The Improvement of Adolescence’s Intelligence Through Adolescent Therapeutic Group Therapy In Depok City

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Abstract: Adolescent’s population continuously rises every year. The success of adolescent’s life is affected by emotional intelligence that can be developed by giving training. The goal of this study is to identify the influence of adolescent therapeutic group therapy to the adolescent’s emotional intelligence in Depok city. Quasy experiment pre-post test with control group was used. The subjects of the research were the middle adolescents aged 15-18 years consisted of 85 respondents (mean of age = 15.75 year, SD = 0.72, 51.58% female) by consecutive sampling. They were divided into 40 people (intervention) and 45 people (control). The therapeutic group therapy was given to the intervention group. The purpose of the therapy was to explore and to analyze the group process, emotional and environment conflicts in constructing self identity and expressing emotion. The data was analyzed by using independent test to know the differences of emotional intelligent between the two groups. The result of the research showed the differences of emotional intelligent between interventions group and control group. The emotional intelligence in intervention group increased significantly after therapy. Therapeutic group therapy stimulates the aspects of the adolescent’s development holistically. It is recommended to implement the therapeutic group therapy to adolescents in improving their emotional intelligent.

I. Introduction

Adolescents are individuals aged between 12-18 years; the transition from childhood to adulthood. The number of adolescents (18% of the total population) and 80% spread in developing countries. The negative behaviors experienced by the adolescents are pessimistic behavior, excessive anxiety and negative self-assessment of others and emotional problems (Blanchard LT, Gurka MJ & JA Blackman, 2006). Other problems experienced by adolescents in Indonesia include the brawl, delinquency, eating disorders, smoking, drugs and alcohol abuse, deviant sexual behavior, and severe emotional problems (MOH, 2013; IDAI, 2013). Adolescents involved in violent and criminal behaviors are also not small in numbers. One example, in early 2015, a motorcycle deprivation offender who acted so sadistically that a victim fell into fatalities in Depok area was a high school student in Depok city (Vivanews, 2015).

Adolescents experience a strong emotional shock caused by stress and tension in achieving their development tasks. Yusuf (2009) reveals that adolescence is the peak of emotionality period; the emotional development in adolescents shows the characters of very strong sensitivity and reactivity against a variety of life events or social situations.

The behaviors of adolescents require special attention as adolescences are very important assets for the survival of a nation. According to Goleman (2004), the success of one's life is affected by the IQ by 20% the remaining approximately 80% is determined by EQ (Emotional Quotion / emotional intelligence). Salovey and Mayer (1999 in the Goleman, 2004) defined that emotional intelligence as the ability to monitor and control their own feelings and others, and use those feelings to guide their thoughts and actions.

Emotional intelligence has five aspects, including the ability to recognize self-emotions, control the emotions, self - motivation, empathy, and building relationships with others. Adolescents who have high emotional intelligence are able to control their emotion turmoil, have good relationships with others, manage stress, and have good mental health (Hartini, 2002). On the contrary, a low value of emotional intelligence correlates with negative behaviors (Petrides&Sangareau, 2006). Currently the number of adolescents who experienced the decrease in emotional intelligence has reached 50% from the previous years. To reach maturity and decrease the negative behaviors, emotional intelligent is so important and it needs to be developed.
Emotional intelligence develops from birth, grows rapidly in line with the development of the human brain, which is shaped by experiences (Ulutas and Omeroglu, 2007). The development of emotional intelligence is influenced by several factors as follows: family, peers, school environment, gender, electronic and printed media, as well as special education (Shapiro, 2003; Strongman, 2003; Ulutas and Omerglu, 2007). The efforts to improve the development of emotional intelligence in adolescents are various in ways. The development is in the form of training in improving the ability of five aspects of emotional intelligence that involves adolescents and the elderly, the arts and sports therapy and group counseling.

Group training is considered quite effective to increase emotional intelligence as it provides information about the introduction of the types of emotions, how adolescents can manage the negative emotions and knowledge about the implications of emotions for themselves and others. Dinarwiyata, Mustikasari and Setiawan (2013) provide therapeutic group therapy in adolescents to improve the ability to control anger emotions; the results obtained is that there is a decrease in anger emotions in adolescents after the therapy. Therapeutic group therapy is a therapeutic intervention that explores and analyzes the group process, emotional conflict and the environment in building self-identity and expressing emotions using the approaches of adolescent psychosocial development that holistically covering the biological/physical, psychological and sexual aspects, cognitive and language aspects, emotional and personality aspects, moral and spiritual aspects, as well as talent and creativity.

II. Material And Methods

The aim of the research is to prove that emotional intelligence in adolescents Therapeutic Group Therapy (TKT) can be increased.

