

Group intervention for emotion regulation training based on cognitive behavioral therapy (CBT) to reduce stress levels in early adolescents

Intervensi kelompok pelatihan regulasi emosi berbasis *cognitive behavioral therapy* (CBT) untuk menurunkan tingkat stres pada remaja awal

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ABSTRACT

Entering the early adolescent development phase brings many challenges for individuals, which can trigger prolonged stress. Adolescents need to overcome this stress to minimize further impacts, such as social relationship problems, academic difficulties, and psychological issues. This study aims to evaluate the effectiveness Cognitive Behavioral Therapy (CBT)-based emotional regulation training in reducing stress levels in early adolescents. This study used quasi-experimental research type with one-group pretest-posttest design. The participants were six early adolescents (12-14 years old) who exhibited severe levels of stress and emotional dysregulation. Changes in stress levels and emotional dysregulation were measured using the Difficulties in Emotion Regulation Scale-Short Form (DERS-SF) and the Depression Anxiety Stress Scale-21 (DASS-21) before, immediately after, and one month post-intervention. Friedman test results showed significant decrease in the level of emotional dysregulation ($p=.04$; $p<.05$) and stress levels ($p=.03$; $p<.05$) from pretest, posttest, and follow up. These findings suggest that CBT-based emotion regulation training is effective in improving emotion regulation skills and reducing stress levels in early adolescents.

ABSTRACT

Memasuki fase perkembangan remaja awal membawa banyak tantangan bagi individu yang dapat memicu stres berkepanjangan. Remaja perlu mengatasi stres yang muncul untuk meminimalisir dampak lebih lanjut seperti masalah hubungan sosial, masalah akademik, hingga masalah psikologis. Penelitian ini bertujuan untuk menguji efektivitas pelatihan regulasi emosi berbasis *Cognitive Behavioral Therapy* (CBT) untuk membantu menurunkan tingkat stres pada remaja awal. Penelitian ini menggunakan jenis penelitian kuasi eksperimen dengan desain one group pretest-posttest. Partisipan penelitian merupakan enam orang remaja awal (12-14 tahun) yang menunjukkan tingkat stres dan disregulasi emosi yang tergolong berat. Perubahan tingkat stres dan disregulasi emosi diukur melalui skor yang diperoleh sebelum, setelah, dan satu bulan setelah intervensi menggunakan alat ukur *Difficulties in Emotion Regulation Scale-Short Form* (DERS-SF) dan *Depression Anxiety Stress Scale-21* (DASS-21). Hasil uji Friedman menunjukkan adanya penurunan yang signifikan pada tingkat disregulasi emosi ($p=.04$; $p<.05$) dan tingkat stres ($p=.03$; $p<.05$) dari *pretest*, *posttest*, dan *follow up*. Temuan ini mengindikasikan bahwa pelatihan regulasi emosi berbasis CBT efektif meningkatkan kemampuan regulasi emosi dan menurunkan tingkat stres pada remaja awal.

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1. INTRODUCTION

During adolescence, individuals are expected to fulfill developmental tasks by finding their identity. They need to discover their potential, life goals and values, self-confidence, and important aspects of life, including expanding social relationships (Erikson, 1968). However, the process of self-identity exploration is not easy for adolescents due to numerous changes in their lives, such as physical, cognitive, social, and emotional changes (Papalia et al., 2009). Specifically, during early adolescence, between ages 11-14, individuals face the transition from elementary school to middle school. Early adolescents must adjust to more challenging learning levels, new peer groups, new teachers, and more complex social activities (Wu et al., 2024).

The various challenges faced by early adolescents make them highly vulnerable to prolonged stress (Khasanah & Mamnuah, 2021). Stress arises from the gap between increasing developmental demands and the resources available to adolescents. Although stress is necessary at a normal level to help individuals with daily activities, excessive stress can lead to physical and mental health issues (WHO, 2023). Adolescents with high stress levels are particularly prone to maladaptive behaviors such as delinquency, substance use, self-harm, and even suicide (Sigfusdottir et al., 2017). Therefore, adolescents need adequate resources to help them cope with developmental demands, including emotional regulation abilities (Berardis et al., 2020; Magson et al., 2021)

Emotional regulation is a process involving physiological, motivational, behavioral, and cognitive aspects where individuals influence or control their emotions—when they feel them, how they experience them, and how they express them (Gross, 2014). Adolescents with proper emotional management are predicted to have higher psychological well-being, better problem-solving skills, and improved interpersonal abilities (McLaughlin et al., 2011; Sabatier et al., 2017; Mulyati et al., 2019). Unfortunately, despite experiencing various forms of emotion during development, many adolescents lack or are unaware of appropriate strategies to manage these emotions (Mulyati & Supriatna, 2019). A lack of knowledge and skills in emotional regulation leads adolescents to potentially use maladaptive strategies, such as avoidance, suppression, excessive focus, or inappropriate expression of emotions (Moran, 2016; Mulyati & Supriatna, 2019). Such regulatory approaches are risky and may lead to internalizing and externalizing behavioral problems in adolescents (Berardis, 2020).

