Intervention of social anxiety on children: Group counseling using miracle technique and scaling questions

Anis Lud Fiana

Department of Guidance and Counseling, Universitas Negeri Semarang, Indonesia
Email: anislud22@students.unnes.ac.id

Abstract

Purpose - This research aims to test miracle tests and scaling questions to reduce social anxiety in a foster child.

Method - This research applied an experimental method with One Group Pretest-Posttest design involving 7 foster children in SOS Children's Village Semarang as the subject of the research.

Result - The result of this research shows that group counseling using the miracle technique and scaling questions is found effective to reduce social anxiety in foster children.

Implication – These techniques could help the counselee to think in the present and the future. The use of miracle questions is perhaps on how the client's feeling or how the client would think. Miracle questions technique could be combined with scaling questions that could be done in helping the counselee to determine their objective, measure their progress, or to determine priority to take action..

Originality - This research is presented the scaling questions technique focuses on the solution as well as the use of scaling questions on the individual's experience experiencing changes.

Fiana, A.L

Keywords:
Konseling kelompok, teknik pertanyaan ajaib, teknik pertanyaan berskala, kecemasan sosial.

Abstrak

Tujuan - Penelitian ini bertujuan untuk menguji miracle test dan skala pertanyaan untuk menurunkan kecemasan sosial pada anak asuh.

Metode - Penelitian ini menggunakan metode eksperimen dengan desain One Group Pretest-Posttest yang melibatkan tujuh anak asuh di SOS Children's Village Semarang sebagai subjek penelitian.

Hasil - Hasil dari penelitian ini menunjukkan bahwa konseling kelompok dengan menggunakan teknik miracle dan scaling questions terbukti efektif untuk menurunkan kecemasan sosial pada anak asuh.

Implikasi - Teknik-teknik ini dapat membantu konseli untuk berpikir di masa sekarang dan masa depan. Penggunaan pertanyaan keajaiban mungkin dapat digunakan untuk mengetahui bagaimana perasaan klien atau bagaimana klien berpikir. Teknik pertanyaan ajaib dapat dikombinasikan dengan pertanyaan penskalaan yang dapat dilakukan untuk membantu konseli menentukan tujuan, mengukur kemajuan, atau menentukan prioritas untuk mengambil tindakan.

Orisinalitas - Penelitian ini menyajikan teknik scaling questions yang berfokus pada solusi serta penggunaan scaling questions pada pengalaman individu yang mengalami perubahan.

Introduction

Trauma of being humiliated and bullied could bring fear in social context including the level of fitness in friendship which could trigger social anxiety. Besides, negated assessments from other people would trigger someone to hardly interact and shape thoughts, responses as well as behavior as the result of pressure in a social or academic situation. According to Parr & Cartwright (2014), social anxiety could be severe and sustained, and it may have negative consequences on the quality of life they undergoing. The anxiety they experience in a social environment is usually caused by fear of having a negative assessment or evaluation from other people. Anxiety could be in the form of pain or nervousness signed by anxiety, sweat, and self-doubt.

The symptoms that frequently occur are trembling, excessive sweating, faster heartbeat, nervousness in facing the situation, etc. This anxiety could be in the form of fear of not being able to be accepted by other people. As for it could be said to have social anxiety according to DSM-5 (2013) are; (1) fear or anxiety for one or more social situations, (2) fear for their behavior or action may cause bullying, humiliation, or disagreement with other people, (3) social situation that may trigger

anxiety or fear, (4) fear for not being proportional. Social anxiety occurs from the condition where someone believes that other people's perception towards them is different from his/her perception of him/her.

La Greca & Lopez (Festa, 2011) found that teenagers with high levels of social anxiety are reported to have fewer friends. They are usually vulnerable to individual issues such as stress, anxiety, and self-destructive behavior. Someone who is fear tends to feel anxious and uncomfortable when they face other people while followed by fear of something that may happen.

Ford et al. (2007) state that behavior that experiences social anxiety is as follows: (1) Shyness, a common tendency to avoid social situations, (2) Introversion, a tendency to choose calmness and become introverted, (3) Behavioral inhibition, a behavior of being fear for someone new or new situation, (4) Performance anxiety, anxious feeling to perform activities in front of other people. Anxious person would feel that s/he is being supervised or assessed by other people. They think that other people consider them as bad and despicable.

Foster children as an individual or as social organisms have become part of the community. Anxiety is required by an individual to survive, despite the imbalance or the balance of life of an individual could also be influenced by over-anxiety (Ethel, 2016). Over anxiety would cause physical disorder, unconsciousness, and insensitivity towards disaster or sad news. Besides, as the consequences of over-anxiety, concentration will decrease, depression, guilt for many things, and self-appreciation decreases.

