While teenagers have the opportunity to tell about the events experienced, but often teenagers do not use these abilities and opportunities. This is because adolescents assess the events that have occurred are embarrassing events and close the future.

Frequent exposure to violence makes children and adolescents more and more harbour negative emotions and form memories and thoughts that they are victims and think that the perpetrator is someone who is evil who will always do violence to him. This distortion makes children and adolescents easily reminded of traumatic events that have been experienced, if individuals encountered the same stimulus as the previous event. These events trigger negative emotions and physical reactions. If individuals experience serious pain and experience fear over it for more than a month the individual is said to experience posttraumatic stress disorder (PTSD).

Children and adolescents who experience victims of violence both physically, verbally and psychologically can cause prolonged trauma. According to Stamm (1999), traumatic stress is a natural reaction to events that contain violence (such as group violence, rape, accidents, and natural disasters) or terrible conditions in life (such as poverty, deprivation). This condition is referred to as Post Traumatic Stress Disorder (PTSD).

PTSD is a symptom after a life-threatening traumatic event that results in psychological distress that damages the integrity and existence of himself or others. PTSD can occur in children and adolescents, but most studies focus more on adults. In DSM-IV-TR, PTSD in children describes symptoms such as recurring dreams, nightmares, and physical symptoms such as abdominal pain and headaches (APA, 2000; Sadock & Sadock, 2007).

Considering that there are so many effects of PTSD in children and adolescents, namely changes in behaviour, withdrawal, nightmares, even insomnia, PTSD must be addressed with appropriate intervention. Art therapy is one therapy that can be used to handle cases of children with PTSD due to violence, disaster, or war. Art therapy judged to be able to express feelings, thoughts, and things that disturb non-verbally (Malchiodi, 2003).

The applied art therapy, among others: psychodrama, dancing and movement, children drawing, finger painting, face and body painting (Martin, 2014; Foa, 2009; Fritz & Westrhenen, 2014; Baum, 2007; Malchiodi, 2003)

In this study, more focus on the therapy drawing can help victims of sexual violence, especially children to express or describe thoughts, feelings and traumatic events experienced. The use of Drawing therapy is considered effective enough to treat PTSD in children (Emerson, 2009; Foa, 2009). The success of Drawing therapy in reducing the level of PTSD that occurs in children with PTSD also depends on the willingness of the child, the presence of caregivers, the environment, and the therapist itself (Emerson, 2009).

Theoretical Review

Posttraumatic Stress Disorder (PTSD)

Posttraumatic Stress Disorder (PTSD) is an anxiety disorder that can from a frightening or terrible, difficult and unpleasant event or experience where there is physical abuse or feeling threatened (American Psychiatric Association, 2000)

In the Diagnostic and Statistical Manual of Mental Disorders, (DSM-V), PTSD is defined as an event or several traumatic events experienced or witnessed directly by someone in the form of death or death threat, serious injury, a threat to one's physical integrity. The incident must create extreme fear, horror, helplessness (Sadock, BJ & Sadock, VA, 2010)

Factors that cause PTSD, according to Kaplan & Sadock (2007) include: biological factors, psychological factors, social factors, risk factors, and several other contributing factors that are not included above.

Symptoms of Posttraumatic Stress Disorder (PTSD) written by APA (2000). There are three groups of PTSD signs and symptoms including:

a. Re-Experiencing Symptoms (Re-experiencing the traumatic event)

he sign of PTSD symptoms is to re-experience traumatic events in various ways and this happens continuously and persists. With the appearance of these signs and symptoms, trauma will be felt again by individuals suffering from PTSD through dreams, memories or problems that are responses to the trauma experienced (National Centre For PTSD, 2009). According to Yehuda, 2002 (in Ira, 2011), signs and symptoms in this group are manifestations of memories of unwanted incidents, appearing in the form of disturbing shadows or imaginations, nightmares and flashbacks. Signs and symptoms that arise are:

1. Continually having unpleasant thoughts or memories about these traumatic events (Frequent having upsetting thoughts or memories about a traumatic event)
2. Having a recurring nightmare (Having recurrent nightmare)

3. Acting or feeling as if the traumatic event will recur is called Flashback (Acting or feelings of distress when Reminded of the traumatic event)
4. Having a strong feeling of suffering when I recall those traumatic events (Having very strong feelings of distress when reminded of the traumatic event)
5. The heart beats fast and sweats when remembering traumatic events (Being physically responsive, such as experiencing a surge in heart rate or sweating to reminders of the traumatic event)

b. Avoidance Symptoms

Signs and symptoms of PTSD include a decrease in the response of the individual in general and avoidance behaviour that persists in everything that reminds the client himself, such as thoughts or feelings about the trauma experienced, or it could be because of an external stimulus or environment that can generate memory or unpleasant feeling. In addition, the signs and symptoms of PTSD in this group include a decrease in emotional abilities, feeling far from others and not having aspirations or expectations that will be fulfilled in the future (National Center for PTSD, 2009). Signs and symptoms in this group are:

1. Try hard to avoid thoughts, feelings or talk about the traumatic event. (Making effort to avoid thoughts, feelings, or conversations about the traumatic events)
2. Trying hard to avoid places or people who can remind you of these traumatic events (Making an effort to avoid people who remind you of the traumatic event)
3. It is difficult to recall important parts of the traumatic event (Having a difficult time remembering the important parts of the traumatic event)
4. Loss of interest in important positive activities (A loss of interest in important, positive activities)
5. Feeling far away or like there is a distance from others (Feeling distant from others)
6. Having difficulty feeling positive feelings, such as pleasure / happiness or love / affection (Experiencing difficulties having positive feelings, such as happiness or love)
7. Feeling as if living in the middle, not expecting to be able to return to living a normal life, getting married and having a career (Feeling as though your life may be a normal life span, get married, have a career).

c. Hyperarousal Symptoms (Alert)

Individuals suffering from PTSD will experience an increase in the physiological mechanism of the body, which will arise when the body is resting. This occurs as a result of excessive reactions to the stressor either directly or indirectly, which is a continuation or the remnants of the trauma that is felt. Signs and symptoms in this group are usually one way to deal with perceived trauma, for example, sleep disturbance is a result of nightmares experienced by clients ((National Center for PTSD, 2009). Signs and symptoms of this group are:

1. Difficulty sleeping or sleeping restlessly (Having a difficult time falling or staying asleep)
2. Easy or irritable or explosive (feeling more irritable or having outbursts of anger)
3. Having difficulty concentrating (Having difficulty concentrating)

4. Always feel like you are being watched or feel as if the danger is eyeing every corner (Felling constantly "on guard" or like danger is lurking around every corner ")
5. Being nervous, uneasy, or easily triggered / very alert (being jumped or easily startled)

Sexual Violence

Sexual violence against children, according to End Child Prostitution in Asian Tourism (ECPAT) International is a relationship or interaction between a child and an older person such as a stranger, sibling or parent where the child is used as a satisfying object for the sexual needs of the offender. This action is carried out using coercion, threats, bribery, deception and even pressure.

Drawing Therapy

Malchiodi (2006) gave examples of what involves drawing therapy sessions and how it differs from art classes. "In most drawing therapy sessions, the focus is about your experience. You are in feeling, perception, and imagination. While drawing therapy may involve learning skills or drawing techniques, the emphasis is generally first on developing and expressing images originating from within that person. , Malchiodi (2003) divided the therapy drawing into 5 main sessions, namely:

1. First session

The first session begins with the identification of problems and habituation to the process of making artwork (images). The main priority in the first session is the presentation of the therapy process, the goal of therapy and getting as much information as possible from the subject. The technique used is a free drawing to familiarize oneself with the drawing process during therapy, egg drawing that aims to find out the subject's view of himself (Malchiodi, 2003), and cave drawings which aim to find out the subject's views on the surrounding environment (Tanaka, Kakuyama, Urhausen in Malchiodi, 2003).

2. Second session

The second session is making pictures from stressor (Malchiodi, 2003). The technique used is family drawing which aims to find out the relationship between the subject and the family, reveal emotions in their social relationships and describe the views of the ideal family and what they actually have (Buchalter, 2009)

3. Third session

The third session is making drawings related to preparing yourself for stressors. The technique used is the human figure (Malchiodi, 2003). This technique aims to determine the subject's perception of himself after experiencing negative events and preparing himself to face feelings and thoughts

4. Fourth session

The fourth session makes the picture "step-by-step management "problem (Malchiodi, 2003). The technique used is best and worst self (Buchalter, 2009; Malchiodi, 2003). Subjects are asked to describe themselves who are in good or bad situations. This technique aims to foster awareness in the subject about the problem, negative automatic thought (NAT), and feelings that have been suppressed, and expose the subject to negative emotions that arise.

5. Fifth session

The fifth session draws images to reduce stress (Malchiodi, 2003). The technique used in this session is a bad situation (Buchalter, 2009). The purpose of bad situations is to reconstruct the negative thoughts of the subject, about the negative events that they experience, and bring about habituation with problems or memories of negative experiences. Finally, the therapist terminates the closing.

Hypotheses

Based on the explanation above, then the hypothesis proposed in this research is namely:
   a. Effectiveness of Drawing therapy for reducing Posttraumatic Stress Disorder in victims of sexual violence.
   b. There is a difference in the influence of drawing therapy on decreasing post-traumatic stress disorder between sufferers of children and adolescents.

Method

This research used experimental research methods. The experimental design used in this study is a quasi-experiment with one group pretest-posttest design. The design of this study only used one group, and did not require a control group.

The subjects used in this study were children and adolescents who were victims of sexual violence with an age range of 8-12 years for children and 16-18 years for adolescents, who had symptoms of Posttraumatic Stress Disorder measured using the PTSD scale of sexual violence developed from PTSD symptoms inside APA (American Psyhciatrics Association). The students who were willing to be involved in the study were 8 people.

The variables studied in this research is the effectiveness of drawing therapy, a decrease in Posttraumatic Stress Disorder (PTSD) in victims of sexual violence. Methods of data collection in this study using a scale of PTSD in victim sexual violence consisting of 31 items prepared by the researchers based on symptoms-symptoms that appear in patients with PTSD from American Psychiatric Association (2000).

Result

First Hypothesis

Existing pre-test and post-test data are then analyzed to test the first hypothesis. The results of data analysis calculations using Non-Parametric Wilcoxon Signed rank test. Wilcoxon Signed rank test is a test used to find out there is a difference between two dependent or paired samples.

Table 1
Descriptive Statistics

	N	Mean	Std.Deviation	Minimum	Maximum
pretest_teenager-child	8	49.75	4,132	45	58
post_ teenager-child	8	46.13	2.997	42	52

Table 2
Test Statistics [a]

	post_teenager-child - pretest_ teenager-child
Z	-2,552 [b]
Asymp. Sig. (2-tailed)	.11

Table 3
Test Statistics [a]

	post_of age
Mann-Whitney U	3,500
Wilcoxon W	13,500
Z	-1.340
Asymp. Sig. (2-tailed)	.180
Exact Sig. [2 * (1-tailed Sig.)]	.200 [b]

According to the results above, data analysis can be obtained p = 0.011 (p <0.05), which means that there is a significant difference between the pre-test and post-test because the value of Z is -2.552 so the hypothesis is accepted. This showed that effective drawing therapy is to reduce the symptoms of Posttraumatic Stress Disorder in victims of child and adolescent sexual violence.

Second Hypothesis

From the post test data that has been obtained, it is then be analysed to test the second hypothesis. In this hypothesis using non parametric data analysis Mann Whitney U test . The Mann Whitney U test was used to determine the median difference between the two free groups if the data scale of the dependent variable was ordinal but not normally distributed.

Table 4
Group Statistics

	Age	N	Mean	Std.Deviation	Std.Mean Error
post_PTSD	Teenager	4	47.75	2.87228	1.43614
	Child	4	44.50	2.38048	1.19024

According to the results of data analysis above, the experimental group obtained a score of Z = -1.340 with a value of p = 0.180. Because the value of p > 0.05, then the

hypothesis rejected. It means that there is no significant difference in the rate of decline in PTSD between adolescent and child sufferers in victims of sexual violence.

Discussion

After drawing therapy on 4 teenagers who were victims of sexual violence who experienced PTSD as a whole experienced the same slight changes, including each subject was able to interact with the surrounding environment even though not yet fully. Some of the changes that are seen are subjects that are initially afraid when in a crowded place little by little they begin to adjust. This happened to subject A and subject B where they had previously felt ashamed if they were in a crowded place, so that the two subjects were more comfortable in the house.

Whereas for child sufferers after being given drawing therapy, there are two children who experience a decline from moderate to low levels that occur in subjects F and G which appear to decrease, namely subjects can sleep peacefully. In subject G after drawing a drawing therapy session, G did the same thing that was done by the G therapist drawing according to his imagination than he while telling stories with his mother. Unlike subject E and subject H they look comfortable to go out of the house. In subject H before if all things have to be accompanied by his mother, slowly H can be independent.

In addition, interventions Drawing therapy is very instrumental in mobilizing sensory storage experiences of trauma to the limbic system through art. Drawing therapy is also able to deal with explicit and implicit memory in the experience of trauma. Memory in the human brain consists of two, namely explicit (awareness, facts, concepts and ideas) and implicit (sensory and emotional). An artistic expression bridge between explicit and implicit memory through the narration of the creations are made, in which the child will menngeksplorasi memory - memory and reason grief experienced. Art activities also help children think and feel what is happening now when making meaning from the experience at issue Children often display their symptoms through games, pictures and / or stories, or may show an indirect concern regarding these events with excessive anxiety and fear (APA, 2000; Sadock & Sadock, 2007; Perrin et al., 2000 in Anderson, 2005).

So, victims of sexual violence who usually tend to be more quiet after experiencing unpleasant events will be very effective when given drawing therapy, considering when drawing a subject also asked to reflect on the image that was made so that the subject can also know what things can be done after experiencing the event with the perception of each subject.

According to Piaget (in Santrock, 2007), individuals at adolescence actively build understanding of the world and have gone through a formal operational stage, where adolescents can reason abstractly, idealistically and logically compared to children, but the facts in the field in this study showed that the same results were obtained after being given drawing therapy to PTSD patients between children and adolescents so that the two did not have a difference even though their age was far apart. This is because drawing therapy it provides the same space for the two groups to express their feelings so that the logical thinking of teenagers decreases. On this occasion feelings are more widely used than logical thinking. This is what causes between children and adolescents to be no different.

Based on the description above, it can be concluded that drawing therapy can be used to reduce PTSD in victims of sexual violence with no need to pay attention to age. Young and older can use drawing therapy to reduce PTSD especially those who are victims of sexual violence. So it can be suggested to allow individuals to draw what they feel so that their feelings become more relieved.

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SHAW'S TEACHING STRATEGY TRAINING ON TEACHER SKILLS IN TEACHING SLOW LEARNER STUDENTS OF REGULER ELEMENTARY SCHOOLS

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Abstract

This study aims to determine whether it is found or not a role for Shaw's teaching strategy training on teacher skills in teaching *slow learner* students of regular elementary schools. Teachers in regular elementary school find difficulties to teach to slow learner students as they have no skill in teaching slow learner students. Thus, the teachers end up in equaling the way they teach to regular and slow learner students. Consequently, it causes the slow learner students to less able to understand their lessons and being left behind to other regular students. The hypothesis proposed in this study is that there is a role for Shaw's learning strategy training on teacher skills in teaching *slow learner* students at Kertajaya Elementary Schools 1/207. This study involved 11 people as its subjects. It employed observation and interview. The data collection methods employed are pretest and posttest and data analized using the Wilcoxon test. The results showed that there is a role for Shaw's teaching strategy training on teacher skills in teaching *slow learner* students of regular elementary schools as it is indicated by a significance value of $0,024 < 0,05$; dan $0,007 < 0,05$.

Keywords: slow learner, teaching strategy, training

Introduction

Kertajaya Elementary School is a public school that is not inclusive does not provide access for students with special needs to enroll. However, the process of enrolling new students at this school is based on government regulations which is limited to prospective students who have family cards of Kertajaya district and have a sufficient age of 7 years. Prospective students who enrolls in Kertajaya Elementary School and meet to the requirements must be accepted by the school. It affects on the presence of prospective students with special needs. The existence of students with special needs is not immediately considered by the school since the very first time, but after conducting learning activities showing that the majority of them are slow learner students.

All kinds of slow learner students can be found in almost all schools, both inclusive and regular schools. This is emphasized by Ana Lisdiana (2012) stating that around 14.1% of students with special needs who attend school include slow learners. It is greater than the total number of children with learning difficulties, mental retarded, and autistic. Slow learner students is defined as those who has intelligence test score

below the average but above the intelligence value of mental disability (Shaw, 2010). Chauhan (2011) adds that slow learner students have limited achievement with IQ ranging from 76 to 98. They are 8% of the overall school population.

Teaching methods provided by teachers to students with special needs (slow learner) are equal to other regular students. Those methods are based on the experience that has been done so far. Teaching students with special needs using equal methods to other regular students complicate them to know and understand what teachers explain from both of the subject matter and instructions given. Slow learner students usually keeping ask or see what their friends do then following them or asking the teacher what to do. Teachers have to explain the subject matter and instructions to students repeatedly so they can understand. There are also many assignments that they do by copying their friends's work. Learning outcomes of slow learner students mostly do not reach the standard graduation value and lead to grade retention. For those who are considered being able to continue in the next grade, they get that opportunity with the note that parents should notice and teach their children at home. However, this is also a note for the teachers due to the difficulties in finding proper teaching methods to slow learner students.

Therefore, teachers in regular schools need knowledge to conduct learning activities to slow learner students which can be improved through training activities. The existence of training activities for teachers in regular elementary schools is considered important because the teacher can optimize the way they teach to slow learner students through training. Also, the training provide knowledge that make teachers can understand more about slow learner students. Bray (2009) explains that training is a process designed to facilitate the learning process of participants. The training aims to support participants to master the knowledge, skills, and behaviors of the training programs. Thus, they can be applied to daily activities.

Malik, Rehman and Hanif (2012) conducted a research using Shaw's learning strategy. The results showed that slow leaner students were more motivated and interested in learning. They were more active, better in learning preparation and faster in learning. In addition, the results showed that Shaw's learning strategy were very effective in improving the adaptive skills, communication and cognitive development of slow learner students (Malik, Rehman and Hanif, 2012). Hence, we were interested in conducting research on Shaw's learning strategy training for teachers at SDN 1/207.

Method

The subjects in this study were 11 teachers at Kertajaya Elementary School 1/207 Surabaya. Before conducting the training, observations and interviews were done first to determine the participant's needs in getting training. Learning evaluation of the training was known by comparing the results of the pretest and posttest before and after Shaw's teaching strategy training. Scale was used to determine the effectiveness of training is Shaw's teaching strategy.

The scale of teaching strategy is based on Shaw's teaching strategy (2010), which includes concrete instruction, generalization, organizing instruction, increasing instructional efficiency, academic motivation and social and economics needs. The data analysis technique used in this study is Wilcoxon technique as the data do not fulfill the assumption of normality and homogenity.

Result

The training was conducted for three days—17th to 19th November 2017—at SDN Kertajaya 1/207 Surabaya. The training process was conducted by the researchers. The following are the test results using the Wilcoxon technique during the 2-days training session:

Table 1
Test Results with the Wilcoxon technique

Variable	Day I	Day II
Slow learner and its teaching strategy	Sig : 0,0024	Sig : 0,007

According to the test results using the Wilcoxon technique, the significancy value for both variables < 0,05, means Ho is denied so there is a significant differences in participant's knowledge about *slow learner* and its teaching strategy either before and after the training.

Table 2
Interview Results of Training Participants

Indicator	Checklist	Description
Giving the concrete instructions	√	All participants apply the teaching strategy especially when giving instructions. They strives to deliver instructions with concrete examples using objects or things around the subject that can be used as examples.
Giving reward when children could answer the questions	√	Only a few teachers applied giving rewards strategy especially for those in small class students: 2nd and 3rd grade. Whereas, for 4th and 5th grade, the teachers rarely did it because they were busy pursuing the subject matter given. Reward is usually given by the teachers in the form of praise to children, allowing them to go home first when they succeed in doing the task, and allowing them to take a break before their friends.
Repeating the previous subject matter when delivering the new one	√	6 teachers repeated the previous subject matter when delivering the new subject because usually it is still related and the task given is similar so the teachers return to the previous subject matter to be explained.
Making the efficient instructions (e.g: using the words "sum" or "subtract" as a direct instruction when delivering addition and subtraction in the mathematics matter.	√	The teachers have used short sentences when giving instructions to slow learner students. When they are assigned to calculate the currency in the story, the teachers instructed "to add or subtract the money". when asking the child to observe or listen to the story and read, copy, the teacher said "listen to the story", "read the book", "written" as well as other lessons.
Increasing the children's motivation	√	Giving motivation to children had also been applied by the teachers, especially those who taught small classes such as 2nd and 3rd grade. When the students looked confused or felt sdifficult, the teacher approached them, then guided and encouraged the childrens to continue learning. Teachers also reminded the children to study diligently at home.
Making children in groups through activities	-	The teachers said that they still did not implement making children into groups because they needed to focus on individual assignments.

> In the small class, the teachers had not tried to apply this because thay were still overwhelmed to control students in class, so the slow learner students were asked to sit in front of them so they could monitor the children.

Based on this evaluation, it shows that the teachers had done five out of six Shaw's teaching strategy in teaching the slow learner students. They are giving concrete instructions, giving rewards when children could answer the questions, repeating the previous subject matter when delivering the new one, making efficient instructions and increasing children's motivation. However, grouping slow learner students with other students was not done by most teachers because they were still focused on individual assignments.

Discussion

Slow learner is defined as students whose intelligence test score are below the average but above of mental disability students (Shaw, 2010). According to Chauhan (2011), slow learner is a student who has limited achievement and has an IQ range of 76-98 which amounts to 8% of the overall school population. Jenson (G.L. Reddy, R. Ramar, and A. Kusuma, 2006) added that slow learner children are slower to capture subject matter related to symbols, abstracts, or conceptual matter.

Steven R. Shaw (in Purwatiningtyas, 2014) explained that one of the characteristics of a slow learner child is showing the higher achievement when informations are introduced in concrete form, but will have difficulty in learning abstract concepts and lessons. Therefore, there should be a strategy to support the slow learner child in learning process by connecting learning activities with real experiences in children's daily lives.

Based on the evaluation of the training, it shows that the participants understand the conditions of the slow learner students and how the teaching method is needed for slow learner students indicated by the trainees. The teaching method had connected to the learning process with real experiences in daily life such as giving concrete instructions where children easier to understand the instructions given, giving rewards when children succeed in answering a problem so that they are more motivated to solve the next problem, repeating the previous subject matter when delivering the new one, making the efficient instructions where children understand more quickly, increase children's motivation and grouping children with other friends.

Malik, Rehman and Hanif (2012) in their research using Shaw's learning strategy argued that slow learner students were more motivated and interested in learning through this strategy. They were more active, prepared better and faster in learning. In addition, the results of the study also showed that Shaw's learning strategy were very effective in improving the adaptive skills, communication and cognitive development of slow learner students (Malik, Rehman and Hanif, 2012).

In the implementation and evaluation of this training, there were limitations to the study: the authors undone more specific behavioral evaluations. The authors only conducted interviews with each training participant to show changes in their behavior by making an evaluation in checklist form. Rather, the author could make an evaluation sheet in self report or self observation form to complete the behavior evaluation that has been done.

Conclusion

Based on the results of the research about learning strategy training of the slow learner students towards the teacher's skills teaching in Kertajaya Elementary School 1/207, it shows that there is an increase in teachers' knowledge and skills after training activities. They have done five out of six Shaw's teaching strategy in teaching the slow learner students. The strategies are giving concrete instructions, giving rewards when children could answer the questions, repeating the previous subject matter when delivering the new one, making efficient instructions and increasing children's motivation. However, grouping slow learner students with other students was not done by most teachers because they more focused on individual assignments.

Acknowledgement

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INCREASING STUDENTS' CREATIVE THINKING SKILL USING SEARCH, SOLVE, CREATIVE AND SHARE MODEL IN THEMATIC LEARNING

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Abstract

Current elementary school uses thematic learning requiring its students to be able to think creatively in its learning process. This study aims to describe the SSC model as learning creativity to improve students' ability to think creatively on thematic learning. It employs qualitative research with literature reviews on journals, proceedings and thematic learning plans in elementary schools. The results reveal that the learning system in SSCS model places the students as learning center who will seek and find their own knowledge. The teachers will only give direction or give examples, thus it will be followed up by the students who may look for a level of knowledge and will solve the problem on their own. The ability to think creatively needs to be nurtured and developed to enable children realizing their optimal potential through providing opportunities for them in expressing their thoughts and feelings (discovery).

Keyword: creative thinking, SSCS model, thematic learning

Introduction

Learning is a combination of two things: studying and teaching activities. Methodology of learning activities tend to be more dominant in students, while instructional teaching is done by teachers. Hence, the term learning is the summary of learning and teaching words [1]. Current elementary schools employs what is called as thematic learning

Thematic learning can be interpreted as a learning activity by integrating material in several subjects into one topic / topic of discussion. Besides, thematic learning will provide opportunities for integrated learning that emphasizes higher student participation or involvement in learning activity. The basic principles for implementing thematic learning are as follows: 1) integrated with the environment, 2) learning forms designed so students find themes, and 3) time efficiency, material burden, methods, and the use of authentic learning resources [2]. Thematic learning requires students to be creative and active in the learning process. As creative thinking becomes catchphrase of the 21st century, it is due to inclusion in many revised curriculums around wonder about what catchphrase actually means for them [3].

Creativity is defined as intelligence that develops in individuals, in the form of attitudes, habits, and actions in themselves in giving birth to something new and original to solve the problem. Thus, creative thinking is the ability of a person or individual to think of something new in solving a problem [4]. Specifically, the characteristics of

creative thinking abilities are based on aptitude including: 1. Fluency or the ability to produce a number of ideas, 2. Flexibility or the ability to produce diverse ideas, 3. Details or elaboration, as the ability to develop, embellish, or issue an idea, 4. Originality or the ability to produce unusual ideas, and [5] Creative thinking or a mental process involving cognitive processing [6].

Creative thinking is one of the high-order thinking skills which is very important to be developed in the 21st century. It creates generations who are potential to solve complex social and environmental issues [7] [8] [9]. All students of different academic abilities can develop their creative thinking skills, if the learning environment provides opportunities for its development. Thus, the learning environment is necessary resource for creative thinking [11]. Elementary school teachers do many things to improve students' creative thinking skills. One of them is using learning innovations in learning models. To achieve learning goals in a dynamic environment, one must also align himself/herself to the dynamic structure of learning tasks for moment-by-moment control of internal cognitive processing and emotional regulation [12].

One of the efforts to develop creative thinking skills is by creating real learning in involving students' real experience in learning activity. This effort can be achieved by implementing appropriate learning models. The effective learning model can minimize the gap between high academic abilities and those of low academic ability [13]. Creative thinking as a positive action is an important factor in stimulating the brain function that shows and creates a good learning style [14]. Based on this, the SSCS model is appropriate to be applied to elementary school students because the model is student-centered in accordance with thematic learning.

SSCS has four stages, namely, i.e. search, solve, create and share. First, search is a process of discovering who, what, where, and how. Second, solve means the way to solve a problem as well as planning the problem solving steps. Third, create is the implementation of plans determined on 'solve', i.e. by using creative thinking and analytical skills. Fourth, share means communicating solutions of the problem with colleagues [15]. Thematic learning using the SSCS model is expected to increase student interest, agility, creativity and communication skills. Such statements are in accordance with the research conducted by Kurniawati & Siti, Rosawati & Dwiningsih, Yusnaeni which shows that there is an increase in student skills and creative thinking after using the SSCS model [16] [17] [18].

The literature review of the use of SSCS has been carried out by many previous researchers. Numerous study discussed about the role of SSCS in improving academic competence in science education. However, several studies more focused on achieving good academic values which are used at higher education institutions and schools. Unlike the previous literature study, this literature study aims to describe the potential of SSCS as a learning model which is carried out as an innovation in teaching and learning process for elementary school teachers as an effort to improve the ability to think creatively in elementary school students. This explanation of the literature study is highly recommended for further research and development, related to its implementation in elementary schools.

Method

This research method is a literature review. Literature studies have important role to inform readers about the results of other studies that are closely related to current research, linking research to existing literature, and filling in the gaps in previous studies [19]. It uses conference journal and article that focuses on the role of SSCS in thematic learning. Scripts is searched on the Online Collection eBook database (EBSCOhost), Scopus, Pro-Quest, experienced Director, Emerald, Education Resource Information Center (ERIC), and Director of Open Access Journal (DOAJ) due to accessibility and more diverse text. A good literature review collects information about specific subjects from many sources. It is well written and contains little if there is personal equality [20]. The keywords in searching the literatures are "SSCS", "Learning model", "Thematic Learning", "Creative Thinking ability", "SSCS to enhance creative thinking skills", "reality in elementary school education".