The ability to regulate emotions can be improved through emotion regulation training (Mulyana et al., 2020). Such training aims to help adolescents find more effective ways to manage and process negative feelings, thus avoiding more severe psychological issues (Valencia & Sinambela, 2022). Adolescents will be taught how to recognize and understand their emotions, accept them, control and exhibit adaptive behaviors, and use appropriate emotion regulation strategies (Southam-Gerow, 2013). Previous studies have shown that emotion regulation training can reduce stress, anxiety, and maladaptive behaviors in adolescents (Benu et al., 2021; Ramadhony, 2020; Houck et al., 2016). However, inconsistencies have been

observed in other studies, where emotion regulation training did not significantly impact reductions in psychological issues such as anxiety, stress, and depression (Lestari & Yudianto, 2022; Larsson et al., 2019). Additionally, previous research has limitations such as the lack of follow-up to assess the long-term effects of emotion regulation training and the absence of screening participants based on emotion dysregulation issues (Pedrini et al., 2022; Esmaili et al., 2022; Larsson et al., 2019). Therefore, further research is needed to comprehensively assess the effectiveness of emotion regulation training in reducing stress levels in early adolescents.

Considering that emotion regulation heavily relies on cognitive functions like problem-solving and memory (Pettineli, 2014), emotion regulation training using a CBT approach is deemed appropriate because it emphasizes the interrelation among emotions, cognition, and behavior (Southam-Gerow, 2013). This approach can help participants reframe irrational thoughts, process emotions, regulate emotional reactions, and enhance adaptive behaviors in challenging situations. CBT is one of the most widely used approaches for alleviating psychological issues (Creswell et al., 2020; Li et al., 2020; Chaudhary, 2019).

The CBT-based emotion regulation intervention will be conducted in a group setting, acknowledging that peer interaction and acceptance play a crucial role in adolescent development (Papalia et al., 2009), thus aiming to maximize the intervention's effectiveness. Group approaches provide more opportunities for participants to learn about themselves and others. Additionally, group therapy has been shown to offer therapeutic benefits such as insight, catharsis, and learning for interpersonal relationships (Giacomucci, 2021). Through group interventions, participants are expected to share and provide feedback that will help them adopt emotion regulation skills, thereby enhancing the effectiveness of the training provided. The alternative hypothesis tested in this study is that group interventions using CBT-based emotion regulation training can effectively reduce stress levels in early adolescents.

2. METHODS

The type of research used in this study is a quasi-experimental design with a one-group pretest-posttest design. This design uses a single sample group which is then compared between pretest and posttest results to determine the effectiveness of the research conducted (Azwar, 2017).

The research participants are six early adolescents aged 12-14 years who have high levels of stress and emotion dysregulation.

This study uses two measurement tools administered to participants before, after, and 1 month after the intervention, namely the Difficulties in Emotion Regulation Scale Short Form (DERS-SF) and the Depression, Anxiety, Stress Scale-21 (DASS-21). DERS-SF is an instrument used to measure the level of difficulty adolescents have in regulating emotions. DERS-SF consists of 13 items developed by Kaufman et al. (2016) adapted from the Difficulties in Emotion Regulation Scale (DERS) by Gratz and Roemer (2004). In this intervention, the scale

used has been translated and adapted into Indonesian by Fiartri (2020) with a good reliability score of 0.89. An example item on the DERS-SF scale is ‘I have difficulty understanding my feelings.’ The DASS-21 is a measurement instrument for assessing depression, anxiety, and stress with 21 items. This tool was developed by Lovibond and Lovibond (1995) and later adapted into Indonesian with a sufficiently good reliability score of 0.88 for depression, 0.86 for anxiety, and 0.77 for stress (Hakim & Aristawati, 2023). In this study, the researcher uses only the stress dimension to measure participants’ stress levels with an example item ‘I feel nervous.’

The research was conducted after obtaining an ethics review letter from the Ethics Committee of the Faculty of Psychology, Universitas Indonesia (Number: 074/FPsi.Komite Etik/PDP.04.00/2024) and after participants filled out informed consent explaining information related to the research, data confidentiality guarantees, and participants’ rights.

