

## Religious Cognitive Behavior Counseling to Increase Subjective Well-being in Adolescent Survivors of Family Violence

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**Abstract.** *Family plays an important role in nurturing and guiding adolescents to develop their identity and character. However, for adolescents who have grown up in families that experienced conflict or even violence, they have an increased risk to develop both internalizing and externalizing problems which lead to their lower Subjective Wellbeing (SWB). Group counseling with a cognitive behavioral approach known as religious cognitive behavior counseling (RCBC) using Islamic prayer implementation, was applied to change negative cognitive distortion or self-talk, in adolescents who experienced family violence. Using experimental study, the RCBC was expected to help participants improving their well-being. Pretest and posttest were executed to measure their subjective well-being before and after the counseling for 40 participants. The results showed that RCBC significantly increased positive affect with the value of  $t = -2.658$ ;  $p < 0.005$ . The RCBC can be developed as an alternative intervention to increase SWB in adolescents particularly in Moslem community.*

**Keywords:** *Adolescents, group counseling, religious cognitive behavior, subjective wellbeing*

**Abstrak.** Keluarga memiliki peran penting dalam proses pendewasaan dan pembimbingan remaja untuk mengembangkan identitas dan karakter mereka. Akan tetapi, remaja yang tumbuh dalam keluarga yang mengalami konflik atau bahkan kekerasan. Mereka memiliki peningkatan resiko dalam mengembangkan masalah internal dan eksternal yang menuntun mereka pada Kesejahteraan Subjektif (SWB). Konseling kelompok menggunakan sebuah pendekatan perilaku kognitif yang dikenal dengan *Religious Cognitive Behavior Counseling (RCBC)* menggunakan implementasi berdoa secara Islam, yang digunakan untuk mengubah distorsi kognitif atau *self-talk* pada remaja yang mengalami kekerasan di rumah. Penelitian kali ini menggunakan studi eksperimen dengan *RCBC* yang diharapkan membantu subjek meningkatkan kesejahteraan subjektifnya. Pre-tes dan pos-tes dilakukan untuk mengukur keadaan kesejahteraan subjektif sebelum dan sesudah pada 40 subjek. Hasil menunjukkan bahwa *RCBC* secara signifikan berpengaruh positif dengan nilai  $t = -2.658$ ;  $p < 0.005$ . Kesimpulannya, *RCBC* dapat dikembangkan sebagai sebuah intervensi alternatif untuk meningkatkan kesejahteraan subjektif pada remaja khususnya pada komunitas Muslim.

**Kata Kunci:** Remaja, konseling kelompok, perilaku kognitif beragama, kesejahteraan subjektif

Adolescence plays an important role in the cycle of human development because this period is a transition that bridges between childhood and adulthood. If the transition period can be passed well, adolescents can grow as individuals who are ready to carry out the task as adult who are independent and responsible for their lives. According to Gunarsa and Gunarsa (2008) when adolescents begin to enter the adult stage, they will need preparation that includes readiness in facing physical changes, social relationships changes, increased ability & skills, as well as the formation of self-identity which is approximately achieved within 9 years (takes place between the ages of 13-21 years old). At the end of adolescence, it is expected that adulthood has been reached, and they have been able to earn their own living and is ready to form a new family.

When struggling to find their identity, psychosocial adjustment is a hallmark of the adolescent development phase. Psychosocial disorders are therefore more common in adolescence than in childhood. Many unhealthy behaviors begin in adolescence, for instance eating disorders, obesity, smoking behavior, drug use, and violent behavior which all those behaviors stimulates a risk of various problems, for instance poor health condition, chronic disorders, and even morbidity. According to Levy (2019) high frequency of psychosocial disorders occur

during adolescence which include depression, suicidal thoughts experienced by approximately 10% of adolescents, anxiety, mood disorders, and other behavioral problems. Individuals with a tendency to have psychotic disorders will often begin the symptoms during adolescence, eating disorders, especially in girls, often occur in adolescence.

The transition to adulthood, is quite hard and complex process that often causes adolescents to experience various obstacles. Parents and other adults who live close to these adolescents play an important role in the process, as Zaky (2017) stated that adolescence is a crucial stage in human life that requires full care, guidance, and empathy. Close and supportive relationships within the family will protect teenagers to avoid the variety of risky behaviors such as alcohol abuse and the use of other substances as well as other problems such as depression (raising children network, 2015). However, not all teenagers receive support and guidance from their families, particularly in the case of teenagers who grown up in families which experienced conflict and violence between its members

These conditions could possibly make parents lose their function in providing support and guidance for their teenage son or daughters during the development process. Moreover, it can even increase the risk for adolescents to

experience various problems both internalizing and externalizing problems as Pannilage (2017) mentioned that a large number of causes that negatively effect on children's wellbeing were included family disharmony, lack of affection, love and care, children exposure to family violence, family income and discrimination against families due to socio-cultural factors.