The articles were chosen from their titles and abstracts which are related to learning purposes. The selected articles were then examined to determine whether they are appropriate for the research purposes. The articles then were downloaded after being evaluated. There are 15 articles that explain the use of SSCS in learning. They were then analyzed using the qualitative content analysis method—a systematic analysis of the relationship between content and context. We grouped the selected articles into sub-categories that correspond to the research questions. The selected articles were analyzed on their abstracts, results, discussions, and conclusions. We analyzed the manuscripts related to thematic learning processes in elementary schools so that the relevance and potential of SSCS as learning model can be revealed.

Result

Based on the review process of 15 studies conducted from 2011 to 2018, it reveals information about using the SSCS model that is relevant to existing learning. The following table the characteristics of the text being analyzed.

Table 1
Background information on the reviewed articles

Sample	Primary Author (year of publication)	Research Design	n	Education level
1	Warda, A.K, Mashuri, Amidi. (20017)	Quantitative	150	Primarry Education
2	Suciati, Nia. (2013)	Action Research	90	Primarry Education
3	Rahmawati, Nurlaili Tri, Iwan, Ary. (2013)	experiment	210	Primarry Education
4	Johan, Honny. (2014)	experiment	69	Higher education
5	Satriwan, Rody. (2017)	experiment	56	Primarry Education
6	Saregar, et al. (2018)	experiment	58	Primarry Education
7	Utami, Runtut Prih. (2011)	experiment	180	Primarry Education
8	Warmini, NI KD, A.A. Gede Agung, Md	experiment	63	Primarry Education

	Sumantri. (2014)			
9	Febrianti, Nola, Isra Nurmi Yenti, Asmendri. (2014)	experiment	60	Primarry Education
10	Djunaedi & Erfan Budi Santoso. (2014)	experiment	90	Primarry Education
11	Irwan. (2011)	experiment	76	Higher Education
12	Milama, Burhanudin, Evi Sapinatul Bahriah, Amaliyyah Mahmudah. (2017)	experiment	68	Primarry Education
13	Mulyana, Yuli, Sigit Priyatno, Nuriana Rachmani Dewi. (2018).	Action Research	40	Primarry Education
14	Yusnaeni, et al. (2017)	Experiment	90	Primarry Education
15	Nastiti, D, et al. (2018)	qualitative	61	Primary Education

As presented in table 1, there are various types of research designs used in the reviewed articles, including qualitative research (1), action research (1), descriptive research (1), and experimental researches (12) as the most used research design. It shows that the use of the SSCS model in learning has attracted the attention of researchers to develop and determine the impact of the SSCS model on student achievement. Based on the level of education, the manuscript samples analyzed in this study were dominated by higher education (2), high school level (5), junior high school level (8), and level up to (1). It shows that the use of the SSCS model can be integrated into all levels of education in the teaching and learning process. The SSCS model helps students to have skills in learning where the process occurs coherently. Thus, they have higher understanding of teaching material and being able to think creatively due to problem solving character that is learned through the SSCS model. It facilitates them in completing questions on their own. The four SSCS phases will guide them to use reasoning in solving questions [34].

Discussion

The reviewed articles are similarly using the SSCS model as a strategy implemented in the teaching and learning process. The SSCS model is a student-centered model with a coherent learning system that makes students not only understand the existing learning material, but also share the knowledge they get with other friends. Student centered learning is relevant to current conditions. Student-centered learning emphasizes students to build their own knowledge [23]. The quality of learning is not only determined by the level of student achievement, but also influenced by the learning process factors held by teachers. Thus, learning is more meaningful if students can be actively involved in learning and employ problem solving process to problems presented in class [10].

The next similarity existed in the reviewed articles is that the SSCS model can increase students' academic potential. Based on the existing research, the SSCS model can improve student's achievement of the average value of learning outcomes in three domains, namely cognitive, affective and psychomotor. Therefore, the student learning value is higher than the average class value with the learning model previously used [29].

In addition, the SSCS model can also improve critical thinking skills and the ability to think creatively on students. This can occur because problem solving through the SSCS model guides students to complete questions that are given or that are submitted on their own regularly, periodically and logically. The four SSCS phases will guide students to use reasoning in solving the questions raised [28].

The difference found in the reviewed articles lies in the research types. The reviewed researches use experimental, qualitative and action research while the current researches use review research. Thus, this research is reviewing existing research by looking at what elements existing in the application of the SSCS learning model. Hence, it provides many scientific references related to the application and process of the SSCS learning model in the field.

The second difference is in the implementation of the SSCS model. The existing studies use science subjects, while this research employs thematic learning as it was conducted in elementary schools in Indonesia with thematic learning curriculum. Thus, the SSCS technique in thematic learning in elementary schools is used.

Acknowledgement

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INDIGENOUS COUNSELING: GUIDANCE AND CULTURAL-BASED BANJAR "BATATAMBA" COUNSELING OVERCOMING VERBAL AGGRESSION IN ADOLESCENTS

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Abstract

The writing of this paper aims to overcome verbal aggression in adolescents of the Banjar tribe in South Kalimantan. The background of this writing is because of seeing the psychological condition of adolescents there which is increasing in incidence such as insulting, cursing, scolding, commonly referred to as "crashing" into individuals or groups. Therefore, Banjar culture-based Indigenous Counseling "Batatamba" focuses on problems in verbal aggressive behavior in adolescents. Batatamba is a culture that exists in the Banjar tribe community to overcome problems in individuals or groups whether psychological problems or social problems. This Batatamba method will be implemented into Guidance and Counseling practices as a technique for dealing with verbal aggressive problems in adolescents. At the stage of Batatamba implementation, it will be carried out as a technique in the practice of Guidance and Counseling with four stages, namely problem solving, reciting prayers or mantras, giving new views to the counselee quoted from the Qur'an or Hadits (Scriptures), giving practice deeds to strengthen the determination of the counselee to make behavioral changes.

Keywords: aggressive verbal, batatamba, indigenous counseling.

Introduction

South Kalimantan is one part of the island of Borneo and one part of the State of Indonesia. In the area of South Kalimantan, it has a tribe called Banjar. In its history, the origin of naming the Banjar Tribe, namely during the civil war in the South Kalimantan region, was won by the Kingdom of Banjar and then divided into land by the border of the Banjar Kingdom. At that time the King of the Banjar Kingdom said *"wahai sekalian anak bangsa yang biajokah, balandiankah, dusunkah, jawakah, dan yang di sungai atawa di gunungkah…. kalian semua adalah banjaranku hendaklah hidup damai di negeri dan dalam perlindunganku"*. With the humility, wisdom and wisdom of a king, all the people recognized a Banjar Kingdom then recognized as the people of the Kingdom of Banjar. So from that beginning the name was the Banjar tribe. The culture found in the banjar tribe is inseparable from the style of religion, so that in practice the community is influenced by Hinduism, Buddhism and Islam so that it has a very large culture in practice every day one of which is Batatamba.

In this modern era, the practice of Batatamba is still carried out until now by the Banjar community. Batatamba is a cultural practice that found in the Banjar tribe to help a patient who has a psychological disorder or is physically or socially ill either mystically or not. Batatamba comes from the word "tamba" which has the meaning of healer, Batatamba means medical treatment, and penanamba means the person who heals or gives treatment.(Azidin, 1990)

There are some people who can be called a penanamba. a) Massage for physical pain such as tiredness; b) village midwives for penanamba who assist the birth process and cure sick babies; c) mualim (designation of banjar community) or ulama, namely the term for penanamba for sickness due to evil spirits, psychological disorders, and also as a place of consultation in individual or group problems.(Sam'ani, 2005)

Corelation with Guidance and Counseling as a profession is to help individuals or groups who have more rational planning and techniques, in problem solving, prevention, decision making, and problems both adaptation and support in facing pressures in the environment or situational in everyday life for normal people. In the theories of Guidance and Counseling adopted from western theories which make it difficult to apply to the values of Banjar culture. Basically the theories found in the west are the result of western cultural values applied to western industrial society. So that discrepancies in the western counseling procedures and insensitivity of counselors in culture make people tend to avoid the practice of guidance and counseling Sue dan Sue, 1990 (Charema, 2008)

Therefore according to Sue and Sue, 1990 it would be better if the application of Guidance and counseling was applied in accordance with local culture which could be called indigenous counseling (Charema, 2008). As in the process of guidance and counseling services the influence of the values found in individuals or groups are so significant, especially regarding the value of religiosity, race and ethnic identity. Thus the values of local wisdom contained in the Banjar community can be applied in the practice of counseling to enhance the role of Guidance and Counseling in the region and provide existence to the profession and achieve the goals in the process of Guidance and Counseling to the fullest. Many cases of violence that occur are manifestations of aggressive behavior, both verbal and non verbal violence. The problems raised by researchers are the current conditions that often occur in adolescence about verbal aggression.

A person's behavior will meet aggressive qualifications if done with the intention of causing a negative effect on the target (victim), giving rise to hope that the action will produce something (Taylor Shelley E., 2009). Behavior that is included in this aggressive definition, namely kicking and slapping, threatening and insulting, even gossiping (gossip) or insinuating. Other behaviors those are included in the definition of aggressive, namely destroying goods, lying, and other behaviors that have a purpose to hurt. An important element of aggressiveness that must exist, namely the existence of purpose or intentions in doing so (Dayakisni, 2009). An incident or incident that happens accidentally even if it produces aggressive behavior in another person cannot be included in an aggressive manner. (Berkowitz, 2003) defines verbal aggressive behavior as a form of aggressive behavior or action that is expressed to hurt others, verbal aggression behavior can be in the form of swear, reproach or invective, ridicule, slander, and threats through words. Based on the opinions of several figures above it can be concluded that the qualification of verbal aggressive behavior can be seen from individual or group behaviors or expressions that are done intentionally with the aim of

hurting other individuals, in the form of swear, reproach or invective, ridicule, slander and threats through words .

Verbal aggression in adolescents is currently increasing, especially in adolescents who are in secondary school educators, whether the number of perpetrators or varied from aggressive verbal impact on tolerance in the surrounding environment, cannot resist pleasure, reflect themselves and are not responsible. The results of previous studies regarding aggressiveness in children and adolescents (Setiowati, 2017) with the results of 345 children and adolescents (73.4%) in the category of moderate aggressiveness, and as many as 73 children and adolescents (15.53%) were in the category of high aggressiveness. In addition, it is known that boys and adolescents are significantly more aggressive than children and adolescents. (Wenar C., & Kerig, 2000) explained that there are several factors that are considered to contribute to the development of aggressive behavior in children, namely self-control. Self control is needed to understand norms (functioning) and is expected to play a role in controlling impulses as we age. In addition, (Santrock, 1995) revealed that one factor that is a predictor of aggressiveness is the role of parents. Based on the results of a study conducted by (Diana, 2009) regarding adolescent-parent communication and the aggressiveness of students at the high school level it is known that there is a significant negative relationship between communication between adolescents and parents with aggressiveness.

Therefore, Banjar culture-based Indigenous Counseling "Batatamba" focuses on problems in verbal aggressive behavior in adolescents. Researchers are interested in studying psychological research in adolescents with cultural elements. Thus, researchers expect this research design to be useful for other researchers.

Method

The article is a literature review with various references and relevant documents such as books, e-books, journals on banjar culture and indigenous counseling

Result and Discussion

Stage of Batatamba

Batatamba has several stages in its practice (Daud Alfani, 1997) :
1. Consultation Problems

At this stage the participants ask questions about the problems experienced by individuals or groups. How the origin of the incident or problem is experienced by individuals or groups.
2. Read Prayers or Mantra

At this stage penanamba recites prayers or mantras to individuals or groups. The Banjar community believes that the reading in the form of prayer, remembrance, or tawa'udz taken from the Qur'an and the Hadith of the Prophet contains magical powers that can heal or can overcome individual or group problems.
3. Give new views and provide reinforcement

Penanamba provides new views and provides reinforcement for individuals or groups to always be careful in carrying out actions.

4. Give a practice or traditional medicine
    At this stage the penanamba gives a practice or study to be carried out as a reminder and gives a medicine either in the form of water, roots, and leaves that have been given a prayer or mantra and avoid restrictions that can be repeat the same event.

Batatamba-Based Guidance and Counseling Design
1. Early stage
    a. Fostering relationships with counselees
    b. Melting the situation
    c. Digging into the counselee's problems
    d. Establish problems that exist in the counselee.
    e. Together commit to implementing and intervening.
2. Transition phase
    a. Clients are welcome to share the problem
    b. Identifying the intensity of problem behavior
    c. Identify feelings for clients when telling problems
    d. Identify the events that initiated the problem and accompany problematic behavior
    e. Identifying behavior problems with clients
    f. Clarifying behavior problems with clients
    g. Identify interesting things found in the life of the client
    h. Find the core of the client's problems
    i. Motivation towards clients
    j. Summarizes the results of client talks
3. Working Phase
    a. Explain and determine the goals of counseling
    b. Strengthen what you want to achieve in the process of guidance and counseling
    c. Pay attention to the obstacles faced by the client and help the client in looking at the problem in order to achieve the goals to be achieved
    d. Approach Batatamba guidance and counseling
4. The final stage
    a. Asking what the client has after giving treatment
    b. Evaluate results after treatment.
    c. Helping clients to learn and implement in client behavior
    d. Conclude the results obtained by the client related to what the client has done and said
    e. Discuss the tasks that need to be done during the next meeting
    f. the counseling process ends

Batamba Technical Guidance and Counseling Stages
    Guidance and counseling stages in general according 1). early stage; 2). transition stage; 3). work stage and 4). the final stage.(Samuel Glading, 2012)
1. Early stage
    This stage begins when you first meet to do the counseling process
    a. Build relationships and dilute the atmosphere during the counseling process involving clients.
    b. Clarify, define and explore client problems
    c. Determine the problems found on the client

2. Transition Phase

    At this stage it is carried out after the initial stage where at this stage as the stage for forming a rule and an explanation of what must be done in the counseling process:

a. Improving relationships with clients
b. Exploring and interpreting possible problems, designing assistance, determining alternatives, and anticipating problems faced by clients
c. Conducting contracts and agreements between counselors and counselees, containing:
    1) Time contract in the implementation of counseling;
    2) Task contracts, both counselors and counselees;
    3) Cooperation contracts in the counseling process, both related to share roles and responsibilities between counselors and counselees in all series of counseling activities.

3. Working Phase

    In the working stage this can be done with the Batatamba technique

a. Read prayers and spells
b. Give new views quoted from the Quran and Hadits (holy books),
c. Give a practice or traditional medicines and provide restrictions that must be avoided so that the same incident does not happen again

4. The final stage

a. Together with counselees and counselors draw conclusions from the results of the counseling process.
b. Arrange a plan of action to be carried out by the counselee based on the results of the agreement that has been built from the previous counseling process.
c. Evaluate the process and results of counseling
d. Make an appointment at the next meeting
e. In the final stage several things are indicated, namely;
    1) Decreased anxiety in the counselee;
    2) The change in counselee behavior towards a positive, healthy, good and dynamic;
    3) Providing new understanding and insight to the counselee about the problems they face;
    4) Do life planning in the future with a clear program and goals.

Aggressive Verbal

    Aggressive behavior is an action that can hurt or hurt other people both physically and psychologically. That can be detrimental to others. (Berkowitz, 2003). Verbal is a communication either in writing or verbally to convey messages. Language is a system of verbal codes that show symbols as a message to be conveyed (Mulyana, 2005). So it can be concluded that verbal aggression is an action that hurts someone through words or written that can harm others.

    At this time verbal aggression among adolescents increased especially in the level of Middle School education. Behavior is characterized by behaviors such as insulting, cursing, scolding, commonly referred to as "crashing" into individuals or groups. If no precautionary measures are taken and treatment will have a negative effect at some time such as having a low tolerance, reacting quickly to his aggressive impulses, unable to reflect on himself, and not being responsible (Myers, 1993)

Some Types of Aggressive Verbal
         The types of aggressive Verbal according to (Dayakisni, 2009) :
1.   Direct Active
         Individuals or groups take actions such as insulting, cursing, angry, swearing directly or dealing with other individuals or groups.
2.   Passive Direct
         Individuals or groups take actions such as refusing to talk, silence, ignoring directly or dealing with other individuals or groups.
3.   Active Indirectly
         Individuals or groups carry out actions such as spreading slander, pitting sheep in an indirect way or not dealing with other individuals or groups they are targeting.
4.   Indirect Passive
         Individuals or groups carry out actions such as not giving support, not using voting rights by indirect or not dealing with other individuals or groups who are the target and do not make direct communication contacts.

The Implementation of Counseling with The Batatamba Technique in Handling The Problems of Verbal Aggressive Behavior
         The implications of counseling using the Batatamba technique to deal with the problem of verbal aggressive behavior in the Banjar community generally will come to a servant to carry out the Batatamba process.
1.   Read prayers or spells
         In this implementation in the counseling process, a counselor prays for the good of the counselee
2.   Giving new views quoted from the Quran and Hadits (holy books),
         Give a new view of the behavior quoted from the Quran and hadits or in accordance with the belief in the Godhead taught through the scriptures.
3.   Give practice (Amalan)
         The counselee also carries out a practice or prayer to remind and strengthen the belief to strengthen the resolve of the counselee to make behavioral changes in order to avoid deviant actions in the teachings of God to avoid the vile and mundane deeds.

Conclusion

         This article discusses Guidance and Counseling based on the culture of the "Batatamba" Banjar tribe to overcome verbal aggression in adolescents. Batatamba is taken from the word tamba which is cure or cure. We can interpret that Batatamba is an attempt to treat both those related to psychological and social relations. In its implementation, Batatamba in counseling practice is an attempt to heal existing clients or counselees with the Batatamba approach. The Batatamba stage is consulting problems, reciting prayers or mantras, giving advice and reinforcement, and finally giving practice and traditional medicines and restrictions that need to be avoided to strengthen the counselee's determination to make better behavioral changes.

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THE CORRELATION BETWEEN THE NEEDS OF AFFECTION AND PROSOCIAL BEHAVIOR OF ADOLESCENTS LIVING IN ORPHANAGES

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Abstract

Prosocial behavior is an act of helping others by volunteering to support the well-being of others who indirectly had benefits and advantages as well as positive consequences for the helper or the person who is helped. The needs of affection is the need to be loved and understood deeply that result in actions can be positive or negative. The purpose of this study was to examine the correlation between the needs of affection with prosocial behavior of adolescents who live in an orphanage. The subject of this research was 150 orphanage adolescents in Surabaya who were taken by using purposive sampling. Data were drawn from the needs of affection and the prosocial behavior scales. Both scales were prepared by researchers using the Likert model. The research method used a *non – parametric* statistical test in the form of correlation. Based on calculations by using SPSS version 20.0, it was obtained that the coefficients correlation (r) = 0.695 with significance value (p) = 0.000 because the significance level obtained is less than 0.01 (p < 0.01). It can be concluded that there is a correlation between the needs of affection with prosocial behavior of adolescents who live in an orphanage.

Keywords: adolescents, needs of affection, prosocial behavior

Introduction

Teenagers are the next generation of the nation that must be able to achieve success in the future. Adolescence is an important period in the span of human life. Adolescence is a period of dilemma which is a transition or period of change before heading to maturity and commonly referred to as the most unstable period in the life of an individual before find their true identity.

According to Papalia & Olds (in Jahja, 2012), adolescence is a period of developmental transition between childhood and adulthood which generally starts at the age of 12 or 13 years and ending in the late teens or early twenty years. At this time, adolescents feel the changes that occur to them such as changes in physical, emotional, and interest in an association. It makes the social sensitivity of adolescents to be less honed or less sensitive to the surrounding environment because they are only focused on themselves, and make the level of caring for adolescents decreased.

Nowadays, helping behavior or commonly referred to as prosocial behavior begins rarely encountered and the decline in prosocial behavior also begins to appear in

adolescents. Baston (in Zakiroh & Farid, 2013) explains that prosocial behavior includes every action that helps others. Regardless of the motives of the helper, prosocial behavior is expected to create a more harmonious life so that a teenager must understand the life together in the community, care and help, and respect each other. Brigham (in Dayakisni & Hudaniah, 2009) said that prosocial behavior is a behavior to support the welfare of others. Prosocial behavior contains elements of generosity, friendship, or help given by others.

Adolescence is a time when children begin to loose or not depend on parents and children feel they can live independently and children have the right to make their own choices. It sometimes makes children feel free, because parents feel their children still need support from their parents, which often has an impact on the emergence of problems in adolescents and parents. Even though teenagers still need love from their parents. The family serves as an ideal vehicle for the preparation of individuals who will later continue their life. Unfortunately, not all people are lucky to have an ideal family. Many children experience the bitter reality of their lives. Parent's death or divorce, poverty, family disharmony, broken family can cause loss of family function, so a child must be free from the embrace of parental affection or sometimes having to live the hard life alone without family. One particular condition is what can cause a person to be in an institution called an orphanage. Hartini (in Mazaya & Supradewi, 2011)

Orphanages as family replacement institutions that handle neglected and orphaned children, administrators and caregivers in orphanages try to meet the needs of children in their development processes both physically and psychologically, but certainly not an easy thing because many things must be taken care by administrators and caregivers in the orphanage. The caregivers in the orphanage cannot pay attention to every child in the orphanage. So that, in social relations adolescents who live in orphanages tend to have lack confidence in dealing with the surrounding environment. The teenager feels not like a teenager who has their parents.

Hartini (in Mazaya & Supradewi, 2011) states that orphanages have a description of psychological needs such as personality that is inferior, passive, apathetic, withdrawn, easily discouraged, full of fear and anxiety. So that, orphanage children find difficulties to establish social relations with other people. This situation causes teenagers who live in orphanages tend to be insensitive or concerned about their surroundings. If this sensitivity is not sharpened or increased, it will disrupt the life of the teenager himself. When teenagers who were initially in an orphanage were released to the community, they could not adjust to their surroundings.

The decline in prosocial behavior also begins to appear in the orphanage. The research was conducted by Kristiyono (2008). He found that the orphanage teenagers too busy with their own activities, namely schooling, resting, and cleaning the environment for the picket. When preparing for dinner, it can be seen that the cooks are the caregivers, and there are rarely children who want to help. Lack of visible prosocial behavior can also be seen in cleaning activities carried out every day. Although the picket schedule has been determined regularly, but sometimes it doesn't work especially when the caregiver is not in the orphanage. While those who are not pickets are busy with their personal activities. These behaviors are simple examples that occurred today. Prosocial behavior begins rarely to be found in adolescent orphanages.

Prosocial behavior in adolescents is inseparable from roles in a family. These values and attitudes were first introduced by the family who will later form the personality of adolescents. Today, many children are ignored from their parents. Parents

lack in giving love, warmth and attention. This affects the formation of an attitude of confidence in their environment. This really will make children difficult to grow and develop with their environment.

Children who are not fulfilled their love needs will meet their needs for others. A child who considers himself not getting love from his parents, he also cannot get love from other people and friends. Schutz (in Sarwono 2015) says that the need for affection is the same as an emotional feeling that is very different between two people. Thank you attitude can build someone's emotional bond with others who (interpersonal needs) to establish relationships (the need for relationships) and also loved. If the love needs are fulfilled, then someone will automatically be satisfied and happy.

Positive attitudes and feelings of pleasure because of giving love will bring positivity in the form of their positive behavior. This can make adolescents more sensitive to their environment, because of the positive behavior they have before. Even though in an orphanage, adolescents still get enough affection, but still feel different from young people who live with their parents. There are small things that are forgotten and cannot be done by caregivers in orphanages, for example parents who have biological children can directly give or devote attention and thank children directly. This is different when compared to an orphanage where love cannot be given directly to every child. It often creates jealousy among children with one another.

An unpleasant experience, feelings that are not accepted or unloved in children will make adolescents focus more on their unhappy condition. If it continues, this will make adolescents unable to let themselves go to others and not care about the problems around them and not care about prosocial youth.

The purpose of this study was to study the relationship between love needs and social behavior in adolescents who live in orphanages. So, the hypothesis in this study is "there is a positive relationship between love needs and social needs in adolescents who live in orphanages".

Method

Research method is an effort that must be taken in research to find, to develop and to test a truth of knowledge. This research is a type of quantitative research.

Respondent

The subjects of this study were teenagers who lived in orphanages. The researcher conducted research in 8 orphanages with 150 teenagers in Surabaya who were taken using purposive sampling. The sampling technique used purposive sampling. According to Sugiyono (2016) purposive sampling is a technique of sampling data sources with certain considerations. The researcher used this technique because not all sample criteria are in accordance with the phenomenon offered. The characteristics of the respondents are that they must be registered and live in an orphanage in the Surabaya area. Subjects have lived in orphanages since becoming orphans, male and female, junior and senior high school level, and 12-20 years old.

Data Collection Methods

The data collection method used in this research is a scale or statement method. This study used prosocial behavior and needs of affection scales. Both scales are prepared by researchers using the Likert model

Instruments

The prosocial behavior scale consists of 61 items based on eight indicators: a person can share feelings with others in an atmosphere of joy and sorrow; share objects or property; willing to help others who are in trouble; provide assistance without being asked; willing to work with other people to achieve a goal; engage in joint activities on their own initiative; willing to voluntarily give part of his property to people in need; donate energy without asking for compensation. The rating was on 5 Likert-type, includes favorable statement and unfavorable statement. There are five alternative answers: strongly agree (SS), agree (S), doubtful (R), disagree (TS), and strongly disagree (STS). Research on this scale used a score that moves from 1 to 5. On the favorable statement, the SS gets a score of 5, S gets a score of 4, R scores 3, TS gets a score of 2, STS scores 1. On the assessment for unfavorable statement that SS gets score 1, S gets a score of 2, R gets a score of 3, TS gets a score of 4, STS gets a score of 5.

The needs of affection scale consists of 43 items based on four indicators: Attention, children get attention that is physical, psychological, or educational given by parents to children; respect, adolescents will feel valued if their opinions and actions are heard and valued by others; responsibility, sincerity of parents and people around him to do things voluntarily without coercion; understanding, acceptance of weaknesses and strengths possessed by adolescents and do not require adolescents to be someone else but to be themselves, so that teens will feel that other people will accept themselves. The rating was on 5 Likert-type, includes favorable statement and unfavorable statement. There are five alternative answers: strongly agree (SS), agree (S), doubtful (R), disagree (TS), and strongly disagree (STS). Research on this scale used a score that moves from 1 to 5. On the favorable statement, the SS gets a score of 5, S gets a score of 4, R scores 3, TS gets a score of 2, STS scores 1. On the assessment for unfavorable statement that SS gets score 1, S gets a score of 2, R gets a score of 3, TS gets a score of 4, STS gets a score of 5.

Data Analysis Technique

Data analysis is a very important part of the scientific method. By analyzing this data, it can give meaning that is useful in solving research problems.

The assumptions tests are not fulfilled normality distribution. The data analysis was originally planned to use *Product Moment*. It cannot be continued to be done so that the suggested data is analyzed by non-parametric correlation technique from *Spearman Rho*.

Result

Based on the validity test by using corrected item 0.300 in the SPSS 20 program, the results of the validity test on the scale of prosocial behavior obtained 34 fall items and 27 valid items. The results of the validity test on the scale of affection needs were

obtained 39 fall items and 28 valid items. The results of the reliability test of the prosocial behavior scale obtained by Croncbach Alpha were 0.932> 0.800. So, the prosocial behavior scale was declared reliable or reliable. While the test of the scale of affinity needs obtained by Croncbach Alpha 0.922> 0.800, the scale of affection needs is stated to be reliable or reliable.

The results of the correlation test between prosocial behavioral variables and affective needs variables using non-parametric statistics with Spearman Rho analysis technique showed a correlation coefficient (r) = 0.695 with a significance value (p) = 0,000 <0.01. Because the significance level obtained was smaller than 0.01 then between Prosocial Behavior variables and Affected Needs variables, they have a very significant positive relationship.

Discussion

The results of this study indicate that meeting love needs contributes to prosocial behavior in their daily activities. Adolescents in orphanages who get affection needs tend to have prosocial behavior in their daily life. Because of the fulfillment of love needs, adolescents of orphanages feel satisfied, happy and accepting in their social relationships will bring a positive attitude towards the environment.

Love needs is one part of human psychological needs. Love needs is a need for comfortable comfort, which requires physical needs to be close to others and usually expressed by touching, holding hands and sitting close together (in Cynthia, 2005).

