Cognitive Behaviour Therapy to Reduce Communication Apprehension in Students Who Are Working on Thesis

Cognitive Behaviour Therapy untuk Menurunkan Kecemasan Komunikasi pada Mahasiswa yang Sedang Mengerjakan Skripsi

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ABSTRACT

The complexity of writing a thesis causes difficulties or obstacles for students, which can result in the emergence of anxiety symptoms. This study aims to determine whether the Cognitive Behaviour Therapy (CBT) approach can reduce the level of communication apprehension experienced by students who are working on a thesis. Study 1 used a quantitative experimental method with a non-control group design and study 2 used a qualitative method. The participants in this study were 5 students from one of the universities in Surabaya. The results of study 1 show that providing interventions in the form of group counseling with a CBT approach can reduce the level of communication apprehension experienced by students who are working on their thesis. The results of study 2 show that group members can change their cognitive distortions so that they have a more positive thought process. Group members are also able to apply CBT strategies that have been done together to reduce their communication anxiety so that it can increase the effectiveness of communication in preparing the thesis.

ABSTRAK

Kompleksitas penulisan skripsi menimbulkan kesulitan ataupun kendala bagi mahasiswa, yang dapat berakibat munculnya gejala-gejala kecemasan. Penelitian ini bertujuan untuk mengetahui apakah pendekatan Cognitive Behaviour Therapy (CBT) dapat menurunkan tingkat kecemasan komunikasi yang dialami oleh mahasiswa yang sedang mengerjakan skripsi. Studi 1 menggunakan metode kuantitatif eksperimen dengan non control group design dan studi 2 menggunakan metode kualitatif. Partisipan dalam penelitian ini adalah 5 orang mahasiswa dari salah satu universitas di Surabaya. Hasil studi 1 menunjukkan bahwa pemberian intervensi berupa konseling kelompok dengan pendekatan CBT dapat menurunkan tingkat kecemasan komunikasi yang dialami oleh mahasiswa yang sedang mengerjakan skripsi. Hasil studi 2 menunjukkan bahwa anggota kelompok dapat mengubah distorsi kognitifnya sehingga memiliki proses berpikir yang lebih positif. Anggota kelompok pun mampu untuk menerapkan strategi-strategi CBT yang telah dilakukan bersama untuk menurunkan kecemasan komunikasinya sehingga dapat meningkatkan keefektifan komunikasi dalam penyusunan skripsi.

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Thesis is the best work of undergraduate students that combines intellectual and emotional abilities, as well as taste and compassion. Students are also required to understand the theory and choose the right research method, and have the ability to write with scientific methods (Puspitasari, 2013). As proof of integrity and theoretical implementation, the thesis is a form of contribution to society with the knowledge that students have gained during the lecture period.

Students can make a thesis with a discussion related to a particular topic based on the results of a literature review of theorists, the results of research in the field, or the results of tests or experiments (Mansur, 2009). Thesis is made to find the error or truth of a phenomenon that occurs in life rationally in accordance with the field of science studied. Thesis writing is also very useful for academics to determine the level of knowledge and understanding of students of the science they have.

The complexity of thesis writing creates difficulties or obstacles for students, which can result in the emergence of anxiety symptoms (Wakhyudin & Putri, 2020). Some students conveyed anxiety in completing the thesis, difficulty expressing opinions to lecturers, fear of answering questions given by lecturers, difficulty establishing communication with research umbrella friends, difficulty in finding references, difficulty understanding related material, and lack of support system owned.

Based on observations of the group guidance process at one of the universities in Surabaya, between students and their supervisors, it appears that students tend to be passive. Students are more silent when given questions by their lecturers. Lecturers also seem to tend to be dominant in the guidance process, by delivering related materials, as well as providing explanations related to the preparation of scientific papers or theses. In the end, the lecturer delivered the material with a tone of voice that tended to rise and suppress because no student answered when asked several times. This condition makes students look depressed, showing tense facial expressions, and bowing their heads more.

Students who are completing a thesis are required not only to have good writing skills, but are also required to have good communication skills. This is because good communication is an important asset in conveying information and knowledge from the supervisor to students and vice versa. Students are required to communicate actively, both to express opinions, give or answer questions, convey their lack of understanding of certain materials or concepts and convey their work progress. However, the students in the study were not able to communicate well because there was a disturbance in communication, called communication apprehension, which is a negative response in the form of anxiety felt by individuals in their communication experience (Rakhmat, 2012).

Communication apprehension leads to reluctance to communicate or avoidance of oral communication (Matsuoka & Rahimi, 2011), forgetting what to say, mistakes in speaking, or difficulty concentrating (Gecer & Gumus, 2010). This perceived communication apprehension has several consequences, including difficulty in understanding what the lecturer means, which causes difficulty in making revisions, which in turn leads to delays in work or not understanding what is written. This also makes students feel more anxious in the next guidance, which eventually becomes a cycle that makes students feel more uncomfortable.

Based on the problems found, interventions are needed to reduce communication anxiety in students who are working on a thesis. Some interventions that can have a positive effect on communication apprehension include behavior therapy (Erford, 2015), cognitive therapy (Erford, 2015; Berger & Mc Croskey, 1982; Baldwin et al., 1979; Nayeem et al., 2015; Hasan, 2008), and cognitive behavior therapy (Corey, 2014;
CBT was chosen because communication apprehension is a cognitive process and communication skills are behavioral processes (Berger & McCroskey, 1982). The CBT approach is considered effective for reducing communication anxiety due to cognitive changes to the source of communication anxiety and the practice factor in communication which can also strengthen these cognitive changes.

