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The Role of Peer Counseling on Mental Health

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The authors declare that they
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described in this manuscript.

Abstrak: Adolescence is identical with the phase of searching for identity. Therefore, adolescents solve their own problems and have difficulty communicating because parents find it difficult to understand the desires of their teenage children and are frustrated dealing with them so counselors are needed to bridge the communication between parents and adolescents. This type of research is a descriptive study using explanatory research. Respondents used were good teens aged 18 years to 22 years. The purpose of the study was to examine the effect of Peer Counseling (X) and Mental Health (Y). Data were tested by multiple regression analysis using SPSS v 16.00 for Windows. The results of the analysis prove that the variable Peer Counseling gives an influence on mental health as indicated by the calculated F value of 38,709 with a significance value of 0.00 (or <0.05). Pearson correlation coefficient value is 0.668 or 66.8% which means a high level of influence between peer counseling and mental health variables.

Keywords: Peer Counseling, Mental Health

Introduction

Adolescence (adoscence) is a transitional period of development from childhood to early adulthood entering this period around the age of 10 to 12 years and ending at the age of 19 to 22 years. The characteristics of adolescence are a period of looking for identity, an age that creates fear, an unrealistic period, and an adult threshold. When teenagers spend time outside their family or home, their thoughts can become more abstract, idealistic and logical. (Santrock, 2007). According to Hurlock (1980: 208-209) all developmental tasks in adolescence are focused on controlling attitudes and behavior patterns that are childish and preparing for adulthood. In addition to facing developmental tasks, adolescents must also cope with stressful situations. (Gladding, 2012)

Peer counseling is counseling given by friends whose age is guided by professional counselors aimed at helping others interpersonal. (Muslikah, Hariyadi, & Amin, 2016). The urgency of this research is to build a closeness between the counselee and the counselor like peers but still in the counselor's personal work norms.

The presence of a peer counselor does not replace the role and function of an expert counselor, but a peer counselor that bridges between professional counselors and foster adolescents by providing advice for adolescents who have problems to consult (Prasetiawan, 2016). Peer counseling affects adolescents to open up more easily because they have the same problems, making it easier to find solutions to these problems. Peer counselors in the form of assistance are provided in the form of various kinds of the same life experiences, such as work, life problems, or peers in various things experienced by the individual. (Salmiati, Rosmawati, & Lestari, 2018).

The advantage of peer counseling is that in the personality development and social development of adolescents there is involvement in the case of peer groups specifically providing suggestions that have a positive impact on adolescents (Muslikah, Hariyadi, & Amin, 2016). Peer counseling allows students to have the skills to implement experiences of independence and self-control which are very meaningful for students, because students based on their level of development are individuals who are undergoing adolescence, this is also explained according to Santrock (2002: 206) states that adolescence comes from the term adolescence which means growing to reach maturity, both mentally, emotionally, socially, and physically. At this time the individual is characterized by a rapid development in the individual in terms of physical, psychological and social, which at this time the attachment to peers is very strong. This situation makes students have their own groups, they prefer to solve their problems with their peers rather than with other people, serious problems they will usually discuss with their peers. The closeness between them can be an opportunity to facilitate Guidance and Counseling services in overcoming the problems they are experiencing (Suranata, 2013).

Peer Counseling

Peer counseling is counseling given by friends whose age is guided by professional counselors aimed at helping others interpersonal. (Muslikah, Hariyadi, & Amin, 2016). According to Astiti (2019) Peer counseling is a counseling carried out by non-professional personnel under the supervision of a professional counselor that is systematic in the form of mutual assistance and mutual support between peers in dealing with various life problems or efforts to develop self-potential. Conclusion Peer counseling is a counseling in the form of activities where peers are involved to help each other in dealing with problems under the supervision of a professional counselor.

According to Gladding (2012) for mental health problems, counselors perform counseling techniques, namely: (1) Identifying data in the form of : (a) Useful information to contact clients and find out as much detail as client details such as client name, address, active telephone number;(b) important information that informs the legality of the client and the basic information used to understand the information obtained after the next session. This information is in the form of age, gender. marital status, occupation (or school level and year); (2) Description of the problem, both primary and secondary. Describe the problem if exactly disclosed by the client. The important thing to note is that problems have an element of behavior; (3) The current lifestyle of clients;(4) The client's family history; (5) The client's personal history in the form of health history, educational history, military history, work history, history of marriage and sex life, experiences during counseling, and client's personal goals; (6) Description of the client during the interview; (7) Conclusions and recommendations. This section contains the relationship between problems the client is experiencing and other information collected during the session.