Previous research conducted by Kristiyono (2008) showed that most caregivers did not know their foster children well. Due to limitations and the large number of children, caregivers call attention to children personally. Lack of fulfillment of affective needs causes children to feel uncomfortable. This will certainly affect their transition period.

Every individual must be fulfilled both in terms of physical, psychological, and in the provision of appropriate education. This makes people accepted and loved in their social environment. All who can play a good role in the social environment will be satisfied and happy if they are in their environment. Having happiness will make individual behavior easy to help life or social for children. Prosocial behavior depends on external rewards and social approval. But increasingly mature, this action needs to have internalized values, without outside incentives. Individuals will be satisfied to have reached their own standards and feel the happiness of compilation when doing good deeds.

In adolescent orphanages, fulfilling the needs of affection around them is very necessary because the teenagers in the orphanage no longer have some parents or both parents. It makes teenagers in orphanages need love from their parents and friends around them. The organizers of the orphanage are expected to be able to provide affection, respect and understand the adolescent orphanages so that their affection needs can be met.

Having a good affection needs makes the orphanage's youth feel valued, and loved. Teenagers who are accustomed to getting affection cause comfort. Teens become accustomed to loving and helping others. This encourages teenagers to get used to helping others (prosocial behavior) with affection and love. Prosocial behavior is a voluntary act to help or provide benefits to other individuals or groups of individuals.

According to Sears, Freedman & Peplau (2005) prosocial behavior is a part of everyday life. In addition, according to Staub (in Spica, 2008) prosocial behavior is any form of behavior that has positive consequences for the recipient in the form of material, physical or psychological, but does not have a clear advantage for those who give it. It means that assistance is given to others without expecting helper desires.

Another study on prosocial behavior in terms of place of residence is related to adolescents who live in Islamic boarding schools and live with their parents. It found that teenagers who live in boarding schools have higher prosocial behavior than teens who live with parents. Teenagers who live with their parents certainly do not experience the sense of fate of their struggle with their friends, unlike those who live with parents, certainly not so fast in prosocial behavior because they are more dependent on their parents (Delvi, 2012).

There are some orphanage teenagers who have obstacles to help but adolescent orphanages tend to be passive and less concerned with the surrounding environment such as in the orphanage itself or at school.

Fulfillment of individual needs of affection from the social environment makes these individuals have high prosocial behavior. Conversely, if the individual's needs of affection are less than fulfilled from the social environment, it will make someone's prosocial behavior to be low. Therefore, if prosocial behavior from adolescent orphanages want to be high, then the social environment or people who are around it such as nursing parents, peers or teachers who are in school must be able to love, accept well, and respect the orphanage adolescents.

Conclusion

Prosocial behavior is an act of helping others voluntarily to support the welfare of others who indirectly have benefits as well as positive consequences for helpers or people who are helped. Meanwhile, affective needs are a need to be loved and understood in depth which results in actions that are positive or negative. Between prosocial behavior and affective needs have a significant positive relationship. So, the research hypothesis stated that "There is a positive relationship between affection needs and prosocial behavior in adolescents living in orphanages", accepted. It can be concluded that there is a correlation between the needs of affection with prosocial behavior of adolescents who live in an orphanage.

Acknowledgement

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A CONTEXTUAL APPROACH TO MEASUREMENT OF CHILDREN'S SOCIAL COMPETENCE: A PRELIMINARY STUDY IN YOGYAKARTA

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Abstract

The concept of social competence has been associated with societal expectation and local culture. Therefore, the measurement of social competence should be constructed using contextual approach. The preliminary study aims to identify the construct of social competence of Javanese children aged of 10-11 years old in Yogyakarta. The data was gathered using focused group discussion (FGD). The participants of the FGD were 18 children (grade 5 of elementary school), 41 parents, 11 teachers, and 5 experts in developmental psychology. The inquiries of FGD were intended to obtain participants' standpoints regarding the important behaviors of which a student must have in order to have good relationship in four social settings. Those four social settings are family environment, peer, classroom, and neighborhood. Coding process produced six facets of social competencies, namely empathy, emotion regulation, communication, responsibility, problem solving and courtesy. The results are discussed with regard to the context of Javanese culture and compared to other cultures.

Keyword: children, contextual approach, javanese, measurement, social competence

Introduction

Children are individuals who are learning to become member of society. Therefore, social competence is crucial life skill for them to develop. Social competencies involve various abilities that can be used by children to interact effectively with their environment (Rubin & Rose-Krasnor, 2013). Low social competence associated with several issues with adjustment, peer acceptance, and academic achivement ((Englund, Levy, Hyson, & Sroufe, 2000; Miles & Stipek, 2006; Wentzel, 2015). Low social competencies related with many behavioral problems including internalizing behavior such as anxiety and depression, and externalizing behavior such as delinquency and conduct disorder (Parker & Asher, 1987).

In previous studies, measurements of social competence more focused on social deficiencies and evaluation of treatment outcomes (Sheridan & Walker, 1999). These studies used teacher, parent, and peer rating scales to obtain information about the competencies. Then, the measurement of social competence began to be carried out using the self-reporting (Merrell & Gimpel, 1998). In this method, children are asked to report their thoughts or opinions related to social behavior and their relationship with others. Children are also asked to report how they deal with various situations or manage social interactions. In addition to self-reporting, several studies were also conducted using observation methods to measure children's social competence (Merrell & Gimpel, 1998).

Social competence can be conceptualized into three levels; theoretical level, index level, and skill level (Rose-Krasnor, 1997). In the theoretical level, social competence is assessed based on interaction effectivity. The effectivity is indicated by the result of behavioral system or the fulfillment of developmental needs. In the index level, the social competence is assessed based on the quality of interaction, relationship, group status, and social-efficacy. Index level is divided into two domains; self domain and other domain. Self domain involves the fulfillment of individual needs or the individual achievement such as autonomy, whereas other domain involves interpersonal relationship. Each domain consists of several layers which reflect spesific situations. In the level of skill, the assessment involves various social, emotional, and cognitive skills such as communication, emotion regulation, empathy, social problem-solving, as well as social motivation. Considering the three levels of social competence, Rose-Krasnor defined social competence as "the ability to achieve personal goals in social interaction while simultaneously maintaining positive relationships with others over time and across situations" (Rose-Krasnor, 1997; Rubin & Rose-Krasnor, 2013).

To be called competent socially, children should not merely have social skills, but also be able to use these skills in ways that are acceptable to others in their environment (Gresham, 2013; McFall, 1982; Sheridan & Walker, 1999). Social expectation determines the content of social competence. Hence, social competence concept can not disassociated with the context where the children live and its local culture. Different society has different aspects of social competence. As an example, assertiveness is an important social competence aspects in western culture, while it is not perceived as important in eastern culture. As well as the different type of verbal and/or non-verbal communication that is expected to be possessed by children in eastern culture (Nangle, Hansen, Erdley, & Norton, 2010).

The measurement of social competence in a contextual perspective should be carried out in certain areas of society and involve important people in the child's environment (Warnes, Sheridan, Geske, & Warnes, 2005). To obtain the contextual measurement construct of social competence, it requires an exploration study. The study should be conducted by inquiring parents' and teachers' opinion concerning various important behaviors in which children should perform to deal with everyday situation such as interacting with other family member, playing with peers and taking course in class.

As the child gets older, children in Indonesia are expected to understand more about the appropriate behavior and action they should take considering that they are member of society in which eastern cultures are highly valued. The present study is conducted to investigate the important aspects in children's social competence either in the perspective of children or in the perspective of the society in Indonesia including parents, teachers, and experts.

Method

Partisipants

The participants in this study are divided into four types; the children group, the parent group, the teacher group and the expert group. The target of population for this study are children, parents, teachers and experts who live in Yogyakarta Special Province (DIY). The followings are the description of the four types of FGD participants;

Children group
The children group consists of children of grade 4 to 6 (elementary level) that live in Yogyakarta Special Province   (DIY). There are 18 participants from 3 different location/region in Sleman DIY. 40 % of them are female, and 60% are male.

Parent group
The qualified participants for parents group are mothers and fathers of children grade 4 to 6 of elementary school and currently live in DIY. The participants of the current study are 41 fathers/mothers from 6 districts in DIY. 95% of them are a mother, 5% of them are a father.

Teacher group.
The eligible participants for teacher group are those who were currently teaching or had the experience of teaching grade 4, 5, or 6 of elementary school student in DIY. There are 11 participants from two different elementary school in Bantul and a person from teacher community in Sleman. 45% of them are female, while 45% of them are male teacher.

Expert group.
Child psychologists of developmental psychology lectures that lives in Yogyakarta are eligible for expert group. There are 5 experts participating in current study, five of them are currently teaching in private university in Yogyakarta.

Data collection
        The present study uses FGD to obtain qualitative data related to aspects of children social competence in late childhood. The participants that have given their consent to be involved in FGD are invited to gather at the agreed time and place. Followings are the questions on the FGD session; 1) *What kind of specific behavior or attitude that 10–11 years old children (grade 5) must have in order to have good relationship with family, parents in particular? 2) What kind of specific behavior or attitude that 10–11 years old children (grade 5) must have in order to be considered as good friends? 3) What kind of behavior or attitude that 10–11 years old children (grade 5) must have in order to be considered as good friends? 4) What kind of behavior or attitude that 10–11 years old children (grade 5) must show in order to be accepted by their neighbor or their community?* Once the question was asked, the moderator encouraged the participants to give opinions, give feedback to others participants' opinions, and made mutual agreement if there were any different opinions. The FGD was conducted once for each group and lasted for approximately 2 hours.

Data Analysis
        In the present study, data were analyzed using three stages of the coding process; open coding, axial coding and selective coding (Strauss, A., & Corbin, 2000).

Open coding
        Open coding involves sorting and categorizing the data by the content similarity to obtain initial categories dan to eliminate redundancy. The data were classified according to their theme, for example, speak softly, speak softly, implement language level would be classified as speak politely to the elders.

Axial coding

Axial coding is used to obtain categories of theme by identifying linkages between themes resulted from the open coding stage. For example, helping parents when their parents are busy, helping friends with their problem, share food could be classified into one category as helping others. Other example is classifying - speak politely, greet the elders, hand-shake with elders into respect to the elder category. Obeying school rule, being quiet in the class, maintaining neighborhood cleanliness and tranquility are classified into act of discipline category.

Selective coding.

Selective coding is carried out by formulate core categories that represent aspects of social competence. In this stage, coding was determined reffered to previous review of social competence facets (Rose-Krasnor, 1997), involving social perspective taking, emphaty, emotion regulation, communication, problem solving and social goals. Responses that are not included in the predetermined categories are considered as new findings.

Result and Discussion

This study resulted seven categories of social competencies, namely empathy, emotion regulation, communication, problem solving, responsibility, and courtesy. Most of these aspects were obtained from the four different types of participant (children, parents, teachers, and experts). The result matches with the previous study (Warnes et al., 2005) which also found similarities in opinion between children, parents and teachers.

The similarities of the opinions showed the same view among children and the social agents in their microsystem (parents, teachers) about what the society expects toward children. Microsystems contain patterns of activity, social roles and interpersonal relationships experienced by children in their immediate environment such as family, school and peer environment (Bronfenbrenner, 1979, 1994)). The reciprocal interactions experienced by children in microsystems allow the transmission of cultural values and community expectations to children.

Previous study in Javanese adolescents (Lestari, 2016) showed that pro-social values were transmitted vertically (parents to children), tilted (teachers, neighbours, extended family) and horizontally (friends). From all these environments, the family is the first environment for children to learn about pro-social values, especially through the role of mothers. A study (Hynie, Lalonde, & Lee, 2006) has found that the transmission of values between generations in Asian families is facilitated by family connectedness.

Table 1
The Coding Result of Social Behavior Reported by Children, Parents, Teachers, and Experts

Social Competence	Indicator	Social Behavior	Participants			
			Child	Parent	Teacher	Expert
Empathy	Feeling the other feelings	Avoids hurting other	x	x	x	x
		Considering others	x	x	x	x
		Feels bad about others' ills/troubles	x	x	x	x
	Expressing care	Helping other	x	x	x	x
		Shares with other	x	x	x	x
		Visiting the sick	x	x		
		Cheers friend who is sad	x		x	x
		Gives gift to friend	x		x	
Emotion Regulation	Considering others' view	Understanding parent's reason		x		
		Takes parent's advice/ guidance	x	x	x	x
		Listens to difference opinions	x		x	x
	Controling emotion reaction	Does not be demanding		x		
		Controls emotion when someone annoys	x	x	x	x
		Forgiving		x		x
		Succumbs for good		x		
	Expressing emotion in acceptable ways	Express objection in acceptable way				x

Social Competence	Indicator	Social Behavior	Participants			
			Child	Parent	Teacher	Expert
Communication	Delivering massage in acceptable way	Express wishes in acceptable way	x	x	x	x
		Express opinion in acceptable way			x	x
		Asking			x	x
	Maintaining conversation	Listening in conversation	x	x	x	x
		Responding in conversation	x	x	x	x
Responsibility	Carrying out their task	Does chores		x		x
		Pay attention in the class	x	x	x	x
		Completes homeworks		x	x	x
	Obeying the rules	Maintains classroom's disciplines	x		x	x
		Maintains environment cleanness		x		
		Maintain neighborhood quietness	x	x	x	x
	Participating in community activities	Participates in *gotog royong*	x	x	x	
		Participate in neighborhood celebration	x	x		
Problem Solving	Cooperating fairly	Sharing classroom's chores			x	x
		Sharing shool's tasks			x	x
	Preventing conflicts	Explain misunderstand with parents				x
		Explains misunderstood with friends				x
		Plays alternately				x
Courtesy	Respecting the elders	Uses higher level language		x		
		Greets first the elders	x	x	x	x
		Shows approriate gesture		x		x
	Doing Javanese manner on daily basis	Speaks politely	x	x	x	x
		Asks for permission/ for leave	x	x	x	x
		Has good maner when eating, sitting, etc.	x	x	x	x

Compared to the other groups of participants, the parents emphasize abilities related to cultural norms. This research was conducted in Yogyakarta, where the people still adhere to Javanese culture. Social skills that parents consider important for children include; using a higher level of speaking to older people, controlling desire and emotions (being patient, giving in, forgiving) and developing feelings of responsibility as family or community member (completing tasks, following rules, and participating in community activities). This finding shows that parents are microsystems that are most related to the culture. Goals in parenting reflects cultural values or cultural prescriptions (Chao, 2000; Darling & Steinberg, 1993).

Most aspects were found in current study confirmed the aspects proposed by the previous expert (Rose-Krasnor, 1997). These aspects are empathy, emotional regulation, communication, and problem solving. Two other aspects, namely politeness and responsibility are new aspects found in this study. Although most of these aspects are seems similar to the opinions of the previous experts and seems universal, but the indicators of the aspects are contextual and reflected the expectation of Javanese society. The following is the definition of each aspect that can be inferred from the finding indicators.

Table 3.
Definition of The Aspects of Social Competence

Aspect	Definition
Empathy	Capacity to feel what others are experiencing and take action appropriately to help.
Emotion Regulation	Capacity to manage and express emotional reactions in acceptable ways
Communication	Capacity to convey messages and maintain conversations in acceptable ways
Problem solving	Capacity to get what is desired and prevent conflict in an effective and acceptable ways
Social Responsibility	Capacity to complete tasks and follow rules according to the role of the child
Courtesy	Capacity to show respect for others in Javanese customs

Based on the definition of the aspects, it can be concluded that the most typical aspect is courtesy. Previous literatures on Javanese culture suggested that courtesy, especially towards elder, are social skills characterized Javanese people (Geertz, 1983; Mulder, 1983; Suseno, 1984). The skills includes the use of high-level Javanese language when talking to elder, asking for permissions and showing Javanese manner (in sitting, eating). The aspect of responsibility is also quite typical among Javanese culture. In the Javanese society, responsibility relates to attitude of 'temen' which contains both honesty and studiousness in carrying out duties and roles in family and community (Suseno, 1984).

Emotional regulation and communication are universal aspects of social competence but in this study have indicators that are quite typical. Emotional regulation and communication are skills that Javanese people put forward to maintain harmony (Geertz, 1983; Suseno, 1984). In general, emotion regulation is the ability to regulate and express emotions in an acceptable way. In Javanese society the regulation of emotions is carried out among others by hiding actual (negative) emotions, being patient, and yielding. In general, communication involves the skill of conveying messages and maintaining conversation. For Javanese, communication should be carried in Javanese manner; wishes or opinions should be conveyed in a polite manner and other's words should be responded by non-confrontational statement.

Empathy and problem solving are the social competences that are universal. The indicators of empathy arises primarily from the children group, that includes feeling bad about others troubles, helping, sharing, visiting friends who are sick, and comforting friend

who is sad. There are few indicators of empathy that are typical, such as considering others feeling and avoid hurting others. Problem solving is a skill proposed by the expert group which considerate as important skills that are required to possess by late elementary school children. Problem solving involves children understanding the appropriate way to get what they want, resolving misunderstanding, and assigning individual tasks to group members for instances.

Based on the explanation above, it can be concluded that most social competencies are determined by the society or local culture. Compared to other cultures, the peculiarities of the social competition expected by the Javanese community are related to politeness behavior, emotional regulation and responsibility. These social competencies are relevant to social harmony which characterizes Javanese culture (Suseno, 1984) and Asian culture in general (Huang, G.H & Gove, 2005; Suzuki, 2002; Wise, S., & da Silva, 2007). On the other hand, there are aspects that are often found in other cultures but not found in this study, such as assertiveness. Assertiveness is a social skill that is relevant to individual autonomy which characterizes the expectations of western society (Suzuki, 2002; Wise, S., & da Silva, 2007).

The implications of the results of this study are; contextual approaches need to be considered in studies or assessments of social competence. The contextual approach is done by taking into account the expectations or environment of the child's environment, both family, school and community.

Conclusion

This study found six aspects of social competences that are expected to be possesed by children in Yogyakarta, namely empathy, emotion regulation, communication, responsibility, and courtesy. Most of the social behavior that include in those aspects reported by all participant groups. Those indicate the same understanding between children and their microsystem (parents and teachers) concerning what the society expects toward children. Two of six aspects are typical in Javanese society, i.e. courtesy and responsibility. Although most of social competencies finding in this study are seems similar to the opinions of the previous experts and universal, but the indicators of the aspects are contextual and reflected the Javanese values. Here, parents are the best social agents in introducing these cultural social competencies to children.

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"MY POTRAIT IN JAIL" PSYCHOLOGICAL DESCRIPTION OF YOUNG OFFENDER IN LPKA KUPANG

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Abstract

Young offenders at LPKA Kupang have not received any psychologist services. The rehabilitation process that is given for them is not very direct and appropriate due to the lack of knowledge of prison staffs in terms of guiding and understanding the actual condition of young offenders. This research aims to describe young offender's psychological condition at LPKA Kupang. This research used description qualitative research design. The data were collected through Focus Group Discussion (FGD) with semi structure FGD guideline and psychological test, such as drawing test. The subjects of this research are 26 young offenders at LPKA Kupang. The result shows that young offender's psychological conditions could be described based on cognitive, behavior, emotion and social aspect. There is also special characteristic of young offenders based on their cases.

Keywords: LPKA Kupang, psychological description, young offenders

Introduction

LPKA (Lembaga Pembinaan Khusus Anak) is an Indonesia public institute for children or teenagers who committed criminal behavior (young offenders). Based on the Law of the Republic of Indonesia Number 11 Year of 2012 about Juvenile Justice System, young offenders are children of 14 – 21 years old who are sentenced to jail. For those who are under 14 years old who committed crime, the responsibility will be given to their family to teach them. Imprisonment will be the last type of punishment given to the children after thorough and full process of investigation and trial based on Indonesian Law System.

LPKA Kupang is the only institution in East Nusa Tenggara Province that accommodates children who committed criminal. Based on data per November 2018, LKPA Kupang accommodates 32 male young offenders from all over East Nusa Tenggara. The majority of their cases are sexual abuse (19 cases). The other cases are robbery (3 cases), persecution (1 cases), and homicide (3 cases). The young offenders at LPKA need to attend several activities such as school and religious activities.

In all these activities, there still no specific activity targeted their psychological condition. The officers show lack of understanding about psychological needs of the young offenders. Whereas, World Health Organization and the International Committee of the Red Cross revealed that the prison is a bad environment mental health (WHO &

ICRC, 2014). Various studies show that offenders often experience variety of mental health problems (Fleming, Gately, & Kraemer, 2012; Huchzermeier, Brub, Godt, & Aldenhoff, 2006). Previous studies outside Indonesia show several mental problems that young offenders have to face such as mood and anxiety disorder, substance abuse, conduct disorder, and oppositional defiant disorder (Rijo. D., Brazao. N., Da Silva., Vagos. P., Vieira. A., Lavado., & Macedo, 2016). Wallinius, Nordholm, Wagnstorm, and Billstedt (2019) also stated that young offenders have problems with their cognitive functioning and aggressive behavior.

In Indonesia, research conducted by Hadjam (2014) shows young offenders had several problems in their cognitive, behavior, emotion, and social aspect. In cognitive aspect, young offenders have cognitive distortion about their crime and their future. They have several problems such as angry and anxiety, and this effects their ability to show empathy and sympathy toward others. Young offenders also feel bored because of repeated activities in prison. They also have physical complain such as headache, itchy, and lack of sleep and appetite.

The previous researches describe that lots of problem may happened to young offenders. In Kupang there is still no research about young offenders' psychological conditions. The purpose of this research is to describe psychological condition of young offenders in LPKA Kupang based on cognitive, emotional, behavior, and social aspect. This research also analyzes about special characteristic of young offenders based on their cases.

Method

This study used qualitative descriptive approach. The subjects were determined using total sampling technique. There are 26 young offenders as the research subjects at LPKA Kupang. All subjects of this study are male, aged between 14 – 21 years old, with varied case backgrounds such as sexual abuse (19 young offenders), robbery (3 young offenders), traffic violence (1 young offenders), persecution (1 young offenders), and homicide (2 young offenders).

Data from this study were collected with focused group discussion (FGD) and psychological test. FGD was conducted using semi structured guideline based on four main aspects: cognitive, behavior, emotion, and social (Santrock, 2010). The focus group discussion used to help the young offenders be more open to release information and not to feel alone. Data from psychological test collected by drawing test consist of draw a person test, tree drawing test, and house-tree-person drawing test. Data were analyzed using qualitative descriptive technique. All collected data were compared and analyzed to find theme related to cognitive, behavior, emotion, and social aspects.

Result and Dicussion

This study aims to know about young offenders' psychological condition at LPKA Kupang based on cognitive, behavior, emotion and social aspects. The data from the focus group discussion and drawing test were analyzed and summarized into four main aspects which are described in table 1.

Based on the table 1, there are several conclusion from this research. On the cognitive aspect, the young offenders usually have more practical type of thinking. Bergvall, Wesseley, Forsman, and Hansen (2001); Isen (2010); Predescue (2014), and Wallinius, et al (2019) explain that young offenders have been more dominant on performance IQ than verbal IQ. Higher performances IQ make people tend to more practical way of thinking, short term planner, and incomprehensive decision maker. Research conducted by De Brito, Viding, Kumari, Blackwood, and Hodgins (2013) also describe young offenders who have impairment adaptive decision making and verbal working memory.

Table 1
Psychological condition of young offenders in LPKA

Data Source	Aspects			
	Cognitive	**Behavior**	**Emotion**	**Social**
FGD	- Worry about their future, family, and social acceptance. - Concrete thinking - Bad decision maker - Short term planning - Thinking low of their self - Blame others	- Sleep difficulty - Itchy - Headache - Lazy - More active doing religious activities such as daily personal pray time, attend church or mosque, actively be singers in church. - Uncontrolled behavior - Disobedient Behavior - often used negative words	-Boring -Anxiety -Relieved -Angry with victim's family -Sad -Missing their parents and friends -Lonely	- Less empathy to others - Less sympathy to others - Less communication skill - negative peer group
Drawing Test	-Negative image about their parents -Negative self-image -Practical thinking -Bad problem solver -Helplessness -Focused on the past -Egocentrism -Tend to judge subjectively -Insecure	- Childish - Destructive behavior - Easily getting nervous - Psychosomatic - Liars - Impulsive	-Uncontrolled emotion -Sensitive -Frustration -Easily getting angry -Anxiety -Fear	- Need of attention and love form others - Difficult to adapt - Bad relationship with parents - Introvert

On the cognitive aspect, this research also shows that the young offenders have external locus of control. They blame their victim's family who puts them in jail, blame the officers, and they also think bad about their parents. Person who has external locus of control tend to blame everything outside their self. Findings of this study show that the young offenders often blame others (such as victims' family or officers) and circumstances around them for their own mistakes. McAnena, Craissati, and Southgate

(2016) explain that prisoners have more dominant external locus of control than internal locus of control. Bowen and Gilchrist (2004) also explain that violent offenders who have external locus of control do not show significant change of negative behaviors even after received psychological treatment. The offenders believe that they are not the one who fully responsible of their crime.The same thing was found in this study.

The young offenders also show some cognitive distortion such as overgeneralization and jumping into conclusions. This resul is consistent with t h e previous research done by Hadjam (2014). Cognitive distortion can impact to emotional and behavior aspect of person (Beck & Alford, 2009; Beck, 2011). Person who has cognitive distortion will be in high risk of experiencing negative emotions and maladaptive behaviors. They tend to have low motivation and it makes them lazy to do anything. They don't want to make effort to get something. They show uncontrolled destructive behavior such as impulsive, lie, and childish. But, at the same time they also show more religious behavior.

On the social aspect, this research shows that the young offenders show less interpersonal skill. This condition makes them cannot fully show empathy and sympathy towards others. The young offenders describe that they have negative relationship pattern with their family, especially their parents. Negative relationship with family makes them feel lack of attention and love. According to the previous research did by Altay (2012) and Vijila, Thomas, and Ponnusamy (2013) parenting pattern that show enough love and attention has positive effect on children social skill. The young offenders in this research also experience maltreatment since their early age. Children who experienced abuse tend to have poorer social skill that related to aggressive behavior tendencies in their adolescence period (Sevecke, Franke, Kosson, & Krischer, 2016). The young offenders' poor social skill could be caused by bad peer environment. Peer group play big roles to determine social skill and behavior pattern in adolescence period (Bazon & Estevao, 2011; Esiri, 2016).

This research also aims to show special characteristic of the young offenders. Analysis was done to get general description about specific characteristic of the young offenders based on their cases. As regards the type of the cases, a distinction was made between crimes committed against persons and those against property. The crime committed against persons are sexual abuse, homicide, and persecution whereas the rime committed against property are robbery and traffic violence. The results of the analysis are shown in table 2.

Table 2
Characteristic of Young Offenders based on Cases

Type of Cases	Characteristic
Crime toward person	- Lack interpersonal skill - lack of love from family - Low self esteem
Crime toward property	- Lack of discipline - Lack of organizational skill - Manipulative behavior

The young group offenders who committed crime toward both person and property show similar ways of thinking and social behavior. These two groups show differences pattern on behavior and social aspects. This research is consistent with

research conducted by Cuervo, Villanuevam, Gonzales, Carrion, and Busquets (2015) showing that there are differences in characteristic between the young offenders who committed crime to person with the ones who committed crime to property. According to Cuervo's research, the causative factors of the young offenders who committed to person were lack of interpersonal skill and have antisocial personality. The causative factors of the young offenders who committed to property were lack of organized activity and lack of positive activities. Furthur research is needed to address this problems.

Although there are lot of negative condition, the young offenders also show some positive changes when they stay at LPKA. They explained that despite of all negative emotion and experience, they actually feel relieved that have opportunity to stay at LPKA. The young offenders feel relieve because at LPK they learn to have more organized life than before. The guilty feeling that they have also made them to become more committed doing religious activity

Conclusion

The result shows that young offender's psychological conditions could be described based on cognitive, behavior, emotion and social aspects. There is also special characteristic of the young offenders based on their cases, especially on cognitive and social aspect. Future research is recommended to analyze specific cases, such as psychological condition of homicide, sexual abuse, persecution, etc. This reseacrh implication is that there is need of psychological intervention for the young offenders. The intervention can be developed based on the psychological aspects.

Acknowledgement

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THE ROLE OF RELIGIOSITY TO RESOLVE STRESS ON VICTIM OF NATURAL DISASTERS

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Abstract

Natural disasters can occur anytime and anywhere. Natural disasters have many various negative impacts. However, humans sometimes cannot be willing when faced with the disaster. Stress is a condition that arises due to unpreparedness to face disasters. Stress occurs when individuals do not internalize their religious values so that they are more surrendered to Allah when the disaster occurs. The method in this paper is to use literature studies from several journals. The results of the literature study show that there is a negative relationship between religiosity and stress. That is, the higher the level of religiosity, the lower the level of stress. Conversely, it is the lower the level of religiosity, the higher the level of stress on victims of natural disasters. The conclusion in this paper is the deep appreciation of the individual for the teachings of the religion he adheres to, an important role in reducing stress on victims of natural disasters.

