

Emotion Regulation in Junior High School Adolescents

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Abstract: This study aims to determine the effectiveness of emotion regulation as a strategy for adolescents in managing every emotion that is being experienced. The research subjects were six participants with the criteria of adolescents who have high emotional regulation scores, namely > 27 based on the mental emotional scale measurement published by the Indonesian Ministry of Health. The results of this study indicated that there was an increase in the emotional regulation scores experienced by the six participants. Data analysis was also carried out with the SPSS version 21 program. The data analysis method used to see the differences in the pretest - posttest in determining the outcome of the intervention was the non-parametric test using the Wilcoxon test. The analysis showed that the value of $Z = -2.675$ with a significance of $p = 0.007$ ($p < 0.05$). This indicates a significant difference between emotional regulation experienced by participants before and after following the group therapy process.

Keywords: emotion regulation, adolescents

Introduction

Mental health examination is an activity to detect mental emotional problems early so that interventions can be identified and promptly taken. If mental emotional problems are known too late, the intervention will be more difficult and this will affect the mental and personality development of students. A mental health check can be done once each year at the start of new student admission and each year thereafter using the Strengths and Difficulties Questionnaire (SDQ).

Health screening is carried out using the Strengths and Difficulties Questionnaire (SDQ) screening which is a tool developed by Robert Goodman in 1997, this screening tool has been translated into various languages in the world including Indonesian. SDQ is a short behavior screening instrument for children and adolescents (3-17 years old) that provides a brief description of behaviors that focus on their strengths and difficulties (Black, Pulford, Christie, & Wheeler, 2010). SDQ consists of 25 statements which can be grouped into five domains, namely, 1) emotional symptoms (10 statements), 2) conduct problems (9 statements), 3) hyperactivity (4 statements), and 4) relationship problems with peers (6 statement). Every statement was answered by a parent or teenager with never (score 0), sometimes true (score 1), and often (score 2). Short questionnaires are especially useful when used in large-scale surveys where items should be limited to ensure a response is sought (Ullebo, Posserud, Heiervang, Gillberg, & Obel, 2011).

Participants and Method

Group members are individuals in adolescent development. According to Santrock (2003) adolescence is a transitional developmental period between childhood and adulthood which includes biological, cognitive, and social emotional changes that begin at around the age of 10 to 13 years and end between the ages of 18 and 22 years.

Measurements and Procedures

The scale used as a pretest and posttest tool to measure emotional regulation uses the Emotional Mental Scale published by the Indonesian Ministry of Health. Categorization of the emotional regulation score based on the score obtained by the subject with a total score of 13 <(Low) means that participants do not get special assistance <27 (moderate) participants only conduct evaluation and counseling to counseling teachers every 3 months. But if the score obtained is > 27 (High), then it must be referred to a health worker, psychologist or psychiatrist for more extensive identification and further treatment. Data analysis was also carried out with the SPSS version 21 program. The data analysis method used to see the differences in the pretest - posttest in determining the outcome of the intervention was the non-parametric test using the Wilcoxon test.

Results

Overall, screening facilitates therapy in forming groups of participants who experience low emotional regulation. Participants' willingness to be involved in group therapy is a supporting factor, so that the group

therapy process consisting of four sessions starting with Focus Group Discussion, psychoeducation, relaxation and evaluation can be carried out.

In the implementation, there was an enthusiastic attitude from the participants to be involved in a series of group therapy processes. All participants are always present at every meeting session up to the evaluation process, making the group therapy process run smoothly and organized.

The well-established social interaction relationship between the participants makes the participants feel comfortable, so that at each session the participants become active and courageous to express their opinions and ask questions. In fact, each participant also provides mutual support to other participants to provide solutions and input based on the experiences they have experienced. Positive support between participants makes participants not feel alone because they have friends who can accept what they are.

The delivery of instructions given by the therapist in providing relaxation also makes it easier for participants to follow the relaxation. The results obtained from the implementation of relaxation are able to make participants get a comfortable body and have enthusiasm in carrying out their duties as students.

The process that is passed in this group therapy also has obstacles, especially those related to place. Next to the teacher's room, the voice of the teacher's chat was heard, so that it made the participants feel a little annoyed, even though the participants still followed suit. In addition, another obstacle was that the participants who did relaxation were not every day, so the results obtained were not the same as participants who did relaxation every day.