Research by Mekeama (2017) on psycho-social experiences experienced by foster children one of which was anxiety and confusion in choosing and determining the way of life for their future. Other research by Hastuti (2013) in her research state that in general, foster children will worry about a condition when they finished high school. Social anxiety from the limited space, from being far from family, and their situation when they have gone away from the orphanage will make teenagers become anxious and confused.

Counseling approach could be an alternative to facilitate foster children in reducing social anxiety. Group counseling process refers to each stage of

development experienced by each member of the group during the group counseling. Myric (2011) states that group counseling process could become a new unique experience where in the process, each member of the group would be encouraged to work together in exploring ideas among the members, attitudes as well as feelings and behavior among the member related to the counselee's self-development.

One of the counseling techniques from Solutions Focused Brief Counseling (SFBC) approach that is possible to be applied to foster children is counseling with the miracle questions technique and scaling questions where this technique is in form of miracle questions and scaling questions. Miracle questions concept is given through stimulus questions about the possibility of problems to be solved. This concept emphasizes that letting the counselee may encourage themselves to be able to dream, in this process, the counselee will have the ability to identify the type of change they expect (Mulawarman, 2019).

Previous research by Fitriani & Wulandari (2021) states that this research sees effectiveness from Islamic counseling using the scaling questions technique to decrease anxiety in the bride. This research shows that Islamic counseling is proven effective to decrease anxiety before the wedding. Furthermore, Martina & Supandi (2017) in their research tried to describe how using scaling questions in decreasing the patient's anxiety. The research result shows that the scaling question technique could help the counselee to tell the condition openly to deliver the issue that hinders it. Therefore, this research tried to prove the combination of scaling techniques to reduce anxiety occurring in foster children.

Different from the miracle question technique, the scaling questions technique focuses on the solution as well as the use of scaling questions on the individual's experience experiencing changes. According to Martina (2017), she states that scaling questions is a technique used to provide an assessment of the individual by scaling from a scale of 0 or 1 for the best score (the individual does not have control at all towards the issue) up to scale 10 for the worst score (individual have control towards the issue), this regards to the individual in the process of self-observation, understanding the problem, as well as the belief that there will be the solution they will obtain during the counseling.

Social anxiety of the foster children requires attention and help in the management of emotion, anxiety, and fear of bad assessment from other people. Therefore, this research aims to see the effectiveness of group counseling using miracle questions techniques and scaling questions techniques in reducing social anxiety experienced by foster children.

Research Method

Subject involved in this research is 7 foster children in SOS Children's Village Semarang with the range of age of 14-17 years old. They were selected in purposive sampling with the criteria of foster children with high social anxiety. Social anxiety level of the foster children is measured using social anxiety instrument developed by the researcher in the aspect of: Fear of Negation Evaluation (8 items), Social Avoidance and Distress in New Situation (9 items), and Social Avoidance and Distress-General (9items) that has 4 scale options (1= very compatible, 4=very incompatible). Based on the test of instrument validity, it was obtained that 26 items are stated as valid (rxy=0.307-0.586) and the alpha reliability coefficient is as much as 0.839.

This research uses the experiment method using One Group Pretest-Posttest design implemented in three stages. First, measure the social anxiety to select the experiment's research subject experiencing high social anxiety. Second, group counseling treatment is given using the miracle technique and scaling questions. Third, a post-test is given to all members of the group to measure the level of social anxiety using social anxiety instrument.

Results and Discussion

The result shows that individuals with social anxiety could be identified by low self-esteem and unable to receive critics from other people. Other social disorder is also known as social phobia which could be identified by fear of the past, insult, and negative evaluation from other people in a social situation and someone tends to avoid the situation they are fear of (Kashdan, 2001). Each individual with social anxiety will have different symptoms. Someone could experience the signs of having social anxiety in a new situation, even in a situation where they know the

people. Therefore, someone with social anxiety issues will tend to be afraid of meeting other people, this is because they are fear of critics from other people.

Foster children whose social anxiety score high tends to have social avoidance compared to the ones with medium or low social anxiety score. Social anxiety occurs as the consequence of a weak social network, lack of social support, and lack of warmth and attention from the closest environment. Family becomes one of the places to introduce values that become the base for an individual to have broader social connections. This is also caused by the time provided, experience, education, and parents' interests.

The condition experienced by the foster children that must live together in the orphanage should continue their development into maturity with the existing limitation. Any limitations in parenting or other things that could limit the space may cause stress or anxiety. Parenting for foster children is expected to remain an alternative to family parenting so that the children could grow along with the stages of their development. Children's socialization function in a family becomes an important aspect of parenting to children.