Adolescents tend to have emotional influences in decision making which can weaken their ability to make decisions in everyday life and tend to be independent without the need for help from adults so they have difficulty solving problems around them. (Hurlock, 1991). Adopted adolescents are more likely to have problems in school, use illegal drugs, and juvenile delinquency than non-adopted children (Santrock, 2007). This is due to the lack of parental roles and also lack of psychological care needed more than non-adopted adolescents. .

Peer counselors can be carried out in a variety of guidance services, providing peer individuals in the form of help but peers are not only the same age, can also have the same life experience in various ways. (Salmiati, et al., 2018).

Mental Health

Mental health is a condition that affects individuals in optimal physical, intellectual and emotional development and runs in harmony with other people's circumstances. (Putri, et al., 2015). The World Federation for Mental Health defines mental health as a condition that allows optimal physical, intellectual and emotional development of an individual and insofar as this is compatible with the optimal development of other individuals.

Ivan Illich described human mental health as the human ability to adapt. Health is not an instinct, but the result of an autonomous reaction, but is shaped by culture to a reality that is also created socially. It can be concluded that Mental Health (Mental Hygiene) is the avoidance of a person from the symptoms of mental disorders and illnesses, being able to adapt, being able to utilize all the potential and talents that exist to the maximum and leading to mutual happiness and the achievement of mental harmony in life..

Putri (2015) argues that the characteristics of a mentally healthy individual are:

1. Feeling good about yourself can be done by dealing with situations, overcoming disappointments, being grateful for life, gaining self-esteem, and evaluating yourself.

2. The convenience of having relationships with other people in the form of loving others, having permanent personal relationships, being able to respect differences of opinion, being involved in a group, not managing others and also not letting others rule themselves.

3. Can meet the demands of life, namely having realistic life goals, being able to make decisions, being able to be responsible, being able to plan for the future, being able to accept new ideas and experiences, and being satisfied with their work.

During adolescence, there are many changes both from a biological, psychological and social perspective, parents often do not know or understand the changes that occur so that parents are confused about emotional lability and adolescent behavior which results in conflict (Indarjo, 2009). The existence of protracted conflict is a stressor for adolescents that can cause a variety of complex problems both physically, psychologically and socially, including education.

Several types of mental disorders that often occur in adolescence, there are various stressors, various negative conditions such as anxiety, depression, and even triggering psychotic disorders. If this condition is not addressed immediately, it can continue into adulthood and can develop into a more negative direction (Indarjo, 2009)..

According to WHO data for 2018, depression is the most common mental disorder and is one of the main causes of disability. More than 300 million people in the world experience depression. Another psychiatric problem that often occurs is bipolar, where around more than 60 million people in the world suffer from this disease. Meanwhile, serious mental problems that often occur are schizophrenia and other psychosis, about 23 million people in the world experience it (BBC, 2019) According to Heath (1980) said that adolescents have psychological maturity that affects mental health as adults and adaptation to the world of work and sexual harmony in marriage.

According to Putri, et al. (2015) mental health disorders are divided into three categories of causes, namely: 1. Somatogenic factors are physical factors which include neroanatomy, nerophysiology, nerochemistry, level of organic maturity and development, and pre and perinatal factors. 2. Psychogenic factors are psychological factors in which there are non-abnormal mother-child interactions such as a lack of trust between one another, the role of a father, sibling rivalry, intelligence, family relationships, work, play and society, loss that causes anxiety, depression, shame or guilt, patterns of adaptation and defense in response to a danger, and the level of emotional development. 3. Sociogenic factors are factors consisting of family stability, parenting patterns, family emotional levels, income or economy, residence, minority group problems, health facilities, education and unfulfilled welfare, racial and religious influences, and values. which is used as a guide.