Based on the results of the pretest and posttest scores, it can be seen that there was an increase in the emotional regulation scores experienced by the six participants. The pretest results showed that of the nine participants who were given the pretest scale had a pretest score above 27 which indicates that they have problematic emotional regulation. After being given the intervention, all participants experienced a decrease in their score on the posttest.

Data analysis was also carried out with the SPSS version 21 program. The data analysis method used to see the differences in the pretest - posttest in determining the outcome of the intervention was the non-parametric test using the Wilcoxon test. The analysis showed that the value of $Z = -2.675$ with a significance of $p = 0.007$ ($p < 0.05$). This indicates that there is a significant difference between the emotional regulation experienced by participants before and after following the group therapy process.

Test Statistics^a

	Posttest - Pretest
Z	-2,675 ^b
Asymp. Sig. (2-tailed)	,007

a. Wilcoxon Signed Ranks Test

b. Based on positive ranks.

Independent relaxation carried out by participants can reduce anxiety and tension to become comfortable and relaxed. Relaxation is not only carried out in a state of anxiety, but can also help participants when faced with situations of daily life.

Group therapy can increase participants' understanding of anxiety in dealing with school assignments. Participants also became calmer and more optimistic when they had to face many school assignments and did not want to think excessively about school assignments.

Discuss

Schools have an important role or responsibility in helping students achieve their developmental tasks. In this regard, schools should strive to create a conducive atmosphere to facilitate students, especially adolescents, to achieve their development. Adolescent development tasks involve aspects of maturity in social interactions, emotional maturity, maturity in achieving a philosophy of life, and maturity in religiosity (Yusuf, 2002).

The training participants are young people who do not get support to achieve their developmental tasks. The teacher always sees group participants as naughty children and doesn't get the teacher's support to get better. This makes group participants feel angry and disappointed, thus affecting motivation in learning and prefer not to attend class during lessons.

According to Hurlock (2003), adolescence is considered a stressful period, a time in which emotional tension increases as a result of physical and psychological changes. Therefore, adolescents are expected to have emotional competence to minimize the emergence of problems related to adolescent emotions, one of which is by implementing emotional regulation strategies.

According to Gross (2007) emotional regulation can be represented by five groups of processes, namely situation selection, situation modification, attentional deployment, cognitive change, and response modulation, with the following explanation:

1) Situation Selection

This type of emotional regulation includes actions that determine how a person will get the expected situation, which can lead to pleasant or unpleasant emotions, in other words, this strategy is the act of approaching or avoiding a person or situation based on the emotional impact that may arise.

2) Situation Modification

Situation modification is a direct attempt to modify the situation so that the emotional effects are distracted. For example, this modification can be done by the presence of other individuals such as friends, parents and the actions or interventions of that individual. The group participants made situation modification if there was a problem at school. They provide mutual support when one of the group participants is having problems with their teacher or friend.

3) Attentional Deployment

Attentional deployment is a way of how individuals direct their attention in a situation to manage their emotions. Attentional deployment can be considered an internal version of the situation selection. The two main attention strategies in this type are attentional deployment distraction and concentration. Distraction focuses attention on different aspects of a situation, or moves attention away from a situation at the same time, for example, when a baby looks away from a stimulating stimulus to one that is less emotional. Distraction can also include a change in internal focus, for example when an individual engages pleasant thoughts or memories while dealing with an unpleasant emotional state, or when an actor attempts to recall an incident involving an emotion in order to act out that emotion convincingly in his acting. There were group participants who did attentional deployment distraction by reading comics when there was something that made them angry.

Attentional deployment of concentration draws attention to the emotional features of a situation. When attention is repeatedly directed to our feelings and their consequences it is known as recollection. Gross (2007) states that if attention is focused on threats that may come in the future, the effect is to increase mild anxiety but decrease the power of negative emotional responses. There are also group participants who do attentional deployment of concentration by not wanting to fight with their friends because this can cause new problems.

Attentional deployment can take many forms, such as physical distractions such as covering the eyes or ears, redirecting internal attention for example through distraction or concentration, and responding to distractions that have previously been done by others. When children are more aware of the internal determinants of emotional experience, their confidence in attentional deployment to regulate emotions increases. Attentional deployment is obtained from childhood. While in elementary school, children are very aware that the intensity of their emotions can be reduced, when they do not think too much about situations that trigger emotions.

