Individual Counseling Client-Centered Approach in Increasing the Resilience of Victims of Bullying

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Abstract
Resilience is an aspect that is owned by individuals in dealing with pressure or challenges. Individuals in health need Resilience. The hectic bullying among teenagers is a phenomenon that has not been fully resolved. This study aims to determine the effectiveness of individual counseling with the client-centred approach in increasing victim resilience-bullying. The methodology in this research is a quantitative experiment, design pre-experiment type and Post-experiment. The sampling technique in this study uses purposive sampling. The sample in this study was two respondents data analysis using Single Subject Research (SSR) with A design1-B-A2. The research results show that the resilience of bullying victims is classified as low with a score for respondent "A," which is 45 and respondent "R," namely 48. Both individual counseling approaches are client-centred and effective in increasing victim resilience-bullying given to respondents "A" and "R" turned out to be effective. With an increase of 14 points for respondent "A" and for respondent "R" as many as 15 points. Thus, the group counseling approach is client-centred and effective in increasing the resilience of victims of bullying.

Keywords: Client-Centered, Individual Counseling, Resilience.


Introduction
The degree of resilience an individual possesses stands out as a pivotal factor influencing their achievement. Resilience constitutes a fundamental attribute enabling individuals to navigate stress, adversities, and unfavorable circumstances (Stainton et al., 2019). Resilience is an inherent capability inherent in all individuals since birth, manifesting in their capacity to endure hardship, setbacks, and trials. This quality represents an inherent strength that empowers individuals to promptly rebound from challenges or despondency (Hendar et al., 2020). Resilience delineates an innate potency that empowers individuals to swiftly recover from adversity and exhibit an imperviousness to detrimental life occurrences (Reivich & Shatté, 2002).

Bullying is common in Indonesia. Bullying is a problem that plagues people of all ages, and can be very dangerous. Bullying is using power to hurt others in a way that makes them feel depressed, afraid, and helpless (Sirry et al., 2022). Victim case bullying in Indonesia is still experiencing significant growth. In 2016-2020, the data at the KPAI (Indonesian Child Protection Commission), namely those experiencing bullying in school, numbered 480. Victims of bullying on social media numbered 361, victims bullying 891 physically and 328 psychologically (KPAI, 2020). Bullying is carried out by the closest people, such as family or friends, who should be a support system; what is good for the individual becomes the bullying; behaviour like this makes the victim’s resilience-bullying drop. Research studies by Yuliatul,
(2020) showed that bullying could change a person's resilience. If left unchecked, this will have a terrible impact on the mental or psychological development and self-confidence of the victim of bullying. Therefore, they need help, guidance, motivation, and direction from other people or in other words, they need counseling to alleviate the problems they face.

Rogers defines counseling as a contribution in which the counselor supports the counselee to improve his mental abilities and functions. So that they can better solve the problem at hand (Lambie & Sias, 2009). Tolbert (in Yusuf, 2016) says that individual counseling is a face-to-face relationship between the counselor and the person being counselled, the counselee is assisted in understanding himself, the circumstances at hand and the current period so that the counselee can use his potential to realize personal and social welfare, and more generally, the counselee can model how he solves problems and achieves his future aspirations. From the explanation above, it can be concluded that individual counseling is a process of helping counselees alleviate the problems they face so that they can develop optimally. In counseling there are several approaches, one of which is the client-centered approach.

The Client-Centered approach, discovered and developed by Rogers, is a client-centred therapy (Kensit, 2000). This approach was an innovation from existing therapies at that time, because it placed counselors and counselees on an equal footing. The relationship between counselor and counselee is recognized by warmth, and mutual trust, counselees are seen as adults who can make decisions and are responsible for their own decisions. The counselor's job is to support the counselee to find out about their problems so they can find solutions for themselves (Astuti, 2021). Approach Client Centered view of human personality positively. Counseling by approach client-centred is an attempt to solve the problem by focusing on what the counselee is experiencing, the counselee is allowed to express what is the problem, and the thoughts that are in him are released freely. Counseling with a client-centered approach embodies an essential endeavor in problem-solving that directs its focus on the experiences of the client (Clarke & Neuhard, 2004). In this context, the client is granted a space and ample opportunity to express and elucidate the barriers or issues they are currently facing. Thoughts that may have long been suppressed within them are allowed to flow freely, creating room for deep reflection and the exploration of solutions relevant to their situation (McKay & Barton, 2018).

