



Behavioral cognitive therapy to reduce cyberbullying behavior in adolescents during the Covid-19 Pandemic

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ABSTRACT

The purpose of this study was to determine the difference in the level of cyber bullying between the group that was given cognitive behavioral therapy and the group that was not given cognitive behavioral therapy. In addition, measuring the level before and after being given cognitive behavioral therapy in adolescents. The method used in this research is an experimental approach study. The results of the analysis using the Mann Whitney-U test measure cyber bullying in the experimental group that was given cognitive behavioral therapy and the control group that was not given therapy with a pre-test Z score $Z = -1.781$ with Asymp. Signature (2-tailed) 0.075 and post-test Z score -2.619 with 0.009, which means that there is a difference in the level of cyber bullying in adolescents between the experimental group and the control group. The results of the Wilcoxon Rank test to measure the pretest-posttest obtained a value of $Z = -2.527$ and $p = 0.012$ ($p > 0.05$), while for the posttest-follow-up Z score of -2.217 with $p = 0.27$ means that there are differences in cyber levels. bullying before and after, and after the follow-up was given cognitive behavioral therapy in the experimental group which means a decrease in the level of cyber bullying in the experimental group.

INTRODUCTION

Rapid technological developments require humans to use digital systems so that they cannot be separated from all-electronic devices. This can affect people's lifestyles to become a big need. Technology has both positive and negative impacts on life. The positive impact provides convenience and speed in carrying out activities. On the other hand, there is a negative impact of technology, namely, cyber bullying that often occurs in adolescents (Rahayu, 2013). Adolescence according to Erickson (Meilan, 2018) is a transitional period between childhood and adulthood between the ages of 13 to 21 years. The task of adolescent development according to Erickson (Santrock, 2010) is identity versus identity confusion where at this time the individual is faced with the question of who is a teenager, what is a teenager, and where is his life headed.

A study from the Digital Civic Index (DCI) in 2020, Indonesia ranks 7th in Southeast Asia, and has an increase of 8 points from the previous score, which rose from 76 points to 84 points, meaning that the level of politeness of netizens in Indonesia is getting worse from the previous

year, namely 2019. points from the previous score, which rose from 76 points to 84 points, meaning that the level of politeness of netizens in Indonesia is getting worse from the previous year, namely 2019. Cyberbullying occurs everywhere and the perpetrators and victims are teenagers. Adolescence according to Erickson (Meilan, 2018) is a transitional period between childhood and adulthood between the ages of 13 to 21 years. The task of adolescent development according to Erickson (Santrock, 2010) is identity versus identity confusion, where at this time individuals are faced with the question of who adolescents and adolescents are, and where adolescents are headed in their lives. Adolescents must carry out developmental tasks at their age well. If adolescents fail to carry out their developmental tasks, it will have negative consequences in the social life of the following phases, causing unhappiness in the adolescents concerned, causing community rejection. This causes the fixation/cessation of normal development at certain stages of development because subsequent development is very difficult (Alwisol, 2014).

METHOD

This study is a quasi-experimental study with the aim of knowing the effect of cognitive behavioral therapy on reducing the number of cyber bullying in adolescents during the pandemic. The subjects in this study were teenagers aged 13-18 years as many as 10 teenagers who did cyberbullying with moderate and high levels. This study consisted of an experimental group and a control group, each of which consisted of 5 subjects. The research data collection used the Cyber Bullying Scale which was compiled based on Willard's cyber bullying aspects (Jalal, 2021).

Scope of Research

The research population came from SMP Negeri X Brebes with a sample of 10 teenagers who were victims of cyber bullying, ranging in age from 13 to 18 years. The research was conducted online using the Zoom Meeting application.

Research design

The implementation of this experiment uses a quasi-experimental type, with a pretest and post-test only control group design (Creswell, 2007).

Research Procedure

The research procedure consists of preparation and implementation. The preparations in this research are obtaining research permits, interviews, field orientation, initial screening using CATQ, and interviews. The next preparation is the preparation of the research scale, professional judgment scale, research scale trials and the preparation of therapy modules, professional judgment modules and module trials. In this research, it is necessary to determine the therapist and therapist assistant. The stages of research implementation are giving informed consent sheets, conducting pretest, implementing cognitive behavioral therapy, taking post test data and feed-back, implementing follow-up and data processing.