Keywords: natural disasters, religiosity, stress

Introducing

Indonesia is one of the countries that is categorized as prone to natural disasters because the geographically showing that Indonesia is located in the path of earthquakes and volcanoes. 70 of the 129 active volcanoes in Indonesia are declared active and classified very dangerous. Although it has a positive impact on soil fertility, it is undeniable that the existence of an active volcano can be a threat to residents living in the neighborhood. Among them is the occurrence of natural disasters namely volcanic eruptions that can threaten the safety of the human life and damage to the environment (Rusmiyati & Hikmawati, 2012).

Natural disasters according to Coburn (http://www.maxmanroe.com, 2019) are stated as an event or even a series of events beyond normal capacity so that residents who experience property loss, loss of life, and damage to government service infrastructure or means of human life. The series of events of natural disasters usually include earthquakes, tsunamis, volcanic eruptions, floods, droughts, hurricanes, and landslides that occur due to natural changes either extreme or slow or even because of irresponsible human actions.

Throughout 2018, BNPB data stated that there were more than five natural disasters that occurred in various parts of Indonesia. Some of these natural disasters include landslides in Brebes, Central Java, earthquakes in Lombok, NTB, earthquakes

and tsunamis in Palu and Donggala, flash floods in Mandailing, North Sumatra, and the last, still fresh in memory, are tsunamis in the Sunda Strait (http://www.bbc.com, 2018). Meanwhile, no one really wants any natural disaster in any form. Although humans have provided themselves with a variety of maximum efforts to prevent natural disasters, their arrival is always unpredictable from time to time. Various problems arise after natural disasters both physically and psychologically for the victims. The most basic physical problems are not fulfilling food and drinking needs, loss of housing, limited health services, and disrupted teaching and learning processes. On the other hand, the psychological problems that are thought to occur frequently are the loss of loved ones so that prolonged sadness arises (Rusmiyati & Hikmawati, 2012).

An individual's unpreparedness to accept himself against the disaster he experiences can cause some tragic consequences, including a traumatic event that can be felt both short and long term. Although individuals have tried to ignore the condition, but inevitably appear proactive responses from individuals and the environment so that behavioral disorders such as moodiness appear, not interested in activities around them, increase aggressiveness, experience nightmares, occur in regression behavior in children and even experience personality dissociation.

Other impacts that can be caused due to natural disasters are the risk of infectious diseases, impaired family roles and functions due to living with other families in refugee camps, loss of self-esteem, saturation of shelter situations, and even the emergence of unrealistic thinking by asking for supernatural assistance to overcome disaster. In fact, one of the most basic human needs is the existence of security both from the threat of natural and human environment and disease disorders (Rusmiyati & Hikmawati, 2012). If this is not immediately addressed, then the inability of humans will emerge in following social changes that occur in the pattern of people's lives resulting in stress.

Stress is a condition in which individuals feel depressed, overly worried about one thing that does not necessarily occur and always gives a negative emotional response to various situations both small and large so that individuals are required to be able to adjust immediately to these changes. However, the stress that comes suddenly and suddenly sometimes makes it difficult for individuals to make adjustments because of their arrival that cannot be predicted by individuals. Conversely, prolonged stress can also result in emotionally helpless individuals (Rahayu, 1997).

Stress according to (Pertiwi & Nuffida, 2017) is a response to every physical, psychological, and social burden experienced by individuals. In this modern era, stress is become a very common word to be heard. Stress is considered as a condition that goes beyond the wishes of individuals, giving rise to a response that is unpleasant or even dangerous if it occurs continuously. Various situations that exist in human life can be a trigger factor for stress. Natural disasters are one of the trigger factors for stress, which are not only experienced by victims but can also be experienced by people who are outside the location of natural disasters (Putri & Rachmatan, 2005). When experiencing stress, every human being needs his own strategy to deal with the stress he feels by doing stress coping, one of which is to increase religiosity.

Religiosity is usually related to the condition of surrendering to God when experiencing disaster. Submission to the almighty shows the belief that what happens in human life is a provision of the creator. The belief that God will not let His people drag on in sadness and the belief that God will always prepare a more beautiful plan if His people successfully pass the test.

Belief is one important dimension in religiosity. The dimension of belief illustrates how much a Muslim believes in the truth of his religion. Beliefs related to the faith in the religion they embrace, including beliefs about God, Angels, Prophets or Apostles, the Book of Allah, the existence of Heaven and Hell, and what is equally important are beliefs about Qadha and Qadar (Ancok & Suroso, 2004). How big is the level of belief in qadha and qadar that is owned by individuals, one of which will show how high the level of religiosity of victims of natural disasters in accepting their destiny.

Religiosity according to Glock & Stark is a form of individual religious commitment related to religion and his faith in his God which is manifested through his religious activities (Ancok & Suroso, 2004). Religiosity should be able to make victims of natural disasters not experience stress when they get a disaster. But in fact, it is often found a phenomenon where victims of natural disasters are unable to face the reality that occurs so that they experience various psychological disorders both physically and psychologically. Based on the description, the researchers want to find out more about the role of religiosity in dealing with stress on victims of natural disasters.

Method

The method used in this paper is a literature study of several journals related to the title which is about religiosity and stress. Literature is obtained from journals related to the theme. The following is a list of research journals related to the themes in this paper, namely:

1. The Relationship between Religiosity and Job Stress on Riau Police Mobile Brigade Members conducted by Farhan Okta Yudra, Fikri and Ahmad Hidayat in 2018. This study shows the results there is a positive and significant relationship between religiosity and job stress on members of Riau Mobile Brigade.
2. The Influence of Religiosity on Stress Management in Class XII Students of State High School I Kasihan by Sangaji Dwi Putra in 2016. This study shows that there is a positive and significant effect between religiosity on stress management in students with an effective contribution of 48.8%.
3. The Relationship between the Level of Religiosity and the Ability to Overcome Stress (coping stress) conducted by Ira Darmawanti in 2012. This study shows that there is a positive relationship between the level of religiosity and the ability to deal with stress ($r = 0.6344$ with a significance level of 5%) .
4. The Relationship between Religiosity and Stress Levels in Persons with Physical Disabilities conducted by Diana Ariyani in 2000. This study shows that there is no correlation between the level of religiosity and stress in physically disabled people.
5. The effect of religiosity on Depression, Anxiety, Stress and Quality of Life of Chronic Disease Patients in Makassar City (Epidemiological Survey Based on Islamic Integration and Health) by M. Fais Satrianegara in 2014. This study showed no significant relationship between religiosity and stress in patients with chronic diseases in Makassar.
6. The Relationship between the Level of Religiosity and the Level of Stress in the Elderly in Surakarta Dharma Bhakti Nursing Home by Muhammad Agung Swasono in 2015. This study shows the results there is a relationship between the level of religiosity and stress level in the elderly in Surakarta Nursing Home.

7. The Influence of Religiosity and Adversity Questions on Job Stress at the Bumiputra 1912 Joint Life Insurance Agent by Mira Ismirani in 2013. This study shows that there is an influence between religiosity and adversity quotient on job stress at the Bumiputra insurance agent 1912.

Results

The results of the literature study based on several previous studies about religiosity and stress that have been done stated that 5 of the 7 journals analyzed showed that there was a negative relationship between religiosity and stress. This means that the higher the religiosity, the lower the level of stress, and conversely the lower the religiosity, the higher the level of stress. Religiosity has a positive role in reducing stress levels in victims of natural disasters.

Any natural disaster of any kind is not desired by anyone, both those who have never felt and victims of natural disasters themselves. When a disaster occurs, victims are forced to flee or even leave their homes to save themselves by moving to safer areas. The loss of property and loved ones is a sad thing for the victims of the natural disaster. Stress occurs when individuals can no longer fulfill their needs both physically and spiritually. Stress can happen to anyone without any age limit with different stress levels depending on what factors cause stress and how individuals can manage the stress they feel. According to Lazarus and Folkman, stress occurs when individuals have difficulty balancing themselves between demands and abilities (Saputra, 2016).

Every disaster leaves panic and deep sadness for the victims. However, Pitaloka (Putri & Rachmatan, 2005) states that God created humans not only to feel fear and fear throughout their lives without being equipped with the ability to solve problems. Religiosity helps people to be more confident in the love of Allah Almighty towards them. It is this belief in help from Allah Almighty that will help people be stronger in facing trials and courage in facing the future by praying and surrendering to God.

Humans cannot escape religion throughout their lives in the world. Religion is a way of life that will help humans act and behave according to religious teachings. Religion is usually synonymous with religiosity when it is associated with how broad an understanding is, how high is the level of confidence, how much willingness to carry out the commands of his Lord, and how deeply human beings live the religion they follow (Saputra, 2016).

Chappoti, Marie, & Chan (Satrianegara, 2014) stated that several studies on religiosity state that people's willingness to carry out orders and stay away from their Lord's prohibitions turned out to have a good effect on health. Doctors in America believe that the strong belief in religion accompanied by prayers can provide an opportunity for healing for patients by 75%. Likewise for victims of natural disasters, when humans are able to feel and do not doubt the highest power that lives their lives in the world, their religiosity will increase so that the stress experienced can be reduced.

Therefore, it can be concluded that the quality of life of a person will be known through how high the level of religiosity. The power of relationship with God in nature will bring calm to humans (Yudra, Fikri, & Hidayat, 2018). That is, when an individual's knowledge of what he has to believe is based on the religion he adheres to, the less stress he experiences. These beliefs contain that what happens in human life is good for him. Be patient when given a sick test, and be grateful when being given

spaciousness (Satrianegara, 2014). Understanding of profound religious values will automatically help individuals to overcome the problems they are facing by submitting and surrendering to God for all events in their lives (Putri & Rachmatan, 2005).

Discussion

Based on the description from the description above obtained from several literature studies it is known that there are differences in results regarding the role of religiosity in dealing with stress on victims of natural disasters. The first opinion states that religiosity correlates in reducing stress. Meanwhile, the results of other studies showed that religiosity is not correlated with stress in some studies. Thus, further attention is needed to why religiosity cannot always reduce stress. It is predicted that there are other factors that can support the role or not of religiosity in reducing stress, which is how deep a person is able to internalize the understanding of religion embraced in his life. When a person internalizes a good understanding of his religion, his religiosity will increase so that submission to the provisions of Allah SWT will increase. Conversely, if the internalization of his religious understanding is low, then submission to the provisions of Allah SWT will be lower. Humans tend to always mourn the calamities they experience rather than be patient when the test comes.

Conclusion

Based on the description above, it can be concluded that religiosity give an important role in reducing stress on victims of natural disasters. Stress occurs when humans cannot accept gracefully when disaster comes to him. Stress occurs when humans do not believe in the provisions of God towards their lives. This belief will help humans to be able to apply the values of religiosity in accordance with the teachings of their religion. High religiosity will help people to be able to face all the tests and trials calmly.

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RELATIONSHIP OF QUALITY OF WORK LIFE WITH EMPLOYEE'S PSYCHOLOGICAL WELL-BEING

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Abstract

Basically, every individual wants to feel happy and prosperous life, both physically and spiritually. Psychological well-being is related to personal satisfaction, hope, gratitude, stability of mood, self-esteem, excitement and pleasure. One way to get the psychological well-being in working is with the quality of work life. The purpose of this research was to find out and describe the correlation between the quality of work life and psychological well-being on employee. Data collecting instruments used for this research are questionnaire, in the form of quality of work life scale and psychological well-being which were given to 30 employees of PT. XYZ as sample respondents. The data analysis technique used in this researh was the product moment technique. Based on the analysis of research data with product moment obtainde from both the correlation coefficient r_{xy} amounted 0.583 with r_{table} 0.463 (0.583 > 0.463 (1%)). It means that there is a very significant relationship between quality of work life and psychological well bein. From these results, it can be concluded that there is a positive relationship between quality of work life and in addition it is known also that the higher quality of work life are given the psychological well-being that employees also higher.

Introduction

Every individual wants to feel happy and prosperous life both physical and spiritual. Everything will be done by the individual to make his life to be more prosperous. According to Corsini (Iriani, 2005), well-being is a picture of a subjective well circumstances. It includes the happiness and fulfillment that is owned in life. Happiness owned by the individual can affect psychological well-being. If someone owns his life in compliance with the satisfactory then someone has a good psychological well-being.

Bartram and Boniwell (2007) stated that psychological well-being relate to personal satisfaction, attachment, hope, gratitude, meaning, mood stability against oneself, self esteem, excitement and pleasure, satisfaction and optimism. It also includes recognizing the strengths and develops talent and interest owned. So, the psychological well-being can lead individuals to be creative and to understand what is doing.

Positive impact of individual who has a positive psychological well-being is able to understand and to accept all aspects within him and also has a positive attitude towards life and others. He has a concern for the welfare of the people other and can show a sense of empathy.

A negative impact of an individual who has a low psychological well-being is to demonstrate dissatisfaction towards the conditions, felt disappointed with what has happened and cannot accept himself for what it is. The individual is usually against others and has no desire to compromise in maintaining relationship.

Psychological well-being owned by individual can be affected by conditions in the surrounding environment wherever individual is. In addition, psychological well-influenced by the environment is also affected by several other factors as well as age, personality, religiosity, and social economic status. Personality and religiosity are formed from the individual learning process of the environment along with increasing age, whereas social economy in economic status can be from the work done by individuals.

An examination of the existing socio-economic status of the individual is retrieved from the work owned. It can also be influenced by the psychological well-being of the work owned by individuals. Interviews was conducted in 3 participants who have concluded that employees who are on the field sales have pressure on workload due to the presence of the target to be met by employees that has been defined by the company. So, it is clear that given the company's workload can give impact to psychological well-being that is owned by an individual. It places the individual company or organization works must provide reciprocity to human resources.

Basically, the organizations and individuals environments have reciprocal relationships each other. The individual will feel comfortable and prosperous if the organization or company can give and fulfill what is required by the individual. The organization and vice versa also requires individuals to be in it so that the organization can run and carry out the process to realize the vision and mission and keep the organization still exist. With the existence of reciprocal needs each other, the organization must be able to create a sense of security and peace for the individual to become more competitive in the work. The individual must also be able to develop their potential and give his best effort for the organization.

The quality of working life is one of the main focus that should get more attention from the organization. So, the existing human resources are more competitive. According to Ivancevich (2001), quality of work life is a general concept that refers to some aspect of the work experience such as management and supervisory style, as well as safety. The program quality of work life assumed that the work and the working environment should be structured to meet the needs of employees.

Nawawi (2011) stated that the company must afford the quality of working life within the company because of its human resources in order to become more competitive. It will create a competitive work environment and overall organization. It is also be more competitive in manifesting its existence. The theory of the Nawawi became more intriguing when researchers noticed the existence of the success of one of the companies, namely PT Yudhistira Ghalia Indonesia as evidenced by the breadth of network marketing which has branches and representative offices marketing almost all over Indonesia.

In line with the rapid advancement of the educational world of PT. Yudhistira Ghalia Indonesia, it continues to develop new innovations that are inseparable from the existence of the role of human resources in it. To make it happen, the quality of human resources owned also increasingly optimized, but there are qualities not only seen from the existence of ability resulted in a goods only but also the quality of human resources towards competitiveness that was later given to the consumer. The ability of

competitiveness used to provide continuous services tailored to the needs of consumers. So, the resulting goods and services are able to compete and seize the market. As a consequence, logically a company will require human resources with high motivation that is comfortable and happy to get satisfaction in his work.

Method

Type and Design of the Research

This research was quantitative research. According to Sugiyono (2010) quantitative research is a research method that is used to examine a particular population or sample by using a research instrument for the collection of data. The data analysis used quantitative or statistically data with the aim to test the hypothesis that has been set. This research used quantitative research design. It used correlation research to measure the relationship between two or more variables.

Population and Sample Research

According to Sugiyono (2010), population is the generalization of the object or the subject which has been set by the researchers. The existing population in this research is employees who work at PT. Yudhistira Ghalia East Java Area of Indonesia. The total number of employees at PT. Yudhistira Ghalia East Java Indonesia that became the population in this research is about 97 employees.

Samples are part of the characteristics possessed by the population (Sugiyono, 2010). The technique of sampling used cluster sampling technique. Cluster sampling is a technique used to determine sample if the subject will be examined. Because of the size of the area and the spread of existing location, then the researcher determined some characteristics in defining the subject. The characteristics of the subject used in this research are:

a. The subject is the permanent employees at PT. Indonesia Ghalia Yudhistira.
b. The subject of working in branch offices PT. Yudhistira Ghalia Indonesia located in Surabaya.

From the characteristics above, it has been specified. The samples used in this study were 30 permanent employees working in PT. Indonesia Ghalia Yudhistira.

Research Instrument

Research instrument is an instrument used to measure natural phenomena or social phenomena which will be observed (Sugiyono, 2010). A scaling model used in this study was Likert scaling model. There were 4 alternative answers in Likert scale namely SS: strongly agree, S: agree, TS: disagree, STS: strongly disagree.

The instrument used in this research was the scale. This study used a scale of quality of working life and the scale of psychological well-being. Quality of work life organized scale based on seven aspects of quality of life work owned by Zin (2004). They are growth and development, participation, physical environment, the leader, salary and benefits, social relevance. As well as social integration, psychological well-being scales used the six facets owned by Ryff (2006). They are the form of self-

acceptance, positive relationships with others, autonomy, mastery of the environment, the purpose of life, and growth personal. Both of them developed through the behavior indicators and made a statement item to describe the existing conditions.

Result

Table 1
Descriptive Statistics Research Data

	N	Min.	Max.	Mean	Std. Deviation
QWL	30	91,00	120,00	102,96	8,72
PWB	30	118,00	170,00	145,76	10,97

The subject of this study was 30 permanent employees who work at PT. Indonesia Ghalia Yudhistira. Table 1 shows that the average scale of quality of work life of psychological well-being scales is 102.96 that has an average of 145.76. The minimum value obtained from the scale of quality of work life is 91 and for the psychological well-being scale is 118. Whereas, the maximum value on the scale of quality of work life is 120 and on the scale of psychological well-being is 170. The standard deviation of the respective scale of quality of work life and psychological well-being scale is 8.72 and 10.97.

Data analysis techniques used in this study is the technique of correlation Pearson product moment from Carl who assisted its calculations using program SPSS 16 for windows. Hypotheses are given on the research is "there is a relationship between the quality of work life with psychological well-being on employees".

Table 2
Product Moment Correlation Test Results

		QWL	PWB
QWL	Pearson Correlation	1	,583[**]
	Sig. (2-tailed)		,001
	N	30	30
PWB	Pearson Correlation	,583[**]	1
	Sig. (2-tailed)	,001	
	N	30	30

Table 2 shows that the value based on the data analysis with product moment obtainde from both the correlation coefficient r_{xy} amounted 0.583 with r_{table} 0.463 (0.583 > 0.463 (1%)). It means that there is a very significant relationship between quality of work life and psychological well being. From these results, it can be seen that there is a positive relationship between qualities of work life. It is also known that the higher quality of work life make the psychological well-being of employees also higher.

Discussion

The results of the study stated that there is a positive relationship between the quality of work life and psychological well-being. It is because basically every individual wants to get comfort and happiness in her life. The comfort and happiness of individuals can illustrate the extent of psychological well-being.

An individual's surroundings is one of the factors that can affect psychological well-being, but most of the factors affect comes from individuals themselves as well as age, personality, religiosity, gender, and socioeconomic status. One of the existing research on psychological well-being because of the role of economic hardship, as well as the serious religiosity satisfaction (Hadjam and Nasiruddin, 2003). The research suggested that social economic status owned by the individual psychological well-being may affect. This is caused by economic difficulties that have a negative impact on the psychological and economic factors measured by money. This is a tool that facilitates the fulfillment of individual needs so as to give effect to individual happiness because income contributes significantly to meeting basic needs.

The role of economic factors that influence individual well-being is also related to the symbolism of money and wealth. Money and wealth hold symbolic functions to determine status and progress that will influence people's reactions to others, thereby increasing individual confidence and self-esteem.

Socio-economic status owned by individuals can be obtained from a job owned by themselves. With that work, the individual also carries out the process taken to achieve his life goals so that the individual relationship between him and the environmental organization makes it develop.

Work capacities of a job that differ according to individual perceptions have also been approved. This is used to make good quality work. The quality of work life is the concept of work experience such as management and supervision style, freedom and autonomy to make decisions, and work safety, so that ultimately the quality of work life programs and work environment are regulated to meet the needs of employees (Ivancevich, 2001).

In line with several other studies, the quality of work life seems to improve the quality of life in the world (Angelia, 2013). The results of this study are a positive contribution to organizational commitment. When the quality of work life is high, then the commitment is given to the organization, expressed in the effective approved quality of work life of 46.2% of organizational commitment.

Another study was also conducted by Arifin (2012), this study shows that more employees are satisfied to get quality jobs and the results produced by employees are also getting better. This is evidenced by the results of data processing in mind because the value of the t-farm statistic (2,480) is greater than the farm table of 2.01, so this shows a higher quality of life for employees than higher performance.

Work life reflects that he has a positive contribution to job satisfaction, commitment to the organization, supporting employees, and increasing intelligence. It can be concluded that the quality of work can help improve the quality of existing human resources.

Conclusion

The conclusion of the study was the quality of working life have a positive contribution to the quality of work life that is owned by its employees. So, the company should further optimize quality the working life of the employees in order to balance between workload with the fulfillment owned by its employees. In addition, individuals in companies and companies must also maximize performance to develop better with every change that occurs.

There are still many shortcomings in this study, so we can also change the same variables and look at other aspects of psychological well-being.

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THE RELATIONSHIP BETWEEN WORK ENVIRONMENT WITH TURNOVER INTENTION TO EMPLOYEES

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Abstract

This research wants to know whether work environment can affect turnover intention or not. Based on this background, the purpose of this study is to determine the relationship between work environment and turnover intention to employees. In this study, the research subjects are 35 employees in the age ranging of 21-25 in Surabaya with purposive sampling technique. Data collection used is work environment scale and turnover intention scale. Validity test results work environment scale 0.522>0.5 and intention turnover scale 0.741>0.5, work environment reliability test p=0.806>0.7 and turnover intention p=0.817>0.7. The data of this study were analyzed by product moment correlation analysis techniques using the SPSS 22.0 for Windows program. The results of this study show that the research hypothesis is rejected which means there is no negative relationship between the work environment and turnover intention (r=-0,072; p=0.679). Based on this research, work environment is not shown to be associated with turnover intention. However, this research reveals that the majority of the subjects experience turnover intention in high category, which is equal to 27 subjects out of a total of 35 with a percentage of 77.1%.

Keywords: employee, turnover intention, work environment

Introduction

In globalization era, competent and quality human resources are needed by companies to improve performance and results that can be obtained. Human resources are the main asset in moving companies. Thus, the success of companies in advancing its business is determined by how to manage human resources so that the plans and objectives of their establishment are achieved. Besides, companies also needs to meet the expected needs of their employees, because of the incompatibility of the expected needs of the company where he works. There will be desire to leave companies which is known as turnover intention.

Turnover intention is a serious problem that often occurs in the world of work. Turnover intention according to Harnoto (2002) is the level or intensity of the desire to leave the company. Whereas according to Mobley et al. (1978) turnover intention is the tendency or intention of the employee to stop working from his job voluntarily or move from one workplace to another in his own choice.

Turnover intention carried out by employees, because they want to find better jobs, higher wages, and a more conducive work environment. Employees in certain companies are very important human resources, because they play a role to run the company. If the turnover rate of intention in companies is high, the companies will experience a loss, such as costs in conducting recruitment & selection, training so that employees become competent and superior and in finding vacant office replacements. This problem becomes serious for the company, if employees who leave the company are outstanding employees. The negative impact that will arise on the company is that it is difficult to find substitute for employees who have the ability and expertise to occupy vacant positions (Robbins, 2017). In addition, according to Mobley et al. (1978) the effects of turnover intention include workload, employee withdrawal costs, training costs, production lost during employee turnover, waste due to the presence of new employees and can also trigger employee stress. In addition to having a negative impact, turnover intention also has a positive impact on the company, according to Mobley (2011) the existence of turnover within the company carried out by employees who lack potential in carrying out their duties, can provide opportunities for companies to recruit new employees with more potential good compared to employees who leave.

Based on Michael Page (2015) data in Indonesia about employee intentions report, almost three-quarters (72%) of respondents stated that they were employees who were very or very likely to leave within the next 12 months. This high percentage yield can be considered as other evidence in the labor market and economy in Indonesia. Thus, turnover intention is a problem that will often be found in various types or fields of companies, because the main assets in the establishment and development of the company are human resources. According to Mobley, et al. (1978) the factors that can affect turnover intention are as follows:

1. Individual characteristics

   Individual character, which may affect the desire to leave the company were age, education and marital status.

2. Work environment

   The work environment has two types, namely the physical and social environment. The physical environment includes the ambient temperature, weather, construction, building and location of works, while the social environment includes the culture of the work environment and the quality of work life.

3. Job satisfaction

   At the individual level, satisfaction of variable-psychology is the most widely studied. Aspects related to the satisfaction of the desire to leave the company, namely the satisfaction of salary, promotion, supervisors, co-workers and satisfaction with the work performed.

4. Organizational commitment

   Organizational commitment can explain the concept of desire to be out by the employees as a form of behavior. Commitment with satisfaction has a difference in terms of commitment leads to the individual's emotional response to the company where he works, while satisfaction leads to the individual's emotional response to his work.

Based on the explanation of the factors above, which can affect turnover intention, one of them is a work environment factor.

The work environment needs to have more attention because it has direct influence on the employees in carrying out their work. According to Chox & Cheyne (2000) work environment conditions can affect one's attitude in carrying out their work. Whereas according to Taiwo (2010) work environment is the sum of the interrelationship that exists within the employees and between the employees and the environment in which the employees work. Companies that can manage their work environment can attract employees to work more productively. Productive employees will generate profits for the company and also for the employees themselves. When employees are productive in working with a company-owned work environment, the employee turnover intention can decrease. Thus, the higher or better the work environment owned by the company can reduce turnover intention on employees.

Based on previous research Fuaidah, et al. (2018) said that the work environment has negative and significant effect on turnover intention, which means that if there are changes that occur with the work environment, then this will also affect turnover intention. While research according to Putra, et al. (2017) also said that the work environment and job satisfaction have negative and significant effect on turnover intention.

Based on the explanation above, this research tries to examine the relationship between the work environment and turnover intention on the employees in the age of 21-25 in Surabaya. The reason to choose the subject of the employees at a young age because this research wants to know whether the work environment can affect turnover intention.

Method

This study used survey purposive sampling techniques on the employees working in Surabaya ranging of 21-25. This study uses a work environment scale developed by Chox & Cheyne (2000) consisting of 6 items with two aspects, namely work atmosphere and work facilities and a turnover intention scale developed by Mobley, et al. (1978) consists of 4 items with three aspects, namely thinking of quitting, intention to search for alternatives and intention to quit. The scale used in this study is a Likert scale with five choices of answers, namely strongly agree (5), agree (4), quite agree (3), disagree (2), and strongly disagree (1).

In this study the work environment scale has a validity value of 0.522 > 0.5 and reliability p = 0.806 > 0.7 and the turnover intention scale has a validity value of 0.741 > 0.5 and reliability p = 0.817 > 0.7 which means the scale in the study is stated valid and reliable. Data analysis techniques in the study uses product moment correlation with SPSS 22.0 for Windows.

Result

The results of the normality test in this study is that turnover intention has a value of p=0.200 > 0.5 which is stated to have normal data distribution and work environment has a value of p=0.149 > 0.5 which is stated to have normal data distribution as well. Therefore, the distribution of data in this study follows normal distribution. Then the results of the linearity test in this study between work

environment and turnover intention has value of p=0.809 < 0.5 which stated between the two variables of this study have non-linear relationship. Product moment correlation test results in this study between work environment with turnover intention obtained r = -0.072, p = 0.679, which means that between the work environment with turnover intention have very weak negative correlation and p = 0.679 (<0.5), which means no significant.

Table 1
The relationship between work environment with turnover intention

Variable	r	p	Result
Work Environment with *Turnover Intention*	- 0,072	0,679	Rejected

The results of this analysis indicate that the hypothesis is rejected, which means that there is no significant negative relationship between the work environment with turnover intention. Based on these results, it proves that the work environment is not shown to be associated with turnover intention. The results of this study are similar to previous studies conducted by Yanti, et al. (2016) which says that there is a no significant negative relationship between the work environment with turnover intention.

