Efforts to Overcome Adolescent Academic Anxiety through Intervention Programs with a Cognitive-Behavioral Therapy Approach

Sekarini Andika Permatasari[1*], Wuri Prasetyawati[2]   (iD)

[1,2] Fakultas Psikologi, Universitas Indonesia, Depok, Indonesia

A R T I C L E   I N F O

A B S T R A K

Kecemasan akademik merupakan respon cemas yang muncul akibat pola pikir maladaptif dalam mengerjakan tugas akademik. Kecemasan akademik di masa remaja yang tidak ditangani dengan baik dapat mengganggu siswa dalam bidang akademik maupun kehidupan sehari-hari. Dengan demikian, dibutuhkan intervensi untuk membantu siswa mengatasi masalah kecemasannya tersebut. Adapun tujuan dari penelitian ini yakni untuk melihat efektivitas program intervensi individual dengan pendekatan CBT dalam menangani kecemasan akademik siswa remaja. Penelitian ini merupakan penelitian kuasi eksperimental dengan desain subjek tunggal. Subjek adalah seorang siswa perempuan berusia 14 tahun. Pengumpulan data dalam penelitian dilakukan menggunakan metode observasi dan wawancara, dengan instrumen penelitian berupa pedoman observasi. Alat ukur yang digunakan adalah Coping Questionnaire-Child dan The Subjective Units of Distress/Discomfort Scale untuk mengukur persepsi subjek terhadap kemampuannya dalam mengatasi kecemasan dan menilai tingkat kecemasan yang dialami. Data dianalisis menggunakan inspeksi visual yang tergambar dari grafik. Hasil penelitian menunjukkan bahwa program intervensi individual dengan pendekatan CBT efektif dalam meningkatkan kemampuan subjek dengan kecemasan akademik dalam mengatasi rasa cemasnya

A B S T R A C T

Academic anxiety is an anxious response that arises due to a maladaptive mindset in doing academic assignments. Academic anxiety in adolescence that is not handled properly can interfere with students in the academic field and everyday life. Thus, interventions are needed to help students overcome their anxiety problems. This study aims to see the effectiveness of individual intervention programs with the CBT approach in dealing with academic anxiety in adolescent students. This research is a quasi-experimental study with a single-subject design. The subject is a 14-year-old female student. Data collection in the study was carried out using observation and interview methods, with research instruments in the form of observation guidelines. Measuring tools used are the Coping Questionnaire-Child and The Subjective Units of Distress/Discomfort Scale to measure the subject's perception of his ability to overcome anxiety and assess the level of anxiety experienced. Data were analyzed using visual inspection drawn from graphs. The results showed that individual intervention programs using the CBT approach effectively increased the ability of subjects with academic anxiety to overcome their anxiety.

1. INTRODUCTION

Intelligence capacity is not the only determining factor for student performance at school. Where the emotional state of students also has a role in determining student performance. Negative emotional conditions, including academic anxiety, can decrease student academic performance (Lestari & Wulandari, 2021; Priyanti et al., 2021). Academic anxiety is a mindset accompanied by disturbing physiological responses, which arise due to worry about the possibility of doing bad academic assignments (Azyz et al., 2022; Triana & Meiyutariningsih, 2021). Academic anxiety can hurt student performance, for example, on tests, grade point averages, and subject grades (Madoni & Mardliyah, 2021; Suhendro & Agustina, 2022). It can happen because the anxiety that is felt can interfere with the student's focus on the task he is doing.

*Corresponding author
E-mail addresses: sekarpermatasari@gmail.com (Sekarini Andika Permatasari)

Anxious students focus their attention on other stimuli that are irrelevant to the task, for example, on the thought of worrying itself (Kusumastuti, 2020; Sjaefarhan & Urbayatun, 2022). Anxiety can function well for students if students can position it as motivation to achieve goals (Pietra, 2019; Rahmawaty et al., 2021). However, anxiety can become a problem when it causes emotional discomfort and interferes with individual functioning academically or daily life. Several characteristics can be seen in students with academic anxiety: having maladaptive thought patterns, giving unnecessary attention, physiological stress, and showing inappropriate behavior (Adhitama et al., 2022; Purwaningtyas, 2020). Some thought patterns include worrying about failure, criticizing and blaming yourself, and mistaken beliefs (for example, believing that a few mistakes equal failure) (Mukminina & Abidin, 2020; Wardhani & Puji, 2022).

