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Original Research

The Effect of a Combination of Group Therapy and Support on the Self-Efficacy and Deviant Behavior of Adolescents

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ABSTRACT

Introduction: The purpose of this study was to investigate the effect of combination therapy and supportive group therapy on the self-efficacy and deviant behavior among adolescents.

Methods: The design of this study was quasi-experimental (pre-post test with a control group design). The population was based on the inclusion criteria of young men aged 15-19 years old in high school in Surabaya and the exclusion criteria was adolescents with physical disabilities, mental disorders and illness. A sample of 62 respondents (31/31) was collected using purposive sampling. The independent variable was a combination of group therapy and supportive therapy. The dependent variable was self-efficacy and deviant behavior. The intervention was given 4 times over 4 weeks and the control group was given a standard intervention. The data was collected using MANOVA.

Results: In the intervention and control groups, there was a significant difference between self efficacy and deviant behavior in the adolescents before and after the intervention with a value of 0,000 (p <0.05). The increase in self-efficacy in the intervention group can be seen from the magnitude of the sub-variables. The deviant behavior variable decreased.

Conclusion: The increase in the self-efficacy intervention group was due to the presence of facilities that helped the students to find information and explore their potential. The decrease in the deviant behavior variables is due to their increased knowledge and the positive support from their peer groups.

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INTRODUCTION

Deviant behavior in adolescents is still a major problem in society (Kementerian Kesehatan RI, 2013) in the large population of adolescents. Around the world, the adolescents total around 1.2 billion or 18% of the world's population (WHO, 2017). In Indonesia, 25% were aged 10-24 years old and in East Java, 15.64% of the total population were adolescents (Badan Pusat Statistik, 2014; DepKes RI, 2012). It also means that there is an increase in the deviant behavior of adolescents. This deviant behavior includes role confusion, free sex, game addiction, crime, mood disorders, bullying and the use of addictive substances (WHO, 2018). This can occur because of the low adolescent confidence in their selfability (low self-efficacy) when it comes to completing the tasks and challenges that exist. This means that the individual youths experience apathy and pessimism (Cepukiene, Pakrosnis, & Ulinskaite, 2018). The adolescents are unable to complete the developmental tasks in their appropriate phase. The impact that results is failure in the next phase of development (Alligood, 2017). Various attempts were made to stimulate the stages of development of adolescents in order to increase their self-efficacy and to prevent deviant behavior. Up until now, there has not been found to be an intervention that explores the character of self-assessing positive aspects, support and the obstacles owned by individuals both internally and externally.

Group therapy is a therapy conducted for individuals in a group that provides mutual support from the fellow group members during the period of development. The period of recovery strengthens the temporary defenses and integrates with the impaired capacity (Keliat & Akemat, 2014) by stimulating the 10 aspects of development in adolescents, namely biology, psychosexual, cognitive, language, moral, spiritual, psychosocial, emotional, talent and creativity (FIK UI, 2015). Group therapy provides effective results when it comes to increasing selfefficacy (Bahari, Keliat, & Gayatri, 2010). There is no previous research that shows that group therapy is effective at preventing deviant behavior so this needs to be combined with other therapies, namely supportive therapy. This is because supportive therapy emphasizes negative coping responses(Stuart, 2013) Adolescents with negative coping will be easily affected by deviant behavior (Stuart & Sundeen, 2013).

The implementation of supportive combination group therapy in the form of support and educative learning in adolescents consisted of several information-giving sessions with a health promotion model approach (Pender, Murdaugh, & Parsons, 2010). Both of these combination therapies stimulate the developmental stages found in adolescents. They also explore the positive aspects of adolescents and the barriers often experienced by adolescents. They then provide solutions and support from their fellow group members and form a commitment (Alligood, 2017). The purpose of this study was to analyze the effect of supportive combination group therapy on self-efficacy and deviant behavior.

MATERIALS AND METHODS

Research Design

This study was quantitative research with a quasiexperimental research design (pre-posttest with a control group design) (Nursalam, 2017). This research was conducted between November 2019 and January 2020 in Surabaya High School.

Participant Recruitment

This study involved 62 respondents divided into 2 intervention groups and a control group (31/31) obtained through purposive sampling. The inclusion criteria in this study were 1) adolescent boys willing to become respondents, 2) adolescents aged 14-19 years, 3) adolescents undergoing high school education (high school). Meanwhile, the exclusion criteria in this study were 1) adolescents with physical disabilities, 2) adolescents with a mental disorder and 3) adolescents who were sick.

