Group Interventions With Cognitive Behavioral Therapy Approach to Overcome Career Anxiety in Individual With Bachelor Graduates in 2022

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Abstract: The pandemic increased the career anxiety of final-year students who are prospective workers. This study examined the alteration of career anxiety levels by providing Cognitive Behavioral Therapy to final-year students waiting for graduation and looking for work. This study used a mixed method design. Within-subjects design with one group of subjects given intervention without a control group. Initially, 11 final-year undergraduate students participated; however, only 5 participants remained. CBT interventions were delivered in five online sessions, accompanied by individual follow-up sessions two weeks later. Participants were measured three times before, after the intervention, and follow-up. The measurements are Career Anxiety Scale (CAS) and Perceived Stress Scale (PSS). Friedman ANOVA was conducted to analyze the score change of each measurement and qualitative evaluation based on the results of observations and interviews. The results showed a significant difference in career anxiety scores ($X^2 = 6.706$, *p-value* $= 0.035$), although there was no significant difference in the perceived stress scores ($X^2 = 0.40$, *p-value* $= 0.819$). The qualitative evaluation showed a change in mindset towards career anxiety before and after the intervention. This research suggested that online group CBT can lower career anxiety in final-year undergraduate students.

1 INTRODUCTION

Job loss was unpredictable during the pandemic, and people tend to worry more about economic problems than exposure to COVID-19 (International Labor Organization, 2020; Lembaga Survei Indonesia; Akbar, 2020). Research shows that final-year undergraduate students as prospective workers are also mentally affected due to pandemic conditions, with an increase in career-related anxiety (Rahmadani & Sahrani, 2021; Chowdhury et al., 2022). Based on research by Muqarrama et al. (2022), career anxiety in final-year students can be seen in the behavior of avoiding discussions about the future, the emergence of physical symptoms such as palpitations, as well as from cognitive aspects such as fear and confusion to face the world of work life in the future.

Final-year undergraduate students' career anxiety had already surfaced before the pandemic occurred. Students are less sure of getting the job they want and still need clarification about their chosen career choice (Ramdhani et al., 2019). According to Mirah and Indianti (2018), uncertainty in determining careers will make individuals likely to have anxiety and hinder them from performing the behaviors needed to make decisions. Furthermore, the negative thoughts that the individual has towards himself can also trigger the appearance of career anxiety (Shin & Lee, 2019). Before the pandemic, in August 2019, as many as 7.05 million were unemployed in Indonesia. In February 2022, the unemployment rate in Indonesia rose to reach 8.4 million people (Badan Pusat Statistik, 2022). Limited job openings and an increase in rival job seekers during the pandemic have made it more difficult for graduates to find jobs (Natalia, 2021; Muqarrama et al., 2022). This can trigger individual career anxiety to increase during the pandemic. In addition, there are several other factors as triggers for anxiety, namely the difficulty of students understanding the material and establishing interpersonal relationships due to online learning (Turmuzi et al., 2021), low expectations for employment, high qualification standards for

workers, parental expectations, self-confidence, and social environment (Muqarrama et al., 2022).

Based on the phenomenon that has been presented, researchers are interested in providing psychotherapy to final-year undergraduate students who have career anxiety using the Cognitive Behavioral Therapy (CBT) approach. The CBT approach was chosen because individuals experiencing career anxiety have a characteristic affinity with cognitive theories regarding anxiety, according to Beck and Clark (1988). Maladaptive schemes of anxiety involve perceived physical or psychological threats to one's domain and an inflated sense of vulnerability, that is, exaggerating the threat related to the situation and underestimating the ability of oneself to cope with it (Beck & Clark, 1988). Another consideration is that CBT has been scientifically tested to deal with anxiety problems (Hirsch et al., 2019; van Dis et al., 2020; Curtiss et al., 2021). This study aimed to see the alteration in career anxiety scores with the Career Anxiety Scale (CAS) after giving Cognitive Behavioral Therapy (CBT) to final-year undergraduate students who have completed lectures but have not graduated and are looking for a job. This research was expected to provide benefits in reducing career anxiety levels, identifying resources to deal with problems, and relapse prevention efforts.

2 LITERATURE REVIEW

This section will explain literature reviews of career anxiety, final-year undergraduate students, stress, and Cognitive Behavioral Therapy (CBT).