When children and adolescents experience violence from their parents or family members, and received direct exposure to violence, it can be described as maltreatment towards children and adolescents. Furthermore, it can increase the risk of psychological, social, emotional and behavioral problems, violence against partners both physically (hitting, kicking, etc.) and emotionally including condescending, threatening and controlling others (Wathen & MacMillan, 2013). Families who experienced conflicts and violence among its members particularly violence against partners will make adolescents imitate those violent behaviors thus when they grow up, they will possibly act as perpetrators of violence against their partners later (Rice & Dolgin, 2002). Hence it can be said that family violence will decrease children's well-being who grow up within that particular condition, as Amato and Afifi (2006) found that children with parents who experienced high level of marital conflict were more likely to feel trapped. This feeling was associated with

lower subjective well-being and poor quality parent-child relationship.

Previous studies involving adolescent subjects in several private secondary schools in Yogyakarta showed a positive correlation between adolescent perception about conflicts between parents and internalizing problems in the form of anxiety and depression (Sholichah, 2016). Other research also revealed significant relationship between level of exposure to family violence with depression (Saragaih & Sholichah 2018); aggressiveness (Faridati & Sholichah, 2018) and anxiety (Aziza & Sholichah, 2019).

Thus, it can be concluded that support in various aspects of children's life when entering the phase of adolescent development, are needed to prepare themselves in achieving the task of adolescent development namely finding self-identity. The process of self-identity discovery is a long and complex process that makes adolescents vulnerable to various problems. Therefore it needs support from adults in the environment, particularly parents. However for adolescents who grow up in families with violence, it is difficult to get the support. This certain condition within the family can actually increase the vulnerability for adolescents to experience problems both internalizing problems and externalizing problems. The depiction of the double risk experienced by adolescents growing up in

families who experience conflict/violence

can be seen on the following figure.

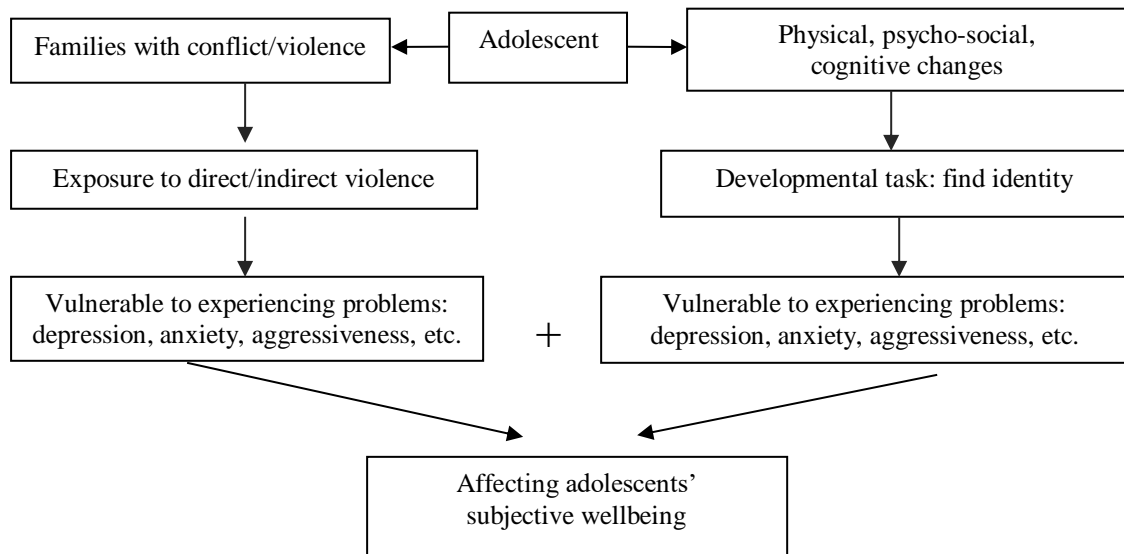


Figure 1. Dynamics of double vulnerabilities in adolescents who was raised in conflict-affected families

It is important to provide intervention that help adolescents cope with the various problems, both from the consequences of their development and the consequences of violence from their families. But these efforts have not been maximally done in Indonesia. Therefore this study aims to provide intervention in terms of improving subjective wellbeing through group counseling with a religious cognitive behavioral approach for adolescent students at Muhammadiyah vocational school in Yogyakarta, because in this particular school, there were no specific program aimed to intervene the effects of family violence among its students, while from the preliminary study it was found there were several students with family violence experience who need guidance and help.