Discussion

The research explained about the relationship between the work environment and turnover intention on 35 employees aged 21-25 in Surabaya. The results of the research obtained in this study indicate that the work environment is not proven to have relationship with turnover intention. Based on the theory by Mobley et al. (1978) the work environment is one of the factors that can affect turnover intention on the employees, but in this study the theory does not apply. However, based on the research by Fuaidah, et al. (2018) and Putra, et al. (2017), it is proven that the work environment with turnover intention has significant negative relationship. However, in this study, it is not proven that there is negative correlation between these two variables. This states that variable turnover intention is not only related to the work environment but with other variables that have been explained by Mobley et al. (1978), namely individual characteristic, job satisfaction and organizational commitment.

The results of the data analysis in this research are that the work environment showed 28.6% of the subjects in the high category, 37.1% in the medium category and 34.3% in the low category. This shows that the employees in the age ranging of 21-25 in Surabaya are connected to the work environment at the company where he works. Then based on the results of data analysis, namely turnover intention shows 77.1% of subjects in the high category and 22.9% in the medium category. This shows that the employees have strong desire to leave the company where he works. According to Sumarto (2009) companies that have young workers will have higher turnover rate than companies that have relatively old workers. Besides that, the turnover phenomenon in the city of Surabaya according to Sumarto (2009) is quite high which occurs in several companies.

This study only examined the relationship between the work environment and turnover intention. The results shows that the work environment is not proven to have relationship with turnover intention as stated in the previous research of Yanti, el at.

(2016). Therefore, for further research in examining the relationship between the work environment and turnover intention, it is necessary to add variables that can affect turnover intention as explained above.

The implications of the results of this study can be used as suggestions that can be considered to take decision in overcoming turnover intention in the companies. In overcoming turnover intention there are several actions that need to be taken by the company, namely:

1. Job Satisfaction

   Companies must be able to improve employees' welfare by fulfilling the needs of employees, such as providing salaries that are in line with the performance, giving awards to employees who excel at work and getting the opportunity to be promoted to higher level. If this can be fulfilled by the company, the possibility of employees to have turnover intention will decrease.

2. Organizational Commitment

   Companies must be able to provide assistance to employees, such as the encouragement feeling, the fairness in the company, meaningful work and the possibility to contribute to the company. The companies and the employees become partners who need each other. Thus, commitment will arise between the employee and the company where he works.

Conclusion

To conclude, the employees in the age of 21-25 who have high turnover intention need discussion material in the company. The main purpose of turnover intention is that they want to find better jobs, higher wages and a conducive work environment. To response, the companies need to find solutions for the employees who want to leave the companies. They are eligible to succeed in the company where he works and responsible companies must respond to the needs of employees so that they have the potential to advance the company.

Acknowledgement

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THE INFLUENCE OF FEAR OF SUCCESS ON THE PSYCOLOGICAL WELL-BEING OF POLICEWOMAN OFFICER IN MAPOLDA (REGIONAL POLICE OFFICE) DIY

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Abstract

As public service officer in law enforcement institution in Indonesia, police need to show good performance. To maintain and improve the police performance can be done by improving psychological well-being. The higher of psychological well-being of the policewoman, the better their perfomances. At conceptual level, the psychological well-being can be influenced by demographic factors (age, gender, socio-economic status and cultural status). In this research, the demofraphic factors are expanded into "fear of success" variabel. Based on the background, this research aims to verify the influence of fear of success on the psychological well-being of policewoman officers at Mapolda (Regional Police Office) DIY. The subjects of this research are 137 policewoman officers at Mapolda DIY. In this research, the subjects' requirements are: they have been working at the police intitution at least 4 years, they are being active at work, and they have ever participated in the promotion. The data of research are collected by using Likert Scale which is used to measure perceptions, attitudes, or social phenomena. The scale is based on the operational definition which is determined by us. The analytical method used in this research is the analysis of multiple linear regression. The result shows that the fear of success has negative and significant influence on the psychological well-being.

Keyword: fear of success, policewoman, psycological well-being,

Preface

Under the leadership of Police General Tito Karnavian, the police institution has experienced some improvements. After being inaugurated as a National Police Chief in July 13th 2016, he has a main program which is called Promotor (Professional, Modern, Trusted). Basically, it includes three main activities. First, performance in this program concerns to aspects of public service, such as: SKCK (*Surat Keterangan Catatan Kepolisian*/Police certificate) publication, SIM (*Surat Izin Mengemudi*/Driving Lisence), LP (*Laporan Polisi*/Police Report), Letter of loss, etc. Another aspect of performance is professionalism in law enforcement which is in impartiality to certain party. Then, the performance could be seen from the safeguarding of the society

security and orderliness which is called *Harkamtibmas*. In this perfomance, the police is required to guard the country from social conflicts.

The second Promoter program is culture. Through this program, the police institution establishes situation which is free from KKN, the arrogance of authority, and the overreaching action. The third is media management. In this aspect, the police needs to build good relations printed and online media agencies. Along with the development of technology, the police institution utilizes social media to build its image.

The good performance of the police institution requires hard work from its staffs including policewoman. As law enforcement officer, the policewoman is expected to work hard due to the fact that the average of policewomen are not temped to corrupt. It is the reason why the policewoman is given the same opportunity as the policeman. Improving the psychological well-being can be conducted to support the perfomance of the policewoman. It is in accordance with the study conducted by Nurlita (2015). She stated that there is a strong correlation between the performance and the psychological well-being.

There are five factors that affect to the psychological well-being, they are: 1) Demographic factors which consist of age, gender, sosio-economic status, and cultural status, 2) Social Support, 3) The evaluation of life experiences, 4) Religiosity, and 5) Personality (Ryff, 1989). From those factors, socio-economic is the main factor affecting the psychological well-being.

The interview results with some policewomen show that everyone needs sense of security, such as physical security, stability, dependency, protection, freedom from threatened things, and psychical needs. If the needs are not fulfilled, the individual mental condition will be threatened. Eventually, it can reduce the individual psychological well-being, so that it will impact to the motivation and the performance.

The interview results with some policewomen also gives information that the actualization for policewoman is one of the needs which must be fulfilled due to the fact that each person needs his or her own space to optimize his or her potential. If the policewoman gets her own space, she can utilize the opportunity from the institution to carry out self-development. That is why the policewomen in Mapolda DIY compete to prove their abilities at work. The high motivation and performance of policewomen will have positive impacts to the police institution as it can maintain and increase public trust to the police institution. However, some policewomen feel fearful when they have chances to develop their carrier. It is related to the assumption that the success of women in Eastern culture is still around domestic area; in contrast, the success of public areas is still dominated by men. This assumption establishes the fear for policewomen when they get success of public area, such as their success to reach high and strategic position in their police institution.

Fear of success is the factor which is related to the psychological well-being of the policewomen at Mapolda DIY. Culture is one of the factors which impacts to psychological well-being. The fear of success is an inner conflict between passion for achievement and negative consequenses. This fear will make women tend to avoid success (Sari, 2012). They tend to experience the fear of success because the achievement is often related to something which is masculine. Therefore, when they reach high achievement, they will perceive losing their feminity. In addition, people will think that she is masculine (Horner in Sari, 2012)

According to Sahrah (2014), there are four aspects of fear of success. The first is the affiliation. In this aspect, a successful woman will be afraid of loosing her affiliation

because of her success. She is afraid that her friends or families will leave her. Second is the self concept which means that a successful woman will be afraid of loosing her feminity and pride. Besides, the self concept also includes a woman who does not have ambition to get high achievement in her career. She tends to do tasks which are not challenging. Third, the desire enhancement. In this aspect, a successful woman will be afraid when her success will make her responsibility is increasing. Moreover, she always hopes to be more successful. Fourth, the conflict. In this aspect, a successful woman feels afraid of getting praises.

However, the fear of success which is experienced by the policewomen at Mapolda DIY can decrease psychological well-being. For sure, this matter must be avoided because psychological well-being is needed to increase the policewomen performance. The fear of success can decrease psychological well-being of the policewomen at Mapolda DIY. It is an inner conflict between passion for achievement and negative consequenses. This fear will make a woman tends to avoid success (Sari, 2012). A woman tends to experience the fear of success because the achievement is often related with something which is masculine. Therefore, when a woman reaches high achievement, she will perceive losing her feminity. In addition, people will think that she is masculine (Horner in Sari, 2012). Therefore, the fear of success which is experienced by the policewomen at Mapolda DIY can decrease psychological well-being. For sure, this matter must be avoided because psychological well-being is needed to increase the policewomen performance in their police institution. The ear of success can decrease psychological well-being of the pilicewomen at Mapolda DIY.

Literary Review

According to Ryff (1989), psychological well-being is the term to describe individual psychological health, and it is based on fulfilling the criteria for positive psychology functions. Fisher (2010) explains that psychological well-being at work place is a condition in which a person has motivation and positive energy to work. He or she is being involved in work, and enjoys at all work activities. Eventually, he or she will stand at their workplace for long time.

Schultz (in Ramadhani, 2016) says that psychological well-being is defined as an individual positive function. In this term, the individual positive function is the goals which are cultivated to be achieved by each healthy person. According to Tanujaya (2014), psychological well-being is a condition in which individuals will do something in life meaningfully. Therefore, will have positive judgment of life.

From some opinions about the meaning of psychological well-being, it can be concluded that: psychological well-being is a condition in which a person feels positive attitude in his or her environment. People who can accept theirselves and have positive relations means that they have great psychological well-being. When they are motivated at workplace, they will enjoy their work as their responsibilities.

According to Ryff (1989), psychological well-being will be fulfilled in several dimensions as follows:

a. Self acceptance. In this dimension, people who have great psychological well-being will have positive attitude towards theirselves. They can accept positive and negative aspects inside themselves, and positive feelings about their past lives.

b. Positive relationships with others. In this dimension, a person who has great psychological well-being can be a warm person. He or she trusts people in his or her

relationship, being empathetic, has affection, and strong intimacy. He or she understands about giving and receiving in his or her relationship.

c. Independence or autonomy. A person who has great psychological well-being will make a decision without social pressure. He or she will behave in the right way according to the standard of individual values. In addition, he or she can evaluate his/her self.

d. Dominating the environment. In this dimension, a person can regulate the environment, arrange complex controls on external activities, use opportunities in his/her environment effectively, choose and create a context which is aproppriate with the needs and the values of each individual.

e. Goals of life. In this term, people will have life goals, purposes, and directions which lead to more meaningful life.

f. Self development is a feeling inside of each individual which makes them think that they are able to pass through the stage of self-development. They are also open minded about new experiences and realize the great potential inside themselves. Hence, they will make improvement in their life all the time.

From these explanations about the aspects in psychological well-being, it can be said that a person who has great psychological well-being will have good self acceptance, positive relationships with others, independence, domination in the environment and having goals and self development in life.

Collins & Eggleton (1980) describes the fear of success as a condition in which people are afraid to reach the success. This fear is caused by the negative consequences of the success that is achieved, such as social rejection and lossing the femininity in women. According to Sahrah (2014), the fear of success is a personality disposition which makes a person feel reluctant to do tasks properly. This is due to the anticipation of negative incentives which might be acceptable. The fear of success which is manifested into behaviour depends on many things, such as the compromise between the several goals and the environment of each individual (Sahrah, 2014).

André & Metzler (2011) defined the fear of success as psychologist obstacle which makes people afraid to create achievements. This fear is caused by negative consequences of success. In a certain context, the success inflicts to social rejection and loosing femininity. In other words, the fear of success refers to internal conflict of some women who have experienced particular situation. Their desire for success is undermined by the anticipation of negative consequences related to success.

According to Sahrah (2014), there are three hypothesis which can be submitted to understand the fear of success behavior. First is motive. The fear of success in individuals is caused by the success rejection motive because someone pays attention of negative consequences to their success. Second is the hyphotesis of cognitive. This hyphotesis is caused by positive encouragement which can motivate people to avoid success. In this hyphothesis, the fear of success is a habit which can be learned, and this habit will obstruct success in a particular situation. Third is the hypothesis of compromise. In this term, success is the result of defined goals of something that is achieved. Even though in operational way, the criteria for those goals are produced not only by the community's volition, but also the actual purpose of people.

From the description, it can be concluded that the fear of success is a condition which makes a person feel reluctant to do tasks properly. However, some aspects of fear of success is not applied in real life. In a particular situation, sometimes people are

afraid to reach success. On the other hand, they will be brave to reach success when they have goals and support from their family or friends.

The aspects of fear of success in this research adopt the ones that were used by Collins and Eggleton (1980). There are four aspects in this reaserch:

a. Success will cause the changes of lifestyle
   A person is afraid of success because it will impact to his or her lifestyle.
   For example: if people reach success, they will not get leisure time in a long time, their responsibilities will increase, and they feel more pressure.
b. Success will cause many changes.
   A person is afraid of success because it effects to personal relationship. For example, it affects the negative attitude of families and friends which makes them feel bad.
c. Fear of competition with colleagues
   A person will be afraid to reach success because it will make him or her to compete with his or her colleagues. Sometimes, he or she feels bad about this competition.
d. Fear of competition with others
   For example, a person will be afraid to compete with others from the same profession or afraid with performance evaluatin which is based on national professional standards.

The Research Method

This research uses quantitative method. The subjects in this research are 238 policewomen at Mako Polda DIY. The method of determining the subject which is used in this study is judgement sampling. This method determines the subject in accordance with particular considerations (Djarwanto, 2001). The consideration was used to choose the sucject who can provide good propects for processing accurate data. The following are some characteristics that are used as consideration for selecting research subjects 1) Minimum work period of 4 years. 2) Still actively working at Mako Mapolda DIY. 3) Not carrying out study assignments. 4) Have participated in the promotion. The number of sample is determined using Slovin formulation. The calculation of Slovin formula shows that this study uses 137 samples.

The data are collected using questionnaires. They are measured with the scale which is arranged by the researchers, they are: scale A (psychological well-being), and scale B (fear of success). These scales are arranged using Likert scale which consists of some favorable statements and some unfavorable statements. The scales of favorable statements are scored as follows: SA = 4, A = 3, DS = 2, SDS = 1, and the scales of unfavorable statements are scored : SA = 1, A = 2, DS = 3, SDS = 4. The total score is calculated by the sum of the item scores. Hence, the result of scale measurements are symptoms of continuum which need to be considered in choosing the research design.
This research aims to to verify the influence of fear of success on the psychological well-being. To achiecve the objective of the research, correlational method was used through the analysis of regression which is used for some tasks: 1) To verify the correlation between independent variable and dependent variabel, 2) To verify the regression line equation, and 3) To calculate the predictive contribution of each predictor both relatively and effectively. The regression equation of two predictors is as follows:

$$Y' = \beta 1\ X1 + K$$

Y'   : Dependent Variable (Psychological Well-being)

X1   : Independent Variable (*fear of success*)

$\beta 1$: Regression coefficient

k   : Constant number

The Result and Discussion

Based on the result, the correlation value of product moment (rxy) between the variable of fear of success and psychological well-being is -0,747 with p=0,000 (p<0,00). It means that the hyphotesis in this research is accepted. The result is reinforced by regression test which finds that the value of regression coefficent is -0,296, and the significance of 0,001 (p<0,001). It means that the fear of success has negative and significant influence on the psychological well-being. If the fear of success is higher, it means the level of psychological well-being of the policewomen at Mapolda DIY will decrease. If the fear of success is lower, the level of psychological well-being of the policewomen at Mapolda DIY will increase. The effective contribution which is given by the fear of success variable to psychological well-being is 22,11%. It means that the two variables of the fear of success contribute as much as 22, 11% with psychological well-being.

The result of this study is in accordance with the research conducted by Stanculescu (2013). The research shows that the fear of success can obstruct the one's goals and acvhievement. It is proven that the fear of success has negative and significance effects to optimis, self-esteem, and self-efficacy. Hence, the fear of success can decrease the one's psychological well-being. The result of this study is also in accordance with the research conducted by Yılmaz (2018) showing that there is a significant negative correlation between the fear of success and life satisfaction. Taken that self-efficacy is influenced by fear of success and fear of success and self-efficacy has effects on life satisfaction into consideration; any kind of psychological help for reducing the fear of success will increase self-efficacy. Similarly, any effort to improve self-efficacy will reduce the fear of success. The increasing self-efficacy is perceived positively and the decrease in the fear of success will increase the individual's life satisfaction.

However, the results found by Agustin, Suryanto, & Hartini (2018) showing that the fear of success can still be reduced by taking into account of the influencing factors. By improving self-esteem, always feeling optimistic about the possibilities that occur in the future, and still trying positively, especially on the existing culture, Javanese women are able to actualize themselves, although it cannot be denied that the fear of success still appears with a minimal level.

In hierarchy theory of Maslow, it is stated that one of human needs is self actualization. According to Robbins & Judge (2013), the needs of self actualization is the encouragement to be someone in accordance with his or her expertise. It includes the the growth, potential achivment, and self fulfillment. Siswandi (2002) mentions that the needs of self actualization basically gives attention to human beings, especially to the values of dignity. It can be achieved by using all potential talents and abilities, and working as well as possible. Therefore, an ideal existence for growth and self

development can be attained. A policewoman who has good perception of career development will have chances to fulfill her needs of self actualization. She will try to actualizise her abilities by developing her career. If the perception of career development is high, the psychological well-being will increase. However, fear of success can obsctruct the psychological well-being.

In the theory of motivation by McClelland (1987), he said that a human being needs achievement which means a motivation to do better, to attain achievement, to work hard for success. A person who has high achivement needs will always have desire to get achievement and to be superior. In addition, he or she loves competition and realistic challenges. For those who have fear of success, they will not get chances to reach the need for achievement.

It also applies to the policewomen at Mapolda DIY. They will not create the need for achievement when they have fear of success. It is also the reason why they are not be able to optimize their potential. The fear of success appears because the policewomen have concerns to their carrer. If they have good carrer, they will be more responsible to their work. When they have great responsibilities, they will not be able to carry out their duties as wife and as mother in their family. Even though the aspect of self acceptance is attained, the fear of success can make her unable to develop their career. As a conclusion, the fear of success can decrease the level of psychological well-being.

Conclusion

The fear of success has negative and significant influence on the psychological well-being. It means that there is negative and significant relation between the fear of success and the psychological well-being. If the fear of success is higher, it means the level of psychological well-being will decrease. If the fear of success is lower, the level of psychological well-being will increase.

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THE MEANING OF HAPPINESS FOR WOMAN

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Abstract

Women are individuals who were created in the world to complement life both for family and society. Every woman has a different definition in defining happiness that can be shown by her behavior in everyday life. Happiness can improve an individual's mood, making it easier for individuals to carry out activities. It is a part which very important to discuss how to describe the happiness of woman. The benefit this reasearch is to know the meaning of happiness and getting know how to increase happiness for women. This research uses qualitative with constructive realism method, with 40 women for 21-28 years who were domiciled in city of Yogyakarta. The collected data using an open questionnaire, FGD with 4 subject and open interview with 2 subject . The results of this study indicate 6 categorization the meaning of happiness in women that is when individuals are healthy emotions, positive relations, thankfull,health, love and achievementThe FDG and interview result are happiness can achieve when woman feel an positive emotion and can achieve her desire.

Keyword: achievement, happiness, love, positive emotions, woman

Introduction

Happiness is the most important thing for every individual, like happiness of material and psychological. Each individual will do various ways to achieve the happiness his wants. Happiness is something that inherently impermanent or forever attached to individuals. The various lives that are lived make people far from being happy because humans just think of busy work in their daily lives. Even though it is not directly realized, when individuals do not feel happy they will have a negative impact, including stress , anxiety , always complaining that they are till being to pessimistic human and influencing health. Unhappiness will be deadly to human life so they don't have a good future. Seligman (2005) says that unhappy humans result in disturbed personality and social life. Unhappiness can lead to the destruction of conformity.

Some studies explain that the positive impact when individuals have a positif happiness is having a high social relationship, more pleasant and romantic. (Diener & Seligman, 2002). Happiness is indexs of how the individuals spend their life every time and the combination of temporary moments that can lead to the welfare and individual healthy (Wren-Lewis, 2014).

The happiness index is a general description of the conditions of life that cover the dimensions of life satisfaction, the dimensions of feeling and the dimensions of the meaning of life. In Indonesia, the happiness index of society is classified as decreasing from year to year, in 2015 Indonesia's happiness index was ranked 74, in 2016 it was

ranked 79th until 2018 the happiness index in Indonesia was ranked 96th (CNN, 29/03 / 2018). For more details the survey conducted by the Central Statistics Agency (CSA) revealed that poverty levels do not affect the happiness of an area. The Special Province of Yogyakarta is a region that has a small income in Java, but DIY is an area with the highest happiness index in Java, which 72.93%. This is due cause social relations of every people was good, feels valuable, feels valued and feels happy when helping each other. Every individual does an activity is to achieve happiness, with all the efforts and struggles that go through. In interpreting happiness every individual, both group and culture, has a different definition and happiness can change with time. Humans themselves who choose how and what happiness is needed in everyday life.

It is none other than women, women are individuals who are created as well as possible and the best pleasure in the world are women. Women have various roles in their daily lives, both physically and psychologically. Various roles performed by a woman will certainly cause a problem that causes a woman's life to become stressed and depressed. This condition will cause women to be far from happy. The results of the study explain that, women experience more mental health disorders (Donelson, 1999). Whereas King (2008), explained that women have almost twice the probability of men experiencing depression. The condition of depression and mental disorders will certainly prevent a woman from achieving happiness.

Happiness is a condition in which individuals remember more and enjoy pleasant events that happen to him than what actually happens and most individuals forget about things they want. Happiness is a concept that based on positive emotions felt by individuals and positive activities that do not have a feeling component at all. Individuals who get true happiness are individuals who have been able to identify and manage or train their basic strengths and use these basic strengths in everyday life, like in work, love, play and parenting (Seligman, 2005).

Happiness is the ultimate goal of all activities, all the efforts made by the individual with all the struggles he does in this life. Seligman said that happiness is actually a result of self-assessment of life that contains positive emotions, comfort and overwhelming joy over positive activities carried out in fulfilling any emotional component (Faith, 2016).

According to Snyder dan Lopez (2006) happiness is a positive emotional condition that defined subjectively by each individual. Becker dan Mereck (2008) explained that happiness is part of satisfaction. Seligman (2005) happiness is a psychologycal concept which refer to positive emotion that feels on individu and the all of positive activities.. Life satisfaction is a real form of happiness when individuals have achieved goals (Holl, 2011). The happiness possessed by individuals varies. This is due to the subjective assessment of each individual (Myers & Diener 1995). For women who have certain activities to achieve happiness, women are part of a community that has roles and responsibilities in forming society (Ray, 1993).

According to Emmons (2012) there are five role of gratitudes and happinesses. There is gratitude that can increase the spirituality, heatlhy, happiness, strengthen relationships between individuals and avoid to something which negative behavior.

Methods

This study uses a contructive realism approach, which taken by emphasizing the reality that exists in society, then concludes the data. This approach can produce theoretical constructs that are in accordance with the circumstances of society. Data collection in this study is to provide open questionnaires and conduct FGDs and interviews.

Participants in this study were women who lived in Yogyakarta and have 21-28 years. The selection of research subjects was done incidentally based on coincidence, whose women who accidentally or incidentally met with the researcher.

The study was conducted in a group of women consisting of 40 women by filling in open questionnaire, each woman filling in a questionnaire and writing answers in the sheet provided, and then the results of the questionnaire were strengthened by FGD to 3 women.

The number of responses obtained 200 words from the previous data, then *content validity is* performed based on analysis and coding followed by categorizing the answers based on keywords that have been filled in the research subject. After categorizing the data then present it in numerical form and describe the results of the FGD and interviews to strengthen the previous data. Focus Group Discussion was conducted with 4 women and interviews were conducted with 2 women to strengthen the categorization that had been made.

Result

The results of the study produced from open questionnaires, interviews and FGDs resulted are 6 categories of happiness. There are, positive relations, healthy emotions, thankfull, achievement, love and health.

Figure 1
Happiness category
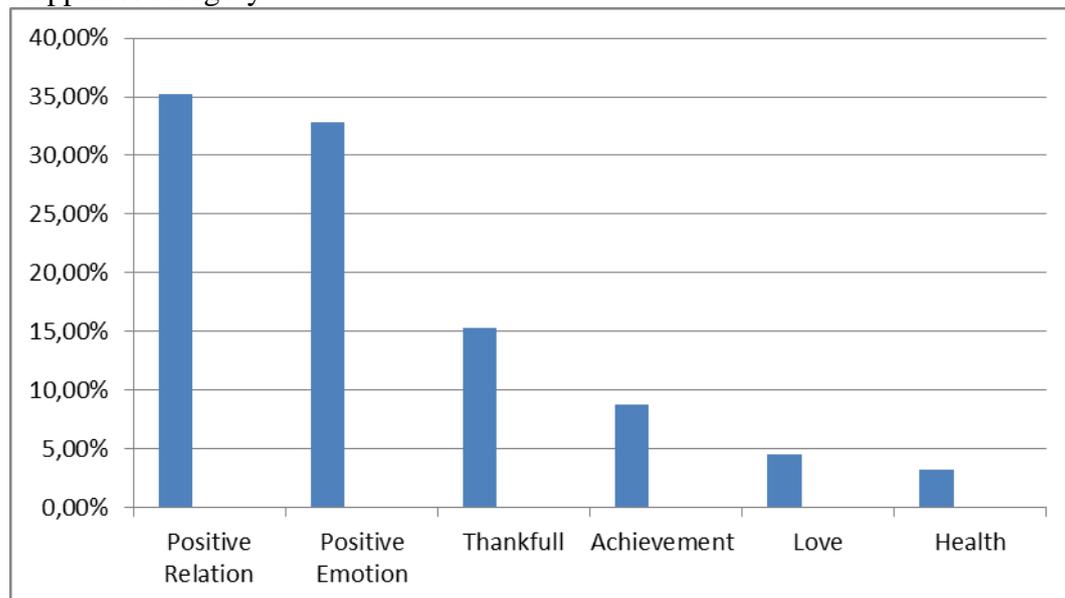
Positive relations is when women can establish good relationships with family, friends and other people surrounding them. Good relationship with family and friends women will feel comfortable when they are beside their family and feel calm when sharing with friends. Friends and family are motivators in women's lives. Healthy emotion is a part of the meaning in happiness, when woman can feel calm, comfort, refreshing and doing things she doesn't know or processes in finding out. Gratitude is when the woman accepts the life she is living with sincerity so that she will feel calm and close to Allah. Achievement for women such as they can achieve success, do all the things they like and responsible for what they have done and made herself calm in carrying out life is happiness for women. Love is when a woman is loved and loved both a job and someone is part of happiness. Health is when healthy women will be able to carry out all expected activities easily and smoothly.

The results of the FGDs and Interviews showed that the source of happiness was health and gratitude, because when we are healthy, the body and soul all activities can go well. When we are grateful we thankfull to Allah for the blessings that have been given and the relationship between positive and others when the kit can enjoy having a good relationship with others. The first happiness is family, which is indicated by the phrase " meaning happiness for me that first, health, second thankfull   and third have a good relationship with anyone and enjoy for every life "I.1-10.

Happiness is when it reaches the desire shown by the phrase "if you've reached the happiness was roughly going again or not. I'm the type of person who is easy or fast satisfied " IV.20-30. The happiness is easily obtained when individuals can realize that happiness comes for example when the family asks for news and daily activities. The family is one of the very influential factor in achieving happiness, "Bahagia it according to my family is very satisfied if I feel happy with family problems" N.20-30

Beside that things, family is motivator in achieving family happiness like a participant says that "family, especially parents, the biggest motivator in my life is my sister " LR.20-30

Discussion

The results of this studies showed some description of women's happiness. There are positive relations. Positive relationships are when women can establish good relations with friends and family. Based on the picture above shows that positive relations have the highest percentage of 35.18%, meaning that the happiness of most women is when women can establish positive relationships, contribute to others well. The FGD results and interviews showed that the biggest relationship in interpreting happiness was a relationship with family. Families give the role and influence of happiness to women in achieving the desired happiness, because when families give attention to individuals they will feel happy. Uchida et al (2004) who say that happiness originates and grows out of mutual support and sympathy.In this study sympathy that benefits is when women are given attention and the family becomes a motivator to achieve happiness.

According to Seligman (2005), gender relationships are inconsistent with happiness. Women have a more extreme emotional life than men. Similarly, the results of the research obtained that in women the meaning of happiness is when feeling emotionally healthy, that is when a woman can feel calm, comfort in the life she

lives. The percentage of healthy emotions is 32.87% which shows that the meaning of happiness is when women feel emotionally healthy. This is in line with Seligman (2005) who said that women have more positive emotions than men.

