Online Group-Based Cognitive Behavioral Therapy for Career Anxiety and Coping Strategy in Final Year Undergraduate Students

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Abstract:

COVID-19 pandemic and transition period from college to work life makes final year students vulnerable to career anxiety. This study aims to describe the process of conducting online group-based CBT intervention during COVID-19 transition period to help final year undergraduate students reduce career anxiety and maladaptive coping strategies. CBT modules administered online in five sessions for one subject group (n = 6). Participants selected based on a high average score of Career Anxiety Scale and final year undergraduate students who have completed their final project. Mixed methods (qualitative and quantitative design) used for data sampling (pre-test, post-test, and follow-up). The results showed a significant difference of participants' career anxiety scores over time with F(2.10) = 4.694, p = 0.037. However, there was no significant difference of online group-based CBT on participants' coping strategy scores over time with F(2.10) = 1.608, p = 0.248 for adaptive coping and F(2.10) = 1.914, p = 0.198 for maladaptive coping. Qualitative evaluation showed participants were able to understand more about themselves and implement necessary strategies to reduce their career anxiety. This research suggested that online group-based CBT can reduce career anxiety for final year undergraduate students during COVID-19 transition period. However, more specific interventions are needed to target changes in adaptive & maladaptive coping strategies.

1 INTRODUCTION

COVID-19 pandemic is starting to subside and forced the government to start making various policies for society to adjust the transition from pandemic to endemic. One of the policies related to the implementation of restrictions on community activities or PPKM starts at level 1, which means that the policy for activities such as offices, wedding receptions and schools are more flexible (Inmendagri No. 35 Tahun 2022 & CNBC Indonesia, 2022). This policy can also be seen in work and education aspects, where the government has begun to allow employees and students to hold face-to-face meetings at 100% capacity on condition that they have conducted the COVID-19 vaccination. Not only in Indonesia, other countries such as Malaysia, Thailand, Australia, Japan and Switzerland have also implemented face-to-face learning activities with several requirements such as checking temperature and always wearing a mask

(Detikedu, 2021). This policy certainly has an impact on people's lives, one of which is final year undergraduate students that need to adapt according to new normal situation.

There are two transition periods for final year undergraduate students. The first transition is related to the COVID-19 pandemic, where students need to readjust the rhythm of activities that previously conducted online to face-to-face meeting. The second transition is related to the role of a student that will end and start entering the world of work. The transition period is not easy to deal with because it usually raises new demands and adjustments for individuals. The demands that arise are related to the ability to socialize in an unfamiliar environment, career readiness, career selection and uncertainty in getting a job (Atmadja, 2013; Hanim & Ahlas, 2020).

Demands in the transition period of final year undergraduate students have an impact on psychological distress such as anxiety and difficulties in adjusting to society. Research

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conducted by Balbeid, et al. (2021) found there was a significant relationship between anxiety levels and readiness to practice among dental students in transition period. Other research also showed that career anxiety of college students increased during the COVID-19 pandemic (Chowdhury et al., 2022; Rahmadani & Sahrani, 2021). Career anxiety behavior in college students such as avoiding discussing the future life, physical symptoms such as palpitations, and cognitive aspects such as fear and confusion about facing the future (Muqarrama et al., 2022).

Career anxiety is an anxiety experience that arises during the stages of the career development process (Pisarik et al., 2017). Prior to the COVID-19 pandemic, career anxiety also occurred among students (Sengkey, 2019; Nurjanah, 2018). Typically, students are still confused about the career choice and tend to be hesitant about getting the job they want (Ramdhani et al., 2019). The triggers of career anxiety include failure to compete at work, low competencies to meet work demands, and difficulties in adjusting to society (Atmadja, 2013). In addition, the uncertainty period that will arise after students graduate from college also triggers anxiety (Nadira, 2013). Negative thoughts themselves can also trigger career anxiety (Shin & Lee, 2019). Thoughts that cause anxiety in final year undergraduate students are related to the elevated level of competition at work, the level of work competencies that are not ready yet, the uncertainty of getting a job, and getting a job that fits their interest (Azhari & Mirza, 2016).