More than just a counseling approach, the client-centered method signifies an approach that values the depth of individual complexity and unique personal experiences. The continuity of research in this domain underscores an undeniable urgency. In an increasingly complex and pressure-laden world, the need for bolstering mental and emotional resilience in individuals becomes ever more critical. By giving special attention to the client's experiences and perspectives, this approach directly contributes to the development of powerful tools to confront diverse life challenges. Consequently, a deeper understanding of how the client-centered counseling approach can play a role in enhancing individuals' resilience to pressure, including within the context of this research, holds substantial implications for societal development and overall psychological well-being.

Methods

This study uses a quantitative approach with a single subject or so-called single-subject research (SSR). This experimental research uses design pre-experiment type Pre WSAQ and Post experiment, namely comparing before and after treatment to the subjects in the study. Data collection techniques used resilience questionnaires. The population is 16 teenagers who are in the Sako sub-district. The research sample is taken through the purposive sampling technique obtained from 2 people, namely subjects "A" and "R." The research location is located on Jl. Sematang forms Lr. East Cross, Sako village, Sako sub-district, Palembang city.

Results and Discussion

Results

Table 1 shows the descriptive presentation of teachers' age, years of experience, and working status. The results show that the mean work-related psychosocial hazard score for teachers aged below 10 (104.25±33.60), within the age range 10 to 20 (113.43±35.62), the age range of 21 to 30 (105.10±27.67), and the age range of 31 to 40 (108.59±15.55). The result shows a high level of work-related psychosocial hazard among primary school teachers irrespective of age.

Under Condition Analysis. (Result of Calculation of Victim Resilience Level Bullying Phase Baseline -1, Intervention, and Baseline -2 (A1 – B - A2), see table 1, 2 and table 3.
The graph above explains that the level of resilience in respondent "A" has increased with the value pre-test 45 in the low category and with results post-test 59 in the moderate category, the number of increases between pre-test and post-test in respondent "A" that is an increase of 14 points, see grafik 1 and 2.

Chart analysis in the respondent "R" experienced an increase in the pre-test resilience with a value of 48 in the low category; in the post-test, the value increased to 63 in the moderate category. The conclusion from the graph above is that there is an increase in resilience in both respondents. The respondent "A" phase baseline 1 has a score of 45 and baseline 2 with a score of 59. The results of the research that has been done show the level of resilience of victims of bullying included in the low category, namely the respondent "A" with a value of 45 and the respondent "R" with a value of 48 included in the low category.

Table 1. Analysis of Respondents' Conditions “A”

<table>
<thead>
<tr>
<th>Treatment</th>
<th>PA</th>
<th>Aspect</th>
<th>Score</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline 1</td>
<td>14</td>
<td>17</td>
<td>14</td>
<td>45</td>
</tr>
<tr>
<td>Intervention 1</td>
<td>15</td>
<td>16</td>
<td>16</td>
<td>45</td>
</tr>
<tr>
<td>Intervention 2</td>
<td>17</td>
<td>18</td>
<td>17</td>
<td>52</td>
</tr>
<tr>
<td>Intervention 3</td>
<td>18</td>
<td>20</td>
<td>17</td>
<td>55</td>
</tr>
<tr>
<td>Baseline 2</td>
<td>18</td>
<td>21</td>
<td>20</td>
<td>59</td>
</tr>
</tbody>
</table>

Table 2. Analysis of Respondents' Conditions “R”

<table>
<thead>
<tr>
<th>Treatment</th>
<th>PA</th>
<th>Aspect</th>
<th>Score</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline 1</td>
<td>16</td>
<td>18</td>
<td>14</td>
<td>48</td>
</tr>
<tr>
<td>Intervention 1</td>
<td>16</td>
<td>18</td>
<td>14</td>
<td>48</td>
</tr>
<tr>
<td>Intervention 2</td>
<td>17</td>
<td>19</td>
<td>14</td>
<td>50</td>
</tr>
<tr>
<td>Intervention 3</td>
<td>19</td>
<td>20</td>
<td>14</td>
<td>53</td>
</tr>
<tr>
<td>Intervention 4</td>
<td>21</td>
<td>21</td>
<td>15</td>
<td>57</td>
</tr>
<tr>
<td>Baseline 2</td>
<td>21</td>
<td>22</td>
<td>20</td>
<td>63</td>
</tr>
</tbody>
</table>

Information:
PA = Personal Ability
SI = Social Interaction
SC = Self-Concept

Table 3. Results of the Calculation of the Resilience Level of Bullying Victims

<table>
<thead>
<tr>
<th>Respondent</th>
<th>Baseline 1</th>
<th>1</th>
<th>Intervention 2</th>
<th>3</th>
<th>Intervention 4</th>
<th>Baseline 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>45</td>
<td>45</td>
<td>47</td>
<td>52</td>
<td>55</td>
<td>59</td>
</tr>
<tr>
<td>R</td>
<td>48</td>
<td>48</td>
<td>50</td>
<td>53</td>
<td>57</td>
<td>63</td>
</tr>
</tbody>
</table>

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Things that the field on Respondents "A" and "R" experienced bullying, which was done by their family treatment bullying. What you get is verbal and relational.