Pretest measurement result identified that the level of social anxiety of the foster children tends to be high (M= 82.29, SD= 4.27). Table.1 shows the analysis result of Mean, SD, and Wilcoxon test results.

Table 1. Data Analysis Result

Measurement		Experiment
Pretest	M	82.29
	SD	4.27
Post test	M	44.87
	SD	2.67
Z	-2.37	
P	<0.05	

SFBT group counseling provides an effect of the decreasing level of social anxiety between the pretest (M= 82.29, SD= 4.27) compared to the posttest (M = 44.87, SD = 2.67; z = -2.37[b] p < 0,05). This finding has proven the effectiveness of

the miracle technique and scaling technique in reducing the social anxiety of foster children.

The result of this research shows that foster children who followed the treatment by group counseling using the miracle technique and scaling questions after the intervention was given were proven effective that social anxiety was reduced. The reduced anxiety in the end will help an individual in overcoming common symptoms of social anxiety. The finding shows that scaling questions are effective in reducing social anxiety.

This finding applied combined techniques, I.e. scaling and miracle questions of SFBC approach, where this therapy focuses on the solution and the counselor is encouraged to stop the process as fast as possible for the growth and the development of the counselee (Capuzzi & Stuffer, 2016). Entirely, a therapy focusing on a solution tries to be autonomous in the therapy of a relationship and dependent on the idea that unnecessary focus on the problem could cause the therapy extends longer than required.

This research result is along with the research by (Mohseni Takalu et al, 2017) the objective of this research is to observe the effectiveness of group therapy focusing on the solution in reducing anxiety, as of the result of this research shows anxiety, after the intervention significantly lower than group experiment than the control group. In other words, group therapy focusing on the solution has a significant effect in reducing anxiety.

Previous research by Ramesh (2015) states that Fifteen teenagers were diagnosed with participating disorder in 12 weeks program of Solution Focused Brief Therapy (SFBT). The result shows a significant increase from pre-therapy to post-therapy in terms of social anxiety, self-efficacy, and the rank of anxiety doctor among the participants. The result shows acceptance and the potency of SFBT efficacy for SAD and highlights the need for future research on the efficacy and the changing mechanism of medication programs focusing on the solution for social anxiety. Other research was performed by Taylor (2013). The objective of this quantitative research was to measure the effect of SFBT on the anxiety symptoms of the client in group therapy. Based on social constructionism, this research tried

to find the use of SFBT in group counseling as an effective intervention. SFBT could become a model of group therapy to produce positive things in social change.

Furthermore, the research by Suranata & Prakoso (2020) was a pilot study aiming to make a website and analyze the effectiveness of the website-based solution focusing on short counseling (SFBC) program to reduce academic anxiety experienced by High School Students. This study was carried out by a group of experiment design pretest-postest involving 30 High School students in Singaraja, Bali. The research result shows that the website-based SFBC program is effective in reducing academic anxiety experienced by high school students; the website-based SFBC program has a good level of acceptance and appropriateness based on the student's perception. The result of this research implies the use of counseling method-based websites for students.

Miracle and scaling question technique is part of SFBC approach, where this approach assumes that the counselee focuses on the solution, a clear and concrete objective. At the beginning of the counseling, the question is commenced to make the objectives clearer. Information about exceptions and about "miracles" help develop certain objectives. By finding out what would be changed in someone's life, the problem is solved. How well this small objective is fulfilled is evaluated at some points during the therapy. Frequently, the client is asked to assess the progress on a scale of 0 to 10 (Sharf, 2004). Both techniques could be combined to ease the counselee in finding the solution to their problems.

Based on the research finding and the related finding, it is proven that miracle and scaling questions techniques could be applied in reducing social anxiety. These techniques could help the counselee to think in the present and the future. The use of miracle questions is perhaps on how the client's feeling or how the client would think. Miracle questions technique could be combined with scaling questions that could be done in helping the counselee to determine their objective, measure their progress, or to determine priority to take action. This proves that the result of this research could be developed by the next researcher using various variables, or in group counseling intervention, a control group could be added as the comparison to measure the effectiveness level of both techniques in reducing anxiety. Other

variables could be developed to prove that this technique could be used based on the counselee's needs.

Conclusion

This research was conducted to test the level of group counseling effectiveness using miracle and scaling questions techniques in reducing the social anxiety of foster children. This finding proves the effectiveness of the miracle and scaling questions technique in reducing the social anxiety of foster children in SOS Children's Village Semarang. The decrease in this anxiety is signed by the change of positive attitude in interpreting life, the way they socialize, and the way they see self-advantages and disadvantages as an effort to think positively so that bad assessments from other people do not hinder them in their development process.