Data Collection and Data Analysis

The research data collection uses a cyber bullying scale. In this study using the Mann Whitney Test analysis method to determine the difference between the experimental group and the control group. Wilcoxon Rank test to determine the difference before and after the intervention using the SPSS 20.0 program.

RESULTS AND DISCUSSIONS

Results

The hypothesis test used by the researcher in this study is a non-parametric test because of the small number of participants (Djarwanto, 2001). The hypothesis proposed by the research is that there is a decrease in the cyberbullying level score in the experimental group after

being given cognitive behavioral therapy compared to the control group. The method used is the Mann Whitney U-Test analysis (**Table 1**).

Table 1. Results of the Pretest-Post-test

	Pretest	Postests
Mann-Whitney U	4.000	.000
Wilcoxon W	19.000	15.000
Z	-1.781	-2.619
Asymp. Sig. (2-tailed)	.075	.009
Mean	80.70	70.60

Based on the (**Table 1**), it is known that the pretest score $Z = -1.781$ with $p = 0.75$ ($p > 0.05$) which indicates that there is no difference in the level of cyber bullying in adolescents between the experimental group and the control group. While the posttest score $Z = -2.619$ with $p = 0.009$ ($p < 0.05$), which means that there is a difference in the level of cyber bullying in adolescents between the experimental group and the control group, where the level of cyber bullying in the experimental group after receiving cognitive behavioral therapy is lower than the level of cyber bullying in the experimental group. cyberbullying in the control group who did not receive cognitive-behavioral therapy. The Wilcoxon Rank Test technique was used to see the difference in the level of cyber bullying in the experimental group between before being given cognitive behavioral therapy and after being given cognitive behavioral therapy. The following is the results of the calculation (**Table 2**).

Table 2. Results of the Pretest-Post-test

	Z	P
Pretest - Posttest	-2.527	0.012
Posttest-follow up	-2.217	0.027

Based on the table above, it is known that the pretest-posttest measurement values $Z = -2.527$ and $p = 0.012$ ($p > 0.05$), meaning that there is a difference between the level of cyberbullying before and after giving cognitive behavioral therapy to the experimental group. In accordance with the rules used, the value ($p < 0.05$) can be assumed that there is a decrease in the level of cyber bullying in the experimental group before and after being given cognitive behavioral therapy. In addition, the posttest-follow-up measurement, the value of $Z = -2.217$ with $p = 0.27$, also had differences in the post-test level of cyber bullying and the follow-up of cognitive behavioral therapy in the experimental group. So, it is assumed that there is a decrease in the level of cyber bullying in the experimental group after and follow-up given cognitive behavioral therapy. This means that cognitive behavioral therapy has an effect on reducing the level of cyber bullying in the experimental group.

Discussion

The research focuses on knowing the effect of cognitive behavioral therapy to reduce cyber bullying in adolescents. Cognitive-behavioral therapy which is based on the theory of principles of cognitive-behavioral therapy proposed by Beck (Aini, 2019). Nelson (2006) states that cognitive behavioral therapy in adolescents has various self-control strategies by teaching adolescents the use of cognitive processes and alternative skills to inhibit aggressive behavior. Cognitive-behavioral therapy focuses on three things, namely thoughts, emotions and behavior (Ahmad, 2019). Participants who are indicated to have cyberbullying are known to have errors in thinking, the cognitive behavioral therapy approach helps participants recognize and evaluate their thinking errors with cognitive restructuring techniques. In the technique of cognitive restructuring, adolescents are helped to change wrong cognitions about themselves and their environment by identifying thoughts, emotions and behaviors.