**Discussion**

The instrument was distributed to the respondent "R" on the personal ability to get a score of 16 points. That "R" is not confident because he often gets bullied, does not believe in their strengths, finds it difficult to speak in public and tends to be silent, is not confident in carrying out the work given, and is not confident in making decisions. Regarding social interaction, with a score of 18 points, he is uncomfortable in crowds, not yet daring to express opinions in discussion forums, is not easily familiar with other people, and tends to be more withdrawn in his surroundings. On the aspect of self-concept, with a score of 14 Points, namely he feels pessimistic about something he is doing, does not believe in his appearance and does not believe in his abilities.

A pre-test of the instruments was distributed to the respondent "A" with a total score of 45 Points. On aspects of personal ability namely "A" is not confident because he gets treatment bullying by demeaning his physique and abilities so that he feels his abilities are not extraordinary things for him not confident in doing something. Regarding social interaction, he tends not to like crowds or chatting, is more comfortable with solitude, and does not dare to express opinions. Furthermore, namely in the aspect of self-concept, feeling unattractive, pessimistic, and does tending to rely on others when making decisions even though they don't agree, but don't dare to express it.

Therefore, to increase individual resilience, the researchers used alternative solutions in the form of individual counseling services with an approach client-centred in increasing victim resilience against bullying. This aligns with the results of a thesis study entitled “Resilience in Young Victims Bullying Verbal at SMPN 4 Binjai” by Melati Hasian Lumban Gaol from the University of North Sumatra University of Nursing in 2020. The results of the research conducted showed that the victim bullying verbal is 58.2%, showing the level of resilience of adolescents is 81.3%, where adolescents have an average resilience (Gaol, 2020). This research proves that adolescent resilience is very important for individuals to improve certain things in their lives, for that, it can be concluded that individual counseling approaches client-centred effective in increasing the resilience of victims of bullying.

Hence, recognizing the imperative to fortify individual resilience in the face of pervasive bullying, researchers judiciously embraced a proactive stance, employing innovative remedies to counteract the adverse effects of victimization. This discerning approach culminated in the implementation of individual counseling services, infused with the foundational tenets of client-centered therapy (Ikiugu, 2007). With an unwavering commitment to bolstering victims’ inner strength and capacity to rebound from the trauma of bullying, this approach stands as a beacon of hope and empowerment (Truebridge, 2014).

Through this therapeutic medium, victims are not merely recipients of guidance, but active participants in their own healing journey, as they are enveloped in an environment of empathetic understanding and unconditional positive regard (Billington, 2019). This bespoke counseling approach not only fosters a safe space for victims to voice their experiences but also nurtures the cultivation of newfound resilience through self-exploration, emotional processing, and the gradual acquisition of coping mechanisms (Compton & Schoeneberg, 2020). Ultimately, the fusion of individualized counseling and a client-centered framework emerges as a transformative force, kindling the flames of resilience and enabling victims to transcend the shackles of victimization, fostering their evolution into individuals imbued with newfound strength and a fortified sense of self.

**Conclusion**

The utilization of the Individual counseling approach, characterized by its inherently client-centered nature, emerges as a potent and efficacious strategy in the augmentation of resilience among individuals grappling with the harrowing effects of bullying. Within the framework of this approach, those subjected to the distressing ordeal of bullying find solace and empowerment. Through the vehicle of counseling, victims of bullying are provided with a profound and comprehensive therapeutic intervention that adheres unwaveringly to the principles of client-centered therapy. This therapeutic modality is meticulously tailored to address the unique and intricate psychological landscape of each individual, allowing for a deeply personalized healing process that fosters growth and resilience. By engendering an atmosphere of empathetic understanding, active listening, and non-judgmental support, the client-centered approach dismantles the barriers inhibiting the victim's emotional expression and self-actualization. Consequently, individuals who have endured the trauma of bullying are afforded the opportunity to articulate their
experiences, navigate their emotions, and rebuild their sense of self-worth under the guidance of a skilled counselor. As the therapeutic journey unfolds, victims of bullying engage in profound self-reflection, recontextualizing their experiences, and progressively cultivating a fortified inner resilience. The client-centered approach's efficacy lies in its capacity to empower individuals with the tools to not only cope with the aftermath of bullying but also to transcend adversity and emerge as more resilient and self-assured individuals.

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References