Solution focused brief counseling approach focuses on the solution, clear intervention focus on effective short term and orientating on the present is suitable to be used in the counseling process on the individual with anxiety problems, low-self esteem, low confidence, and problem in a social situation. This research proves that with miracle and scaling questions, counselees could encourage themselves to be able to dream, which in this process, the counselee would have the ability to identify the type of change they expect. While the scaling questions technique, takes the counselee to be able to reveal their feelings in the form of a scale, this is of course a solution alternative that could be used on the counselee who is having difficulty revealing their self-condition in verbal form.

Counselor may apply group counseling intervention to overcome the problem related to social anxiety. For future researchers, it could use a broader research design and could add other variables to support the welfare of the foster children like self-esteem and social support.

Fiana, A.L

References

American Psychiatric Assosiation. (2013). Diagnostic and statistical manual of mental disorder edition "DSM-5", Washington DC: American Psychiatic Publishing.

Capuzzi, D. & Stauffer, M. (2016). Counseling and Psychotherapy Theories and Interventions. American Counseling Association.

Ethel, Ricca, A. Sarjana W. Sofro, M, A, U. (2016). Hubungan tingkat kecemasan dengan kualitas hidup pasien hiv/aids di rsup dr. Kariadi semarang. *Jurnal kedokteran Diponrgoro. Volume 5, Nomor 4.* https://doi.org/10.14710/dmj.v5i4.15910

Ford, E. Liebowitz, M. & Andreas, L, W. (2007). What you must think of me: a firsthand account of one teenager's experience with social anxiety disorder. Oxford University Press.

Hastuti, I.B. (2013). Pelatihan kori untuk meningkatkan kepercayaan diri pada remaja panti asuhan. *Program Pendidikan Magister Profesi Psikologi Fakultas Psikologi Universitas Muhammadiyah Surakarta*.

Kashdan, Todd & Herbert. J (2001). Social anxiety disorder in childhood and adolescence: current status and future directions. https://link.springer.com/content/pdf/10.1023/A:1009576610507.pdf

La Greca, A. M., & Lopes. N. (1998). Social anxiety among adolescents: linkages with peer relations and friendships. *Journal of Abnormal Child Psychology, Vol. 26, No.2, pp. 83-94.* https://doi.org/10.1023/a:1022684520514

Martina, Khoirun, N, D. & Supandi. (2017). Konseling islami dengan teknik scaling question untuk mengurangi kecemasan pasien. https://www.researchgate.net/publication/322145886_konseling_islami_dengan_teknik_scaling_question_untuk_mengurangi_kecemasan_pasien

Mekeama, L. (2017). Studi fenomenologi: pengalaman pikososial remaja yang tinggal di panti asuhan muhammadiyah aisyiyah kota jambi. *Universitas Andalas.*

Mohseni Takalu, M. T., Hosseini, S. A., & Khankeh, H. (2017). Effectiveness solution-focused therapy group, to reduce stress, anxiety and depression in caregivers of patients with multiple sclerosis. *Modern Care Journa*l, 14(4). https://doi.org/10.5812/Modernc.10696

Mulawarman. (2019). *SFBC (Solution-Focused Brief Counseling), Konseling Singkat Berfokus Solusi: Konsep, Riset, dan Prosedur.* Jakarta: Prenadamedia Group.

Myrick, R, D. (2011). *Development Guidance and Counseling: A Practical Approach.* Minneapolis: Educational Media Corporation.

Parr, C. J., & Cartwright-Hatton, S. (2014). Social anxiety in adolescents: The effect of video feedback on anxiety and the self-evaluation of performance. *Clinical Psychology & Psychotherapy, 16(1), 46–54*. https://doi.org/10.1002/cpp.599

Ramesh. (2015). Solution-focused brief therapy for social anxiety disorder- a pilot study. *International Journal of Psychology and Education, 2 (7).*

Sharf, Ricard. (2004). Theories of Psychotherapy and Counseling: Concepts and Cases, 5th Edition. Linda Schreiber-Ganster.

Suranata & Prakoso. (2020). Program web-based SFBC untuk mereduksi kecemasan akademik siswa saat pandemi COVID-19; sebuah pilot studi. *JPPI (Jurnal Penelitian Pendidikan Indonesia)Vol.6, No.2. pp. 47-52*. http://dx.doi.org/10.29210/02020609

Taylor, William. (2013). Effects of Solution-Focused Brief Therapy Group Counseling on Generalized Anxiety Disorder. *ProQuest Dissertations Publishing.*