Data Collection

The independent variable was group therapy with peer support. The dependent variables were selfefficacy and deviant behavior in adolescents. The intervention group received group therapy as a part of supportive combination therapy while the control group received the standard activities that exist in the school. Group supportive combination therapy was given over 4 meetings at a duration of 60-90 minutes for each meeting. This was done once a week for 4 weeks.

The data was obtained through a self-efficacy questionnaire and deviant behavior modification questionnaire. Ten questions were used to assess adolescent self-efficacy consisting of the subvariables of magnitude, generality and strength. The categories were low self-efficacy = 10-19, moderate self-efficacy = 20-29 and high self-efficacy = 30-40. For the deviant behavior questionnaire, there were 20 questions for each sub-variable of deviant behavior: physical victims, material casualties, social deviant behavior and behavior against status. The categories were mild deviant behavior = 20-49, moderate deviant behavior = 50-79 and severe deviant behavior 80-100. This instrument was tested for validity on 7 adolescents in a Surabaya High School. Each item in the question had a validity of (r> 0.754), so the instrument or question items correlate significantly to the total score (declared to be valid). The reliability test used Cronbach's alpha with a selfefficacy value 0.913> α and a deviant behavior value $0.947 > \alpha$. This suggests that all items are reliable and that all of the tests consistently have strong reliability.

The demographic data includes gender, age, specialization, living together and the activities that the adolescents participate in. Descriptive analysis was used to examine the respondent's characteristics. The analysis of influence was done using the Wilcoxon Sign Rank test, Paired t-test and the Mann-Whitney test. The analysis of the relationship of the two variables related to group therapy in combination with support was analyzed using MANOVA. This research protocol has been declared to have passed an ethical test conducted by the Health Research Ethics Commission of the Faculty of Nursing, Airlangga University, with ethical certificate number 1812-KEPK issued on 31st October 2019.

RESULTS

The descriptive statistical analysis of the respondent's characteristics has been shown in Table 1. This study involved 62 male adolescents from a Surabaya high school divided into the intervention and control groups. The descriptive statistical analysis of the self-efficacy and deviant behavior among adolescents has been shown in Table 2. Table 3 indicates the analysis of the relationship of the two variables with the group therapy and combination supportive for each group.

Table 1 shows that in the intervention and control groups, 62 people (100%) were male and the highest

Table 1. Characteristics of the respondents (n=62)

				%		
Characteristics	Inter		control		Total	
	n	%	n	%		
Age						
11-14	1	3.2	2	6.5	3	4.8
15-17	29	93.5	28	83.9	57	88.7
18-20	1	1.6	3	9.7	4	6.5
Gender						
Male	31	100	31	100	62	100
Female	0	0	0	0	0	0
Adolecent activity						
Joined Adolecent Activities	20	64.5	15	48.4	35	56.5
Never Joined Adolecent						
Activities	11	35.5	16	51,6	27	43.5
Caregiver						
Parents	18	58.1	21	67.7	39	62.9
Sibling	10	32.3	8	25.8	18	29
Self	3	9.7	2	6.5	5	8.1
Specialization						
IPA	19	61.3	18	58.1	37	59.7
IPS	12	38.7	13	41.9	25	40.3

Table 2. Pre and posttest results in the intervention and control groups

Variable	Group	Pre-Test (Mean ±SD)	Post-Test (Mean ±SD)	Delta	P value
Self-Efficacy	Intervention	21.23 ± 3.106	31.71±4.368	10.48	0,000
	Control	22.81 ± 5.069	22.97 ±4.950	0,1	0.665
P-value Mann Whitn	ney	0,298	0,000		
Deviant Behavior	Intervention	48.94 ± 8.095	38.61 ±10.016	-10,33	0.000
	Control	54.10 ± 9.981	54.29 ±9.459	0,19	0,314
P value Mann-Whit	nev	0.047	0,000		

Table 3.	Results of a	multivariate a	analysis of self	f-efficacy and	deviant behavior
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Variable	Group	SD	Box	Levine	MANOVA	Partial	Eta	Information
			Test	Test		Squared		
Self-Efficacy	Intervention	4,368		0,378	0,000	0,475		Significant
	Control	4,950	0.075					Significant
Deviant	Intervention	10,016	0,875	0,997	0,000	0,401		Significant
Behavior	Control	9,459						Significant

age range distribution was for the 15-17 year old range, totaling 57 people (88.7%). Regarding specialization, the science class had the highest number of students at 37 people (59.7%). On average, the teenagers lived together with their parents (62.9%), totaling 37 teenagers. However, not all had a complete set of parents. There were orphans and teenagers from broken homes. The number of teenagers who participated in the activity totaled 35 people (56.5%), and most of them were attending a sports club.