Grateful is when getting the desired thing makes every woman being happy, the results of this study shown that being grateful is one way to interpret happiness. Gratitude has a fairly good contribution in describing the meaning of happiness, in the picture above it is grateful to have a percentage of 15.28%. Andayanti and Karyanta says that who argued that grateful individuals would find happiness easier. Gratitude is a fun thing when connected with satisfaction, pride and hope (Emmons and McCullough, 2003).

For women, the meaning of happiness also be in the form of an achievement, when a woman has achieved the desired thing they will feel happy. In the process of getting happiness, a woman is willing to do anything to achieve happiness both in the form of preferred activities and need to be fulfilled in everyday life. This research showed that the achievement of have percentage of 8.80%, like on FGD and interview that have been conducted, showed that would feel happy when his desire has been reached. When the participants has achieved happiness, the subject wants to achieve the next happiness in the form of achievement. Related to this, it is the same as flow theory (Arif, 2016) states that when someone has achieved the desired happiness, it will surely achieve the next happiness, because humans do not have satisfaction when achieving happiness. In this case it can be interpreted that women can feel happiness when they have achieved the desired thing and the happiness in the form of achievement will continue to be sought because happiness and achievement are contiue.

Most women think that the source of happiness is when they are married, have children and live with loved ones. The next meaning of happiness in women is love, love is a feeling that arises in a woman, love can be interpreted to like or liked by someone and like the work he does. This is in line with the research conducted by Crossley and Langdridge (2005) which states that the source of happiness in women includes love, that is when a woman is loved by someone she loves. But in this study, the meaning of love has a low percentage p of 4.63%, because love is abstract. Stenberg (2005) says that in the psychology, love is something abstract to learn, love is a story that reflects the feelings of two people who have mutual care and love.

In this study was found that happiness category is health. By having mental and physical health women can do all the desired activities well and smoothly. In the picture above, health contributed 3.24%. Carr (2004) says that happiness has a positive impact on various aspects of human life, one of which is to provide an opportunity to have a long life.

This study have limitations, firtsthe highest source of happiness in women is healthy emotion, healthy emotions become a thing that needs to be done in order to increase happiness in women. This healthy emotion can be sought in the form of maximizing the quality and self-actualization that is in itself. Second, The next component that supports this research is love, the characteristics of the subjects in this study are not all married women who have a low proportion of love components. So for further research recommended to examine happiness in married women, so that the component of love in the sense of happiness has a fairly strong relationship. Third, For the further researches that are expected to choose subjects on characteristics that are in

line with the needs of the study, so that they will produce more unique and unique results according to the characteristics of the subject, for example married women.

This research is expected to provide knowledge to every women to achieve their happineess. Each women who feel unhappy can increase the happiness when their have a positive relation, positive emotion, thankfull, achievement, love and health.

Conclusion

This study produced six categorizations the meaning of happiness in women. Women can feel happy when having positive relationships with others. The biggest categories of happiness are positive relation, having relationship with the family, because the family is factor that affects for women in achieving happiness and the family becomes a motivator for a woman to achieve happiness. In addition to having a positive relationship with others, women describe happiness when healthy emotions, healthy emotions are when women feel calm and comfort in life that is lived. Women has an emotionall healthy when they can be happy or refreshing his life . Gratitude is a form of happiness, happy for everything has Allah given.

Every individual has a target in his life, happiness will be felt when the target has been achieved well and surely happiness in the form of achievement will continue to be sought by every woman when they have achieved the desired of happiness. The meaning of happiness in the next woman is love, because when a woman is in love or being loved by some one, it makes a woman happy. The meaning of further happiness in women is health. Health can be interpreted as being mental and physical healthy, so it can do all the desired activities smoothly and well.

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A MENTAL HEALTH DESCRIPTION OF STUDENTS AT JAKARTA STATE UNIVERSITY

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Abstract

This study aims to look at the mental health problems of students at Jakarta State University. This research uses survey research methods. The sample in this study used incidental sampling techniques included in the nonprobability sampling category. The sample of this research was 60 students of Jakarta State University (UNJ). The data collection in this study used a questionnaire or questionnaire in the form of non-tests. The scale used the Likert scale. Based on the quantitative data from the assessment results, it can be concluded in general that the description of mental health problems has a healthy classification with 33 respondents out of a total of 60 respondents. It means that the majority of respondents have sufficient mental health even though almost 50% and also experience mental unwell. The highest mental health dimension possessed by Jakarta State University students (UNJ) is mental efficiency in which UNJ students are able to control the ability of mental processes effectively (observation, learning, thinking, and will). The implication of this study is that people who have high mental health and community attitudes has positive influence to search for help of professional treatment.

Keywords: mental health, students, survey research

Introduction

Mental health is very important for human being as similar as physical health in general. People who is mentally healthy, the other aspects of life will work more optimally. The condition of mental health cannot be separated from the condition of the good physical health. Various studies showed that there is a relation between one's physical and mental health, in which individuals who suffer from physical pain indicate phychological problems to mental disorder. Conversely, individuals with mental disorders also show the existance of physical function disorder. Healthy and sick are biopsychosocial condition which merges in human life. The introduction of the health and pain concepts, both physically and psychologically, is the part of the introduction of humans to their conditions and how they adapt to the surrounding environment.

Mental health is how people see themselves, their lives, and other people in their lives; evaluate their challenges and problems; and simultaneously explore their choices consciously. This includes handling stress, connecting with others, and making decisions (Hadjam, 2011).

Good mental health for individuals is a condition where individuals are free from all kinds of mental disorders, and condition where individuals can function normally in adjusting their selve to deal with problems that might been countered through out their life. According to to the World Health Organization (WHO), mental health is part of the well-being of individuals, which is related to the abilities to handle life stress to productively work and support in their communities. According to Putri, et al. (2015) nowadays,more than 450 million of the world's population live with mental disorders. The prevalence of mental disorders in the world population according in 2000 received data on mental disorders by 12%, in WHO 2001, it increased to 13%. In 2002 the survey showed 154 million people globally experienced depression and 25 million people suffered from schizophrenia, 15 million people were under the influence of illicit substance abuse, 50 million people managed to overcome epilepsy and about 877,000 people diedfrom suicide each year.

Predicted in 2015 to be 15%, and in developing countries the prevalence is higher. Judging from the number of people with mental disorders that each year increases, the handling or treatment offered is also increasingly diverse, but unfortunately it does not working in Indonesia where mental health sufferers are still considered something strange and sufferers must be excluded. Various stigma is given to people with mental health disorders so that families of sufferers prefer to cover the condition of their family members.

The community is given various options for treatment of patients with mental health disorders but they prefers to seek treatment from a medicaster or quack because they still assume that mental illness is due to a disturbance of spirits. Therefore, the public should be educated about mental health, and how to handle it, so that sufferers can be minimized and the community will eliminate views which are not appropriate for sufferers of mental health disorders.

The results of Syriah's study in 2012 stated that many things interfere with one's mental health, one of which is alcoholic beverages. In the society in big cities, alcoholic beverages are commonly consumed, such as in parties, celebrations, entertainment venues or simply showing loyalty and identity in a particular group. Alcohol dependence greatly affects one's mental health.

According to the results of a research conducted by the National College Health Assessment in 2014, as many as 33 percents of students experienced depression for about the past year. As a result of this depression, they have difficulty to focus on learning and doing assignments because they are too worried about the small things that happen in their lives. Another research in 2015 also concluded similar results that 20 percents of today's students seeked mental care and consultation regarding the pressure they experienced in academic study. In fact, 9 percent of them claimed that they had seriously committed suicide because they could not bear the burden they experienced.

Mental health problems are related to attitudes and/or skills because a person is mentally healthy or not. It can be seen from the attitudes and skills performed. This often happens in Indonesia. So, researchers want to conduct surveys that will later be given a score and identified how far and what problems that students experience. Then, it will later be used as a reference in making intervention programs for students.

The purpose of this study was to obtain data on the mental health picture of students at Jakarta State University to describe some aspects of mental health that UNJ students have to make a prediction of what interventions will be applied. The researcher

suggests counselors or therapists to be able to follow up on students who are diagnosed with mental health problems so that the disorders they experience do not getting worse.

Method

This study was conducted with the goals to obtain empirical information and data regarding mental health descriptions owned by the students of Jakarta State University (UNJ). The research method used in the mental health research of UNJ students was the survey research method. Survey methods are usually used to identify facts, opinions, attitudes, and behaviors, as well as relationships between aspects (Heppner, 2008). In this study, a description of the mental health of students at Jakarta State University (UNJ) be identified.

The sampling technique was the method taken in order to get a representative sample. The sample in this study used incidental sampling techniques included in the nonprobability sampling category. Incidental sampling technique is a technique for determining samples based on chance, that is, anyone who accidentally met with a researcher could be used as a sample, if the person who was accidentally metwas viewed suitable as a data source (Sugiyono, 2010). The sample used in the study of mental health problem description on the students of Jakarta State University (UNJ) was 60 students. The tool of data collection used in this study was a questionnaire in the form of non-tests. The scale used was the Likert scale. Likert scale is used to measure attitudes, opinions, and perceptions of a person or group of people about social phenomena (Sugiyono, 2010).

The scoring system was determined by the following criteria:

Table 1
Scoring Rubric

The choices of the Answer	Scores	
	Item +	**Item -**
Very appropriate	4	1
Appropriate	3	2
Inappropriate	2	3
More inappropriate	1	4

The items of the statement that had been made, then the researcher loaded into Google Form distributed to 60 students of Jakarta State University. (https://docs.google.com/forms/d/1IQ91nSaVNwDAL_kg_hSXhA0-sMgdXFI1Qky7F86gG Y/edit).

The instrument made based on aspects of Schneiders. Mental health is the condition of individuals that can accept themselves as they are, think and act in accordance with reality, and are able to overcome conflicts, frustrations and environmental demands. Specific health criteria were changed into some indicators in this study. The criteria for mental health are as follows:
1. Mental efficiency is the control of the mental processability effectively
2. Integration of mind and behavior.
3. Integration of motives and conflict solving is the alignment of encouragement which comes from in individuals and the distribution in accordance with self-worth.

4. Healthy emotional life is the ability of individuals to display emotional responses and adequate emotional depth.
5. Peace of mind is the harmony which arises from the mental health criteria possessed by individuals
6. A healthy attitude is the ability of individuals to react or respond to friends, works, religion, and other things that individuals perform well.
7. Self-concept is the ability of individuals to think positively about themselves.
8. The adequate identity of the ego is to what extent the individual understands who he is clearly and separated from others without secluding or isolating himself from others.
9. An adequate relationship with reality is the degree to which an individual's ability to act according to reality.

Result

Based on the result of the research analysis of the mental health of the students at Jakarta State University, it was found 55% were included into the category of mental health and 45% were included into the category of mental unwell. A description of overal mental health based on per-dimensional data as follows:

Table 2
The Results of Per-dimensional Data

No	Dimension	Percentage
1.	Mental Efficiency	83%
2.	Integration of Mind and Behavior	61,25%
3.	Integration of Motives and Conflict Resolution	81,98%
4.	Healthy Emotional Life	75,94%
5.	Peace of Mind	76,56%
6.	Healthy Attitude	72,29%
7.	Self Concept	75,83%
8.	Adequate Ego Identity	69,17%
9.	Adequate Relationship with Reality	74%
	Average Percentage	74,46%

Graphic 1
Per-Indicator Percentage
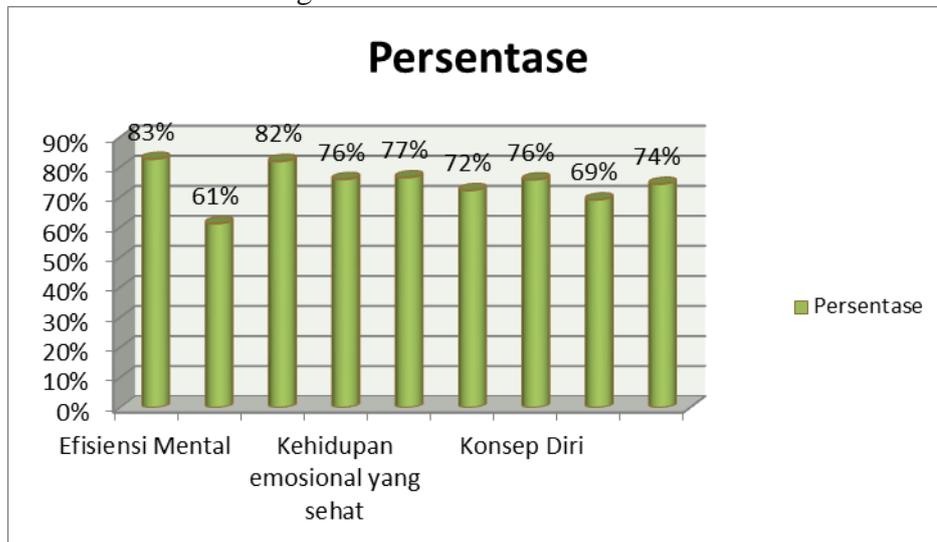
Based on the data per indicator, it was found that the highest value was in the indicator of mental efficiency, which meant that respondents had effective control of the ability of mental processes (observation, learning, thinking, and willingness). The indicator with the lowest achievement was the integration of mind and behavior which meant that the respondents did not have harmony between the behavior displayed by the individuals againts what their thought. Without harmony control, excessive fantasy (phobias, delusions, symptoms) begins to develop.

Discussion

Mental Health Sciences

Alexander Schneiders said that: "Mental health is the science that develops and implements a set of practical principles and aims to achieve and maintain the psychological well-being of the human organism and prevent mental disorders and inability to adapt" (Yustinus, 2006).

In Indonesia, Health Law No. 23/1992 states that health is a healthy condition physically, mentally, and socially, which allows every human being to live productively both socially and economically. The World Health Organization (WHO, 2001) states that mental health is a condition of well-being realized by individuals, in which there are abilities to manage natural life stress, to work productively and produce, and to participate in their communities.

The Importance of Mental Health for Individuals

Mental health is very valuable in helping someone to understand himself well. If someone understands himself better and also realizes he is valuable, then he will readily prepare himself to explore the feelings, emotions, and motivations which are owned by others. The study of mental health can provide many preventive ways and also methods of treatment which will help reduce many complex and severe social problems caused by delinquency/crime, alcoholism, and other adaptability, both mild and severe.

A normal/mentally healthy person is a person who displays adequate & acceptable behavior in society in general, his attitude of life according to the norms & patterns of community groups, so that there is a satisfying interpersonal & intersocial relationship (Kartono, 1989). Whereas according to Karl Menninger, individuals who are mentally healthy are those who have the ability to hold back, show intelligence, behave by tolerating other people's feelings, and have a happy life attitude. At present, mentally healthy individuals can be defined on two sides, negatively with the absence of mental disorders and positively when the presence of mental health characteristics is present. The characteristics of mental health individuals refer to positive conditions or traits, such as positive psychological well-being, strong character and virtues (Lowenthal, 2006).

Mental Health Dimension

Mental health is the condition of individuals that can accept themselves as they are, think and act in accordance with reality, and are able to overcome conflicts, frustrations and environmental demands. Specific health criteria revealed by Schneiders in cited by Semiun (2006) were changed into some indicators in this study. The criteria for mental health are as follows:

1. Mental efficiency is the control of the mental processability effectively (observation, learning, thinking, and willingness).
2. Integration of mind and behavior. The harmony between behavior displayed by individuals by what they think. Without the control of the harmony, fantasizing excessivelysuch as (phobias, delusions, symptoms) begins to develop.
3. Integration of motives and conflict solving is the alignment of encouragement which comes from in individuals and the distribution in accordance with self-worth. A healthy person can control conflicts and frustration.
4. Healthy emotional life is the ability of individuals to display emotional responses and adequate emotional depth. The feeling of insecurity, inferiority, hostility, hatred, jealousy and envy, are the signs of emotional disturbance. While the feeling of love, acceptance, belonging, and safety, are the signs of having emotional and mental health.
5. Peace of mind is the harmony which arises from the mental health criteria possessed by individuals: the adequate contact with reality, the harmony of emotions, the feelings of security and belonging, and the controlled thoughts and imagination.
6. A healthy attitude is the ability of individuals to react or respond to friends, works, religion, and other things that individuals perform well. Mental health will not be formed if individuals have hatred, negative prejudice, pessimism and cynicism, or desperation.
7. Self-concept is the ability of individuals to think positively about themselves. The feelings of helplessness, inferiority, insecurity, or worthlessness will reduce positive self-concepts.
8. The adequate identity of the ego is to what extent the individual understands who he is clearly and separated from others without secluding or isolating himself from others.
9. An adequate relationship with reality is the degree to which an individual's ability to act according to reality. Characteristics of individuals who have an adequate relationship with reality can receive the fact when they accept failure. To what extent a person accepts the reality, rejects it or runs away from it.

The Definition of Students

The definition of students according to KBBI is individuals who study in college. Montgomery (Papalia, 2007) reveals that universities can be place for an individual to develop intellectual abilities, personality, especially in practicing verbal and quantitative skills, thinking about creativity and moral reasoning.

Djojodibroto (2004) finds that students are a group of people who have two traits, namely young humans and intellectual candidates who must be able to think critically about social reality, whereas as young humans, students often do not measure the risks that will befall them. The students in their growth period are in the category of emerging adult hood or in the age range of 18-21 years (Monks, 2001).

At theageof 18-21 years, Papalia (2007) states that at this age there is a shift in development from adolescence to young adulthood. At the age of the emerging adolescents who switched to this early adult, the individual development is characterized by the search for self-identity, the existance of the environment influences, and the awareness of starting to make decisions about his career (Papalia, 2007).

The Characteristics of Students

The characteristic of students in general, that is the stability in personality that begins to increase, because of the reduced turmoil that exists in the feeling. They tend to solidify and think carefully about something they have achieved, so they have a realistic view of themselves and their environment. (Ganda, 2004).

The most prominent characteristic of students is that they are independent, and have an estimate of the future, both in terms of careers and love relationships. Students will deepen their expertise in their respective fields to prepare themselves to face the world of work that requires strong mentality (Ganda, 2004).

The Assignments as Students

Studying in college has a lot of difference with studying in high school. It can be seen from the whole system. There are many differences between colleges and schools and the campus environment is no longer like school. In academic activities, the treatment received by students who are studying in colleges is different from what is received by students studying in high schools. The way the lecturer gives lectures to college students is generally not the same as the way the teacher explains the lesson for high-school students. This striking difference brings difficulties to some college students in the transition from habits in the high schools to the guidance in higher education.

Ginting (2005) suggests that the various things faced by college students at the beginning of the lecture period are the different experiences with the experiences in high schools. So, that is why is needed a initial preparation in the first day on campus, so that in each college implements a study orientation program. The status transformation from high-school students to college students requires a change in mental attitude andsomeone's behavior. One thing that is absolutely enhanced is independence. Independent people do not depend on other parties for hope, whether they are lecturers or classmates. He believes that the fate of his studies is more than he himself determines, although it is possible to ask for help from others (Ginting, 2005).

Scientific justifications, by following the nature of the knowledge, the college students are expected to be able to understand the various problems that occur and they moreover can find the right solutions to solve them. Academic people must always develop themselves so that they can be a responsive generation and able to face future challenges. In terms of academic people who always follow the nature of science, this also relates to the role of college students as the guardians of values, where the college students must look for truth values themselve, then transfering them on to society, and the most important thing is to maintain the truth value (Drajat, 2007).

The college Students as intellectual communities and at the same time as citizens naturally have duties and responsibilities which are not light. Because, ideally students are required not only to be smart in learning, but also must be critical of the existing social reality. This fact makes students get assumed to be the agent of change (Drajat, 2007). Because, all forms of reality that exist today must regeneratively be passed on to the college students who have the duties and responsibilities as the initiators of ideas for the advancement of social life and nationhood. The history also notes that the role of college students is also very large in the process of reforming national life. This is something that is very contradictory to the main task of the college students as a campus community, whose duty is to learn to become prospective scientists. However, they spend more of their time just to do things that are not relevant to the science taught in Higher Education. It seems that we must reaffirm the primary task of the college students by borrowing Arief Budiman's term that is "college students are those who study at the school level of universities to prepare themselves for a bachelor level expertise. That is the first and foremost task for students (Drajat, 2007).

The implication of this research is to make students aware of the importance of mental health for themselves. Many of us do not understand the importance of mental health and also do not know the symptoms of mental health disorders. If individuals have understood and are aware of the importance of mental health, they are expected to be able to prevent and manage their mental health properly. Then, people who have high mental health and a positive community attitude influence the search for help to professional treatment. The limitation of this research is to focus on the characteristics of mental health problems only for students at Jakarta State University.

This research has theoretical and practical implications, the theoretical implications of this study can add empirical evidence about mental health theory and the practical implications for UNJ students to know the extent to which mental health images exist in them. This study still has limitations, namely (1) this study only uses survey methods through distributing questionnaires without conducting interviews directly, so the results of the study only reveal the instrument data only. (2) this study only conducts overall discussion not grouping by faculty or study program.

Strategy for Overcoming Mental Health Problems

At present, there has been a paradigm shift in the mental health movement that emphasizes the prevention aspects of mental disorders and how the community plays a role in helping to optimize the mental functions of individuals (Dewi, 2012). The Mental Health Action Plan 2013-2020 reveals that mental health, like other health aspects, can be influenced by various socioeconomic factors that need to be addressed

through comprehensive strategies for promotion, prevention, treatment and recovery in the overall approach of the government.

According to Santrock (in Wardhani, 2016), physical conditions can cause mental problems and vice versa mental problems/difficulties can worsen physical symptoms. Overall, the goals of this mental health action plan are to promote mental health, prevent mental disorders, provide services, improve recovery, promote human rights and reduce mortality, morbidity and disability in people with mental disorders. The action plan specifically has the following objectives:

1. Objective 1: to strengthen leadership and effective governance for mental health;
2. Objective 2: to provide comprehensive, integrated and responsive mental and social health services in community-based settings;
3. Objective 3: to implement strategies for promotion and prevention in mental health;
4. Objective 4: to strengthen information systems, evidence and research for mental health.

In addition, there is a need for mental health regulations that can increase access through funding mental health services equivalent to physical health services, or by stipulating that services need to be provided through primary health care centers (puskesmas) and in public hospitals (WHO, 2009).

Conclusions

Based on the results of the research description of mental health problems of the students at Jakarta State University which had been described, it could be concluded that:

1. The description of mental health problems had a healthy classification with 33 respondents out of a total of 60 respondents, it means that the majority of respondents had mental health which was sufficiently fulfilled even though almost 50% also experienced mental unwell.
2. The highest mental health dimension possessed by the students at Jakarta State University was mental efficiency in which the students of UNJ were able to effectively control the ability of mental processes (observation, learning, thinking, and will).

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LEVEL OF INTERNET ADDICTION FOR STUDENTS

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Abstract

This research was descriptive study. It aims to determine the prevalence of internet addiction for students. The subjects of this study were 271 students of in UIN Antasari. The population of this study were male and female using random method. They were from Ushuluddin and Humanities Faculty, Islamic Economics and Business Faculty, Tarbiyah Faculty, and the Da'wah and Communication Sciences Faculty. The reseacher used Internet Addiction Test (IAT) for mesuring the instrument. The results of this study were presented as follows, UIN Antasari students had known the internet since junior high school. The most dominant internet is used more than 5 hours/day (52.03%). The biggest majority is used internet to looking for entertainment (87.22%). The type of the social media is was whatsApp (89.68%). While the type of online media is Youtube (72.33%). Based on the results of measurements using the Internet Addiction Test (IAT) from Young. Those were presented as follows, level of internet addiction for students include in Normal category (33.9 %), Low Category (52.4 %), Medium Category (13.7 %). Whereas, there was no level Internet addiction in the Heavy category. This study provides an initial description of internet addiction to for students at UIN Antasari Banjarmasin. Although, Heavy category not found but needs to be aware for negative things which is might raise from using internet, especially for the maniac.

Keywords: internet addiction, prevalence, students

Introduction

At present, internet as one of the media that is very helpful for human life. By using the internet, humans can find all the informations and entertainments feel free. Formerly the internet was seen as a luxury item and can only not only be used by certain people but also now the internet can be owned by everyone regardless of groups, statuses, and ages. The internet has been one on human daily activities such as, household activities, the business world, even in the world of education is not spared from the internet. Spread the internet in all aspects of life because the internet is very easy to use and very practical and multifunctional.

According to the e-Marketer market research institute, the population of internet users in Indonesia reached 83.7 million in 2014. In 2017, e-Marketer estimated internet users to reach 112 million and put Indonesia in the sixth position in internet users. Whereas in 2018, there are an estimated 123 million people in Indonesia. This achievement places Indonesia in fifth place for internet use after China, the United States, India and Brazil (KOMINFO n.d.). Referring to the data above, it can be concluded that the population of Indonesia is the largest internet user in the world and

the use of the internet has become a necessity for every Indonesian citizen who comes from all walks of life.

Whereas according to a the survey conducted by APJII (Association of Indonesian Internet Service Providers) in 2014, the majority of internet users in Indonesia were aged 18-25 years, that is equal to 49% (Association of Indonesian Internet Service Providers 2014: 13). Whereas in 2017, it was found that internet users in Indonesia were dominated by young age groups between the ages of 13-18 years at 16.68%, ages 19-34 years at 49.52%. (Association of Indonesian Internet Service Providers 2017)

Looking at data on internet users based on the age category shows that one of the biggest internet users is in the category of adolescents and early adults, namely students. Students themselves are students who study in academies or colleges. The internet has a positive and negative impact. The negative impact that can be caused by the internet is internet addiction (Raihana 2010). The need for the availability of information and entertainment as well as the ease of accessing the internet made students have a considerable risk of experiencing internet addiction. Student needs for information and entertainment along with the ease of accessing the internet caused the intensity of internet used become longer than planned. So that the longer and excessive used become a pathological and addictive behavior.

Suler (1996) states that internet users can be classified into two groups. First, internet users who use the internet in a healthy manner, meaning that this group is able to integrate real life with the world of cyberspace. These individuals discuss online activities with family and friends, use their true identities, interests, and expertise in online communities, call and meet directly with known people through online activities, or meet friends who are known in cyberspace through the internet. Second, internet users who use internet unhealthily. In this section, individuals separate between real life and the world of cyberspace. The activities of cyberspace become a world of its own, not discussed with people in their lives. Internet users included in the second group will become addicted to the internet. (Hidayat and Retnowati 2004)

Addiction is defined as a habit that must be carried out in certain activities or the use of a substance, regardless of the consequences that damage physical, social, spiritual, mental and financial well-being (Young and de Abreu 2017: 8). According to Young (2009) the increasing number of internet users, the easier the internet access, and the more intense individuals using the internet can make individuals experience internet addiction. Internet-addicted individuals lose control of their lives because they spend too much time online. (Suprapto 2015) Individuals generally use the internet between 40-80 hours per week, with sessions that can reach 20 hours. Individuals can use the internet from late at night until the morning without stopping so they feel exhausted and can interfere with study or work (Suprapto 2015).

Someone called addiction on the internet, must show certain behaviors. According to Young (1996 and 1999), the criteria for addiction to the internet are (Soetjipto 2005):
a. Feel the fun with the internet
b. Need additional time to achieve satisfaction when using the internet
c. Unable to control, reduce or stop using internet
d. Feeling restless, depressed, depressed, or irritable when trying to reduce or stop using the internet
e. Access the internet longer than expected

f. Losing the closest people, jobs, educational opportunities, or careers because of internet usage.
g. Deceive family, therapist, or people closest to hiding further involvement with the internet
h. Using the internet as a solution to overcome problems or eliminate feelings of helplessness, guilt, anxiety or depression.

Whereas according to Beard and Wolf, there are at least six criteria that must be fulfilled to be able to be declared individuals affected by internet addiction, namely (Beard and Wolf 2001):
a. The preoccupied mind of the internet
b. The duration of internet usage is increasingly increasing for the sake of fulfilling self-satisfaction
c. Never tried but failed to control, reduce, or stop using the internet
d. Not calm, moody, depressive, and easily irritated
e. Online activities that exceed the planned time
f. Having a problem or having the risk of losing personal relationships, losing a job, losing educational opportunities, and losing a career.

There are number of studies conducted related to internet addiction such as the relationship between internet addiction and depression in students (Dewiratri & Karini, 2014), video game addiction with student stress (Indahtiningrum, 2013), with disturbances in sleep patterns (Diarti & Sutriningsih, 2017), insomnia (Dewi, 2011), loneliness and learning achievement in internet addicts (Mukodim, 2004), internet addiction rates in early adolescents (Sari, Ilyas, & Ifdil, 2017), the impact of internet addiction on teenagers (Hakim & Raj, 2017), type personality of internet addicts (Anggraeni, Husain, & Arifin, 2016), reliability of cybersex actors (Agustina & Hafiza, 2013), testing construct validity of internet addiction criteria (Soetjipto, 2005).