The transition period of COVID-19 pandemic also has an impact on increasing career anxiety level in final year students (Chowdhury et al., 2022; Rahmadani & Sahrani, 2021). This might happen because uncertainty, especially related to work, during the COVID-19 pandemic is increasing. Based on data from the Badan Pusat Statistik (2022), the unemployment rate in Indonesia increased to 8.4 million in February 2022. Limited job vacancies and increased competition among job seekers during the pandemic made it more difficult for final year undergraduate students to get jobs (Muqarrama et al., 2022; Kompas, 2021). Low competencies for work are also another factor that increases career anxiety because students have difficulty in understanding learning material and establishing interpersonal relationships during online learning courses (Turmuzi et al., 2021). Other factors that trigger career anxiety during COVID-19 pandemic are also related to the high standard of worker qualifications, higher parental

expectations, low self-confidence, and limited network (Muqarrama et al., 2022).

Excessive career anxiety experienced by final year undergraduate students has a negative impact on individual career development. Based on research conducted by Daniels et al. (2011) showed that individuals who experience prolonged period of career anxiety have an impact on a lack of commitment to careers, dissatisfaction, and failure to contribute to the environment despite having sufficient education. In addition, individuals who have career anxiety also experience disturbances in decision making (Bluestein & Phillips, 1988; Germeijs et al., 2006). Individuals who experience career anxiety tend to avoid useful behaviors related to career choice such as gathering career-related information, attending career counseling, and determining career path decisions (Germeijs et al., 2006; Thai, 2014). They are also prone to experiencing cognitive distortions related to their skills and work performance (Pisarik et al., 2017). It makes individuals tend to predict negatively about their career in the future, thus increasing the career anxiety experienced.

Career anxiety can take a role as a driving force for career development. Career anxiety makes individuals actively explore the career that they want to choose (Bluestein et al., 1995; Park et al. 2016). This might happen if the individual has an environment that makes him feel safe, such as secure attachment with his parents. Individuals who have career anxiety and secure attachment with their parents tend to have a good commitment regarding their career choices (Mirah & Indianti, 2018).

Coping strategy is one of factors that also influence career anxiety level. Coping strategy is individual response to face stressful situation (Lazarus, 1993). There are 14 dimensions of coping based on Carver (1997) including active coping, use of instrumental support, behavior disengagement, self-distraction, denial, substance use, use of emotional support, venting, positive reframing, planning, humor, acceptance, religion, and self-blame.

Research conducted by O'Hare and Tamburri, (1986) found that individuals with the anxiety trait and having a high self-efficacy type of coping behavior can make their own career choices. This result is also supported by the research of Weinstein et al. (2002) who found that women who have high perceived control and do problem-focused coping can make career choices with lower anxiety level. The research conducted by Rahmah (2021) also found that coping strategies can reduce career

anxiety and doubts related to career decisions in final year students. On the other hand, when responses are disproportionate in a prolonged period when facing a stressful situation affect the subjectivity of coping strategies, such as thinking that they have low competencies and are associated with higher anxiety. Therefore, effective coping strategies are necessary to implement in order to reduce career anxiety.

The phenomenon of career anxiety which is increasing during the transition period in final year undergraduate students, negative impact of career anxiety on career development, and the importance of effective coping strategies to reduce anxiety, makes us interested in providing online group psychotherapy interventions for final year students who have career anxiety using the Cognitive Behavioral Therapy (CBT) approach. According to Yalom and Leszcz (2015) group therapy can have a therapeutic effect on group members through a group approach that has structured activities. Several studies also showed that group therapy can help individuals to reduce their anxiety (Wolgensinger, 2015; Maulidya & Lubis, 2017).

The aim of this study was to describe the process conducting online group psychotherapy intervention using the CBT approach to help final year undergraduate students reduce career anxiety level and change maladaptive coping strategies. The CBT approach was chosen based on empirical evidence that it can help people to deal with problems related to anxiety, both individually and in groups (Curtiss et al., 2021; Hirsch et al., 2019; van Dis et al., 2020; Wolgensinger, 2015). This is also supported by research conducted by Flansburg (2011) which found that the CBT approach can help individuals who have career doubts by changing dysfunctional mindsets and ineffective problemsolving skills. In addition, the CBT approach is proven to help clients who have high anxiety to deal with situations of career uncertainty (Law et al., 2014). We propose that online group CBT intervention is effective to reduce career anxiety and maladaptive coping strategies in final year undergraduate students.