Career anxiety is experiences of anxiety that arise when the individual performs stages of career development process (Pisarik et al., 2017). The process generates discomfort in response to certain work-related situations, for example, anxiety in determining job choices, applying for jobs, social environment at work, etc. The factors causing career anxiety are divided into three: indecision in making career decisions, lack of affiliation with faculty or academic staff, and the perception that individuals have minimal control over their careers (Thai et al., 2014). There are four negative impacts on individuals who experience it: disrupting mental and physical health, interfering with career competence and certainty, interfering with decision-making, and cutting off career paths (Thai et al., 2014).

Final-year undergraduate students are defined as students who will complete their studies in higher education, have completed credits of courses according to the provisions, and are working on their final project/thesis as one of the requirements for obtaining a degree. When facing graduation, final-year students tend to have high anxiety (Sengkey, 2019). In addition to meeting various requirements to graduate, they are afraid to prepare for a career and apply for a job (Nurjanah, 2018). Recent research by Muqarrama et al. (2022) complements the career anxiety problems of final-year students, which are associated with the technological age. Students tend to avoid discussing the future, have physical symptoms appear, feel afraid, and are confused about facing the world of work (Muqarrama et al., 2022).

Stress is a physiological or psychological response to internal and external pressures. Stress involves changes in almost all body systems, affecting how a person feels and behaves (VandenBos, 2007). Prolonged stress will make a person anxious and uncomfortable, decrease productivity, and can cause physical and psychic problems (Saulsman & Nathan, 2012). Individuals who experience stress mostly deal with it in dangerous ways and do not solve the problem, referred to as the escape method. According to Saulsman and Nathan (2012), there are seven forms of escape method behavior: avoiding situations, seeking reassurance and checking, distracting, suppressing, using alcohol or drugs, overeating, oversleeping, and self-harm. Strategies in dealing with stress or coping are grouped into two types, namely, problem-focused coping, problem-focused strategies, and emotion-focused coping, emotion-focused strategies (Freire et al., 2020).

Cognitive Behavior Therapy, commonly abbreviated as CBT, is a form of psychotherapy that integrates the theory of cognition and learning with treatment techniques derived from cognitive and behavioral therapy. CBT is a scientifically tested therapy to treat anxiety problems and stress-related disorders (Hirsch et al., 2019; van Dis et al., 2020; Curtiss et al., 2021). CBT refers to interventions and techniques that encourage more adaptive thoughts and behaviors to correct painful emotional experiences (Curtiss et al., 2021). According to Chand et al. (2022), there are three aspects of cognition emphasized in CBT: automatic thoughts, cognitive distortions, and underlying beliefs or schemas.

3   METHOD

The design of this study was a mixed method, within-subjects design with one group of subjects given intervention without a control group. In the within-subjects design, researchers only tested one treatment group (Creswell & Creswell, 2017). Researchers chose this design based on the purpose of the study, which was to determine the alteration in career anxiety scores after CBT treatment. In addition, researchers also conducted observations and interviews with participants.

Participants in this study were final-year undergraduate bachelor's degree students who have completed lectures and final projects but have not yet graduated and experience career anxiety. Researchers set a target for the number of participants who participated in group therapy, as many as 7-10 people. There were three criteria for participants: final-year undergraduate students from state or private universities in Indonesia who have completed lecture credits and thesis, have a career anxiety score above average, indicated by a Career Anxiety Scale (CAS) of >36, and are willing to take part in the entire series of group therapy sessions consisting of five therapy sessions and one follow-up session.

The researchers recruited participants by distributing posters that research groups had made through social media. Participants interested in group therapy register through the Google Form link containing personal data, informed consent, and CAS measuring instruments. Participants who completed the questionnaire and had an above-average career anxiety score (CAS >36) were invited to participate in the pre-session. During the pre-session, participants were interviewed regarding the description of career anxiety problems experienced, filling out a pre-session questionnaire, and determining the willingness to carry out group therapy. Furthermore, participants were contacted via personal email and WhatsApp to coordinate the implementation of therapy.

Researchers performed the following steps in preparing for career anxiety group therapy: First, conduct a literature study of career anxiety and therapeutic modules used to treat the problem. Then the therapist compiled a Cognitive Behavior Therapy intervention module for career anxiety and a career development self-help booklet for non-selected participants. The creation of the intervention module also refers to the reference to the CBT module made by previous researchers on academic anxiety (Luzanil & Menaldi, 2021).