Students with academic anxiety are usually easily distracted by external or internal factors that make children unable to work efficiently (Astuti et al., 2022; Natasya, 2022). Internal factors in question are worries and physical reactions that are felt, such as palpitations, tense muscles, sweaty hands, etc. As a result, students do something wrong when dealing with academic activities, such as delaying assignments (Agustiningsih, 2019; Widianti & Hartiningsih, 2021). Children with academic anxiety are also often very careful to avoid mistakes, so the duration of doing assignments becomes very long (Putri et al., 2018; Yuline, 2021). Academic anxiety in adolescence that is not handled properly can hurt individuals in the future, not only in terms of academics but also decreased well-being and social skills (Fitriani et al., 2022; Hatmanti & Septianingrum, 2019). Students' maladaptive thinking is the main factor that causes anxiety. Therefore, if children can change their thinking patterns to be more adaptive, they can manage their anxiety and increase their effectiveness in academic activities (Fardani et al., 2021; Nursolehah & Rahmiati, 2022). Three gradual elements can help change maladaptive thinking: identity, challenge, and transform (Afifah & Wardani, 2019). The first stage is that children need to identify and be aware of thoughts that trigger anxiety (identity), then test these thoughts (challenge) to get more realistic thoughts about a condition (Hidayat et al., 2021; Prasetya et al., 2022). After having more realistic thoughts, children are encouraged to face their fears (transform) to strengthen these new, more realistic thoughts and beliefs (Merry, 2020; Rosa et al., 2021).

These elements focus on interventions with a cognitive behavioral therapy (CBT) approach, changing the client's mindset to change his emotions and behavior (Sauran & Salewa, 2022). The CBT strategy is a strategy that is widely used in intervention programs for anxiety cases in children and adolescents, including in the school context, which is proven to be able to reduce symptoms (Aini, 2019; Arsih et al., 2022; Rimayati, 2019). One program that has been proven to be able to reduce anxiety symptoms experienced by adolescents is the Coping Cat. The program's goal is not to cure anxiety but to teach youth how to manage it well (McLeod et al., 2022; Mukund & Jena, 2022). The therapist acts as a trainer who helps clients to develop anxiety management skills and practice using these skills. The Coping Cat program includes psychoeducation and exposure (Fahlevi et al., 2019; Norris & Kendall, 2020). In psychoeducation sessions, the subject is taught the steps to manage anxiety. Subjects are taught how to identify somatic reactions related to anxiety, reduce perceived somatic reactions, change maladaptive mindsets to be more adaptive, find more adaptive solutions, and reward themselves for managing anxiety (Aulia et al., 2021; Maharani, 2022).

Furthermore, in the exposure session, the subject faces a situation that makes him anxious and applies the steps taught in the psychoeducation session. In practice, there are two types of exposure: imaginal and in vivo. In imaginal exposure, the situation is not presented in real terms but is imagined by the subject (Ayun & Wibowo, 2020; Kurniawati et al., 2021). Meanwhile, in in vivo exposure, the subject deals directly with the situation. Several previous studies have revealed that cognitive behavioral group counseling effectively increases adolescent self-confidence (Harahap, 2023). Further research revealed that CBT counseling effectively increased student self-efficacy, especially in mathematics (Sopiyah et al., 2020). The results of other studies revealed an increase in the learning motivation of disabled children in scores and categories according to the ARCS motivation questionnaire after the administration of CBT interventions (Nugroho & Purwandari, 2019). Based on some of the results of these studies, it can be seen that CBT positively influences student self-confidence. In previous research, no studies specifically discuss efforts to overcome adolescent academic anxiety through intervention programs with a cognitive-behavioral therapy approach. So this research is focused on this study to see the effectiveness of the intervention program with the CBT approach in dealing with academic anxiety problems.

2. METHOD

This research is a quasi-experimental study with a single-subject design. The single-subject design is a research design intended to look at the effectiveness of a treatment (treatment) for individuals with certain symptoms. The treatment given to the subject is an intervention program with a CBT

approach. The subject's behavior in the baseline condition will be compared with his behavior after being given the intervention program. Thus, it can be seen how the effectiveness of the intervention program in dealing with academic anxiety problems experienced by the subject. The subject of this study was Mawar (a pseudonym), a 14-year-old female junior high school student in grade 9. Her parents registered Mawar with their consent to participate in a psychological examination. Psychological examinations and interventions were carried out by the first author, who was undergoing professional psychology practice under the supervision of a licensed psychologist (2nd author). Based on the psychological examination results, Mawar indicated that she was experiencing academic anxiety. Mawar is an outstanding student at an A-accredited school in South Jakarta. In addition to her qualified intellectual abilities, Mawar often thinks of bad possibilities that will make her fail. He often thinks, "What if I fail?", "What if I cannot do the questions?". When he makes a mistake in doing an assignment or exam, he feels he has failed and is a bad person. Mawar fears the teacher will feel disappointed and angry if she gets a bad grade, even though she never scolded her. He also very rarely scores below the minimum completeness criteria. His anxiety makes him delay studying or doing assignments because looking at books scares him. His heart was pounding, his head was spinning, and his stomach was sick and nauseous. He finally chose other activities that were more fun with the reason to calm down and get excited. He often stays up late. The anxiety that he feels makes it difficult to manage work on tasks with the time he has.