2 METHOD

2.1 Research Design

We used mixed methods within subject design for this study. One subject group was formed based on certain criteria to be given online group CBT intervention. There are three measurements as follows pre-session, post-session and follow upsession two weeks after intervention for one subject group. Quantitative and qualitative data was also collected for this study. Quantitative data was collected using a career anxiety scale to determine individuals' career anxiety level and the brief cope to determine individual career strategy. Qualitative data was collected using observation and interview. Qualitative interviews were conducted individually in pre and follow-up sessions for 30 minutes to find out more about the change of career anxiety and coping strategy experienced by the participants.

2.2 Participant

Participants for this study consist of six people grouped into one subject group. All participants were female, aged between 21-23 years old, from public and private universities in Indonesia. There are three criteria of participants for this study including 1) final year undergraduate students who have completed their final project and waiting for their graduation ceremony; 2) have high score (> 40) of Career anxiety scale; 3) willingly to participate in all sessions of group intervention. Participants who met the criteria invited to take part in a pre-session interview aimed to explore further their career anxiety, coping strategy, filling out the CAS and the brief cope questionnaires, as well as selecting a schedule for group therapy intervention. All participants who are willing to take part in group therapy were invited via email according to the chosen schedule.

2.3 Overview of Intervention Program

The target of CBT intervention program is to change the emotional aspects by changing the thoughts and behaviors that play a role in causing disturbing emotions (Cully & Teten, 2008). The CBT approach was developed based on Beck's cognitive theory (1964) regarding systems of thinking and beliefs that disrupt the emotions and behavior of individuals in overcoming their problems, so it is necessary to change beliefs and develop behavioral plans to overcome these problems (Fenn & Bryne, 2013). Furthermore, the CBT program also developed individual skills by increasing awareness of their thoughts and emotions, identifying situations, thoughts, and behaviors that affect emotions, and changing dysfunctional thoughts and

behaviors to increase positive emotions (Cully & Teten, 2008).

According to Beck (1976), there are three cognitive levels in CBT intervention, namely:

- a. Core beliefs or schemas: beliefs that individuals have about themselves, other people, and the world that are learned from the beginning of life and influenced by childhood experiences.
- b. Dysfunctional assumptions are rigid rules or requirements possessed by individuals in living with certain situations that are unrealistic and maladaptive.
- c. Negative Automatic Thoughts (NAT) are negative thoughts that are automatically activated when an individual faces a certain situation.

The A-B-C model in the CBT program helps the process of cognitive restructuring to change their irrational beliefs into more rational beliefs (Corey, 2012). A (activating event) in the A-B-C model is an event or situation that is experienced and raises certain beliefs within the individual. B stands for belief that an individual has when facing a certain situation. Belief (B) can cause emotional reactions in individuals. C stands for Consequences is an emotional or behavioral reaction caused by an individual's beliefs.

2.4 The Program Objective

The objective of online group CBT intervention program are as follows:

- 1. Participants can identify the concept of the A-B-C model of their career anxiety. This goal refers to CBT theory which states that beliefs held by individuals can influence their response to situations. Participants need to understand the overall picture related to career anxiety that occurs.
- 2. Participants can identify their beliefs regarding career anxiety. This goal refers to CBT theory which states that irrational beliefs can affect anxiety. Participants need to be aware of their irrational beliefs to change them into more adaptive beliefs.
- 3. Participants can understand and implement various techniques to help them change their irrational beliefs and bring up more alternative thoughts. This goal refers to CBT theory which states that there are cognitive and behavioral techniques that can help individuals become aware of evidence/facts that can challenge their irrational beliefs to develop alternative beliefs that are more adaptive.
- 4. Participants can identify their resources and use adaptive coping strategies to overcome career

anxiety problems. This goal is based on theory which states that psychological well-being can increase if individuals know the resources they have and use adaptive coping strategies to deal with stressful situations.