Second, look for measuring tools related to career anxiety and perceived stress. The therapist asked permission from a previous researcher at the Master of Educational Professional Psychology, Universitas Indonesia, who had conducted thesis research on career anxiety. Meanwhile, the permit for a perceived stress measuring instrument was obtained from a research team from the Faculty of Psychology, Airlangga University, who examined the early adult population. Third, recruiting participants and trying out the Career Anxiety Scale (CAS) measuring instrument. Fourth, selected participants were invited to participate in pre-sessional interviews and scheduling of group therapy sessions. Fifth, unselected participants were given a career development self-help booklet created by the therapist, containing career anxiety psychoeducation, coping stress, two-column techniques for determining career choices, and reading references. Finally, preparing for the technical implementation of group therapy sessions, such as creating worksheets, determining rules, preparing games, and subscribing to the Zoom Pro application. The Universitas Indonesia ethics review team has approved this research procedure with the number 113/FPsi.Komite Etik/PDP.04.00/2022.

Online CBT group sessions were delivered five times, one time per week, and the duration of each session was about 120 minutes (2 hours). The activities in this group therapy include sharing, giving materials, group discussions, case studies, worksheets, homework, worksheet and homework reviews, and feedback. The following is a brief overview of group therapy sessions:

Pre-session: participant interviews, providing Career Anxiety Scale and Perceived Stress Scale measuring instruments, and completing demographic data such as name, gender, age, GPA, regional origin, ethnicity, and non-academic activities.

Session 1   : understanding career anxiety and thought processes in career anxiety (ABC sequence).

Session 2   : finding automatic negative thoughts (NATs) in career anxiety.

Session 3   : identifying cognitive distortions and strategies to overcome them.

Session 4   : understand other dispute strategies to overcome automatic negative thoughts.

Session 5   : identify factors that can cause relapse and strategies to prevent them.

Follow-up   : giving a post-test questionnaire followed by an interview to follow up with individual participants.

Participants were measured three times before, after the intervention, and follow-up. The measurements are Career Anxiety Scale (CAS) and Perceived Stress Scale (PSS). This group therapy uses the Career Anxiety Scale (CAS) measuring instrument – 12 items from Thai et al. (2014) adapted by Mirah and Indianti (2018).

The CAS measuring instrument consists of 12 items, using 6 Likert scale points with ranges of 1 (strongly disagree), 2 (disagree), 3 (somewhat disagree), 4 (somewhat agree), 5 (agree), and 6 (strongly agree). The higher the score indicates, the greater the career anxiety the individual feels.

In career group therapy, researchers also used the Perceived Stress Scale (PSS) measuring instrument – 10 items as a supplement aimed at determining participants' perceptions of the level of stress they experienced over the past month. Yuniaty and Hamidah (2019) adapted the measuring instrument to Indonesian and then redeveloped the Perceived Stress Scale into ten items. This scale uses 5 Likert points consisting of 0 (never), 1 (rarely), 2 (sometimes), 3 (often enough), and 4 (very often). Friedman ANOVA was conducted to analyze the score change of each measurement and qualitative evaluation based on the results of observations and interviews.

4 RESULTS

Cognitive Behavioral Group Therapy was delivered online using Zoom meetings. The therapy was guided by a facilitator and two co-facilitators who help record observations, what participants convey, screen sharing power points, and other technical settings. The therapy sessions ran for five sessions, followed by one interview session and individual follow-up measurements. The session takes place every Wednesday, July 20 – August 17, 2022, followed by a follow-up on Wednesday, August 31 – Thursday, September 1, 2022.

The first session was attended by 11 participants (nine women and two men) who were final-year undergraduate students and had completed their thesis/final project from various universities in Indonesia. The number of participants in the first session increased because one participant switched groups. In the fifth session, there were five participants, with three participating in complete group therapy: participant 1, 2, and 9.

Table 1. Overview of the Participants.