This research was conducted in 3 phases: baseline, intervention, and post-intervention. In the baseline phase, Mawar makes an anxiety ladder containing conditions that usually make her anxious. Then, Mawar fills out a measurement tool to assess how well she can overcome her anxiety in the conditions on the anxiety ladder. The next phase is the provision of interventions. The intervention provided is a program with a CBT approach. The programs provided are based on important components of the Coping Cat program. The intervention consisted of 11 sessions. The first six sessions are psychoeducation sessions. In the psychoeducational sessions, Mawar was taught to recognize her anxiety and physiological responses consciously. After that, he was taught to practice relaxation techniques like deep breathing. Roses are taught to identify thoughts that trigger anxiety consciously, then evaluate these thoughts to adopt more adaptive thoughts. Evaluation of thoughts is assisted by triggering questions, for example, "What are the possibilities that could happen in this condition?", "Of all the possibilities, which has happened more often so far?" After evaluating thoughts that trigger anxiety, Mawar is trained to be able to solve conditions that make her anxious. These solutions include more realistic thoughts, things to be done, and environmental resources to help him deal with the condition. Furthermore, Mawar practiced respecting herself for every effort she had made to deal with her anxiety. Besides face-to-face sessions with researchers, Mawar was also tasked with practicing the steps independently at home.

In the next five sessions in the intervention phase, Mawar conducted an exposure session. In the exposure session, Mawar practiced what she learned in the psychoeducation session to deal with conditions on the anxiety ladder. Due to the Covid-19 pandemic, which prevented researchers and Mawar from meeting face to face, the exposure session was conducted using imaginal exposure. During the session, Mawar imagined facing a condition that triggers anxiety while directly practicing the steps she had learned. In the exposure session, Mawar assessed her level of anxiety when she was about to face a condition on the anxiety ladder (before taking steps to manage anxiety), after taking steps to manage anxiety, and after facing the condition. The next phase is the post-intervention phase. In this phase, Mawar again fills in the measuring instrument as in the baseline phase. Mawar assesses how she can overcome her anxiety when facing the conditions listed on the anxiety ladder. In addition, Mawar was asked to write down the changes she felt in herself before and after the intervention.

The Coping Questionnaire-Child was used to measure Mawar's perception of her ability to overcome anxiety when facing conditions on the anxiety ladder. The items in the CQ-C are "When you:…(a description of the conditions on the anxiety ladder), can you help yourself reduce the anxiety you feel?". Items were rated on a 7-point Likert scale (1=Not at all able, 4=Somewhat capable, 7=Very capable). The higher score indicates that Mawar can reduce her anxiety in that condition. The psychometric research results show that CQ-C is a reliable measurement tool (α=0.69) and valid through convergent and discriminant validity tests. The CQ-C scores obtained in the baseline and post-intervention phases will be compared to see the interventions' effectiveness. The Subjective Units of Distress/Discomfort Scale is used to help Mawar identify the level of anxiety she feels about a condition. Testing the validity of SUDS with concurrent validity techniques shows that SUDS is proven valid for measuring individual anxiety levels. In this study, researchers adapted the method of administering SUDS in the Coping Cat program, which is called Feeling Thermometer and has a score range of 0 – 8 (0=Not anxious; 8=Very anxious). The higher the score indicates, the higher the level of anxiety. SUDS was given to Mawar with visual aid (thermometer image) so that it was easier for the subject to assess her level of anxiety. The SUDS was filled in by Mawar when monitoring her anxiety during the exposure session.

Research results were evaluated by visually examining the data graphs in baseline and post-intervention conditions. The characteristic used in the visual inspection of the graph is the change in level, the change in CQ-C score between baseline and post-intervention conditions (Byiers et al., 2012). In addition, changes in anxiety levels measured through SUDS during the exposure session provided additional information regarding how the steps to deal with anxiety taught in the intervention phase succeeded in helping Mawar overcome her anxiety in dealing with conditions on the anxiety ladder. Furthermore, the qualitative data in the form of Mawar's answers regarding the changes she felt before and after the intervention became subjective information regarding the effectiveness of the intervention program.