Looking at these thoughts, the researchers are interested in conducting research to see how far the level of internet addiction is for students by looking at various variables.

Method

This study uses a descriptive survey approach where the researcher is collecting as much datas as possible about the factors that are the supporters of the variable that have been determined. The variables in this study were internet addiction and the other variables were students.

The population in this study were male and female UIN Antasari Banjarmasin students. The number of active UIN Antasari students from all classes is 11,000. so based on Isaac and Michael's Table with an error rate of 10% (Arikunto 2002), the number of samples in this study were 270 people spread in 5 faculties at UIN Antasari (Ushuluddin and Humanities Faculties, Faculty of Islamic Economics and Business, Da'wah and Communication Sciences, Faculty of Tarbiyah and Teacher Training, and Faculty of Sharia).

Sampling in this study use incidental sampling techniques because the samples around the researcher can be obtained easily and the samples taken by the data still meet the research criteria.

In order to obtain the desired data, the instrument use the Internet Addiction Test (IAT) which consists of self-identity and 20 questions about internet addiction. IAT refers to the aspect proposed by Young (1998) which includes aspects of focused attention on the internet, longer internet time, control people, anxiety while offline, increasing internet satisfaction, the internet as an escape, compulsiveness, withdrawal, social risks and often lying (Noviana, Khrismasagung, and Trikusumaadi 2016). IAT is the first validated and reliable instrument to find out that internet addiction are mild, moderate and severe. (Laura and Mary 2004)

The IAT consists of 20 questionnaire items based on a 5-point Likert scale. Subjects only need to answer questions using a scale (Young and de Abreu 2017: 35):

0: Never
1: Rarely
2: Sometimes
3: Often
4: Very often
5: Always

After all, questions are answered, then add up the numbers of each question response to get the final score. The higher the range of the score, the higher the level of addiction. The following is an addiction category based on the final score obtained (Young and de Abreu 2017: 37):

Normal Category: 0 - 30 points
Lightweight Category: 31 - 49 points
Medium category: 50 - 79 points
Category Weight: 80 - 100 points

Then the data that has been collected then the results are presented in the form of quantitative data (percentage) and discussed using the Developmental Psychology approach.

Result

Presentation of Subject Data
Following the distribution of research subjects based on age and sex:

Table 1
Distribution of Research Subjects

Age Category	Gender		
	Male	Female	Total
16 years old	1	0	1
17 years old	7	9	16
18 years old	28	46	74
19 years old	27	51	78
20 years old	20	53	73
21 years old	10	12	22

22 years old	5	1	6
23 years old	1	0	1
Total	99	172	271

From table 1, the age of the subjects in this study were in the range of 18-21 years. Women dominate the subjects in this study that is 63.5%, while men are 36.5%.

Percentage of Student Internet Addiction Level
Following the percentage of internet addiction rates:

Table 2
Level of Internet Addiction to Students

Internet Addiction Level Category	Total	Prosentase (%)
Normal	92	33,9
Light	142	52,4
Is being	37	13,7
Weight	0	0

Based on table 2. As many as 52.4% in the Light category, amounting to 33, 9% in the Normal category and 13.7% in the Medium category. In this study there were no subjects in the heavy category.

Percentage of Internet Addiction Level by Age Category
Following the percentage of internet addiction rates by age category:

Table 3
Level of Internet Addiction by Age Category

Age Category	Internet Addiction Category				Total
	Normal	Light	Is being	Weight	
16 age	0	1	0	0	1
17 age	8	6	2	0	16
18 age	23	44	7	0	74
19 age	27	41	10	0	78
20 age	20	39	14	0	73
21 age	9	9	4	0	22
22 age	4	2	0	0	6
23 age	1	0	0	0	1
Total	92	142	37	0	271

Based on table 3, generally the Light category is at the age of 18-20 years. While the category is at the age of 19-20 years.

Percentage of Internet Addiction Level Based on Gender Category
Following the process of internet addictions based on gender categories:

Table 4
Internet Addiction Levels Based on Gender Categories

Sex Category	Internet Addiction Category				Total
	Normal	Light	Is being	Weight	
Female	34	52	13	0	99
Male	58	90	24	0	127

| Total | 92 | 142 | 37 | 0 | 271 |

Based on sex, men have a large tendency to experience addiction than women. The mild category for men is greater than for women and also the moderate category is greater for men than for women.

First Time Use of the Internet
Following the categories when you first know and access the internet:

Table 5
First Time Internet Usage

Time Category	Total	Prosentase (%)
SMP/MTs	245	90,41
SMA/SMK/MA	23	8,49
Lecture	3	1,11
Total	271	100

As much as 90.41% of respondents said that they first used the internet when they were in junior high school / MTs.

Use of Time to Access the Internet
Following the time used by each subject in accessing the internet:

Table 6
Use of Time to Access the Internet

Time Category	Total	Prosentase (%)
Less than 1 hour	8	2,95
2-3 hour/day	55	20,30
4-5 hour/day	67	24,72
More than 5 hours/day	141	52,03
Total	271	100

As many as 52.03% of respondents use 5 hours a day to use the internet, then 24.72% of subjects use the internet for 4-5 hours per day, 20.30% of subjects use the internet for 2-3 hours per day, and only 2.95 % whose use the internet for less than 1 hour.

Purpose of Using the Internet
Following the objectives of internet use by research subjects:

Table 7
Purpose of Accessing the Internet

Destination Category	Total	Prosentase (%)
Searching for information	212	78,22
Get entertainment	71	26,20
Spend time	73	26,94
Others	42	15,50

78.22% of subjects used the internet for information purposes and 26% each used the internet to seek entertainment and spend time.

The Most Used Social Media
Following the social media that are often used by research subjects:

Table 8
Social Media That are Often Used by Students

Social Media Category	Total	Prosentase (%)
Facebook	35	12,92
Twitter	4	1,48
Instagram	123	45,39
Whatapps	243	89,68
Others	24	8,86

The most frequently used social media is Whatapps (89.68%), followed by Instagram (45.39%, Facebook (12.92%) and Twitter (1.48%).

Online media is often used
Following the online media that are often used by research subjects:

Table 9
Frequently Used Online Media

Social Media Category	Total	Prosentase (%)
Game Online	39	14,39
Youtube	196	72,33
Website	127	46,86
Others	26	9,59

Online media that are often used by the subjects of this study are Youtube (72.33%), Website (46.86%), and Online Games (14.39%).

Discussion

At the development stage, adolescents are at the stage of the identity crisis, tend to have high curiosity, always want to try new things, easily influenced by their peers (Sarwono, 2004, in Sari, Ilyas, and Ifdil 2017). Individuals who have high curiosity generally have high self-confidence and are free to express their thoughts, feelings, and creativity. While individuals who have low curiosity show characteristics of lack of confidence, feel insecure, cannot express thoughts and feelings freely (Ifdil, 2010, in (Sari dkk., 2017). But not a few adolescents are negatively affected by the use of the internet, one of the effects of adolescents being highly dependent on accessing the internet to achieve satisfaction by spending long periods of time, so that teens get addicted (Fauziawati, 2015, in Sari etc., 2017).

Regardless of culture, race, or gender, internet addiction seems to be an increasingly big problem. College counselors say that students are the population most at risk of experiencing internet addiction, because they are encouraged to use computers or laptops, live in dormitories that have internet facilities, mobile internet devices, and are more encouraged to use them to contribute to internet addiction student.(Young & de Abreu, 2017 page. 51). This is in accordance with the results of research that in the

percentage of UIN Antasari students have more results in the mild category of internet addiction.

Because away from home and the supervision of their parents, students use their new freedom and take advantage of that freedom by spending time in chat rooms or sending messages to Facebook friends and other social media without parents complaining about their refusal to stop using computers or laptops. This can be seen in the results of the study for the total level of internet addiction more common among students aged 18 to 20 years. At these age teenagers in the education, the process has entered their first year as students, most of whom have to live separately from their parents.

Young (1996b in (Hidayat & Retnowati, 2004)distinguish internet users who use the internet normally (called Non-Dependent) with addictive internet users (called Dependent). Non-Dependent uses the internet as a means to obtain information and to maintain long-established relationships through electronic communication. Dependent uses an internet application in the form of two-way communication to meet, socialize, and exchange ideas with newly known people through the internet (Young, 1996b; 1997 in Hidayat & Retnowati, 2004).Non-Dependent use the internet between 4 to 5 hours per week while the Dependent uses the internet between 20 to 80 hours per week with 15 hours per online session. Dependent gradually develops the habit of using the internet. In this study at most the percentage that shows the use of the internet for students ranges from more than 5 hours per day / online session or around 35 hours per week. Already above the lowest threshold of addiction. There seems to be a gradual Dependent on the habit of using the internet. This is exactly the same as the increasing tolerance level for drug addicts who gradually increase the dose to get the desired effect.

Young (1996, in Hidayat & Retnowati, 2004) states the profile of internet addicts has the characteristics of men, young, and understand about computers. Similarly, the opinion of Busch and Shotton (Young, 1996 in Hidayat & Retnowati, 2004) which states that men are superior in using information technology and feel more comfortable using it than women. But the results of this study indicate that subjects who are in the category of internet addiction both mild and moderate are more female than male. This may be due to women preferring to discuss emotional problems or issues than men (Young, 1996 in Hidayat & Retnowati, 2004).

Among internet users, in terms of categories of mild and severe addicts, they go beyond the use of technology as a functional information tool. What is often referred to as media habits, each student uses the internet with certain intentions. This invention can take many forms, ranging from general pleasure-seeking behavior, using it as a form of entertainment, to using it to fulfill social goals. In this study, students spend a lot of time in using the internet with the aim of finding information and the purpose of using the internet to search for information in accordance with the duties of adolescents as students who are assigned assignments by lecturers or lecturers so that one method is used to complete assignments that are by searching for information on the internet. In addition, the use of the internet for the purpose of seeking information is intended to update the latest information about an event or an ongoing event.

In cyberspace, one can create a social network of new relationships. With regular visits to certain groups (for example, certain chat areas, online games or facebook), one can form a high degree of familiarity with other group members, thus creating a sense of community. In these cases, individuals are more likely to use the internet as an alternative means of developing social foundations that they do not have in their

immediate environment. In other cases, those who feel socially awkward or have difficulty developing healthy relationships in real life know that they are better able to express themselves more freely and find friendships and feelings that are lost in their real life. This is shown in the results of the study stating that there are two social media that tend to be favored by students, namely What-Apps and Instagram. This social media tends to have a function in creating new social relationships that are closer to old friends and new friends on social media. (Young & de Abreu, 2017, page 17)

According to one study, when non-dependent internet users use most of their online time using e-mail and surfing sites, dependent users spend most of their online time using synchronous interpersonal communication applications. Students who experience dependency on the internet are more often significantly using synchronous chat applications than students who do not experience dependency.

The results obtained in this study are limited to internet users who write as UIN Antasari Banjarmasin students. Therefore it should be noted about the generalization of all internet users. Hopefully, further studies are needed by enlarging the range of subjects such as the work environment or the community environment in general and also by considering age groups. In addition, further studies are needed on the influence of personality types on the tendency of internet addiction.

Conclusion

Following the conclusions that can be conveyed to illustrate the purpose of this study are:
1. The proportion of internet addiction rates is normal (33.9%), mild (52.4%), moderate (13.7%) and weight not found)
2. Women have a higher percentage than men who are internet addicted.

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LANGUAGE ADAPTATION OF GENERAL HEALTH QUESTIONNAIRE (GHQ) 28 AS MENTAL HEALTH SCREENING TOOL FOR COLLEGE STUDENTS

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Abstract

According to local and global report, there are an increasing number of mental health problems. The age ranges that are susceptive to mental health problems are adolescents and young adults which has been categorized as productive age. It can be seen from many reports that show high rate of mental health problems among college students. Considering the high prevalence of mental health problems among college students, it is important to develop mental health screening tool which enables early detection of mental health problems. This study aimed to adapt *General Health Questionnaire* (GHQ) 28 which has been widely used and considered as valid and reliable mental health screening tool. This study was carried out by following instrument adaptation procedure which is forward and backward translation method. This method included the process of forward translation by an independent translator, synthesis and discussion, and assessment by experts, followed by backward translation and pilot testing. After following the adaptation process, the Indonesian language GHQ 28 was produced. The result of this study is an adapted version of GHQ 28 in Indonesian language which ready to be evaluated psychometrically. There are few modifications of the translation based on the pilot study to adjust the Indonesian college students understanding of the questionnaire.

Keywords: adaptation, mental health screening, young adult

Introduction

Mental health problems in the world appear to attract more attention than ever, this can be seen from the many reports of high mental health problems globally. WHO reports that there are at least 350 million people in the world who are depressed, some of which contribute to 800 thousand suicides each year. Suicide regarded as the second highest cause of death for people aged 15-29 years. Other mental health disorders which are also increasing and attracting public attention lately is bipolar disorder, which according to WHO affects around 60 million people worldwide. Severe mental disorders, psychosis also affect around 20 million people globally (WHO, 2014).

In Indonesia, awareness about mental health considered as very low and the number of mental disorders in Indonesia are relatively high. According to the Indonesian Ministry of Health's Health Research and Development Agency (2013), the prevalence of mental disorders in Indonesia has declined compared to 2007. The

provinces with the highest prevalence of severe mental disorders are DI Yogyakarta (2.7 per mile), Aceh (2.7 per miles), South Sulawesi (2.4 per mile), Bali (2.3 per mile), and Central Java (2.3 per mile). Furthermore, in 2013 Riskesdas also added the prevalence of emotional disorders, the total is 6% in Indonesia, it means that there are more than 12 million Indonesian people who are indicated to experience emotional disturbances. Provinces with the highest prevalence of emotional disorders are Central Sulawesi, West Java, DI Yogyakarta. Of all subjects with mental disorders, around 10% of these disorders are suffered by those in productive age, 15-34 years (Badan Penelitian dan Pengembangan Kesehatan Kementerian Kesehatan RI, 2013).

Among all existing segments of society, it turns out that the student segment, which is in the age of 15-25 years, is a segment that is at risk of experiencing mental health disorders. The results of the study (Kessler, et al, 2007) showed that at the age of 25 years, 75% of those who would experience mental health problems experienced their first onset. In students, significant changes related to attending lectures will exacerbate the psychopathology that arises during childhood or it will stimulate the emergence of the first onset (Pedrelli, Nyer, Yeung, Zulauf, & Wilens, 2015). *National Alliance On Mental Illness* (NAMI) in the United States reported that about 765 respondents, 27% had depression, 24% were bipolar, 12% combined personality disorder, eating, schizoaffective, obsessive compulsive disorder and 11% anxiety (Gruttadaro & Crudo, 2012).

The mental health conditions of students in Indonesia have also increasingly gained public attention since the occurrence of lecturer murder cases by students in North Sumatra in May 2016 (regional.kompas.com, 2016), which indicates the existence of emotional and impulse control problems. In addition, student suicides also appear increasingly prevalent in various regions. In May 2016, there was student suicides in Yogyakarta (Hasanudin, 2016) and last March 2016 in Jambi (Alfriandi, 2016). At the end of 2015, suicides also occurred to students in Yogyakarta (tribunnews.com, 2015) and in Jakarta (okezone.com, 2015). This is also reinforced by various studies showing that 5-30% of students experience moderate to severe depression (Aditomo & Retnowati, 2004; Qonitatin, Widyawati, & Asih, 2011; Susilowati & Hasanat, 2011; Wayan, Asthiningsih, Marchira, & Sedyowinarso, 2010).

Based on the study results above, it can be seen that the mental health problems of students need to get serious attention. However, in Indonesia there is no adequate mental health screening tool. Therefore, mapping the mental health of students through screening is very important to do. Screening is detecting conditions or risks for subjects who have not shown symptoms (Thompson & Van den Bruel, 2012). Furthermore, the purpose of screening is to identify the target condition earlier than the usual diagnostic process, which begins with a person experiencing feelings of discomfort or experiencing symptoms that cause distress. By establishing a diagnosis process at the outset, it is expected that interventions can be more effective, so that mortality and psychiatric morbidity can be reduced. The main principles of screening are the condition of important health problems and the availability of adequate testing equipment to screen (Thompson & Van den Bruel, 2012). Some of the screening tools that are often used in the realm of mental health are the Hopkins Symptom Checklist (Derogatis, Lipman, Rickles, Uhlenhuth, & Covi, 1974), Depression Anxiety Stress Scale (Lovibond & Lovibond, 1995), Patient Health Questionnaire (Kroenke, Spitzer, & Williams, 2001), and General Health Questionnaire (Goldberg & Blackwell, 1970). Unfortunately, among the various screening tools, the screening tools that have been

adapted and validated in Indonesia are still limited. Adaptation of measuring instruments into the language and culture of the population that will be targeted screening is very important. It is because there may be differences in terms of referring to the symptoms being measured. The impact of the adaptation process that is not optimal is the low validity of the test equipment, as found by (Prady et al., 2013) which shows that GHQ is not recommended for use due to the problem of item translation and different ways of administration in ethnically diverse subjects.

One of the tools that has been extensively adapted and validated in Indonesia is the General Health Questionnaire (GHQ). The initial version of GHQ has 60 items. Subsequently, GHQ has various versions, the 12 point or GHQ version 12, version 28 items or GHQ 28, and a version of the 30 items or 30. GHQ GHQ that has been validated in Indonesia is GHQ 12. As a result, in general GHQ 12 can be validly used to determine subjects who are at risk of experiencing mental health disorders (Idaiani & Suhardi, 2006). In the past 2013-2014, the GHQ 12 was also re-adapted and validated. This is because GHQ will be used as a patient screening tool at the puskesmas (Primasari, 2013). The result is a valid GHQ 12 for detecting self-adjustment disorders (Primasari, 2013), depression (Nurwanti, 2013), general anxiety (Emeldah, 2013), and obsessive compulsive (Nursalim, 2014). Although it is valid for detecting various psychological disorders, GHQ 12 has two to three original constituent factors, namely anxiety and depression and social dysfunction and loss of self-confidence (Werneke, Goldberg, Yalcin, & Utsun, 2000). Unlike the GHQ 12, the 28-item GHQ or GHQ 28 is formed based on the analysis factor of the GHQ 60 whose results are four factors or four sub-scales, namely the somatic subscale, insomnia anxiety, social dysfunction, and depression.

Features GHQ 28 which has a psychological disorder detection coverage wider than the GHQ 12 (and other screening tools in general) make GHQ 28 is very widely used in mapping study of mental health. With the four sub-scales, the GHQ 28 does not only produce a single score that reflects the severity of the subject, but also produces four scores on the sub-scale, so it is recommended for researchers who need more than one score (Goldberg & Hillier, 1979). GHQ 28 is also proven to have relatively stable structural factors and satisfactory validity. Research result (Werneke, Goldberg, Yalcin, & Ustün, 2000) shows that GHQ 28 has been tested in 15 countries and the result is that the structural factors are relatively stable. GHQ 28 has been translated into 10 languages and the translation has proven to be used equally well in developing countries (Goldberg et al., 1997).

Based on the explanation above, it can be seen that Indonesian students are vulnerable to mental health problems. Unfortunately, adequate screening tools have not been adapted in Indonesia, so that students' mental health problems cannot be properly mapped. Therefore, this study aims to adapt the GHQ 28 screening tool into Indonesian language and culture so that it can be used as a screening tool for students' mental health. GHQ 28 was chosen because it has a wider detection range of psychological disorders, has satisfactory psychometric evaluation, and has been widely used in research in various countries.

Method

The research method used refers to the stages of adaptation to measure instruments. Based on (Hambleton, 1996), Scale adaptation is all activity from deciding whether a scale or test can measure the same construct in different languages and cultures, choosing translators, determining appropriate accommodation in preparing scales or tests in a second language, adapting the test and seeing equivalence on an original scale. In the context of scale translation, the term adaptation is more appropriate to use because translators do not merely translate into other languages, but also try to find concepts, words, and expressions that are culturally, psychologically, and linguistically equivalent to the second language and culture.

There are seven stages of instrument adaptation, namely 1) translation of instruments from the original language to the target language (forward translation), 2) synthesis of versions that have been translated, 3) evaluation of synthesis by experts, 4) evaluation of instruments by target population, 5) re-translation to the original language (back translation), 6) pilot study, and 7) evaluation of factor structures using exploratory analysis and confirmatory factor analysis (Borsa, Damasio, & Bandeira, 2012; Sousa & Rojjanasrirat, 2011).

The adaptation procedure used in this study are:

1. Translating GHQ 28 from English into Indonesian by at least two translators (forward translation)

    The terms of the translator here are independent, bilingual, and not only has understanding of Indonesian culture, but also having experience related to culture where the instrument is developed. Translator 1 must understand the terminology of psychology and constructs measured in Indonesian, while translator 2 must understand phrases, jargon, idiom expression, and emotional terms in Indonesian. The second translator should not know the psychological terminology or construct of the instrument. This approach will produce a translation version that contains words and sentences that are nuanced psychologically and linguistically that are usually pronounced according to culture

2. Synthesize the results of the two translators

    In this stage, the researcher summarizes the two translated versions of the instrument, where the researcher compares the differences in translation and examines the differences in semantics, idiomatic, conceptual, linguistic, and contextual, so that a translation version is obtained. In this stage, the third interpreter and the researcher themselves need to be involved

3. Evaluation from experts

    The experts here are ideally methodologists and psychologists who know the constructs measured by the instrument. Experts will assess aspects such as layout, instructions, scope and accuracy of terms in items.

4. Evaluation by the target population

    This stage aims to verify whether items, responses, and instructions can be understood by the target population. Subjects at this stage can vary depending on the target respondents of the instrument. Subjects will be asked to rate instructions and items using dichotomous scales (for example clear or unclear) and asked to give suggestions in writing items on items that are still unclear. Instructions, responses, and items that are considered less clear by 20% of the subject sample, must be re-evaluated. The recommended number of samples is 10-40 subjects.

5. Translating the GHQ 28 which has been translated into Indonesian returns to the original language (English) by at least two translators (backward translation).

   Similar to forward translation, translator 1 must understand the terminology of psychology and constructs measured in Indonesian, while translator 2 must understand phrases, jargon, idiom expressions, and emotional terms in Indonesian. This is a process of checking validity to ensure that the translated version describes the same item content as the original version. This stage clarifies the choice of words in the translation process. Nonetheless, the similarity between back translation and original sources do not guarantee a satisfactory forward translation because the results may be incorrect. This shows that back translation is just one method of validity checking (Beaton, Bombardier, Guillemin, & Ferraz, 2000).

6. Pilot Testing

   This stage aims to find out whether the translated questionnaire can be accepted by the target population, whether the translation is understandable, and whether the language used is simple and precise.

Result

The results from each stages of adaptation procedure:

1. The licensing process of adaptation and validation of measuring instruments from GHQ distributor 28

   The licensing process to use GHQ 28 as the object of research was carried out to the main distributor of GHQ 28, GL Assessment Ltd. based in London, England. The licensing process has been carried out in accordance with the procedures provided by the GL Assessment and researchers have paid the specified permit fee to use GHQ 28 as a measurement tool to be adapted.

2. Stage One: Translation of GHQ 28 from English to Indonesian by at least two translators (forward translation)

   The first step, according to the adaptation procedure, is to involve two translators, a translator with a psychology background and a 1b translator with an English background.

   Translators involved in this first stage are:

   a. Translator 1a lived in Australia from childhood to adolescence and has a master's degree in psychology, especially mental health from University College London, England.

   b. Translator 1b is a translator at UNISSULA's Center of International Language Development (CILAD) which holds a master degree in English Language Education, obtaining a double degree from the University of Ohio, United States.

   The results of the first phase are 11 significant differences in the translation of the words / phrases / idioms, which are presented in the following table:

Table 1
Translation Differences in Words/Phrase/Idiom

Item Number	Words/idioms in English Version	Translator 1a	Translator 1b
2	Tonic	Vitamin	Obat penambah stamina
3	Run down	Kelelahan	Loyo
3	Out of sorts	Kurang sehat	Tidak bersemangat
7	Hot or cold spells	Keringat dingin	Badan tearsa panas dingin
9	Once you are off	Tetap tidur setelah memejamkan mata	Tidur kembali setelah Anda bangun
15	To keep youself busy and occupied	Mampu menyibukkan diri	Menjaga diri Anda tetap sibuk dan beraktivitas
18	The way you've carried out your task	Puas dengan hasil kerja Anda?	Puas dengan cara Anda menyelesaikan tugas
23	Entirely hopeless	Hidup sama sekali tidak bermakna	Merasa putus asa menjalani hidup
24	Life isn't worth living	Merasa hidup tidak berharga untuk dijalani	Merasa hidup sia-sia
25	Make a way with yourself	Kemungkinan bunuh diri	Melukai diri sendiri
26	Your nerves were too bad	Kekhawatiran terlalu besar	Sangat gelisah

3. Synthesis of translation results forward translation

   Based on Table 1, it can be seen that there are still words, phrases, and idioms that are not the same, so that according to the procedure a synthesis of the translation results is based on the discussion and analysis of the researcher and one translator, 2 translators, who come from a psychology background and have qualifications English that meets the criteria (having lived abroad, having experience in translating scientific articles into English and vice versa). Here the task of translator 2 is to choose the most suitable translation between translations 1a and 1b and provide input on the translation results if there is something that needs to be changed. In this case the translator 2 and the researcher conduct a discussion to determine the translation that is considered most appropriate.