Table 2 shows that the intervention group obtained a mean value for the self-efficacy pre-test of 21.23 \pm 3.106.After the group therapy support and combination therapy was conducted for 4 weeks, the mean value of the self-efficacy post-test was 31.71 \pm 4.368 in the intervention group. The delta value of 10.48 was obtained. The Wilcoxon test results in the intervention group showed that there were significant differences in the self-efficacy before and after the group therapy supportive combination with a value of 0,000 (p <0.05). Table 5.7 shows that after testing the data analysis using the Mann Whitney test,

a p value of 0,000 was obtained. This means there was a difference in the post-self efficacy values between the two treatment groups and the control group.

The intervention group obtained the result Indicating that the mean value of the pre-test for deviant behavior was 48.94 ± 8,095. After conducting the group therapy supportive combination for 4 weeks, the mean value of the self-efficacy post-test was 38.61 ± 10.016 in the intervention group. This obtained a delta value of -10.33. The paired t-test results in the intervention group showed that there were significant differences between the deviant behavior before and after the group therapy in supportive combination with a value of 0,000 (p <0.05). Table 5.8 shows that after testing the data analysis using the Mann-Whitney test, a p value of 0.000 was obtained. This means that there were differences in the post-deviant behavior values between the 2 treatment groups and the control group.

Table 3 shows that testing the variancecovariance similarity individually for each variable shows the value of the box test. The result was significant. The box test value was 0.875. This means that the variance-covariance of all of the variables was the same for each group. Assuming that the similarity of the variance-covariance matrix has been fulfilled, the MANOVA analysis process can proceed. The hypothesis test shows the significance figures for the intervention group and the control group as tested by the Pillai Trace, Wilks Lamda, Hotteling T and Roys Lagest Root procedures. The result was <0.05. The P-value has a significant value. This means that the hypothesis test is accepted, that is, there is a simultaneously effect from the group therapy in a supportive combination on the self-efficacy and deviant behavior of adolescents.

The results of the statistical tests found that all of the variables of self-efficacy and deviant behavior in the intervention and control groups had a significant influence on the group therapy supportive combination (p < 0.05).

DISCUSSION

The administration of a combination of group therapy and peer support increases self-efficacy and reduces the deviant behavior of adolescents. The assessment related to the increase in adolescent selfefficacy can be seen from the sub variable magnitude (individuals can perform different tasks by sharing the level of difficulty), generality (the mastery of individuals in the occupied field) and strength (trying to achieve their goals) (Cepukiene et al., 2018). The increased self-efficacy of adolescents is caused by a combination of the supportive group therapy and shared learning methods, discussions, educational games and support groups. These collectively influence a person's behavioral skills when taking action for themselves (Chang, Yuan, & Chen, 2018; Yendork & Somhlaba, 2015). These results are in line with the research which states that the combination of therapeutic and supportive group therapy given once a week for 4 weeks affects the adolescent's selfconfidence when presenting ideas and completing challenges that can help the teens have confidence in their potential (Lavik, Veseth, Frøysa, Binder, & Moltu, 2018).

The deviant behavior carried out by the respondents is in line with the definition given by the Indonesian Ministry of Health. This includes role confusion, depression, free sex, game addiction, crime, mood disorders, intimidation and the use of addictive substances (kementrian kesehatan, 2014). The respondents' changes can be seen in the subvariables off deviant behavior that cause physical or psychological harm to others. This is in addition to material casualties, socially deviant behavior and challenges (Hockenberry status & Wilson, 2018), (Prasetya, 2018). The decrease in the deviant behavior of adolescents is due to their active participation in group therapy activities combined with supportive group therapy that includes biological, psychosexual, moral, spiritual, cognitive, language, psychosocial, emotional, emotional and talent stimulation. It explores the aspects of internal support and the obstacles that are external to the adolescents (Bluth & Eisenlohr-Moul, 2017). Forming a supportive and positive environment can have a significant influence when it comes to reducing the deviant behavior of adolescents.

For the adolescents who undergo standard school activities, they do not experience changes in their selfefficacy and deviant behavior. The results of this study prove that a supportive combination of group therapy affects self-efficacy and deviant behavior. Both of these combination therapies stimulate the stages of adolescent development and explore the positive aspects of human fibrous adolescents that are safe both internally and externally [19], [25]. This can improve their self-efficacy and lessen the deviant behavior of adolescents.

CONCLUSION

The conclusion of this study is that the combination of group therapy and support is an effective, easy and fun educational therapy that is proven to improve self-efficacy and prevent deviant behavior in adolescents. Contributing to the improvement of health education for adolescents, it is hoped that the adolescents can read the guidelines and learn to stimulate their personal development.

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