Subjective well-being is seen as important for adolescents since it is one of predictors for individual quality of life. Subjective well-being refers to what people think and how they feel about their lives, the cognitive and affective conclusions they reach when they evaluate their existence (Diener in Seligman & Csikzentmihalyi, 2000). Cognitive conclusions are more related to judgment of life satisfaction while affective conclusions are reflected in the positive or negative effects that individual has. Previous research concluded when measuring happiness, it is more focused on the affect component (Diener, Helliwell & Kahneman, 2010). Positive affect is associated with protective psychosocial and behavioral factors for example greater social connectedness, perceived social support, optimism, and preference for

adaptive coping responses, as well as greater probability of performing health behaviors (Diener & Chan, 2010). Adolescence is a period during human development that is vulnerable to experiencing various problems, therefore maintaining and increasing subjective well-being in adolescents is very crucial.

Religious Cognitive Behavior Counseling (RCBC) is an intervention designed in this study as an alternative solution to enhance adolescent SWB with several considerations. The first consideration was based on Kendall-Tackett (2001) who argued that experiencing abuse in childhood, can influence a child to develop cognitive distortion, because a child has been powerless in the past, he/she may be highly fearful and overestimate danger and adversity in his/her current environment, underestimate his/her own sense of self-efficacy and self-worth in dealing with both real and perceived danger, and feel that there is nothing he/she can do about it. Hence cognitive distortions can lead to emotional stress and increase the risk of depression. If it is not treated properly, the condition can last until the child grows into adolescents and even adults.

The second consideration was related to religiosity. Indonesian citizens are known as religious. Many norms and values in everyday life are based on religious teachings, thus the majority of

children have been introduced to religious practice from an early age both in family, school and community circles. Although it has not been much researched, but facilitating religious values that are familiar with life, is seen as a promising step in terms of improving well-being.

The principles in CBT can work accordingly with Islamic teachings in terms of the consideration that mind (Akal) is an important element. Islam views the ability to think as the most unique human characteristics and with this ability individuals not only understand the experience of self but also the experience of others, as well as calculate and analyze all the wishes and plans (planning) before executing an act (Al-Munawwar, 2002). One of the meanings of thought (akal) in Islam is not limited to the cognitive aspect as said by Anharudin (Aziz, 2009) that characteristic of *akal* (thought) is the synthesis of feeling and thought, which is capable of receiving something that can be sensed and even cannot be sensed (beyond the empirical experience), hence that what the *akal* (thought) received, can develop into trust. Changes in Thought (akal) during RCBC are facilitated by guiding participants to find prayers that fit each participant's problem and write them down on paper/cards and serve it as guides when participants read them repeatedly thus it will be embedded in participants' beliefs. This principle does not contradict with the

perspective of Ellis (Cashwell & Young, 2011), who acknowledged that believing in God, can be psychologically healthy.

In Islamic teaching, prayer can be interpreted as a solemn request made to God in order to obtain goodness, accompanied by an attitude of humility towards God (Sholikhin, 2009). Humility is intended as an acknowledgment of human dependence on God. However, the meaning of dependency is contradictory to the context of dependence in human relations that leads to the inability of individual to do something independently, because in the Qur'an surah 2, verse 45, there was an order to pray that is the prayer must be accompanied by the sincerity of fortitude as a means to achieve the needs (Shihab, 2007). Thus, prayer is a request to obtain goodness addressed to God humbly, but it must be accompanied by perseverance to get the prayer granted.

The Cognitive behavioral (CB) approach pointed out that cognitive distortions once it become self-talk will stimulate individuals in developing feelings or behavior that are not adaptive or detrimental to the individual. While

prayer is a request to obtain the goodness of God that is done sincerely, thus in the context of RCBC it can foster new positive self-talk, which is accompanied by sincerity. In terms of fostering the confidence about the truth and sincerity behind the prayer itself it should be accompanied by a commitment to strive hence the wishes expressed in prayer will be granted. This step is no different from a client undergoing therapy with a CB approach, who followed certain steps to replace his/her negative self-talk with more positive thoughts and beliefs, then try to learn and develop new adaptive behaviors.

The concept proposed in this study is in accordance with the opinion of Pearce et al. (2015) which stated the integration between religiosity and CBT still has the same principles as the conventional CBT approach and uses the same tools, but the uniqueness of RCB is to explicitly use the religious traditions of the client as the main basis for identifying and changing thoughts and behaviors that are detrimental. The concepts used in this study were formulated in Figure 2.