Method

This research is an explanatory research, which is to explain the influence between variables through testing the hypotheses that have been formulated. Based on the level, this type of research is a descriptive study that aims to describe the state of the object of research / provide a more detailed description of the observed phenomenon accompanied by data, characteristics and patterns of relationships between variables. This research is also analytic / inferential which aims to draw general conclusions.

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The research location is in Jember Regency. The subjects in this study were adolescents. Respondents were adolescents aged 18 to 22 years, with the sample technique used was simple random sampling. In this study, the population used was adolescents in Jember Regency. The study will be conducted from March 2020 to June 2020.

This type of research is descriptive research. There are two variables analyzed, namely Peer Counseling (X) and Mental Health (Y). Analysis of research data using multiple regression analysis using the SPSS v 16.00 for Windows program.

This operational definition is made to equalize perceptions between researchers and readers, or users of research results (Hasan, 2002, Amil 2008). To measure the existing variables, a scale is used and the scale-making technique used is the Likert scale, with a scale of 1 to 5. The number 5 indicates very satisfied or and scale 3 indicates neutral, while the scale 1 indicates very dissatisfied or disagree with (Panudju, 2003 : 9). The operational definition of each research variable can be described as follows:

1. Independent Variable (Independent): Peer Counseling (X1)

In this study, the operational definition of the variable (X1) Peer Counseling is a counseling activity in which peers are involved to help each other face problems in the supervision of a professional counselor.

2. Dependent Variable: Mental Health (Y)

In this study, the operational definition of the Mental Health variable (Y) is a condition that affects individuals in optimal physical, intellectual and emotional development and runs in harmony with other people's circumstances.
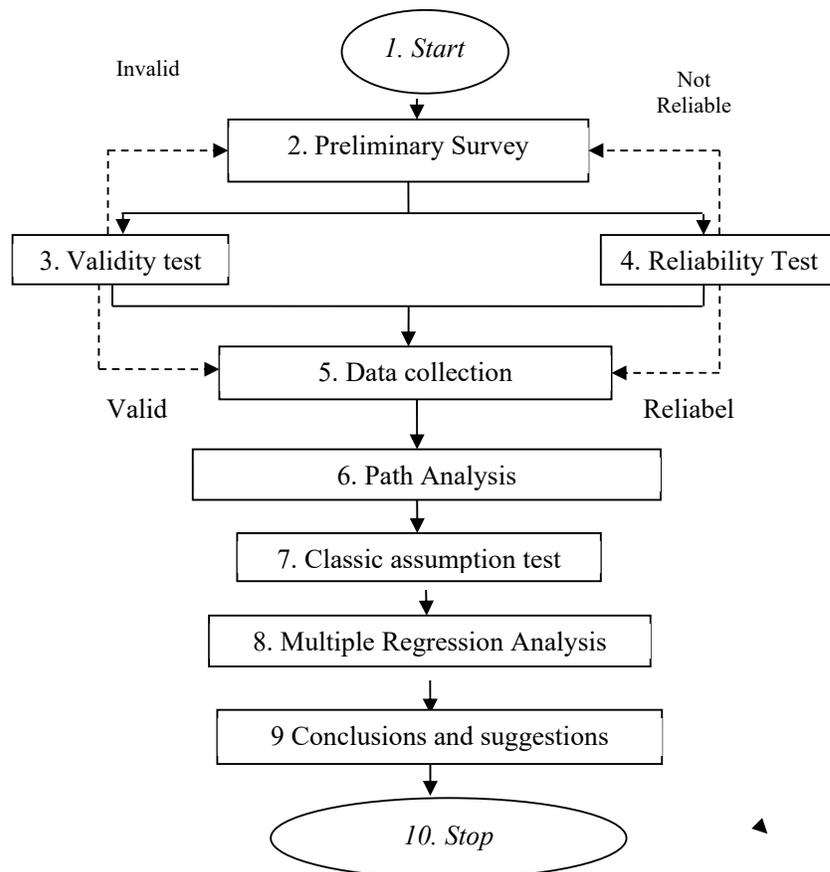

Figure 4.1 Stages of Research
Source: processed data, 2020.