Generally, the research is divided into four stages: pre-test, intervention implementation, post-test, and follow-up. The pre-test stage is conducted to assess the initial levels of stress and emotion dysregulation before the intervention sessions begin. The pre-test is conducted using the DASS-21 and DERS-SF questionnaires. Next, the intervention implementation stage consists of five sessions with a duration of approximately 60-90 minutes. The intervention activities are detailed in Table 1. Then, the post-test stage involves re-measuring participants’ stress and emotion dysregulation levels using the DASS-21 and DERS-SF after all intervention activities have been completed. Additionally, participants will be asked to review the intervention activities. The post-test is conducted to assess the results of the intervention program. Finally, the follow-up stage involves re-measuring within 1 month after the post-test to assess the effectiveness of the intervention program.

Table 1. Series of intervention materials and activities

Session	Materials and activities
1 st	Understanding and Being Aware of Emotions (Recognizing the various emotions that arise, the causes of emotions, the purpose of emotions, the intensity of emotions, body reactions based on emotions, and mindful breathing)
2 nd	Managing Emotions: Meeting Basic Needs and Adaptive Emotional Responses (Check-in emotions, sociometer of basic needs fulfillment, identification of adaptive and maladaptive emotion regulation strategies, and mindful breathing)
3 rd	Managing Emotions: Increasing Positive Emotions (Check-in emotions, filling out the dopamine menu worksheet, and mindful breathing)
4 th	Using the Mind to Manage Emotions (Check-in emotions, expressing disturbing thoughts, anxiety box, understanding the triangle of thoughts, practicing creating new ways of thinking, practicing mindfulness by playing with plasticine)
5 th	Expressing emotions (Check-in emotions, practicing mindfulness by sensing the finger, telling stories with others, writing art journaling, and pass the compliment activities)

Data analysis was conducted quantitatively using non-parametric analysis due to the small sample size (<30). The Friedman non-parametric test was used to determine the differences in stress and emotion dysregulation levels of participants before (pre-test), after (post-test), and 1 month after the intervention (follow-up). Additionally, the researcher compared stress and emotion dysregulation scores to assess the percentage decrease in stress and emotion dysregulation levels. Qualitative analysis was also performed by recording the changes experienced and perceived by participants.

The success indicators for this study are a 15% reduction in stress scores on the DASS-21 and a decrease in emotion dysregulation scores based on the DERS-SF. These success indicators were established by reviewing several previous studies that found CBT programs conducted in 10-14 sessions over 1-2 months had a success rate of 10-40% in reducing stress, anxiety, and depression (Li et al., 2020; Chaudhary, 2019; Granath, 2006). Therefore, a 15% success indicator in this study is considered appropriate given the fewer number of sessions and shorter intervention period.

3. RESULTS AND DISCUSSION

RESULTS

Table 1 shows the stress scores (with the DASS-21 scale) and emotion dysregulation scores (with the DERS-SF) of the participants at pre-test, post-test, and follow-up.

Table 1. Pre-test, post-test, and follow-up results

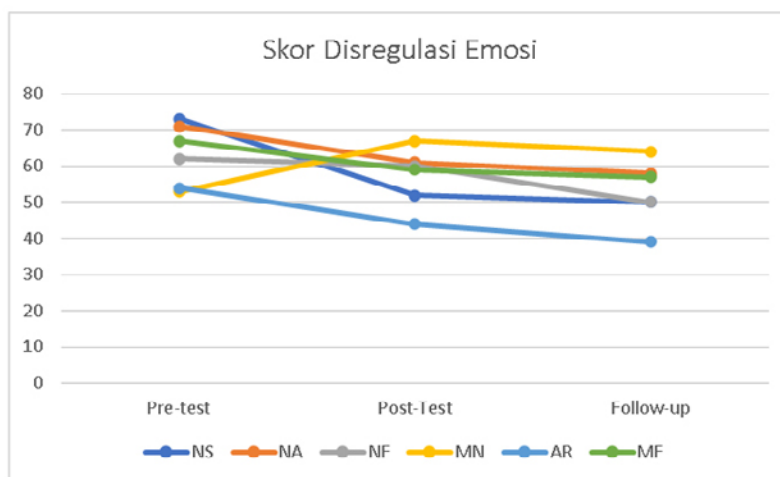
Participants	Stress Scores			Emotional Dysregulation Score		
	Pretest	Posttest	Follow-up	Pretest	Posttest	Follow-up
NS	30 Severe	18 Mild	8 Normal	73 Severe	52 Severe	50 Severe
NA	30 Severe	24 Moderate	12 Normal	71 Severe	61 Severe	58 Severe
AR	28 Severe	16 Mild	2 Normal	54 Severe	44 Severe	39 Mild
MN	28 Severe	26 Severe	36 Severe	53 Severe	67 Severe	64 Severe
NF	28 Severe	28 Severe	14 Normal	62 Severe	60 Severe	50 Severe
MF	28 Severe	18 Mild	18 Mild	67 Severe	59 Severe	57 Severe
Average	28.67	21.67	15	63.33	57.16	53
% Decrease rate	-	24.42%	47.68%	-	9,74%	16,31%