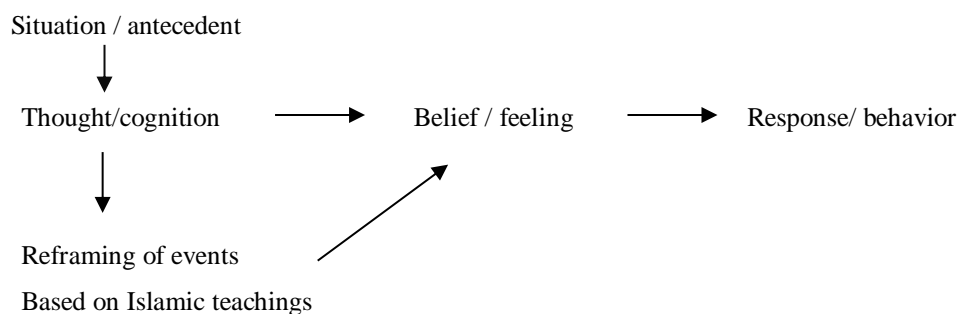


Figure 2. The concepts used in Religious Cognitive Behavioral Counseling

Previous study on the effect of religious spiritual interventions was analyzed using meta-analysis by Worthington & colleagues (Pearce, et.al. 2015). They analyzed 46 studies which explored the effect of spiritual interventions on patients. The results explained that patients who had spiritual beliefs showed greater improvement compared to the results of treatments using other psychotherapy techniques. Research that integrated religiosity with psychotherapy began to attract the attention of several researchers in Indonesia lately such as Hayatussofiyyah, Nashori and Rumiani (2017) who integrated religiosity with CBT to reduce depression in female adolescent. Other researchers also executed similar method. Putri, Uyun, and Sulistyarini (2016) implemented RCBT to improve subjective well-being in patients with chronic kidney failure. However, there is a limited number of researches on the application of religious cognitive behavioral approaches to improve subjective well-being in adolescents. This specific RCBC approach for adolescents who experienced family violence has not been widely done in Indonesia. Therefore, in this study a group counseling intervention was designed with a religious cognitive behavior approach to improve

SWB in adolescents who experiencing domestic violence.

## **Method**

### *Subject*

Based on the results of the SWB pre-screening of 150 students who experienced family violence, there were 43 students of Vocational School in Yogyakarta who showed the indications of having low-moderate subjective well-being. However, only 40 vocational school students (aged 16-17 years old) who were willing to participate in the group counseling. On the execution day, the subjects were divided into 2 large groups, afterward on the counseling process, each large group (20 participants on each large group) was divided again into 4 small groups consists of 5 participants. Within each small group, a psychologist became the counselor who leads the counseling process.

### *Measures*

Three scales used in the study were (1) Positive and Negative Affect Schedule (PANAS) scale developed by Watson, Clark, Tellegen (Watson & Clark, 1999; Crawford & Henry, 2004) (2) The subjective wellbeing scale is a modified scale from Satisfaction With Life Scale (SWLS), from Diener, Emmons, Larsen and Griffin (1985). (3) Psychological and physical violence sub scales of Domestic

violence scale developed by Sholichah (2018).

#### *Data analysis*

Quantitative data derived from SWLS and PANAS measurements were analyzed using t-test. Data obtained from homework and assignments in the counseling process were analyzed qualitatively.

#### *Procedure*

The research was carried out in 2 stages, namely (1) preparation which began with program offerings, module development, module trials, training for assistants and counselors, agreement on a program implementation schedule, and (2) implementation of interventions involving 40 vocational students divided into 2 large groups (8 small groups). The group counseling program was carried out in 4 meetings for each group, hence in total 8 meetings were held, with a minimum duration of meeting was 120 minutes. A module was structured as a guideline for counseling process. The process was illustrated as follows:

The first meeting was started by reading the Koran Surah Al-Fatihah and surah Ar-Ra'd verses 28-29 with the meaning as follows:

*“Such are the ones who believe (in the message of the Prophet) and whose hearts find rest in the remembrance of Allah. Surely in Allah's*

*remembrance do hearts find rest (ar-ra'd: 28)*

*“So those who believe (in the message of the Truth) and do good are destined for happiness and a blissful end” (Ar-ra'd: 28)*

(Islamic studies.info a)

The counsellor explained briefly about the meaning of the verses after reading it. The next process consist of 3 sessions; (1) The first session was building the trust between participants and counsellors. The counsellors invited all participants in each group and all of counselors introduced them selves and shared both an example of happy experience and sad/unhappy experience. (2) Second session was providing information about the aims and benefits of the program to participants, hence that all participants can confirm their decision to follow counselling as their personal decision with sufficient consideration, before they sign the informed consent. Participants who have signed the informed consent were then involved in forming group norms (3) The third session was the process for counsellors in guiding participants to understand the differences of thoughts, feelings and behaviors, then identify the links among the three aspects through the participant's experiences, then they practiced it by doing the homework.

The second meeting started with the counselor and participants read the Koran Surah Al-Fatihah and surah Al-Baqoroh



verses 152-157 with the meaning as follows:

*“So remember Me and I shall remember you; give thanks to Me and do not be ungrateful to Me for My favours”*(Al-Baqarah:152).

*“Believers, Seek help in patience and in Prayer; Allah is with those that are patient”* (Al-Baqarah:153).