4. Expert judgment (professional judgment) on the results of version I translations

   After compiling version I translation, the next step is to ask for an assessment and input experts on the results of the translation, instructions, and layout. Suggested experts are methodologists and practitioners in the field of mental health. The experts chosen for this stage are:

   a. Psychology faculty lecturers who have experienced in handling and validating measuring instruments. He lived abroad for approximately 5 years and had a doctorate. He is also experienced in research adaptation and validation of measuring instruments (one of which is GHQ 12) (Expert a)

   b. An experienced psychology faculty lecturer conducts research on adaptation and validation of measuring instruments (Expert b)

   c. A psychology practitioner who practices in one mental hospital

After obtaining a professional judgment, a synthesis was carried out to get the version II translation, as follows:

Table 2
Synthesis of Translated GHQ 28 Version I and II

Item Number	GHQ 28 Translated Version I	Version II (synthesis from researcher and expert/practitioner)	Annotation
2	*Apakah akhir-akhir ini Anda merasa membutuhkan obat penambah stamina?*	*Apakah akhir-akhir ini Anda merasa membutuhkan suplemen penambah stamina?*	Based on the KBBI *tonic* means body freshening fluid, not medicine so the term drug is not appropriate to use here
3	*Apakah akhir-akhir ini Anda merasa kelelahan dan kurang sehat?*	*Apakah akhir-akhir ini Anda merasa kelelahan?*	The word *kurang sehat* was deleted because feeling run down dan out of sorts in original questionnaire in Indonesian means almost the same which is fatigue. If there is a difference between physical and mental fatigue, it is worried that this will actually make respondents confused because Indonesian people are not familiar with the term mental fatigue
4	*Apakah akhir-akhir ini Anda merasa tidak sehat?*	*Apakah akhir-akhir ini Anda merasa sakit?*	The word ill in original questionnaire in Indonesian mean ill so it is better to use the word sick directly rather than unhealthy, besides that in the previous item the word *kurang sehat* has been used so it is worried that it is difficult to distinguish from this item
5	*Apakah akhir-akhir ini Anda merasakan rasa sakit di kepala?*	*Apakah akhir-akhir ini Anda merasa pusing dan sakit kepala?*	*Pusing* and *sakit kepala* are two different things so that both of these need to be mentioned separately
7	*Apakah akhir-akhir ini Anda merasa badan terasa panas atau dingin?*	*Apakah akhir-akhir ini badan Anda terasa panas dingin?*	The term *panas dingin* is more common among Indonesian
8	*Apakah akhir-akhir ini Anda kekurangan tidur karena diselimuti suatu kekhawatiran?*	*Apakah akhir-akhir ini Anda sulit tidur karena mengkhawatirkan sesuatu?*	Simpler sentence were chose
9	*Apakah akhir-akhir ini Anda kesulitan untuk tidur lelap setelah memejamkan mata?*	*Apakah akhir-akhir ini Anda kesulitan untuk tidur nyenyak?*	The word *tidur lelap setelah memejamkan mata* was harder to be understood than *tidur nyenyak*. The word *nyenyak* already represent the condition of sleeping comfortably
10	*Apakah akhir-akhir ini Anda merasa ketegangan yang terus menerus?*	*Apakah akhir-akhir ini Anda merasa tertekan terus menerus?*	The word strain in original questionnaire based on Cambridge dictionary means force or influence that stretches, pulls, or puts pressure on something, sometimes causing damage,

			so that in this case *merasa tertekan* were chosen because strains in this context mean the burden that is constantly stressed
14	*Apakah akhir-akhir ini Anda merasa gugup dan khawatir sepanjang waktu?*	*Apakah akhir-akhir ini Anda merasa gelisah dan khawatir sepanjang waktu?*	Strung up in original questionnaire mean nervous or worried while nervous itself mean worried and anxious (Cambridge Dictionary). In this case the word *gelisah* was chosen because it more suitable as the translation of nervous
15	*Apakah akhir-akhir ini Anda mampu menyibukkan diri?*	*Apakah akhir-akhir ini Anda berusaha tetap sibuk dan aktif?*	Based on the expert judgement it was suggested to substitute the word *mampu* with *berusaha*
17	*Apakah akhir-akhir ini Anda merasa telah melakukan segalanya dengan baik?*	*Apakah akhir-akhir ini secara umum Anda merasa telah melakukan pekerjaan dengan baik?*	There were changes in words choice
21	*Apakah akhir-akhir ini Anda dapat menikmati aktivitas keseharian Anda?*	*Apakah akhir-akhir ini Anda dapat menikmati aktivitas normal Anda sehari-hari?*	The word *normal* was added to clarify the condition which there normal activity
23	*Apakah akhir-akhir ini Anda merasa bahwa hidup sama sekali tidak memiliki harapan?*	*Apakah akhir-akhir ini Anda merasa bahwa hidup ini tidak memiliki harapan sama sekali?*	There was change in word order so it will be easier to be understood
25	*Apakah akhir-akhir ini Anda sempat memikirkan kemungkinan untuk bunuh diri?*	*Apakah akhir-akhir ini Anda berpikir untuk melarikan diri dari kenyataan?*	Make away with in original questionnaire mean to escape with (Macmillan Dictionary) and carry something away (Oxford Dictionary). The word *melarikan diri dari kenyataan* was chosen because make away with doesnt always mean suicide but running from reality. It is also usefol for distinguished from item 28
27	*Apakah akhir-akhir ini Anda mendapati diri Anda berharap bahwa Anda lebih baik mati dan lepas dari semua masalah?*	*Apakah akhir-akhir ini berharap mati dan meninggalkan segalanya?*	Simpler sentence were made
28	*Apakah akhir-akhir ini Anda mendapati diri Anda terus memiliki pikiran untuk bunuh diri?*	*Apakah akhir-akhir ini Anda berulangkali terpikir untuk mengakhiri hidup?*	The word suicide never explicitly used in GHQ 28 original version, so the word *bunuh diri* was substitute with *mengakhiri hidup*

5. Backward Translation
In this stage, the translation of GHQ 28 version II is translated back to the original (English) language by two translators, as follows:

a. Translator 2a has studied post graduate abroad with a background in psychology.
b. Translator 2b is a lecturer at the Faculty of Language and Communication who holds a master's degree in English Language Education, received a double degree from the University of Ohio, United States.

The results of the backward translation conducted show that there are some differences, especially in the use of phrases or idioms, but overall the results are relatively equivalent to the English version of GHQ 28

6. Pilot Testing

After obtaining the GHQ 28 version II translation that has been carried out with backward translation without any significant changes, the adaptation process is continued with pilot testing, where 40 people were tested on the subject using cognitive interviews. Each subject was interviewed individually where the interviewer asked if there were difficulties in understanding the terms in each items. Cognitive interviewing is an interview method that aims to see the subject's cognitive processes when answering questionnaire questions. In addition, it is also to ensure that the subject understands the question as intended by the concept and objectives of measurement. There are two cognitive interview methods in general, the first Think-Aloud, the subject is explicitly asked to answer survey questions while saying what he thinks and feels is related to the questions, so the interviewer knows about how the subject arrived at a certain answer. The second is verbal probing, which is after the subject answers the question, the interviewer asks further about the answer for example asking the meaning of the particular term used in the questionnaire and asking how the subject arrived at the answer (Lambert, Kinzie, & Gieser, 2012).

The pilot testing process using cognitive interviews is carried out on students of Sultan Agung Islamic University with the following description of the subject:

Table 3
Subject Description of Pilot Testing

Annotation		Number
Sex		
	Male	17
	Female	23
Batch		
	2014	21
	2015	6
	2016	6
	2017	7

Table 4
Pilot Testing Results

No	Translated GHQ 28 Version II	Annotation
4	*Apakah akhir-akhir ini Anda merasa sakit?*	Several subjects were questioning the meaning of words *sakit*, whether it is phisically or psychological?
5	*Apakah akhir-akhir ini Anda merasa pusing dan sakit kepala?*	*Pusing* and *sakit kepala* are hard to be distinguished by the subjects

6	*Apakah akhir-akhir ini Anda merasakan kepala Anda tegang dan penuh tekanan?*	The words *penuh tekanan* is answered by some subjects as a condition of a lot of thought, not referring to physical symptoms as intended by this subscale
7	*Apakah akhir-akhir ini badan Anda terasa panas dingin?*	Some subjects were not understand the meaning of *panas dingin* condition, they thought that cold was caused by changes in air temperature, not because of changes in body temperature
11	*Apakah akhir-akhir ini Anda merasa gelisah dan mudah marah?*	The *gelisah* and *mudah marah* are conditions that were hard to be distinguished. Subjects perceived this as causality condition which *mudah marah* is caused by *gelisah*
14	*Apakah akhir-akhir ini Anda merasa gelisah dan khawatir sepanjang waktu?*	*Gelisah* and *khawatir* were hard to be distinguished by subjects
16	*Apakah akhir-akhir ini Anda merasa membutuhkan waktu yang lebih lama untuk mengerjakan sesuatu?*	Many subjects hardly understood *membutuhkan waktu lama mengerjakan sesuatu* because now they are not busy so they don't feel rushed, not because there are other psychological barriers
26	*Apakah akhir-akhir ini Anda merasa tidak dapat melakukan apapun karena sangat gelisah?*	Some subjects hardly understand this

Based on the pilot testing stages, there are some items which hard to be understood by subjects and they need to be revised:

Table 5
Item Revision Based on Pilot Testing

Item Number	GHQ 28 Version II	GHQ 28 Version III (after pilot testing)	Annotation
4	Apakah akhir-akhir ini Anda merasa sakit?	Apakah akhir-akhir ini Anda merasa tidak sehat/ sakit?	The words *tidak sehat atau sakit* added to clarify the physical dimension of sickness
5	Apakah akhir-akhir ini Anda merasa pusing dan sakit kepala?	Apakah akhir-akhir ini Anda mengalami sakit kepala?	The word *pusing* were deleted and only words *sakit kepala* were used becuse *pusing* and *sakit kepala* are hard to be distinguished
6	Apakah akhir-akhir ini Anda merasakan kepala Anda tegang dan penuh tekanan?	Apakah akhir-akhir ini Anda merasakan kepala Anda tegang atau terasa berat?	The word *penuh tekanan* were substituted with *terasa berat* in order to emphasize the physical dimension
7	Apakah akhir-akhir ini badan Anda terasa panas dingin?	Apakah akhir-akhir ini badan Anda terasa panas dingin (meriang)?	The word *meriang* was added to explain that *panas dingin* is physical condition
11	Apakah akhir-akhir ini Anda merasa gelisah dan mudah marah?	Apakah akhir-akhir ini Anda merasa gampang tersinggung dan mudah marah?	*Gelisah* was substituted by *gampang tersinggung.*
14	Apakah akhir-akhir ini Anda merasa gelisah dan khawatir sepanjang waktu?	Apakah akhir-akhir ini Anda merasa gelisah dan gugup sepanjang waktu	The word *khawatir* was substituted by *gugup* because it considered more appropriate as the meaning of the word nervous

16	Apakah akhir-akhir ini Anda merasa membutuhkan waktu yang lebih lama untuk mengerjakan sesuatu?	Apakah akhir-akhir ini Anda merasa ada hambatan sehingga membutuhkan waktu yang lebih lama untuk mengerjakan sesuatu?	The word *hambatan* was clarify the purpose of this question is the existence of psychological barriers that require a longer time to do something
26	Apakah akhir-akhir ini Anda merasa tidak dapat melakukan apapun karena sangat gelisah?	Apakah akhir-akhir ini Anda merasa sangat gelisah sehingga tidak dapat melakukan apapun?	The words *sangat gelisah* needs to be replaced at the beginning of the sentence to make it easier to understand

Based on the revision above, the translated final version of GHQ 28 are as follow:

Table 6
Final Version Translated GHQ 28

Item	Questions
A1	Apakah akhir-akhir ini Anda merasa bugar dan dalam kondisi kesehatan yang baik?
A2	Apakah akhir-akhir ini Anda merasa membutuhkan suplemen penambah stamina?
A3	Apakah akhir-akhir ini Anda merasa kelelahan?
A4	Apakah akhir-akhir ini Anda merasa tidak sehat/sakit?
A5	Apakah akhir-akhir ini Anda mengalami sakit kepala?
A6	Apakah akhir-akhir ini Anda merasakan kepala Anda tegang atau terasa berat?
A7	Apakah akhir-akhir ini badan Anda terasa panas dingin (meriang)?
B1	Apakah akhir-akhir ini Anda sulit tidur karena mengkhawatirkan sesuatu?
B2	Apakah akhir-akhir ini Anda kesulitan untuk tidur nyenyak?
B3	Apakah akhir-akhir ini Anda merasa tertekan terus menerus?
B4	Apakah akhir-akhir ini Anda merasa merasa gampang tersinggung dan mudah marah?
B5	Apakah akhir-akhir ini Anda merasa takut atau panik tanpa alasan yang masuk akal?
B6	Apakah akhir-akhir ini Anda merasa semua beban menumpuk pada Anda?
B7	Apakah akhir-akhir ini Anda merasa gelisah dan gugup sepanjang waktu?
C1	Apakah akhir-akhir ini Anda berusaha tetap sibuk dan aktif?
C2	Apakah akhir-akhir ini Anda merasa ada hambatan sehingga membutuhkan waktu yang lebih lama untuk mengerjakan sesuatu?
C3	Apakah akhir-akhir ini secara umum Anda merasa telah melakukan pekerjaan dengan baik?
C4	Apakah akhir-akhir ini Anda merasa puas dengan cara Anda menyelesaikan tugas?
C5	Apakah akhir-akhir ini Anda merasa berperan penting dalam suatu hal?
C6	Apakah akhir-akhir ini Anda merasa mampu membuat keputusan dalam banyak hal?
C7	Apakah akhir-akhir ini Anda dapat menikmati aktivitas normal Anda sehari-hari?
D1	Apakah akhir-akhir ini Anda melihat diri Anda sebagai seseorang yang tidak berharga?
D2	Apakah akhir-akhir ini Anda merasa bahwa hidup ini tidak memiliki harapan sama sekali?
D3	Apak ah akhir-akhir ini Anda merasa hidup ini tidak berharga untuk dijalani?
D4	Apakah akhir-akhir ini terlintas dalam pikiran Anda untuk bunuh diri?
D5	Apakah akhir-akhir ini Anda merasa sangat gelisah sehingga tidak dapat melakukan apapun?
D6	Apakah akhir-akhir ini berharap mati dan meninggalkan segalanya?
D7	Apakah akhir-akhir ini Anda berulangkali terpikir untuk mengakhiri hidup?

Discussion

Cross-cultural adaptation process seeks to produce an equivalent instrument between the source and the target culture. By pursuing this equivalence, it is expected to produce psychometric properties such as equal validity and reliability both at the item

level and scale (Beaton et al., 2000). Furthermore, there are several types of equivalence in adaptation, 1) semantic equivalence, namely equivalence in word meanings, 2) idiomatic equivalence where idioms rarely can be translated, therefore need to be replaced with expressions equivalent to the original source, 3) experience equivalence where the situation in the original version must be in accordance with the target cultural context. The result is a modification of the words, for example in the Brazilian version of HAQ which originally used public transportation replaced by private cars because most Brazilians do not have private cars, 4) conceptual equivalence of the validity of explored concepts and events experienced by people in cultural targets (Beaton et al., 2000)

Based on the explanation of the GHQ 28 adaptation process above, it can be seen that this process has followed the process of adaptation of forward and backward translations. In the first stage in Table 1, namely forward translation, it can be seen that there are several differences between translators 1a and 1b, especially in making meanings of English phrases. Then the synthesis process was carried out by 2 translators and researchers so that the GHQ 28 version I was produced. Furthermore, a professional judgment process was carried out by two experts in the field of measuring adaptation and one practitioner. The results can be seen in Table 2, there are several inputs related to the selection of the right diction in the GHQ 28 item which then synthesized by the researcher so that an agreement is reached.

The next step is the backward translation process. This stage needs to be done with the aim of checking how the translated version reflects the content of the original version. Backward translation does not mean that an item is literally identical to the original version but has the same concept equivalence, so it is necessary to ensure that the words used are in accordance with the existing cultural context (Borsa et al., 2012). The result of this backward translation is that there are several differences in the use of phrases and word selection with the original version of GHQ 28, for example in items 3, 5, 10, 11, 14, 22, and 25. However the differences in phrases and selection of words are still considered equivalent and has the same meaning in English, so it is considered acceptable.

The last is the pilot testing stage, where GHQ 28 trials were conducted on 40 student subjects. The results of pilot testing can be seen in Table 4 where there are several items that need to be composed of sentence arrangements and word selection which better suit for the use of everyday subject language. Can be seen in Table 4, items 4, 6, 7, 11, 14, 16, and 26 have several words or sentences that make it difficult for the subject to understand the intent of the question so that changes are needed. Changes to the words on these items can be seen in Table 5, where there are several word adjustments to make them easier to understand. In the adaptation process, modifications to the items are very possible to fit the target culture context Furthermore, modifying the instructions or formatting, modifying or rejecting the wrong items, making new items. Test adaptation committees are permitted to modify or eliminate items that are irrelevant, inadequate, and ambiguous and may make better substitutions to target new cultural situations by maintaining the main concepts of deleted items (Guillemin, Bombardier, & Beaton, 1993).

In general, the process of adapting the GHQ 28 language and culture has followed the standard procedures for adaptation of measurement tools, forward and backward translation, and pilot testing. As explained above, this adaptation process

requires changes to a number of words in order to be easier understood by Indonesian people.

Conclusion

Based on the results of the adaptations that have been made, it can be concluded that the adaptation process has been carried out in accordance with the standard procedure for measuring instruments and has been compiled in the final version of the GHQ 28 Indonesian translation. This version is ready to be used for psychometric property evaluation.

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COPING STRESS IN THE WIVES OF THE PATIENTS WITH SCHIZOPHRENIC DISORDERS

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Abstract

This study aims to determine stress coping performed by wives of schizophrenic disorder patients (caregiver). The burden of disability to be caregivers can create pressure for families with schizophrenia, especially for wives. Coping stress is a way to reduce or eliminate stress in the form of emotion focused on coping and problem focused coping. The subjects of this study were two people from Gresik Regency. The method used in the study is qualitative with case study approach. The results of this study indicate that wives of schizophrenic disorder patients experience stress in the form of physical fatigue, psychological fatigue and financial problems. The first subject was NJ using Emotion-focused coping in the form of distancing and escape-avoidance. NJ chose to keep a distance from her husband when he was sick. NJ also avoids or runs away from stressful problems and situations by fantasizing and smoking. The second subject was KH using problem focused coping in the form of seeking social support in stress management. He tried to find medical information, emotional support and advice from people about the disorders experienced by her husband. KH also uses emotion focused coping in the form of self-control, which is an attempt to regulate his feelings when facing the problem.

Keywords: Caregiver, Coping Stress, Schizophrenia, Stress.

Introduction

A family with a family member experiencing schizophrenia or what is familiar with the term crazy can drastically become alienated from its environment, underestimated and become a source of gossip in the community. The attitude of the community towards the family will have an impact on social status. Thus, sometimes ODS (people with schizophrenia) are ostracized by their own families because they are considered as bearers of disaster. Caregivers suffered severe stress while living with ODS (People with schizophrenia). Caregivers who are family member or called family caregivers are required to use most of their time to care for and provide social support for better ODS conditions.

Caregivers also face the public's stigma about ODS which can have an impact on the emergence of shame and social withdrawal. In addition, high maintenance costs and changes in roles and responsibilities among family members create dynamics which can affect the health condition of caregivers and cause anxiety, stress to depression. Family caregivers who can't handle it will experience helplessness. (Gitasari, 2015).

Schwartz & Gidron (in Nainggolan, 2013) said that the ODS family (people with schizophrenia) felt a different burden than other families in general. The family feels a very heavy burden. However, in general, the family still shows a sense of responsibility, support and great affection for their family members who are ODS.

The closest family members to the sufferer will experience the highest level of stress. Life partners, especially wives will feel heavy burden if their husband suffers schizophrenia. If this happens, it will be a nightmare for wives. The husbands who are the hope of them as leaders and the backbone of the family, turn around to become burden on their life.

This burden of disability will create pressure for the families of sufferers, especially for the wives. If the pressure is not handled correctly, the wives will experience prolonged stress. Stress itself can cause negative responses and emotions, including anger, anxiety, fear and sadness at different levels. Ways to overcome the negative effects of stress, called coping is then needed. The response and negative emotions that are the effects of the wives' stress will adversely affect the condition of schizophrenics. Therefore, there is a need for an appropriate and effective way to deal with stress, called the coping technique.

In certain situation, environmental condition can have negative psychological impact on a person's mental health. One of the negative psychological effects is stress experienced by someone. Stress is the reaction of an organism to unpleasant stimulation. Stress must be understood as an interactive relationship that occurs between physical, physiological, psychological and behavioral systems (Hanurawan, 2010).

Stress itself is an individual response to circumstances and events (called stressors) that threaten individuals and reduce the ability of individuals to overcome all forms of stressors (Santrock, 2002). Stress is a demand that encourages organisms to adapt or adapt. While stressors are a source of stress (Nevid, 2002)

The role of social support as a deterrent to the emergence of stress has been proven. The presence of people around can help the person find alternative ways of coping in the face of stressors or simply providing the emotional support needed during difficult times (Nevid, 2003)

Coping is a set of individual responses and the environment affects each other. There are two types of coping, namely problem focused coping such as seeking social support by seeking help from others to get advice, support or information about the problems that occur. Emotion focused coping involves ways to regulate emotions caused by stressful events experienced by individuals, such as contemplating the circumstances that occur in them and trying to get positive meaning from the problems that occur Tylor (in Laras, 2016)

According to Lazarus & Folkman (in Davison, 2006) identifying two dimensions of coping, coping that focuses on problems (Problem focused coping) includes acting directly to overcome problems or looking for information that is relevant to solutions. Coping that focuses on emotions (emotion focused coping) refers to various efforts to reduce various negative emotional reactions to stress. Lazarus & Folkman (in Maryam, 2017) divided the coping strategy into two types:

1. Coping strategies focused on problems.

   Coping strategies focused on problems are actions directed to solve problems. Individuals tend to use this behavior if they assess that the problems they face can still be controlled and can be resolved. Problem-centered coping behavior tends to be done if the individual feels that something constructive can be done to the

situation or that he believes that the resources he has can change the situation. Coping strategies focusing on problems are:

a. Planful problem solving is to react by making certain efforts that aim to change the situation, followed by an analytical approach to solving problems.

b. Confrontative coping is to react by changing circumstances that can describe the level of risk that must be taken.

c. Seeking social support, namely reacting by seeking support from outside parties, both in the form of information, real assistance, and emotional support.

2. Emotional-focused coping strategies are to make efforts aimed at modifying emotional functions without making an effort to change the stressor directly. Emotional-centered coping behavior tends to be done if the individual feels he/she cannot change the situation that presses his/her and can only accept the situation because the resources he/she has are unable to cope with the situation. Coping strategies focused on emotions are

a. *Positive reappraisal* works by creating positive meaning which aims at self-development including religious activity involvement.

b. *Accepting responsibility* works by growing awareness of self-role to problems. It also takes problems as they are.

c. *Self controlling* works by giving good regulation in feeling or action.

d. *Distancing* is used to avoid problem constraint.

e. *Escape avoidance* works by avoiding problems.

Coping stress from the wives of the schizophrenic sufferers not only allow her to accept their husbands' existence and abnormal condition, but also help them to treat their husbands with positive emotional conditions.

In some circumstance, the experience of the most trusted person of individuals is very decisive in overcoming stress. The most powerful pilot figure is the parents. If children are accustomed to talking about problems, then they can deal with problems in the future. Psychologist Martin Seligman shows that if someone faces a lot of threats that cannot be controlled anymore, the person learns to believe that he is indeed unable to control the situation. As a result, when facing a problem, this person tends to withdraw, give up or feel depressed.

In fact, managing stress is not easy especially if the pressure experienced by someone is large enough. Stress experiences by the wives who has husband with schizophrenic disorder cannot be said to be mild. The wives must not only accept and care for their husband, but also must accept gossip and possibly rejection of the surrounding environment. If they cannot manage the stress they face, then negative responses and emotions will be the impact of that stress.

Family support and acceptance are very influential on the healing process in patients. Therefore, stress coping becomes a very important part, especially for people who are near the patients to be able to bring them towards better conditions. But not all women and families have the right and effective coping stress. If this happens it will have a negative impact on the healing process of the patients because negative emotional response will affect the family especially the wives in caring and handling the patients.

In the research of Laras & Resdasari (2016) with the title Coping Against Work Stress in Nurses Who Ever Deal with Hiv / Aids Patients, it shows that the type of coping that is often used by the subject is emotion focus coping. The subject always

remembers motivation in working and utilizes vacation time for the family while experiencing work stress. This study aims to explain stress coping in nurses when the amount of pressure arises due to workload and fear of contracting the HIV / AIDS virus.

The results of research conducted by Fajriyati & Setia Asyanti (2017) show that caregiver stroke patients experience stress in the form of physical fatigue, psychological fatigue, demands from family and financial problems. Caregivers face problems that arise in various ways. There are three forms of coping that were successfully revealed in this study, including religious coping, emotion based coping and coping based on problems. Coping is influenced by age, life stage, gender, ethnicity & culture, economic status and social support.

In another study conducted by Saputra., Lisiswanti., Larasati & Rahmania (2017) with the title Koping Strategy in Type 2 Diabetes Mellitus Patients, there were variations in coping strategies in the form of problem-focused coping, emotion-focused coping, and emotion-focused problems coping. The form of coping is divided into positive and negative copings. Positive coping affects good physiological and psychological conditions while negative coping is the opposite.

Research Method

This research used qualitative approach with case study approach because the data obtained will be more complete, deeper and meaningful so that the objectives of this study will be achieved.

Qualitative research is carried out in natural and inventive conditions. It places more emphasis on meaning and bound values. Qualitative research is used if the problem is not clear, knows hidden meanings, understands social interactions, develops theory, ensures data correctness, and examines historical developments (Noor, 2012).

Case studies are special phenomena that are present in a bounded context, although the boundaries between phenomena and contexts are not entirely clear. The case can be in the form of individuals, roles, small groups, organizations, communities or even a nation. Cases can also be decisions, policies, processes, or certain special events.

The case study approach allows researchers to obtain complete and integrated understanding of the interrelations of various facts and dimensions of this particular case. Methods of data collection can be done from various sources in various ways. They can be in the form of observations, interviews, or study of certain documents / works / products related to the case (Poerwandari, 2005)

The data collection used is interview. Moleong (2006) states that interviews are conversations with specific intentions. The conversation was carried out by two parties with a view to constructing people, events, activities, organizations, feelings, motivations, demands, roundness and other things experienced in the past and expanding information obtained from others.

According to Patton (Moleong, 2006) data analysis is the process of arranging data sequences, organizing them into a pattern, basic description categories and units so that themes can be found and work hypotheses can be formulated as suggested by data. The researchers' steps in analyzing the data are as follows: making verbatim transcripts of interviews and observations, searching for categories, describing categories, and discussing research results.

The subjects of this study were two people with the initials NJ aged 65 years and KH aged 45 years. Both of them are from the Panceng District of Gresik Regency. NJ and KH are the caregivers, where NJ's and KH's husbands suffer from schizophrenia. NJ's husband was taken to the Menur Hospital for treatment, as well as KH's husband.

Result

NJ experiences stress when her husband was sick. When her husband was sick, NJ felt sad, but he also felt annoyed, angry and even out of control. One of the things that makes her angry was when he heard someone talking about her who doesn't care about her husband.

When NJ's husband was sick, NJ did not want to take care of his husband. He handed over the problem of treatment to her husband's brother. NJ told his husband's family to pick up the husband to be treated at his brother's house. Even NJ did not care about her husband's condition and her husband's medical expenses. When her husband was sick, NJ also smoked to eliminate the burden he felt.

Being a caregiver from ODS was also felt by KH. He also experienced stress. KH were immediately anxious, scared, and unable to sleep when they found out their husband was sick. KH and her family are simple families. KH experienced confusion when facing with family economic conditions. KH was troubled because he has to find expenses for the treatment of his husband, his daily needs and the school needs of his child. The pressure is getting stronger when many people visit the condition of her husband.

KH also sought information for the treatment of her husband by coming to a religious leader (Kyai) but there was no result. KH then got help from the village people to bring their husband to Menur Hospital Surabaya.

When KH's husband was sick, KH did not remain silent. KH tried to find information and treatment for her husband. KH was worried about the cost of medical treatment for her husband and other family needs as KH's husband could not work anymore. This condition then gradually improved when he found solution to this problem. The medical expenses are free. The place for KH children to recite also provides free tuition fees for KH's children. She then started working on the syabutan, although there were not many results but he was grateful. KH is more grateful for what is happening in his family. KH also did not want to sue her husband for a living. KH was aware of the condition of her husband who was in the process of recovery. KH worried that her husband would relapse if he got the pressure.

When KH faced the problems, she can only be patient and submit all his affairs to God. KH does not want to listen to what other people are talking about about his family. The effort carried out by KH in dealing with problems and when KH's husband was sick, made KH more spacious in facing all the tests.

Discussion

Based on the results of the data analysis, it can be concluded that being caregivers are not easy. They are more prone to stress. NJ and KH experience stress

consisting of physical fatigue, psychological fatigue and financial problems. They use coping in overcoming and reducing the stress they experience.

Stress is a subjective experience, so that each individual can have different responses to stress. Stress can have an impact both physically and psychologically. Stress experienced by individuals is usually accompanied by emotional tension and tension physical causes discomfort. Situation like this make individuals motivated to take a biased action relieve stress. That action done is coping (Sarafino, 2006)

Stress is the individual's response to circumstances and events (called stressors) that threaten individuals and reduce an individual's ability to deal with all forms of stressors (Santrock, 2002).

According to Lazarus & Folkman (in Davison, 2006), they identified two dimensions of coping namely coping that focuses on problems (Problem focused coping) includes acting directly to overcome problems or looking for information that is relevant to solutions and coping that focuses on emotions (emotion focused coping) refers to various efforts to reduce various negative emotional reactions to stress.

NJ uses Emotion-focused coping in the form of Distancing and Escape-avoidance. Distance is an effort that aims to maintain the distance between oneself and the problems faced and behave ignoring the problem at hand. Individuals who use this strategy consciously refuse to think about or dissolve the problem and assume that something has never happened. While Escape-avoidance is avoidance or escape from problems. By doing this strategy the individual hopes that the bad situation faced will soon pass. A stressful situation makes him do coping by way of fantasizing and smoking. Coping makes Subject NJ feel comfortable and can relieve stress. NJ considers that the efforts made can make NJ Subject eliminate the problem.

The second subject was KH. She uses problem focused coping in the form of seeking social support. Seeking social support is a strategy characterized by efforts to seek advice, information or emotional support from others. KH tried to find information and assistance to others to be able to help him overcome the problems he was facing (Problems with her husband who had schizophrenia). KH did not stay silent and tried her best to recover her husband.

KH also uses emotion focused coping in the form of Self-control. It is a strategy that describes the efforts made by individuals to regulate their feelings by storing those feelings whem she tried to overcome and saved the feelings she feels. The burden borne is not easy, but she tried to remain strong and did not show her burden in front of other people.

Conclusion

Based on the results of the research that has been done, it can be concluded that the two subjects namely NJ and KH experience stress that comes from family or environment (External). Both face similar problem, namely the schizophrenia condition of their husbands. NJ uses emotion focused coping in the form of Distance and Escape-avoidance. KH uses both forms of coping, namely emotion focused coping in the form of Seeking social support and problem focused coping in the form of Self-control.

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