Based on table 1. The measurement results show a decrease in stress levels and emotional dysregulation of participants before, after, and 1 month after the intervention was carried out. The percentage decrease in stress scores from pre-test to post-test was 24.42%, then during follow-up there was a decrease of 47.68%. Meanwhile, the emotional dysregulation score in general decreased by 9.74% from pre-test to post-test, then continued to decrease to 16.31% during follow-up.

Table 2. Friedman Test Analysis Results

	Stress	Emotional Dysregulation
N	6	6
Chi-Square	6.09	7.00
df	2	2
Asymp Sig.	.04	.03

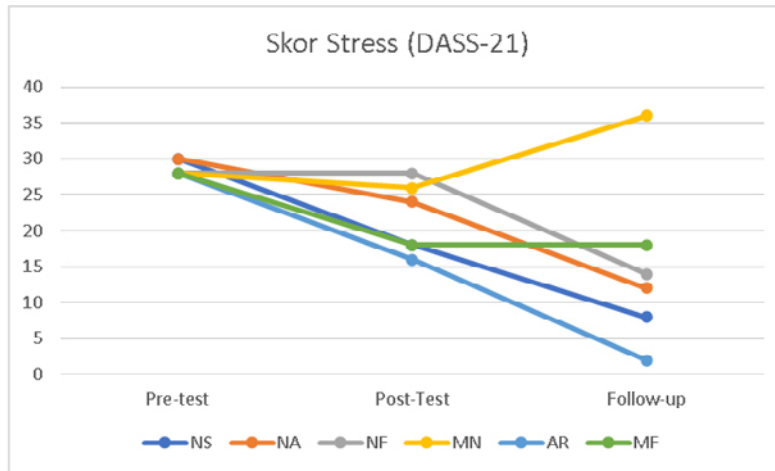
The results of the Friedman test obtained a significance value of .04 ($p < .05$) for the participants' stress levels and .03 ($p < .05$) for the level of emotional dysregulation. These results indicate that there is a significant difference in the levels of stress and emotional dysregulation of participants from the pre-test, post-test, and follow-up. It can be concluded that quantitatively there is a significant decrease in the levels of stress and emotional dysregulation of participants before, after, and 1 month after the intervention was carried out.



Graph 1. Results of Emotional Dysregulation Measurement

Based on the results of the participants' emotional dysregulation measurements from completing the DERS-SF questionnaire, it can be seen that in general there was a decrease in the emotional dysregulation score from the pre-test, post-test, and follow-up. More specifically, NS, NA, NF, MF, and AR experienced a decrease in the emotional dysregulation score before

and after participating in the intervention activities, then decreased further during the follow-up. Meanwhile, MN showed an increase in the emotional dysregulation score before and after participating in the intervention activities, then decreased in the score during the follow-up.



Graph 2. Results of Stress Level Measurement

Based on the stress level measurements from the DASS-21 questionnaire, there was a general decrease in participants' stress scores from pre-test, post-test, and follow-up. Specifically, NA, NS, and AR experienced a decrease in stress levels before and after the intervention, with further reductions at follow-up. NF showed stable scores before and after the intervention, with a decrease at follow-up. Participant MF showed a decrease before and after the intervention, then remained stable at follow-up. Meanwhile, MN had stable stress scores before and after the intervention, with an increase at follow-up. According to qualitative data, MN was undergoing intensive extracurricular paskibra training, which led to exhaustion and difficulties in managing time for studying and completing school assignments.

Overall, participants acknowledged positive impacts from the intervention. They felt they better understood the various emotions they experienced, started accepting the emotions that emerged, could express feelings in an adaptive manner, managed their emotions more effectively, and felt more comfortable and calm. Participants also realized that their emotions could be shaped by their thinking patterns and made efforts to change their perspectives on problems. They were able to apply alternative strategies when initial strategies were less effective, with the most frequently chosen techniques being mindful breathing and increasing positive emotions through enjoyable activities.

DISCUSSION

This study was conducted to assess the effectiveness of group intervention using Cognitive Behavioral Therapy (CBT) in reducing stress levels among early adolescents.