*“And do not say of those who are killed in the way of Allah that they are dead; they are alive even though you have no knowledge of their life”* (Al-Baqarah:154)

*“We shall certainly test you by afflicting you with fear, hunger, loss of properties and lives and fruits. Give glad tidings, then, to those who remain patient”* (Al-Baqarah:155).

*“those who when any affliction smites them, they say: “Verily, we belong to Allah, and it is to Him that we are destined to return”* (Al-Baqarah:156).

*“Upon them will be the blessings and mercy of their Lord, and it is they who are rightly guided”* (Al-Baqarah:157).

(Islamic studies.info b)

Counselor explained briefly about the meaning of verses. The next session was (1) Participants revealed their experiences doing homework, (2) counselors guided participants to reflect on their experiences in order to understand the relationship of antecedents/events, thoughts, feelings and behaviors, (3) Participants learned to develop positive

self-talk to replace negative self-talk and then counselors invited participants to observe the effects on their feelings and responses, (4) Participants practiced breathing relaxation techniques and visualization/guided imagery as one of the strategies for coping with stressful situations, (5) Participants were instructed to practice it in daily life and record it with the self-monitoring sheet.

The third meeting began with reading the Koran surah Al-Baqarah verse 286 with the meaning as follows:

*“Allah does not lay a responsibility on anyone beyond his capacity. In his favour shall be whatever good each one does, and against him whatever evil he does. (Believers! Pray thus to your Lord): “Our Lord! Take us not to task if we forget or commit mistakes. Our Lord! Lay not on us a burden such as You laid on those gone before us. Our Lord! Lay not on us burdens which we do not have the power to bear. And overlook our faults, and forgive us, and have mercy upon us. You are our Guardian; so grant us victory against the unbelieving folk”*(Al-baqarah:286).

(islamic studies.info c)

Counselors explained the meaning of the verses with the aim that participants can learn from the verses. The next phase was consisting of four sessions: (1) Reflection on participants' experiences in practicing new self-talk and relaxation in

daily life. (2) Psycho education: implementing the understanding the role of *akal* (thought) in Islam, counselors explained and guided the discussion about the role of akal/thought in human behaviors. (3) Counselor guided participants to implement prayer according to the problems felt by participants and practice it by developing self-talk using prayer. (4) Participants were asked to practice it as homework.

The fourth meeting was started with reading the qur'an surah Ash-Sarh verses 1-8, with the meaning as follows:

*“(O Prophet), Did We not lay open your breast” (verse: 1), “and relieve you of the burden” (verse: 2). “that had well-nigh broken your back?” (verse: 3) “And did We not exalt your fame?” (verse: 4) “Indeed, there is ease with hardship” (verse: 5) “Most certainly, there is ease with hardship” (verse: 6) “So, whenever you are free, strive in devotion” (verse: 7) “and turn to your Lord with longing” (verse: 8) (Islamic studies d)*

Counselor explained the meaning of that verses briefly and invited participant to discuss it together, then followed by: (1) Reflection on practicing prayer that accompanied by creating new, more positive self-talk based on prayers obtained from the Koran or hadith, in order to replace cognitive distortion or negative self-talk, (2) Identification of obstacles and strategies that have been taken to overcome them, (3) Psycho education about *istiqomah* (commitment) during the process of overcoming the obstacles, (4) Program evaluation and closing.

### Result

From the initial measurement result of 120 students, it was concluded that only data from 115 students can be analyzed based on the completeness and skills in filling the scale, while 5 data were not analyzed because 1 student refused to fill seriously and 4 others students with special needs had difficulty in understanding the sentences thus cannot complete it. A summary of the descriptive analysis can be seen bellow

Table. 1. Results of Descriptive Analysis of Initial Measurements (Pre-test)

Category	Subjective wellbeing		PANAS (positive and negatif affect scale)	
	Freq	%	Freq	%
<b>Low</b>	19	16,5	18	15
<b>Moderate</b>	87	75,65	80	70,2
<b>High</b>	9	7,85	17	14,5
<b>Total</b>	115	100	115	100

Data obtained from initial measurement was used as screening phase involving 115 vocational students. Moreover, result of SWLS that measure life satisfaction showed 76, 65% of students were categorized on the medium level, 16.5% students were on the low level and 7.85% students were on the high level. While the measurement with PANAS showed that 15% of students were on the low level, 70% on the moderate level and 14.5% on the high level respectively. The measurement result of experiencing domestic violence scale showed that 45 students reported having experienced family violence in various forms both psychological and physical violence. The most common forms of psychological violence were swearing and underestimating work, while the most common forms of physical violence were pinching and kicking. Based on the results of these measurements, 45 students who have experienced family violence and showed low level of SWB and positive affect were invited to participate in group counseling, however only 40 students who willed to participate in this study.