Participants have automatic thoughts as a result of the bullying causing consequences such as (a) participants do not share many photos, (b) participants do not comment in any group unless they want to ask important things, (c) participants do other activities such as doing their hobbies playing online games and go with friends. (d) participants don't upload status (e) don't swear when in whatapps group. Cognitive-behavioral therapy provides education on materials such as definitions, types, effects of cyber bullying, prevalence/rate ratio of cyber bullying, the role of bullying, causes of cyber bullying with new information that participants relate to information they have about cyber bullying (cognitive processes). Agree with Newen (2015) states that the cognitive process is a process of transferring information that usually occurs to connect several information inputs to form a cognitive system that gives rise to action, where this process involves one of the paradigmatic processes with cognitive methods: perception, memory, learning, emotion, intentionality, self-representation, rationality, and decision making or something similarly relevant. Participants gain insight that what they do has dangers to be gained. This happened because participants also received updated information about cyberbullying. Supported by Cekic's research (2019), it states that cognitive behavioral therapy connects thoughts, emotions, behavior so that it recognizes thoughts, replaces thoughts and changes cognitions that cause cyberbullying.

The schemas that individuals have about themselves play an important role in information processing. Schema is a construct that is used to understand the structure of individual meanings and distortion processes. Schematics have important implications for assessing and changing problematic functions. The process of cognitive behavioral

change is inseparable from the performance of self-efficacy, self-efficacy is a better predictor of future behavior than past behavior (Goldfried, 2003).

Angry emotions in cyberbullying participants are the result of wrong thinking. Cognitive-behavioral therapy helps participants understand the types of emotions and evaluate body cues such as emotional and physical changes that occur when other people become victims of cyberbullying, which is often called emotional recognition so that participants understand the feelings of victims of cyberbullying. Participants' emotional responses can be regulated by coping methods found in cognitive behavioral therapy so as to regulate and even prevent cyberbullying. The findings in the study were-participants were able to regulate emotions by thinking about the impact of cyber bullying having mental disorders on victims who were suicidal, insane and participants could be at risk such as going to prison, hurting themselves, being hated by others so that participants could behave adaptively and be accepted by the environment.

Behavioral cognitive therapy is directed at modifying the function of thinking, feeling, and acting by emphasizing the role of the brain in analyzing, deciding, asking, acting, and deciding again by changing the status of thoughts and feelings so that it is expected to change behavior from negative to positive. Behavior that has been positive requires monitoring to provide awareness to participants. Changes that occur in participants include an increase in awareness so that there is a reduced desire to carry out cyberbullying. Based on the statements of homeroom teachers and supervising teachers, there were no reports of cyberbullying from students and their guardians.

In conclusion, the quantitative and qualitative data obtained within the scope of the study revealed that behavioral cognitive therapy reduced cyberbullying by increasing participants' awareness of cyberbullying and changing participants' thinking. In addition, there is a reflected change in participants in participant behavior. These findings indicate that cyberbullying therapy based on a cognitive-behavioral approach affects the level of cyberbullying, this is due to the occurrence of a learning process. The learning process according to Neisser (Damayanti, 2014) is the transformation of the input (input), then the input is reduced, described, stored, found again.

This is in line with the findings of Cekic (2019) which states that cyber bullying therapy is a cyber bullying prevention program that has an influence on the level of cyber bullying and cyber victimization. Andersson (2014) states that cognitive behavioral internet therapy has a similar positive effect to face-to-face behavioral cognitive therapy in clinical populations. Foody's research (2015) suggests that cognitive-behavioral internet therapy is an online psychological therapy for both victims and

perpetrators by overcoming the pressure caused by cyberbullying experiences.

The limitation of this research is that the object of research is on the WhatsApps group social media, which is only one of many other social media and online games so that it is not widespread. In addition, the information provided by participants is through a cyberbullying scale so that it does not show the participants' true opinions. The weakness of the study is that the intervention has obstacles from outside interference such as signals and lack of focus from participants. This is due to the lack of direct interaction between participants and therapists.

CONCLUSIONS

Based on the results in the research and discussion, it can be concluded that there is a difference in the cyberbullying level score between the experimental group who was given cognitive behavioral therapy and the control group who was not given cognitive behavioral therapy. There is a difference in the cyberbullying level score in the experimental group between before receiving treatment and after receiving treatment in the form of cognitive behavioral therapy.

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Authors' Contributions

The authors jointly carry out research, data collection, data analysis, interpretation and write the text of this article and improve so as to get the final manuscript that can be published in this journal.

Conflict of Interest

The authors declare that they have no conflict of interests.

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