3. RESULTS AND DISCUSSION

Result

Three conditions in the anxiety ladder are assessed through CQ-C: entering face-to-face learning, studying for written exams, and evaluating Al-Quran memorization. An overview of CQ-C score changes between the baseline and post-intervention phases can be seen in Figure 1.
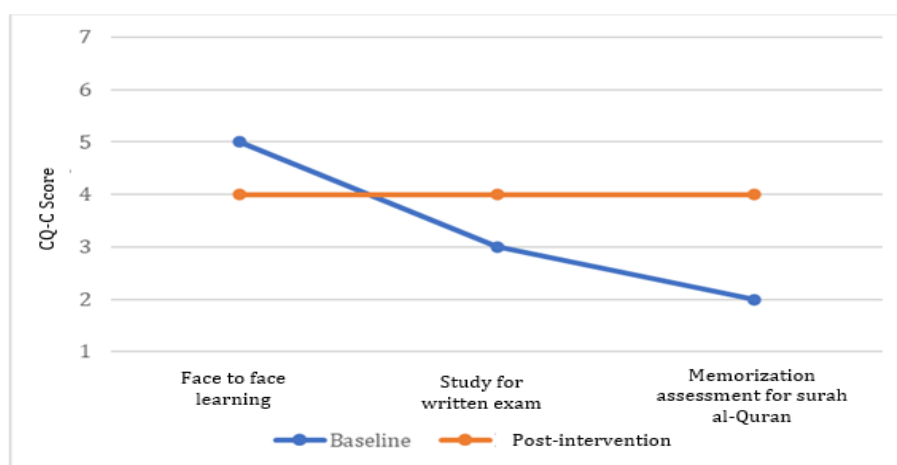

Figure 1. Changes in CQ-C Scores Between Baseline and Post-Intervention

In Figure 1, it can be seen that there is an increase in scores in the learning conditions for the written exam and the conditions for memorizing surah al-Quran. It shows that Mawar felt more able to overcome her anxiety in these two conditions after the intervention than before she received it. However, there is a decrease in scores in face-to-face learning conditions. It shows that Mawar felt more able to overcome her anxiety during face-to-face learning before the intervention compared to after the intervention. The next phase is the imaginal exposure session. Imaginal exposure is done for each condition in the anxiety ladder. Mawar assessed her level of anxiety when she was about to face a condition (before taking steps to manage anxiety), after taking steps to manage anxiety, and after she faced the condition. The display of changes in the SUDS score during the imaginal exposure session can be seen in Figure2.
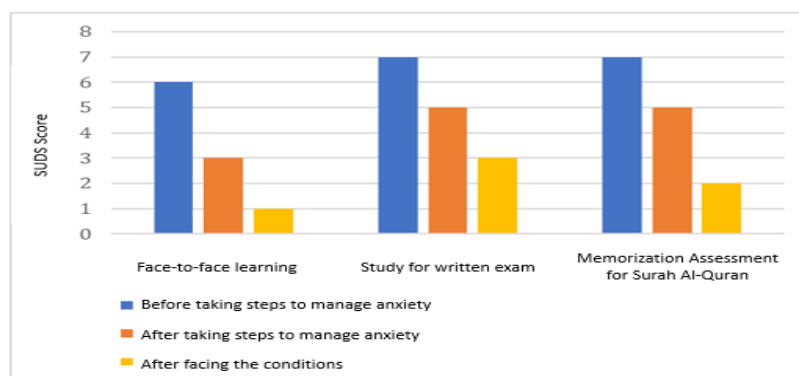

Figure 2. Changes in the SUDS Score During the Imaginal Exposure Session

Figure 3 shows a decrease in anxiety levels after Mawar carried out the steps to manage anxiety taught during the intervention phase and after she faced conditions that made her anxious. In taking steps to manage anxiety, Mawar managed to identify maladaptive thoughts that make her anxious. In addition, he can evaluate it and create new thoughts that are more adaptive in dealing with conditions that make him anxious. An overview of Mawar's maladaptive thoughts and new thoughts that are more adaptive in seeing conditions in the anxiety ladder can be seen in Table 1.