4) Cognitive Change

Cognitive change is a change in the way a person assesses a situation when he is in a problematic situation to change the significance of his emotions, either by changing the way he thinks about the situation or regarding the ability to manage his demands.

5) Response Modulation

Unlike the previous emotional regulation process, response modulation occurs at the end of the emotional arousal process in the emotional system, namely after the response tendency has started or the emotion has occurred. Response modulation efforts are carried out on physiological aspects, for example drugs used to treat physiological responses such as muscle tension (anxiolytics) or sympathetic nerve overactivity (beta blockers). Exercise and relaxation can also be used to reduce the physiological and experiential aspects of negative emotions. Alcohol, cigarettes, drugs, and even food can also be used to modify emotional experiences.

The approach used by giving intervention in the therapy process is behavioristic. The behavior technique used is relaxation techniques. Relaxation is a technique that aims to release tension and restore balance to both mind and body and can create a sense of comfort in participants. This technique is based on the belief that the body responds to anxiety stimulated by thoughts or other conditions of pain and illness. Basically, relaxation techniques are included in a behavioral therapy approach, with techniques developed that focus on repetitive components, for example words, sounds, prayer phrases, body sensation or muscle activity (Kazdin, 2001).

Respiratory relaxation used is the breathing relaxation method, muscle relaxation and visual relaxation. Kusuma & Erwin (2010) in the basic hypnosis and hypnobirthing training workbook said that a series of relaxation techniques ranging from muscle relaxation, breathing relaxation, mind relaxation and planting positive sentences carried out regularly and concentration will cause the body to relax so that the body responds to release. endorphins which make the mother relax and reduce pain, especially when the brain reaches alpha waves or at rest. In this condition, when the body releases the hormones serotonin and endorphins, humans are relaxed without tension and anxiety.

Group therapy is a type of psychological intervention performed by therapists with a group of clients. Group therapy is more intensive in providing psychological help. This therapy is effective after cohesiveness in the group is formed and each member feels comfortable with each other, which allows each member of the group to be able to talk and share their problems freely. The existence of psychological safety for the group will allow a person to more easily express his feelings compared to expressing outside the group. Group members will tell other group members what form of support they need and their hopes (Djiwandono, 2005).

Group participants are able to follow any instructions or directions given during the intervention. The problems faced by one of the participants made other participants respond the same so that there were similar problems. Participants who had the same problem felt that not only did they experience the problem but other participants also experienced it. In addition, there was a process of sharing opinions and helping other participants who were having problems. This process made the participants feel helped and went deeper into the problem

Anger can be overcome with support from peers. The results of the study by McDonald et al. (2010) showed that social support from peers in adolescents can help them overcome their anger. Interventions to relieve anger will be more effective if you get social support from both parents.

The approach used by giving intervention in the therapy process is behavioristic with methods of breathing relaxation, muscle relaxation and visual relaxation. Kusuma & Erwin (2010) in the basic hypnosis and hypnobirthing training workbook said that a series of relaxation techniques ranging from muscle relaxation, breathing relaxation, mind relaxation and planting positive sentences carried out regularly and concentration will cause the body to relax so that the body responds to release. endorphins which make the mother relax and reduce pain, especially when the brain reaches alpha waves or at rest. In this condition, when the body releases the hormones serotonin and endorphins, humans are relaxed without tension and anxiety.

Based on the therapy provided by the therapist through relaxation techniques, the subject gets several benefits from the process that has been passed. Some of the benefits felt by the subject, namely:

- a. The subject is difficult to concentrate on because it is in a crowded house because there are many small children. When doing relaxation breathing begins to be comfortable and relaxed, the subject feels sleepy and ready to sleep.
- b. Breathing relaxation and muscle relaxation are quite helpful in coping with tense situations. Breathing relaxation is best done if we really concentrate in order to get a more comfortable and relaxed body.
- c. Breathing relaxation is often done to get a comfortable, relaxed body and a clear and vibrant mind. Breathing relaxation can help reduce anxiety, the body becomes calmer and more relaxed.

Conclusion

The data analysis method used to see the differences in the pretest - posttest in determining the outcome of the intervention was the non-parametric test using the Wilcoxon test. The analysis showed that the value of $Z = -2.675$ with a significance of $p = 0.007$ ($p < 0.05$). This indicates a significant difference between emotional regulation experienced by participants before and after following the group therapy process.

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