Information :
1. Start. Research begins research
2. Preliminary Survey. Researchers conducted a preliminary survey by distributing questionnaires to 50 adolescent respondents
3. Validity Test. The validity of the collected questionnaires was tested. If the questionnaire is declared valid, then the questionnaire can be distributed to all respondents. If the questionnaire is declared invalid, then return to the preliminary survey to review the questions in the questionnaire
4. Reliability Test. The reliability of the questionnaires collected was tested. If the questionnaire is declared reliable, the questionnaire can be distributed to all respondents. If the questionnaire is declared unreliable, then return to the preliminary survey to review the questions in the questionnaire
5. Data Collection. After the questionnaire is declared valid and reliable, at the data collection stage the researcher is assisted by students who can distribute the questionnaire to all respondents
6. Path Analysis. Researchers conducted data analysis using path analysis to obtain a research path analysis model.
7. Classic Assumption Test. The path analysis model must be free from classical assumption tests. To find out that the path analysis model is free from the classical assumption test, the normality test, molticolinearity test, and heteroscedasticity test were carried out.
8. Multiple regression analysis. After the data is declared free from the classical assumption test. The researcher then performed multiple regression analysis
9. Conclusions and Suggestions. The researcher concludes the research results and provides research suggestions
10. Stop. The research is complete.

Data analysis in research using SPSS v 23.00 for Windows. This research was conducted from March 2020 to June 2020. Several data analysis techniques in this research include:

1. Validity Test

The validity test is carried out to ensure the accuracy of the measuring instruments used. The validity of the question items in this study used the Product Moments correlation technique, which is the correlation between the score of the question items and the total score of the question items used to test the validity of the instrument. The criteria for each question item are declared valid if the value of r (correlation coefficient between the score of the question items and the total score)> 0.30 (Santoso, 2001).

2. Reliability Test

Reliability is closely related to trust. In this study, researchers used data reliability testing tools using the Alpha Cronbach formula (α) based on the internal consistency of a research instrument

3. Path analysis

Path analysis is part of the regression analysis used to analyze the causal relationship between variables in which the independent variables affect the dependent variable, either directly or indirectly, through one or more intermediate variables (Sarwono, 2006)

3. Classic Assumption Test

The classical assumption test consists of:
a. Normality test
The basis for decision making on the normality test is that if the data spreads around the diagonal line and follows the direction of the diagonal line, then the existing data analysis model fulfills the normality assumption.
b. Muliticollinearity Test
Decision making testing is done with the criteria if the condition index value <value 15 then multicollinearity does not occur.
c. Heteroscedasticity Test

Decision making on the heteroscedasticity test is carried out with the criteria that if there is no certain pattern above and below the number 0 on the Y axis and the data is spread, it can be said that the research model does not occur heteroscedasticity.

Data analysis in the study used the SPSS v 23.00 for Windows program. This research will be conducted from January 2018 to November 2018 (10 effective months). Some of the data analysis techniques in this study include:

1. Validity Test

The validity test is carried out to ensure the accuracy of the measuring instruments used. The validity of the question items in this study used the Product Moments correlation technique, which is a correlation between the score of the question items and the total score of the question items used to test the validity of the instrument. The criteria for each question item are declared valid if the value of r (correlation coefficient between the score of the question items and the total score)> 0.30 (Santoso, 2001).

2. Reliability Test

Reliability is closely related to trust. A test is said to have a level of confidence if the test gives correct results.

3. Normality Test

The basis for decision making on the normality test is that if the data spreads around the diagonal line and follows the direction of the diagonal line, then the existing data analysis model fulfills the normality assumption.

4. Proof of Hypotheses

The null hypothesis (Ho) is rejected if t analysis results> t table (critical point) at a certain level of significance. Conclusions can be formulated after the decision to reject and accept the null hypothesis is carried out with a significance level of 5%. In formulating conclusions, it can be done by emphasizing the influence of whether there is an effect of treatment (treatment)

Results and Discussion

Descriptive data about the characteristics of the respondents are presented in order to see the characteristics of respondents based on education.

Table 4.1 Characteristics of Respondents by Education

No	Pendidikan	Jumlah	Prosentase
1	SMA	15	30%
2	Mahasiswa Smt 2	13	26%
3	Mahasiswa Smt 4	22	44%
		50	100%

Source: primary data processed in 2020

Table 4.1 shows that as many as 30% of respondents have high school education and the equivalent. Some 70% of the respondents were students consisting of 26% of semester 2 student respondents, while 44% of semester 4 student respondents. The following graph is presented in Figure 4.2.