- 5. Participants can make a relapse prevention plan. This goal refers to the theory which states that relapse can occur when individuals are in the process of changing behavior. Participants need to know the situation, signs, and strategies to deal with these setbacks.
- 6. Participants' career anxiety reduces after the intervention program. This goal refers to the theory of the CBT approach which states that alternative thoughts can elicit adaptive emotional responses and behavioral levels that help reduce the anxiety level.

2.5 Program Implementation

CBT modules were administered online using Zoom application in five sessions, one session every week in 120 minutes, for one subject group. Intervention modules were developed based on the CBT approach that is the main target to reduce career anxiety level. Information and discussion about coping strategy was added in the last session to strengthen the change of coping strategy. The program details are listed in Table 1.

In practice, there were challenges that occurred during intervention. In the beginning, there were seven participants who registered to take part in the program. After session 1, there is one participant who drew back because she got a full-time job. Furthermore, few participants had trouble in actively participate during intervention due to unstable internet connection. To overcome this problem, participants were asked to disable their camera and use the chat feature to actively participate during the session. In addition, five participants were unable to attend 1-3 intervention sessions in range due to conflicting schedules. To overcome this problem, researchers sent learning materials and worksheets to participants. We also held a question-and-answer session by email.

Table 1: Program Session(s) & Objective (s).

Session		Objective
Pre-session	•	To gather participants' baseline
		level of career anxiety and
		coping strategy
	•	Selecting schedule for group
		therapy intervention

Session	Objective
Session 1 •	Understanding of career anxiety and cognitive process using the A-B-C model
Session 2 •	Finding negative automatic thoughts (NAT) in career anxiety
Session 3 •	Understanding and identify cognitive distortion and strategy to overcome it
Session 4 •	Planning and implementing strategy to dispute cognitive distortion
Session 5 •	Planning adaptive coping strategy and relapse prevention Post-test: gather participants' level of career anxiety and coping strategy after intervention
Follow-up session	To gather participants' level of career anxiety and coping strategy two weeks after intervention

3 RESULTS

Figure 1 summarizes the differences of participants' career anxiety level before and after intervention. Based on the graph of Career Anxiety Scale (CAS) score measurement, four participants experienced a decrease in CAS scores at the follow-up session compared to the pre-session.

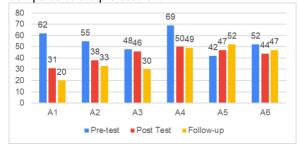


Figure 1: Comparison of Participants' Career Anxiety Scale Score.

Normality test conducted using Shapiro Wilk (N <20) showed that the sample distribution of the career anxiety variable is normally distributed p = 0.976 (pre-test), p = 0.468 (post-test), and p = 0.438 (follow-up) up). Based on this result, data analysis using repeated measures ANOVA can be conducted

to find out whether the CBT intervention influences participants' career anxiety from time to time. The test result showed that there was a significant main effect of CBT interventions on participants' career anxiety scores from time to time with F (2.10) = 4.694, p = 0.037. The homogeneity of variance results using Mauchly's Test of Sphericity show the value of X2(2) = 0.406, p > 0.166, which indicates that the population data group is homogeneous so that repeated measures ANOVA tests can be conducted.

Furthermore, the results of the post-hoc comparison test showed that the interaction effect of the CBT intervention on career anxiety was significant in the pre-test and follow-up session with Cohen's d=1.604, p=0.044, 95% CI [-0.405,3.613]. Therefore, five sessions of online group CBT interventions is proven to have an effect on reducing participants' career anxiety.

Figure 2 summarizes the differences of participants' coping strategy before and after intervention. Based on the graph of the brief cope score, it showed variative results between adaptive and maladaptive coping strategies from time to time. There were 3 participants who experienced an increased score of adaptive coping strategies, 2 participants experienced a slight decrease score of adaptive coping strategies, and 1 participant with a same score of adaptive coping strategies from time to time. There were 3 participants who experienced a decreased score of maladaptive coping strategies and 3 participants who experienced an increased score of maladaptive coping strategies over time.