The participants were divided into 2 large groups, each of group consisted of 20 students. Participants in both large groups were divided again into 4 small groups consisted of 5 people, thus in total there were 8 small groups. Each small group was guided by a psychologist. The counseling

process itself consisted of 4 meetings for each group with duration of 120-150 minutes/meeting.

### ***Group dynamic***

Group 1 (large group), consisted of 85% male students and the rest were female students. On the first meeting, almost all participants from group 1 appeared worried and passive. The majority of participants had difficulty composing sentences when introducing themselves, and avoiding eye contact when talking. Among participants also tended to show less friendly manner to each other. While group 2 (large group), consist of 90% female students and the rest were male students. From the beginning of the first meeting the atmosphere was more dynamic. Participants were active and enthusiastic but on the same time the atmosphere became crowded. To manage this situation, the mirroring game was implemented in which participants paired up as mirrors and would move together to follow the song which was played during the game. Participants became calmer after their energy was channeled, but there were three female participants who seemed aggressive, giving mocking comments and laughing at other participants with disabilities. During counseling session, it was found that the majority of participants felt depressed when experiencing domestic violence but they generally did not have

coping skills in dealing with stressful situations, thus their response was generally not adaptive for instance running away from home, retaining feelings of sadness, anger and venting on others, and covering up their own suffering alone.

The permissive, gentle, but firm and no-judgment behavior of the counselors motivated participants to express their problems. The counselor tried to manage and help the interaction among participants who tended to show different level of expression. Active participants with expressive attitude were directed to stimulate and attract other participants to be more active thus willing to express their emotional experience openly without being afraid to any judgment. The counselors actively gave rewards for participants in the form of praising; hence they feel appreciated whatever the experience was expressed.

On the second meeting, almost all participants openly shared the problem that had been bothering them. Most of their problems were related to the violence experienced in their family both directly or indirectly (e.g., witnessing other family members experienced violence). Furthermore, from the beginning of counseling process, the counselors made careful observations for each participant, and it was supported as well by additional data through individual interview. Similar to participants in group 1, the majority of

female participants in group 2 also began to build strong dynamics within the group. On the second meeting only one participant was unable to share her/his personal problem with other participants. After being confirmed with the results of domestic violence assessment data, it was found that participants experienced some form of domestic violence hence it was suggested and decided to form an additional session apart from the group counseling.

Each meeting in group counseling was always opened with the activity of reading Koran verses and its translation which the theme was in accordance with the purpose of intervention itself. A brief explanation by the facilitator about the meaning of the verses was read out to build a connection with the problem that appeared relevant for participants. This procedure made the majority of participants paying attention and having high enthusiasm during the counseling process.

On the second meeting participants began to express their emotional feeling related to violence they experience that had been difficult to share before, as they felt those emotion had to be buried by themselves. One participant who showed aggressive behavior by hurling ridicule at other participants, was willing to open up and shared his/her problem. Likewise, other participants began to share

unpleasant experiences, many of which stem from verbal abuse and physical abuse from their parents, as the example given by K and A on the quote bellow:

*“I idolized a doctor who treated me gently, in my opinion it was natural because she helped me a lot. But instead of appreciating it.. my mother made fun of me, she always disliked anything about me. Maybe if the doctor had a bad incident, my mother would only acknowledge her kindness.” (K).*

*“I came home late, my father was angry and threatened me with a knife, and scratched my neck until the blood came out, I was sad and helpless. How could he do that? Finally I ran to grandma's house.” (A).*

The counseling process within the groups facilitated the understanding of cognitive distortion which became negative self-talk or negative thoughts about oneself that arose from experiencing family violence and unpleasant emotional effect. The session can help to compose a narrative about their emotional experiences with a new understanding that many unpleasant events cannot be changed, but participants can interpret in in more positive way through changing their mindsets. Participants were guided to think about the past event they experienced and develop a new positive mindset that can connect those events, thoughts, feelings and actions together, thus the narrative or thought about those past events was changed.

Table 2. Examples of Creating New Self-talk

<b>Antecedent</b>	<b>Thought</b>	<b>Feeling/emotion</b>	<b>Response</b>	<b>New positive Thought</b>	<b>Feeling/emotion</b>	<b>Response</b>
Dad gets angry & mistreats A when he gets home late	How could you do it, with your own child	feeling sad, helpless, angry	run away from home	Actually father's actions are due to my benefit	anger lessened	come home immediately after school

After witnessing the process experienced by A, other participants also began to learn to create new self-talk. On the context of K who understood his mind that his mother would like the doctor he admired, if the doctor was wretched, it was basically a distorted thought because the

problem was not with the doctor, but lies in his mother who tended to think negatively about any choice made by K. On the counseling process K further created a new self-talk:

*“That's how my mother responds to my story, so I won't think she hates the doctor.”*