**Study Design:** uses quasi experiment method with pre-posttest with control group approach

**Study Location:** this was a senior high school at Depok, West Java, There are SMAN 4 and 7 Depok

**Study Duration:** November 2014 to May 2015

**Sample size:** 85 respondents

**Sample size calculation:** 45 adolescents served as the intervention group and the other 40 were used as a control group

**Subjects & selection method:** Eighty-five adolescence students at SMAN 4 and 7 Depok (age 15-18) became respondents who met the following criteria: had never participated in group therapy, no physical or mental disabilities and having low level and moderate emotional intelligences according to the results of screening; samples taken with consecutive sampling. The intervention group received therapeutic group therapy for 5 days (seven sessions), while the control group was given no therapy during the intervention.

**Statistical analysis**

After the completion of therapy, then post-test was performed with questionnaires similar to the pre-test. The collected data were analyzed with SPSS 17.0 descriptive data presentation for common characteristics. Homogeneity test used t-test and chi-square. To determine the pre-post test differences in both groups, the data were tested by t-test.

III. Result

45 adolescents served as the intervention group and the other 45 were used as a control group. Three respondents in the intervention group did not join until the completion of group therapy and two respondents resigned. As the result, there were 85 respondents in the average age of 15.75 years who participated in the study (41 males and 44 females). Most of the students were sitting in class XI (45) and was the eldest son (30) and the youngest child (27). Most adolescents got authoritative parenting of families (54 people). From the entire characteristics and adolescent family parenting, both groups had a significant homogeneity (Table 1).

<table>
<thead>
<tr>
<th>Table. 1 Adolescent Characteristics</th>
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<tbody>
<tr>
<td>Age</td>
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<td>Age</td>
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<tr>
<td>15.90 ± 74</td>
</tr>
<tr>
<td>Gender</td>
</tr>
<tr>
<td>Female</td>
</tr>
<tr>
<td>Education</td>
</tr>
<tr>
<td>Grade XI</td>
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<td>Birth Order</td>
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</tbody>
</table>
After the application of therapeutic group therapy (TKT), adolescent’s emotional intelligence in the intervention group increased significantly. Intervention and control groups had no significant differences in emotional intelligence after the application of therapeutic group therapy (TKT) adolescents (t = 7.97, p <0.05) (Table 2).

### Table 2: Adolescent Emotional Intelligence

<table>
<thead>
<tr>
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<th>Intervention (n = 45)</th>
<th>Control (n = 40)</th>
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<tbody>
<tr>
<td>Adolescent emotional intelligence Pre</td>
<td>69.28±4.69</td>
<td>68.73±4.28</td>
<td>.56*</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>7.97*</td>
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<td></td>
<td></td>
<td></td>
<td>6.08*</td>
</tr>
<tr>
<td>Post difference</td>
<td>78.93±6.49</td>
<td>69.58±4.19</td>
<td></td>
</tr>
<tr>
<td></td>
<td>9.65±9.17</td>
<td>0.87±2.98</td>
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*p< .05

### IV. Discussion

Adolescent emotional intelligence after therapeutic group therapy experienced a significant increase, while the group that did not receive therapy also increased, but not significantly. It means that therapeutic group therapy influenced significantly to the increasing of adolescent emotional intelligence. Research on the effectivity of therapeutic group therapy application is also done by Dinarwiyata and friends (2013), which was successful to increase anger emotion control. From these studies, it can be seen that the therapeutic group therapy has an effect to improve emotional intelligence on the aspects of emotional self-control.

Different from the study conducted by researchers, all aspects of emotional intelligence in adolescents as aspects of self-awareness, emotional self-control and others, self-motivation, empathy and the ability to build good relationships with others became the target to get therapeutic group therapy. Group therapy involves all members of the group to participate fully with the facilities of a therapist. The previous research carried out by the Maritime et al (2010) also mentions that the ability of adolescent development and self-identity increased after following the entire sessions in the therapeutic group therapy. The building of self-identity is causing a variety of emotional problems in adolescents so indirectly the emotional intelligence development was increased. The results of this study demonstrate that the therapeutic group therapy has an important role in adolescent development holistically.