The validity test table can be done by comparing r count (Pearson correlation value) with r table (obtained from table r). According to Sugiyono (2016) if r count is positive and r count> r table then the statement is declared valid. Meanwhile, if r count is negative, and r count <r table then the statement is declared invalid. According to Jainuddin (2016), to find out the value of r table, the data is first converted by knowing the df value or degree of freedom.

The number of statement items in this study were 19 statements with n = 50 respondents. If the value of n = 50 and k = the number of variables, then the value of df = 50-1 = 49. With a significance level of 5%, the value of r table (in Table r Pearson correlation) is 0.281 or 0.3. Each statement item will be declared valid if the Corrected Item-Total Correlation value is greater than 0.3. The following is a table of processed validity testing results as an interpretation of the validity test output of the SPSS program, while the Corrected Item-Total Correlation output of the SPSS program version 23 for Windows is in the attachment.
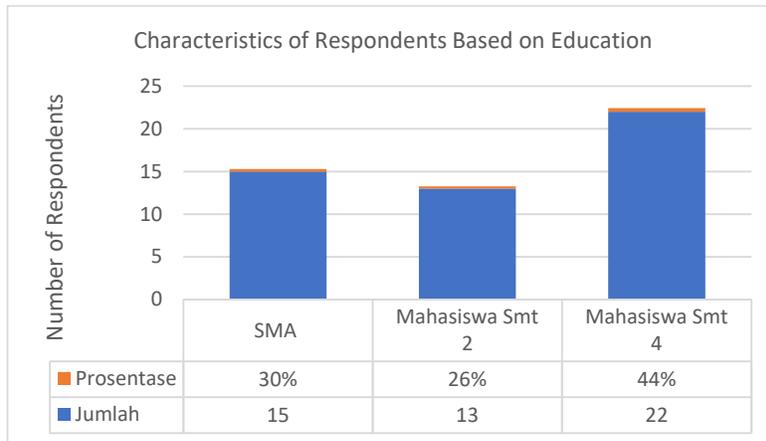
Figure 4.2. Respondent Characteristics Graph
Source: Primary data processed in 2020

The validity test table can be done by comparing r count (Pearson correlation value) with r table (obtained from table r). According to Sugiyono (2016) if r count is positive and r count> r table then the statement is declared valid. Meanwhile, if r count is negative, and r count <r table then the statement is declared invalid. According to Jainuddin (2016), to find out the value of r table, the data is first converted by knowing the df value or degree of freedom.

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Table 4.2. The validity of the Peer Counseling variable

Variable	Indicator	Correlation Value	Estimate	Explanation
Peer Counseling	1. Identify the problem(X1)	-0.017	0,455	Invalid
	2. Problem Exposure (X2)	0,594	0,000	Valid
	3. Problem Exposure (X3)	0,494	0,000	Valid
	4. Problem Exposure (X4)	0,686	0,000	Valid
	5. Lifestyle (X5)	0,312	0,014	Invalid
	6. *Family history of the client (X6)*	0,637	0,000	Valid
	7. *Family history of the client (X7)*	0,492	0,000	Valid
	8. *Client personal history* (X8)	0,554	0,000	Valid
	9. *Client description during interview* (X9)	0,493	0,000	Valid
	10. *Conclusions and recommendations* (X10)	0,392	0,002	Valid

Source: Processed SPSS Results, 2020.

The table shows that of the 10 items of the Peer Counseling variable statement, there are 2 invalid statement items. The results of the item validity test show that 2 statements are invalid, namely the statement item number 1 and number 5 where the invalid statement is not used in the analysis.