Based on the dynamics that occurred within the group, there was a gradual positive change among participants. The participants appeared more enthusiastic and more relaxed. Participants who tended to be passive and those who hold back their emotion at the beginning of the meeting began to express and share their emotion more openly, e.g. crying when they were sad. Participants were guided to view each event on the context of how thoughts, feelings and behavior were related to each other. The counselors guided this process with a firm but gentle way in order to make participants who tended to show their aggressiveness to be able controlling their emotional expressions, while passive participants became encouraged to express their experiences. Defensive attitude was still shown by 2 female participants and 2 male participants who have difficulty in developing trust to other participants during the session. Hence only in the last meeting all of them were willing to be open about their selves. Based on the result of counseling in each small group, it can be concluded all participants who experienced blocking were participants with the high level of violence experience from their parents.

Significant changes were found in the session creating a new self-talk with prayer. Almost all participants seemed eager to find prayers in accordance with their respective problems to be combined with a new, more positive self-talk. There was an atmosphere of togetherness that developed because counselors were actively involved in the counseling process, particularly in small groups, thus the tension that occurred on the beginning of counseling, gradually faded. Guided by the counselor, participants looked for the prayers they want from the Qur'an and the hadith that can be accessed online. The prayer that has been chosen by the participant was written on a card and then it was placed on the wall or in a place that was easily seen by participants, hence it could appear as a reminder for the participants.

Participants were enthusiastic about doing homework applying prayer into their new self-talk. The changes in self-talk to be more positive was evident after applying prayer, hence in the final meeting the atmosphere of counseling was very different. Almost all the participants were involved in relaxed conversation both with fellow participants and with the counselor and they no longer showed expression of anger or aggressive behavior towards other participants.

Table 3. Examples of Changes in Self-Talk Accompanied by Prayer

Antecedent	Thought	Feeling/ emotion	Response	New thoughts & prayers	Feeling/ emotion	Response
Scolded by mother	Why mother was so rude	Disappointed, upset	Shut himself	Maybe I can be more discipline (Prayer: QS Al Baqarah 153)	More patience	The body felt comfortable and lenient (DA)
Scolded for coming home late	Surely the motorbike would be taken away	Confused, scared	Silent, said nothing and helpless, unable to do anything	My parents were angry because they care about me (Prayer: QS: Al-Isra 23-24)	Felt calm	Silent but not afraid anymore (Y)
Mocked by friends	I'll just hit him	Angry	Hit a mocking friend	Be patient / just ignore. (Prayer: QS Ar-rum, 4 & 21)	Felt calm	Stay away from him (S)
Felt burdened (discouraged in learning)	There is no hope	Confused, hopeless	Daydreaming	God does not burden but according to ability. (Prayer: QS Al-baqarah 286)	Felt calm	Study with enthusiasm (R)

Data obtained from the measurement of positive & negative affect (PANAS), and life satisfaction (SWLS) were analyzed with t-test. The results showed for PANAS,  $t = -2.658$ ;  $p=0.005$  ( $P < 0.01$ ) It means there was a significant difference in positive affect between before and after (pretest and posttest) RCBC, thus it can be concluded RCBC significantly increased the positive affect.

Result on Life satisfaction showed t-score =  $-1.775$ ,  $p = 0.042$ ,  $p < 0.05$ , which means there was significant difference between pretest and posttest score of SWL.

Thus, the group counseling significantly increased life satisfaction.

### Discussion

The result of this study showed there were significant increases in positive affect and life satisfaction on vocational students after participated in group counseling with a religious cognitive behavioral approach. This finding was very useful and crucial in order to develop alternative intervention for adolescents who experienced vulnerability both because of their development and because of the

environmental conditions e.g. families with domestic violence.

The RCBC approach has not been much researched, particularly as intervention for increasing SWB in adolescents, but many studies that have integrated spirituality/religiosity have shown positive results. Previous study by Good (2010) took a manual treatment approach that focused on spiritual growth and depression reduction through cognitive approaches. It showed that cognitive behavioral therapy has proven effective in helping restructuring the cognition of clients who were depressed. Individuals who valued spirituality tended to view the world differently than those who do not hold spirituality as an important value in their lives.

In Indonesia context, the integration of religiosity and CBT is more closely investigated in relation to depression. Research that applied CBT to increase SWB was conducted by Putri, Uyun and Sulistyarini (2016) who implemented RCBT to improve subjective well-being in patients with chronic kidney failure. The result showed RCBT improved SWB in patients with kidney failure. This current study was in line with other previous study by of Putri, Uyun & Sulistyarini (2016), but in this current study religiosity was integrated with group counseling approach not psychotherapy and it was applied for adolescent participants who have relatively

no serious problems in their physical health. Both findings indicated that the integration of cognitive behavioral approaches with religiosity has proven to be a promising intervention. Thus it is encouraged to be developed for SWB intervention both on adults and adolescents.