A group therapy was formed from the members that have the same characteristics, such as age, encountered problems and have the same purpose among members. The membership of adolescent therapeutic group therapy generally consists of adolescents aged 13-15 years who have relationship problems with parents and adolescents aged 15-18 years who face the problem of identity, relationships with the opposite sex, sex, use of drugs, alcohol and plans to get a job (Stuart, 2013). Adolescents feel the formed group has similarity emotionally. Adolescents can learn or accept the role model of the group members, mutual help and support each other in group therapy (Cherry, 2013). Members of the group receive a positive relationship among members who assist the process of self-identity development, helping the interaction between peers who emphasize the importance of relationships, group norms can give a very strong influence on socialization, members can experience the cooperation with others, and the group provides an opportunity to listen without being asked (Chaffin et al, 1996 in Schmied, and Tully, 2009). Group therapy in adolescents considered to be very effective to solve social problems, phobia in female adolescent, lower levels of depression and internalizing symptoms (Kim & Kim, 2014; Hayward et al, 2000). However, in contrast to the results of research conducted by Reynolds, S., et al (2012), group therapy has a medium effect in reducing anxiety in adolescents, while getting therapeutic group therapy individually has enormous effects to reduce anxiety.

A group therapy is often given independent exercises and exercises between sessions, which consist of building exercises (social, coping, or communication skills), emotional regulation and dialect /language style behavior therapy, therapy for mental health disorders which are specific such as anxiety, mood disorders, and eating disorders (Cherry, 2013). Likewise, in a study conducted by the researchers, adolescents are given the opportunity to conduct an independent exercise together with the group in accordance with the given topic twice with the supervision from the school (facilitator).

Exercises or stimulations provided in the therapeutic group therapy are aimed to the ability of biological / psychosexual, cognitive and language, moral and spiritual, emotional and psychological, as well as
the talent and creativity (Stuart, 2013). As in previous studies conducted Dinarwiyata and friends (2013), group therapy consisted of 7 sessions which were administered for 5 meetings, in contrast to the study of Bahari and friends (2010) 7 therapy sessions were administered over 12 meetings with the details: session 1 and 7 administered once and 2-6 were each given twice. This therapy is given once during adolescence. Timing of other forms of group therapy such as counseling groups one week (Nurnaningsih, 2011) Group therapy is given for more than 2 weeks (Wood, 2009), as many as 10 group therapy sessions with the implementation length: 60-70 minutes each session (Lee, 2015). Group therapy was more focused on members who were in the community (McCann, Roux & Phil, 2006). Group therapy was more efficient than in the form of individual therapy in the terms of cost and time effectiveness, the provision which only requires approximately 90 minutes of each meeting (Yalom, 2005).

Stimulation in development aspects can strengthen the development of emotional intelligence in adolescents. This is caused by the interrelationships of all development aspects. The emotional aspects of adolescents has increased attention on other friends, are able to control themselves, and do not demand forcefully to fulfill the desire, the attention to other friends while arguing, provides an opportunity to express feelings, controlling their emotions when there is a difference of opinion, as well as assessing the advantages and disadvantages of themselves. In school life, adolescents are more active and are able to express emotions more assertively. This is caused by the therapeutic group therapy giving adolescents an opportunity to express emotional or behavioral problems and give each other feedback on behavior that is annoying or fun, learn tolerance, giving the opportunity to practice new behaviors. Through group therapy adolescents can learn compassion, and it can prevent temperamental character (Wood, 2009).

The effectiveness of therapeutic group therapy for emotional intelligence is quite high and very significant with counted score amounted to 7,970, df = 83 at a significance level of 5%, table = 1.668. EI intervention individually examined by Nelis and friends (2009) provide enhanced emotional intelligence within four weeks. Counseling services in the group studied by Nurnaningsih (2011) is also quite good to improve adolescent emotional intelligence, but on the aspects of emotional self-control have not improved. Group counseling continuously and regularly needs to be given to students who have low intelligence in order to enhance the optimal emotional intelligence (Manalu, 2012). Emotional intelligence in adolescents has not improved after being given the Jazz music therapy studied by Yulissusanti, Widodo and Rusmawati (2013). Improvement of emotional intelligence after the administration of therapeutic group therapy was good enough to be applied in improving adolescent emotional intelligence. Therapeutic group therapy is considered more effective than the interventions to improve emotional intelligence being done by the previous researchers in terms of time and material provided covering all aspects of adolescent development. Group therapy is efficient enough in time and money to be given to adolescents (Yalom, 2005).

V. Conclusion

Emotional intelligence increased significantly after Adolescent Therapeutic Group Therapy had been applied to the intervention group, whereas the control group did not experience significant improvement. Adolescent emotional intelligence in the group receiving adolescent group therapy was higher than the emotional intelligence in the group that did not receive Adolescent Group Therapy.

The findings in this study can be used by nurses CMHN (Community Mental Health Nursing) as a reference in the implementation of psychiatric nursing on adolescent to improve emotional intelligence in psychiatric. Future studies could examine the effectiveness of adolescent therapeutic group therapy in the early adolescents.

References


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