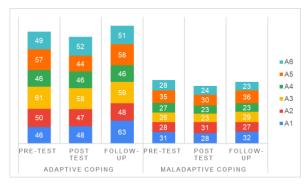


Figure 2: Comparison of Participants' Coping Strategy Score.

Normality test conducted using Shapiro Wilk (N < 20) showed that the sample distribution of adaptive coping strategy variables is normally distributed with a value of p = 0.216 (pre-test), p = 0.380 (post-test), and p = 0.565 (follow-up). The maladaptive coping strategy variables are also

normally distributed with p=0.229 (pre-test), p=0.158 (post-test), and p=0.593 (follow-up). Based on this result, data analysis using repeated measures ANOVA can be conducted to find out whether the CBT intervention can influence the participants' coping strategies from time to time. The test result showed that there was no significant main effect of CBT interventions on participants' coping strategy scores from time to time with F(2.10) = 1.608, p=0.248 for adaptive coping strategies and F(2.10) = 1.914, p=0.198 for maladaptive coping strategies.

The results of the qualitative data from observation and interview sessions showed that online group CBT intervention is effective in helping participants to manage their career anxiety. Concepts and techniques that were successfully implemented by the participants to reduce career anxiety such as the A-B-C model of career anxiety, NAT identification, deep breathing techniques, grounding, and mantra. The impact of online group CBT intervention to participants based on follow-up interview such as increasing positive self-image, self-understanding about their career anxiety, more relaxes and focus on dealing with situations that triggered career anxiety, being more courageous to get a job actively, having an open mind and positive thoughts of career-related, and able to make careerrelated planning.

4 DISCUSSION

In general, the online group therapy activities have been conducted successfully according to the modules that have been prepared. The difference in interaction that occurred between participants between the first session and the next session could be seen quite clearly, even though there were differences in the number of participants present in each session. In the first session, the participants' initiative was still minimal in sharing their experiences, providing feedback or appreciation between participants. In the initial session, participants need to be stimulated by the facilitator to be active in group discussions. This is a common thing to happen because starting to enter group therapy is an experience that can trigger anxiety for participants (Bernard, et.al, 2008).

However, based on the results of the participant's feedback, it showed that the therapeutic effect in the form of universality had started to occur since the first session. Participants felt they had the same experience as other participants, so they did not feel alone in dealing with the career anxiety they

experienced. In addition, participants have begun to be open to share their experiences and ideas so that therapeutic effects appear in the form of catharsis and altruism in group therapy over time. The dynamic interaction between participants leads to interpersonal learning within each participant. This is a therapeutic effect that was expected to appear in participants in group therapy (Yalom & Leszcz, 2005). The therapeutic effects that appear can help participants to reduce the career anxiety they experience.

The attachment that is built between group members is a crucial factor in group therapy (Yalom & Leszcz, 2005). Based on the feedback obtained, there were several participants who considered the attachment that was built between participants to be less developed. This might have happened due to the limited verbal and non-verbal interactions of the participants because group therapy was carried out online. Based on the results of research conducted by Schuster, et.al. (2018) explained that the lack of non-verbal signals is one of the main weaknesses in implementing online therapy. In online group therapy, participants need to wait for each other so conversations don't overlap, and voices can be heard clearly. This results in fewer flowing interactions. In addition, connection problems that may occur when participating in a session prevent participants from turning on the camera so that participants' body language cannot be seen clearly. However, this can be overcome by the facilitator's efforts to provide a stimulus that can trigger activeness and interaction between participants, such as games and interactive discussion activities so that the participants can still feel the therapeutic effect. This is also supported by the measurement of career anxiety which has decreased over time and the qualitative statement given by the participants in the follow-up session that their condition has improved.

Based on the results using the CAS measurement tool, it shows that giving CBT interventions in online group therapy has a significant effect on reducing career anxiety among participants. Based on the average score of the CAS questionnaire, there was a decrease in career anxiety from pre-test to follow-up. A significant reduction in career anxiety in the treatment group was seen at pre-test and follow-up. This might happen because participants are increasingly aware of the connection between their thoughts and emotions, and the need to change dysfunctional thoughts and behaviors that can increase positive emotions (Cully & Teten, 2008). Based on the interviews result, the participants became increasingly aware of the

connection between the situation, the negative thoughts they had, and the consequences that occurred to them. Participants can identify the types of their negative automatic thinking (NAT) and are willing to try to change these NAT through the implementation of several methods such as evidence hunting, alternative thoughts, and the use "mantra" so that help reduce their career anxiety. Therefore, the online group-based CBT module can be applied effectively and further developed to deal with career anxiety.