Table 4.3. The validity of the Mental Health variable

Variable	Indicator	Correlation Value	Estimate	Explanation
Mental Health	1. *Feelings of good self* (X1)	0,527	0,000	Valid
	2. *Feelings of good self* (X2)	0, 518	0,000	Valid
	3. *Feelings of good self* (X3)	0,642	0,000	Valid
	4. Relationship Convenience (X4)	0,598	0,000	Valid
	5. Relationship Convenience (X5)	0,653	0,000	Valid
	6. Relationship Convenience (X6)	0,423	0,000	Valid
	7. *Meet the demands of life (X7)*	0,631	0,000	Valid
	8. *Meet the demands of life (X8)*	0,456	0,000	Valid
	9. *Meet the demands of life (X9)*	0,478	0,000	Valid

Source: primary data processed in 2020

The results of the validity test in table 4.2 show that of the 9 items of the Mental Health variable questionnaire, 9 statement items were declared valid.

Reliability test

Reliability is a continuation of the validity test by testing only valid statement items. To determine the reliability and stability of the measurement instrument, a reliability test was used (Sekaran, 2016). According to Supriyanto (2009) reliability tests are carried out so that the resulting data is consistent and reliable. Reliable research results will be used in different times. A reliable instrument will produce the same data even though it is used on the same object and data (Sugiyono, 2016).

An instrument or questionnaire is said to be reliable if the Cronbach alpha coefficient is above 0.6. According to Sekaran (1992) a reliability value of 0.7 is acceptable and above 0.8 is good, while a Cronbach alpha value of less than 0.6 is not good (in Purnomo, 2016). The following is a table of research data reliability tests using the SPSS program. The output of the test results using SPSS version 23 for Windows is in the attachment.

Table 4.4. Reliability Test Results

Variabel	N of Items	Alpha	Cronbach" Alpha Minimal	Reliabilitas
Peer Counseling (X)	8	0,746	0,6	Reliabel
Mental Health (Y)	9	0,832	0,6	Reliabel

Source: Processed SPSS Results, 2020

Classic assumption test

The use of parametric and non-parametric statistics depends on the assumptions and types of data to be analyzed (Sugiyono, 2016). Researchers need to assume that the population is normally distributed, therefore it is necessary to use the classic assumption test consisting of the normality test (Supriyanto, 2009). In analyzing the variable grouping data, namely all respondents, each variable is presented data to be studied, answers the problem formulation and hypothesis testing using calculations. (Firdaus & Handriyono, 2018) (The residual normality test is used to test whether the residual value generated from regression is normally distributed or not. If the data is normally distributed, then the data represents the population. According to Ghozali (in (Normi, 2017) decisions about data normality can be known through the PP Plot graph, which is known by: (1) the data spreads around the diagonal line by following the direction of the diagonal line of the regression model that meets the assumption of normality; (b) the regression model does not meet the

normality assumption if the data is spread far of the diagonal line and / or not following the direction of the diagonal line. The following is a PP Plot graph.
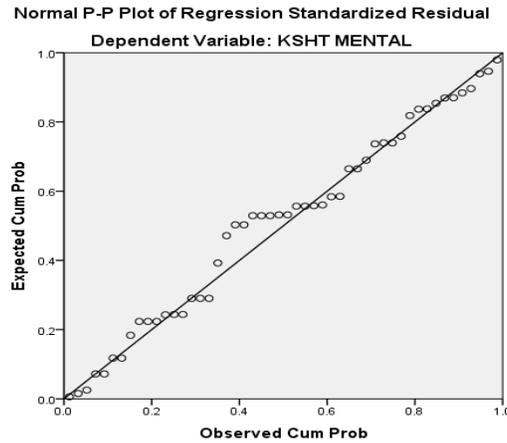

Figure 4.3. P-P Plot Graph
Source: SPSS Processed Data, 2020

A good regression model is one that has a residual value that is normally distributed. The method used is the graphical method, namely by looking at the distribution of data on diagonal sources on the Normal P-P Plot of regression standardized charts. As a basis for decision making, if the points spread around the line and follow the diagonal line, the residual value is normal. This shows that the regression model in this study is suitable for use because it meets the assumption of normality.

Linear Regression Analysis

In the previous description, it has been discussed about the relationship between X and Y variables based on theory and previous research. To prove the research hypothesis, multiple linear regression data analysis was used, after passing the classical assumption test requirements. According to Sunyoto (2010) regression analysis is a test that measures the effect of independent variables on one or more dependent variables (Supriyanto, 2009).