	Sex	Age	Domicile	GPA	Pre-test CAS	Pre-test PSS
1	F	23	Palembang	3.50	60	21
2	F	23	Depok	3.93	40	22
3	M	24	Pandeglang	3.37	55	20
4	F	21	Jakarta	3.71	58	13
5	F	22	Jakarta	3.50	51	24
6	F	21	Depok	3.39	55	18
7	F	22	Bogor	3.61	57	19
8	F	22	Blora	3.57	55	22
9	M	23	Jakarta	3.68	61	26
10	F	23	Yogyakarta	3.55	52	20
11	F	22	Jakarta	3.63	49	29

The researchers asked about the career anxiety problem of each participant. Participant 1 is concerned that getting a job will be challenging because the minimum requirement for a job vacancy is one year of experience and she fears being unable to adapt to the job. Participant 2 is concerned that her physical illness will affect her career choices because she has complex regional pain syndrome. Participant 3 has concerns about his career because he graduated late from Social Welfare two years. He was afraid that HRD or recruiters would question delays in completing studies. Participant 4 has concerns about careers because Russian literature majors feel less flexible in choosing a field of work. Participant 5 worries about her career after graduation because she is unsure of his abilities, fears disappointing his parents, and overthinks in the afternoon or evening about his career. Participant 6 career-related concerns are difficulty finding jobs, many start-up employees being laid off, and companies not hiring.

Participant 7 has concerns about not being able to get a job because she is more interested in the HR field than being a guidance and counselling teacher. Meanwhile, she has yet to gain experience in the HR field. Participant 8 needs clarification to determine the field of work, but her parents do not want her to work away from home, while her father is heavily in debt. She wants to work outside the city because the higher income can help the family financially. Participant 9 concern about his career is wanting to find a career that will not make him miserable. For example, receiving adverse treatment from work, not according to interest, not supportive, unmeaningful work, so there is no lesson learned. Participant 10 is afraid of not being able to find a job that matches her values and lacks income. Participant 11 is afraid of finding a job, and many competitors are more

experienced, especially in organizations. At the same time, she feels she lacks experience, so it will likely not be easy to get a job. She is afraid of being unemployed for a long time, not being able to work, it will be difficult, the environment being uncomfortable, and the salary is not proportional to the workload.

Measurements were conducted three times during the pre-sessional interview (pre-test), the fifth session (post-test), and two weeks after the fifth session (follow-up). Five participants participated in the entire session on the three measurements. Statistical analysis was performed using Friedman's ANOVA, with details of pre-test scores (Mean rank = 2.80), post-test (Mean rank = 1.30), and follow-up (Mean rank = 1.90). CAS scores at three measurement times were compared. As a result, there were significant differences in career anxiety scores (X^2 = 6.706, p-value = .035). In contrast, the PSS score showed no significant differences in perceived stress scores (X^2 = 0.40, p-value = .819).

Table 2. CAS and PSS Measurement Results.

Participant number	1	2
Pre-test CAS	60	40
Post-test CAS	58	31
Follow-up CAS	58	31
Pre-test PSS	21	22
Post-test PSS	26	20
Follow-up PSS	25	14

Participants generally felt a change in career anxiety after being given CBT. The follow-up interviews showed the effects of therapy that were felt subjectively by participants and the application of various techniques learned in therapy to daily life. Participant 1 perceived that she has more self-control when anxiety comes. Participant 2 does not think much about her career anxiety because of the possibility that this therapy helps. She was most helped by the golden question technique, knowing the impact if she continued to think negatively. Participant 4 already feels calmer when thinking about career direction. From the experience of the following therapy, she gets some opportunities that she does not have to accept if it is detrimental and more selective. Participant 9 became more aware of the mind even though it was rudimentary because he was not used to looking for evidence of thoughts. It is more about identifying the source of negative thoughts but still needs to consider the consequences. Participant 11 felt a change in her,

she used to be more often anxious, but now it has begun to decrease.

Participants' qualitative evaluation of group therapy sessions was based on satisfaction with the therapy sessions, approaches and methods, the most helpful techniques, the effectiveness of the therapy sessions and what was already good. In general, participants were satisfied with group therapy sessions. The approaches and methods used are considered sufficient according to the participants' preferences. According to participants, evidence hunting, golden questions, mantra, deep breathing, and grounding are the most helpful techniques. Group therapy was considered quite effective by participants in reducing career anxiety.

According to participants, the implementation of group therapy sessions has been exemplary. The material presented is helpful. Participants knew what could be reflected and had reminders to act more adaptively when experiencing anxiety. The facilitator's rendition is calm, and the voice intonation and body style are excellent and neutral. The therapeutic atmosphere is comfortable and supportive.