Further analysis showed there were 3 participants who experienced a decrease score in career anxiety to below average (average career anxiety score <41). Based on the results of the analysis conducted, the three participants were active participants and had high initiative in group therapy sessions with a minimum attendance of three group therapy sessions. For this reason, activeness, initiative, and number of attendances may also play a role in providing a therapeutic effect in reducing career anxiety. In addition, according to research by Nadira (2013), the uncertainty related to work that arises during the transition between higher education and work can cause anxiety in individuals. Based on the results of the interviews, it was found that the three participants had gotten jobs when they attended the follow-up session. This reduces uncertainty related to work which can cause anxiety so that the career anxiety experienced by the three participants significantly decreases.

On the other hand, there was one participant who experienced an increase score in career anxiety although it was not significant. Based on attendance, this participant only attended two of the five group therapy sessions. Meanwhile, other participants attended at least three group therapy sessions to experience a decrease in career anxiety. This might cause the participant not to fully understand the given module and get the therapeutic effect needed to reduce anxiety. In addition, external factors such as the friendship environment can increase career anxiety (Muqarrama, Razak, & Hamid, 2022). Based on the results of the interview, the participant said that she received a lot of information from her classmates who had gotten jobs in the two weeks after the group therapy session was over. This can trigger participant's career anxiety to increase because participant feel burdened to get a job immediately.

Researchers also measure coping strategies as one of the factors that influence career anxiety. Based on the results of coping strategy scores using The Brief Cope measuring instrument, it showed that there was no significant change in coping strategies after online group-based CBT intervention. Based on the average score of The Brief Cope, it was seen that there was a decrease score in the use of maladaptive coping strategies and an increase score in the use of adaptive coping strategies from time to time, although that was not significantly. This might happen because the interventions program did not directly target individual coping strategies, so it did not have a significant impact. In addition, the use of coping strategies is also sensitive based on the problem situations that are experienced by each participant (Lazarus, 1993; Carver & Scheier, 1994). For this reason, the various conditions and situations of the participants may influence the fluctuating coping strategy change scores.

In general, providing online group-based CBT interventions is proven to reduce career anxiety. However, there are several circumstances that need further attention in providing online group interventions such as participant characteristics, flexibility in delivering therapy modules, online platforms used, internet connections, and devices used. Facilitators need to understand the characteristics of participants in group therapy so they can use the right approach in communicating and managing the group dynamics. For example, if the participants in group therapy are students who are still introverted and cautious, the facilitator be able to position themselves as a friend and throws humor about students-related to lighten the mood.

Flexibility in intervention module delivery is also needed so that the facilitator can allocate time appropriately to stimulate interaction between participants. The use of online platforms such as zoom allows the facilitator to use various existing features such as raising hands, giving emoticons, and chat columns to build interaction with participants. It is also necessary to pay attention to the internet connection of the facilitator and participants so that the group therapy sessions can run well. For devices used for group therapy sessions, participants recommend using a laptop so they can work on worksheets comfortably and reduce the distraction that arises from using a mobile phone.

5 CONCLUSIONS

Based on the results of implementing online groupbased Cognitive Behavioral Therapy (CBT) for final year undergraduate students concluded that CBT interventions had a significant effect on reducing career anxiety as indicated by significant changes in career anxiety scores before and after intervention. In addition, the CBT intervention in this study did not show a significant effect on changing the participants' coping strategies. However, there were three participants who experienced increased scores on the use of adaptive coping strategies and three participants who experienced decreased scores on the use of maladaptive coping strategies. Furthermore, specific interventions are needed to target changes in adaptive & maladaptive coping strategies. Overall, qualitative results show that participants can identify their career anxiety cycle, identify NAT, implement various techniques for managing career anxiety, identify adaptive and maladaptive coping strategies, and make a self-management plan to overcome setbacks.

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