Multiple regression model testing in this study uses SPSS version 23 for windows. Here is the SPSS output of simple linear regression values:

Table 4.4 Descriptive Statistics

	Mean	Std. Deviation	N
KSHT MENTAL	30.3600	4.75420	50
PEERKONS	26.8400	4.22026	50

Source: Processed SPSS Results, 2020

Descriptive statistical table for Mental Health and quality variables seen from the mean (mean) and standard deviation. It appears that the average Mental Health is 30.36, while the average Peer Counseling is 26.84. This means that the average Mental Health and Peer Counseling <50

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	494.421	1	494.421	38.709	.000[b]
	Residual	613.099	48	12.773		
	Total	1107.520	49			

a. Dependent Variable: KSHT MENTAL
b. Predictors: (Constant), PEERKONS
Source: Processed SPSS Results, 2020

(The Role of Peer Counseling on Mental Health)

Anova is the result of the F test, as mentioned above that this test is used to see the effect of variable X on variable Y, here are the results of the F test:

a. Sig value = 0,000

b. Terms:

i. H0 is accepted if the value is Sig. > 0.05

ii. H0 is rejected if the Sig <0.05

c. Result: Sig <0.05 (0.00 <0.05) then H0 is rejected, which means that there is an effect of

Variable X on Variable Y 38,709> 0,000 (or <0.05) The calculated F value is greater than the table value

These results prove that the Peer Counseling variable has an effect on raw health as indicated by the calculated F value of 38.709 with a significance value of 0.00 (or <0.05). By following the sig level. 0.05 as the cut off value, then the significant level is 0.000 or below 0.05. This means that the independent variable has a significant effect on the dependent variable.

Table 4.6. Coefficients

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	t	Sig.
1	(Constant)	10.158	3.286		3.091	.003
	PEERKONS	.753	.121	.668	6.222	.000

Source: Processed SPSS Results, 2020

Coefficients are the results of the T test used to see the effect of variable X1 on variable Y, here are the results of the T test:

a. Sig value X (Peer Counseling) = 0.000

The value of t count = 6.222

Terms:

i. H0 is accepted if the value is Sig. > 0.05

ii. H0 is rejected if the Sig <0.05

b. Result:

i. Value of t Count> t Table

ii. 6.222> 0.000 This means that Ho is accepted, which means there is an influence of Peer Counseling on Mental Health

i. R = 0.668 x100% = 66.8 5

ii. With an R value of this means that there is a strong correlation of 66.8% between the variable peer counseling and mental health

Table 4.7. Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.668[a]	.446	.435	3.57392

a. Predictors: (Constant), PEERKONS

b. Dependent Variable: KSHT MENTAL

Source: Processed SPSS Results, 2020

The determinant coefficient (square) column in the Model Summary table is 0.446. This shows that the peer counseling variable affects 44.6% of the Prearson correlation coefficient (0.668) which shows a high level of influence between the Peer Counseling and Mental Health variables of 0.668 or 66.8%.

Table 4.8. Residuals Statistics

	Minimum	Maximum	Mean	Std. Deviation	N
Predicted Value	23.7063	37.2546	30.3600	3.17651	50
Residual	-8.98579	7.28298	.00000	3.53726	50
Std. Predicted Value	-2.095	2.170	.000	1.000	50
Std. Residual	-2.514	2.038	.000	.990	50

a. Dependent Variable: KSHT MENTAL

Source: Processed SPSS Results, 2020

Conclusion

From the results of the analysis using linear regression analysis on 50 respondents, the results showed that Peer Counseling has a significant effect on the mental health of adolescents in Jember Regency.

Based on the analysis of the results of the research, the discussion, and the conclusions of the study results that have been described previously, there are several suggestions that can have implications for further research, including:

1. For the benefit of further studies, the results of this study can be the basis for studies on effective counseling approaches for adolescents, considering that adolescents in the era of identity diffusion are not easy to share problems or are not easily open, so peer counseling will be easily accepted by adolescents so that adolescents believe and receive the benefits of the counseling provided.

2. This research can be developed into an appropriate counseling design for adolescents so that adolescent counseling can not only address problems but also gain self-understanding (insight) about themselves, adaptation, healthy interactions with the environment.

Acknowledgment

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