The use of prayer as an amplifier instead of negative self-talk showed significant influence on this research. This finding was in line with the phrase by Pargament (Cashwell & Young, 2011) which concluded from his research that coping lifestyle (Prayer, faith, trusting God's will, etc.) was used by many people when experiencing distress. However, the strategy needs to be done carefully thus the intervention process will particularly help participants to gain a deep spiritual experience.

As Muhammadiyah school students, all participants have sufficient knowledge about the principles of their religious teachings and sufficient involvement in religious activities/rituals but do not necessarily support the creation of strong spirituality. Spirituality is a general potential that exists in everyone (Chandler, Holden & Kolander in Cashwell & Young, 2011), hence the inability of students to experience their spirituality may happened due to their lack of self-awareness and self-internalization because of the way those religious activities were taught. For



example when religious activities were carried out because of obligation or compulsion or the teaching method was in a dogmatic way.

The effect from lack of spiritual appreciation of his life experiences, individuals tended to divert their suffering to others, instead of transforming their suffering towards compassion of themselves and others (Cashwell & Young, 2011). Therefore counselors needed to facilitate participants to be able to use their religious life to empower themselves. The counselors first ascertained the suitability of their steps with the client's belief system and whether the client has a constructive dialogue or not about the client's motivation to participate in religious activities (Cashwell & Young, 2011). In this study the steps were carried out on the first and second meeting, which began by inviting participants to read and understand verses from the Koran with themes that were relevant to participants' personal problems, accompanied by a brief explanation of the verses meaning that were recited. Hence on the third 3rd meeting the participants already had a more constructive understanding of the teachings of Islam in accordance with the Qur'an.

Generally, it can be argued as a normal phase when children are not yet able to show their spirituality, but for teenagers who do not get the support they

need they could have lack of spirituality for the long-term, therefore the emergence of awareness about the existence of an almighty is crucial for teenagers. It can foster a sense of security in adolescents because they will understand that there is a place to lean on besides their parents. And they can learn to build hope based on a new, more positive belief in God. Through practicing prayer, they will learn their wishes will come true if they have a commitment to improve their selves.

Considering the double vulnerabilities possessed by participants, the result of this study showed that RBCT can be very beneficial for participants, because it increased both indicators of subjective well-being, namely positive affect and life satisfaction which play an important role in adolescents' lives. As Diener & Chan (2010) stated that subjective well-being refers to people's evaluations of their lives, including their life satisfaction. This evaluation was based on their state of feelings (moods and positive emotions e.g. joy, happiness, energy, hopefulness, optimism, and sense of humor which were associated with the reduced risk of mortality in healthy populations).

Life satisfaction and positive effects are like two sides of a coin, as Kuppens, Diener & Realo (2008) concluded from their study with participants from 46 countries, that to enhance life satisfaction

both in western and non-western countries, it should adopt interventions that promote the experience of positive emotions (as compared with those that are solely aimed at avoiding negative emotional experiences).

### **Conclusion**

Adolescence period is marked by the rapid development of all aspects of life, namely physical, emotional-psychological, social, and cognitive, which made adolescents become vulnerable to experience internalizing and externalizing problems. Adolescents need support from the environment, particularly from the family and closest environment, thus they can adapt to the current development as well as can achieve the expected development task, namely the formation of self-identity.

Family conditions with violence and conflict will create a double risk for adolescents. Research found that children living with parents who experienced high level of marital conflict were more likely to feel trapped and depressed. This feeling was associated with lower subjective well-being and poor quality parent-child relationships.

The result of this study indicated that RCBC significantly increased SWB in adolescent experiencing family violence, that can be clarified from the increase in positive affect and life satisfaction. These

result was related to the entire counseling process that allowed participants to learn and to understand the relationship between events in their life and the distorted thoughts about these events. It was then followed by the emergence of negative feelings and actions or responses that were not adaptive as well. Through the activity of reading the holy verses of the Koran participants also learnt that they have the option of interpreting unpleasant experiences in different perspective. Hence they can learn to develop positive self-talk based on Islamic teachings. It basically became the most favorable session for the majority of participants

Religious strengthening of adolescents who did not get the support they need from their parents was an important point because the emergence of awareness about the existence of the almighty can foster a sense of security in adolescents. In this process, they realized that there was a place to lean on besides their parents. And they can learn to build hope based on a new, more positive belief in God, a prayer that will be granted if they have a commitment to improve their self. However, the counseling in this study was carried out only in a limited 4 meetings, thus it is necessary and suggested for future study to develop further individual counseling for participants in deeper process.

Despite of the result, there were some limitation of the study; (1) Limited time which made it difficult for the counselors to explore data in depth conversation with each participant. (2) The counseling process was carried out during active school days, hence there was a concern that the participants would miss the lessons in their class and it might affect the participants state during the counseling.

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