Quantitative results showed a significant decrease in participants' stress levels and emotional dysregulation before, after, and 1 month after the intervention. These results indicate that increasing emotional regulation skills can reduce perceived stress levels. This study supports the findings of other studies that good emotional management skills can reduce stress levels in individuals (Valencia & Sinambela, 2022; Gunawan & Bintari, 2021; Behrouian et al., 2020). Individuals with good emotional regulation skills are able to modify their judgments and emotional reactions to difficult situations. They are able to make peace with stressful situations because they are optimistic in assessing the situation, are more careful in understanding the situation, and can carry out various strategies to overcome negative moods (Gunawan & Bintari, 2021). Therefore, good emotional regulation skills will help individuals modulate negative emotions and increase positive emotions, thereby reducing perceived stress levels (Peixoto et al., 2022).

According to individual participant scores, only one participant, MN, showed increases in both stress and emotion dysregulation scores. This increase in MN's scores was due to MN participating in intensive extracurricular Paskibra training, which caused MN to struggle with time management and not utilize leisure time effectively. This situation aligns with Chalikkandy et al. (2022), who explain that individuals experiencing stress due to workload find it more challenging to regulate emotions and adjust stress processing mechanisms.

Qualitatively, participants reported various benefits from the CBT-based emotion regulation training. Some participants felt more capable of recognizing and acknowledging their emotions. The process of acknowledging emotions helped participants distinguish among different emotions, identify their causes, and recognize accompanying physical conditions (Rieffe et al., 2008). Being able to accept negative emotions helps individuals observe and evaluate their feelings with an open mind. Conversely, if emotions are perceived as mistakes or shameful, this may lead to psychological issues. Similarly, Nesayan et al. (2017) stated that awareness of emotional states helps individuals think about and evaluate their feelings, thus reducing negative moods.

Participants were also able to determine effective strategies that could help manage negative emotions. The ability to select the best emotion regulation strategies is known as regulatory flexibility and is related to psychological well-being (Fabiansson & Tan, 2016). This flexibility is not easy to achieve, as some individuals may not be aware of alternative emotion regulation strategies or may not understand how to apply them. The type of emotion regulation strategies used will also depend on the amount of mental resources available, as some strategies may require greater cognitive effort and resources than others (Fabiansson & Tan, 2016).

The techniques most frequently used by participants were mindful breathing and engaging in hobbies or other positive, enjoyable activities. The basic concept of mindful breathing is that various emotions are related to breathing patterns (Philippot et al., 2010). For

instance, when feeling happy, individuals tend to breathe steadily and in a normal rhythm; however, when feeling anxious or angry, their breathing becomes irregular, short, and rapid. Therefore, altering the rhythm of breath when experiencing negative emotions can help the body become more relaxed and calm (Distina, 2021). In this process, mindful breathing not only helps individuals become aware of negative thoughts but also of neutral thoughts, enabling them to think about solutions more adaptively (Cho et al., 2016). Additionally, engaging in hobbies or enjoyable activities has also been shown to effectively help regulate negative emotions (Yi, 2023). Although these activities serve as a form of distraction or escape from problem situations, doing something else allows individuals to focus less on negative feelings and thoughts, thereby reallocating resources to address their problems (Baumeister & Vohs, 2004).

While the research results indicate a decrease in participants' stress levels after the intervention, these findings cannot be generalized due to the very small sample size and the absence of a comparison group. Future research should aim to test the effectiveness of CBT-based emotion regulation training in reducing stress with a larger sample size to enhance the generalizability of the findings. It is also recommended to involve a control group to assess the success rate of the intervention provided. Furthermore, several recommendations should be considered to optimize the intervention outcomes: 1) Assigning tasks outside of sessions and extending the time between sessions to give participants more opportunities to practice each taught strategy. 2) Scheduling sessions outside of school activities, such as organizational or extracurricular events, to improve participant attendance. 3) Choosing locations with minimal distractions. 4) Providing specific follow-up questions to understand which strategies participants have practiced, how often they have practiced them, which strategies have been helpful, and which ones have been less effective, thus allowing for a more detailed depiction of the intervention outcomes.

4. CONCLUSION

Based on the results obtained, there was a significant reduction in stress and emotion dysregulation levels among participants from pretest, posttest, and follow-up. This indicates that the CBT-based intervention program can improve emotion regulation skills and reduce stress levels among participants. Qualitative assessments also reveal that participants experienced benefits from the training. They gained knowledge about various emotion regulation strategies, began practicing the taught strategies, and observed changes in their emotional conditions and thought processes when facing difficult situations. Overall, the CBT-based emotion regulation intervention program appears to be quite effective in helping reduce stress levels among adolescents.

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