5 DISCUSSION

This study aimed to reduce career anxiety levels by modifying cognitive and behavioral aspects that are less adaptive using the Cognitive Behavioral Therapy (CBT) approach. In general, the implementation of group therapy proceeds according to the intervention design that has been made. From the observation results, the dynamics of the development of interaction between participants can be seen. Each participant can be open to expressing their concerns regarding their career, responding to other participants' stories, expressing opinions, providing positive affirmations, and asking questions if they need help understanding the material presented. All participants could understand the material presented, so they worked on worksheets and applied techniques according to the presentation during the session. However, there were barriers to interaction between participants because many chose to disable videos throughout the session due to poor internet connection.

Based on the results of observations and interviews, there was a change in the mindset of participants before and after the intervention. Participants were able to see career anxiety-inducing situations or conditions more neutrally. They learned that the previous way of thinking led to maladaptive

behaviors and prolonged negative feelings. Participants could connect cognition, emotion, and behavior according to the goals of Cognitive Behavioral Therapy (Westbrook et al., 2011; Chand et al., 2022). In addition, the material on stress coping also broadened perspectives on how participants have overcome problems, especially in careers (Saulsman & Nathan, 2012; Friere et al., 2020).

Online group therapy using the Cognitive Behavioral Therapy approach can be considered successful in reducing career anxiety in bachelor graduates in 2022. Based on the results of career anxiety measurement using CAS, most participants experienced a decrease in anxiety from the pre-measurement (Mean rank = 2.80) to post (Mean rank = 1.30) even though there was an increase at the time of follow-up (Mean rank = 1.90). An interesting finding from the analysis results was that participants who were active and took the initiative during therapy sessions (participant 2, 4, 9) experienced a significant decrease in their career anxiety scores. While the other two participants only experienced a 1-2 point drop in score. Another thing to note is that participant 2, 4, and 9 have already received job offers when the follow-up session is conducted.

In this group therapy, participants also measured perceptions of stress levels using PSS (Yuniaty & Hamidah, 2019). As a result, there was no significant change in the PSS score at the pre-post-follow-up measurement. Three participants had fluctuating PSS scores: participant 1, 9, and 11. Participant 2 was the only participant with a declining PSS score, while participant 4 was the opposite. It is possible that the distance between the measurement times that are not the same between pre-post (5 weeks) and post–follow up (2 weeks) affects the assessment of stress levels. Yuniaty and Hamidah (2019) made this measuring instrument for the last month / 4 weeks. In addition, participant 2 has chronic pain, and participant 4 has a bipolar diagnosis. These different health conditions most likely affect their stress levels. In the other three participants, the source of participant 1 stress is because she has not got a job, participant 9 still has not found meaning, and participant 11 is related to financial condition. From these results, participants needed to identify the source of stress and how to overcome it so as not to negatively affect the condition and psychic (Saulsman & Nathan, 2012).

Implementing online group therapy has various advantages for both facilitators and participants. Participants from outside the area/island can attend therapy sessions to reach more needy individuals. The process of communication and provision of materials has become more practical. Zoom is also quite comfortable because it can take advantage of features such as chat columns, whiteboards, break-out rooms, and reactions. According to participants, the material presented was practical and structured and provided a new perspective on overcoming career anxiety.

Based on the reflection of the facilitator's experience, there are some limitations in the implementation of group therapy. The facilitator's self-presentation tends to be calm, friendly, and neutral body language is considered by some participants to be more energetic so that participants are more active. The group's agreement on enabling video only when speaking made some participants choose to disable the video from the second – fifth session. Ice breaking takes longer because of the large number of participants in the initial session. One participant had career anxiety due to not having found the purpose/meaning of his work. Finally, internet connection constraints that hinder therapy sessions make participants share stories through chat.

Recommendations are given to improve the effectiveness of the implementation of subsequent group therapy sessions:

Open group therapy sessions with simpler ice-breaking games to increase the bonding and enthusiasm of participants following the therapy.

Provide more opportunities and encouragement for participants to respond to questions or answers from other participants so that the session is more interactive and dynamic.

The facilitator also proposes a group agreement to enable video during the session to make the interaction more dynamic and anticipate participants doing other activities outside therapy.

Addition of specific and practical materials related to the work selection and adaptation process, such as simulated interviews between participants, how to make choices when getting a job offer, and tips on dealing with the work environment for new graduates.

6   CONCLUSION

This research suggested that online group Cognitive Behavior Therapy can lower career anxiety in final year undergraduate students.

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