Table 1. Changes in Mind in Dealing with Conditions in the Anxiety Ladder

Situation	Maladaptive Mind	Adaptive Mind
Face-to-face learning	"I am afraid of being given a difficult task," "I am afraid that there are books left behind."	"I have materials for doing assignments," "Before leaving, I will check things so nothing will be left behind."
Study for written exams	"I am afraid that later the grades will be bad, and I cannot answer the questions. If the grades are bad, I am afraid the teacher will ask why the grades are bad."	"I can learn from existing material, from previous questions. I can ask a friend if anyone has a more complete record. If the questions are memorized, I can memorize the keywords. I can see if it is multiple choice from the other questions because they might be related. If later is wrong, then it is okay. It is okay if the teacher asks questions. Sometimes the teacher just makes small talk."
Assessment of memorization of Al-Quran surahs	"What if it does not work out?"	"To run smoothly, I can practice with Mom and friends and ask to be corrected if something goes wrong," "Later, if something goes wrong, the teacher usually corrects it. If it is not fluent, the teacher allows you to memorize again and do an assessment on another day."

Qualitatively, Mawar stated that she felt a change in herself. Mawar feels less anxious and more able to deal with her anxiety. Usually, Mawar delays doing assignments because she feels anxious. However, after the intervention session, he dared to start working on the assignment earlier.

Discussion

The results of this study indicate that individual intervention programs using the CBT approach can improve the ability of subjects with academic anxiety to manage their anxiety. The subject considered that he could better overcome his anxiety in conditions related to academic assignments. These results then emphasize that adolescent participants who are given the CBT program (compared to participants who do not receive the intervention) have lower anxiety symptoms (McLeod et al., 2022; Mukund & Jena, 2022; Sauran & Salewa, 2022). However, in this study, the increased perception of the ability to overcome anxiety did not occur in one condition, face-to-face learning. Subjects felt no better able to overcome their anxiety after the intervention. It might happen because of a sudden change, doing face-to-face learning after doing distance learning for a long time. The subjects in the study had had time to do face-to-face learning before filling in the CQ-C in the post-intervention phase. Adolescents who have a history of academic anxiety are a group that is prone to feeling high anxiety when returning to face-to-face school (Azyz et al., 2022; Triana & Meiyutariningsih, 2021). Therefore, the subjects in the study may have increased anxiety between the conditions before and after the intervention was given.

Other findings show that an intervention program with a given CBT approach can reduce the subject's level of anxiety when dealing with conditions that trigger anxiety. When a person is conscious and fully listens to his actions, he can reduce anxiety symptoms. It is because, in a state of full awareness, it is easier for a person to be aware of the condition of the body, manage emotions, and change perspectives on oneself (Lestari & Wulandari, 2021; Priyanti et al., 2021). In this study, subjects were asked to perform relaxation techniques to calm down, to be aware of their physiological responses, and what they were thinking that made them feel anxious. Thus, he is in good condition to evaluate the harmony between thought and reality. Finally, the subject can have more realistic thoughts to reduce anxiety and deal with conditions that usually trigger anxiety. It shows that stimulus, thought, body response, and emotion are interrelated and coordinate in directing human behavior (Madoni & Mardliyah, 2021; Pietra, 2019; Rahmawaty et al., 2021; Suhendro & Agustina, 2022). In this study, exposure was carried out through imaginal exposure, in which the subject imagines himself facing a condition that makes him anxious. In this study, it appears that Mawar feels anxiety just by imagining her condition. The imaginal exposure technique can make research subjects anxious (Hidayat et al., 2021; Prasetya et al.,

2022). This technique is effective for helping individuals who are learning to manage their anxiety because it triggers anxiety at a low level compared to dealing directly with real conditions (Merry, 2020; Rosa et al., 2021). Meanwhile, in vivo exposure can be done if the individual can manage his anxiety well with the imaginal exposure method (Aini, 2019; Arsih et al., 2022; Rimayati, 2019). It is recommended because in vivo exposure is feared to trigger excessive anxiety, while individuals cannot tolerate and manage it. The results obtained in this study are in line with the results of previous research, which also revealed that cognitive behavioral group counseling is effectively used to increase adolescent self-confidence (Harahap, 2023). Further research revealed that CBT counseling effectively increased student self-efficacy, especially in mathematics (Sopiyah et al., 2020). The results of other studies revealed an increase in the learning motivation of disabled children in scores and categories according to the ARCS motivation questionnaire after the administration of CBT interventions (Nugroho & Purwandari, 2019). Based on some of the results of these studies, it can be seen that CBT positively influences student self-confidence and can reduce student learning anxiety.

4. CONCLUSION

This study found that individual intervention programs using the CBT approach effectively increased the ability of subjects with academic anxiety to overcome their anxiety. Furthermore, CBT programs effectively reduce subjects' anxiety levels in dealing with conditions that trigger anxiety.

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