Rust, Gentry, & Ford (2020) applied communication skill training and Rogers & King (2012) with a CBT approach had a positive effect, namely reducing communication anxiety in pharmacy students. The CBT approach is considered effective for reducing communication apprehension due to cognitive changes to the source of communication apprehension and the practice factor in communication which can also strengthen these cognitive changes.

Changes in cognition are needed to provide a new appraisal or assessment of certain situations (which are the source of anxiety) so that it is expected to reduce communication apprehension. Then, behavioral processes are also needed by applying exercises that can improve communication skills, so that clients get used to the communication process carried out, which is expected to further reduce their communication apprehension.

**Method**

Study 1 in this research uses a quantitative experimental method with a non-control group design, which has only one pretest-posttest group or does not have a control group. The experimental design uses group counseling with a CBT approach. The stages are (1) Introduction and activity contract, (2) Pretest, (3) Problem free talk, (4) Cognitive restructuring, (5) Modeling, (6) Role playing, (7) Homework, (8) Follow up, (9) Termination, (10) Posttest.

The instrument used in this study is an adaptation of the Personal Report of Communication Apprehension-24 (PRCA-24) which has three score categories, namely low (24 - 50), average (51 - 80), and high (81 - 120) (McCroskey, 2005).

<table>
<thead>
<tr>
<th>Score</th>
<th>Categories</th>
</tr>
</thead>
<tbody>
<tr>
<td>24 – 50</td>
<td>Low</td>
</tr>
<tr>
<td>51 – 80</td>
<td>Average</td>
</tr>
<tr>
<td>81 – 120</td>
<td>High</td>
</tr>
</tbody>
</table>

Study 2 used a qualitative method using a case study approach. The case study method has four types, based on its specific purpose (Gog, 2015), namely theory testing, explanatory, descriptive, and exploratory. The case study in this study belongs to the descriptive type, which is to provide an overview of how (CBT) is applied to reduce communication apprehension in students who are working on a thesis.

**Result**

The demographics of the study subjects or participants are presented in Table 1.

<table>
<thead>
<tr>
<th>No</th>
<th>Name</th>
<th>Gender</th>
<th>Age (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ALP</td>
<td>Woman</td>
<td>22</td>
</tr>
<tr>
<td>2</td>
<td>ACO</td>
<td>Woman</td>
<td>22</td>
</tr>
<tr>
<td>3</td>
<td>WAO</td>
<td>Woman</td>
<td>22</td>
</tr>
<tr>
<td>4</td>
<td>SWR</td>
<td>Woman</td>
<td>22</td>
</tr>
<tr>
<td>5</td>
<td>ALZ</td>
<td>Woman</td>
<td>22</td>
</tr>
</tbody>
</table>

Based on Table 1, the participants were all female, and 22 years old.

The results of study 1 showed that the five subjects experienced a decrease in PRCA-24 score after being given Group Counseling with CBT approach. Based on Figure 1, it is known that all participants...
experienced a decrease in PRCA-24 scores with an average decrease of 19.6, from an average score before the intervention of 86.6 (high category) to an average score after the intervention of 67 (average category). The largest decrease in score occurred in subject ALP with a decrease of 34, from a score before the intervention of 84 (high category) to a score after the intervention of 50 (low category). While the lowest score decrease occurred in the ACO subject with a decrease of 12, from the score before the intervention 91 (high category) to the score after the intervention was 79 (average category).

The results of this study also show that students who are undergoing a thesis can also experience high communication anxiety, where the group members have PRCA-24 scores between 81-91 with an average of 86.6.

The results of Study 2 show that Group Counseling with the Cognitive Behavior Therapy (CBT) approach refers to cognitive and behavioral changes in participants after the completion of the intervention. Cognitive changes in participants are presented in Table 2, while behavioral changes in participants are presented in Table 3.

**Table 2. Cognitive Change in Participants**

<table>
<thead>
<tr>
<th>Subject</th>
<th>Cognitive Distortion</th>
<th>Before</th>
<th>After</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALP</td>
<td>“Should” statement</td>
<td>The lecturer should answer the students’ questions, instead of answering with follow-up questions. Each lecturer has their own characteristics that cannot be controlled, so focus on what can be done during guidance.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Personalizing</td>
<td>The lecturer got angry because I couldn't answer the questions given (to all students under guidance)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Discounting the positive</td>
<td>Feeling that it is futile to ask questions because they do not get the answers they want, although in the end the lecturer still provides additional material or explanations. The more questions, the more things to look for, the more knowledge, if not with questions, students will not think deeply.</td>
<td></td>
</tr>
<tr>
<td>ACO</td>
<td>“Should” statement</td>
<td>In the guidance process, he should get answers to his confusion, not questions that further confuse the client. Each lecturer has their own characteristics that cannot be controlled so focus on what you can do during the guidance and the more questions you are asked, the more knowledge you will gain that may be useful for answering questions during the exam.</td>
<td></td>
</tr>
</tbody>
</table>
“Should” statement

WAO
The lecturer should have been able to understand the distressed students if the lecturer delivered it in a high tone.

Each lecturer has their own characteristics that cannot be controlled, so focus on what can be done during guidance.

SWR
Lecturers are supposed to answer students’ questions, not come up with hard-to-answer questions.

Each lecturer has their own characteristics that cannot be controlled, so focus on what can be done during guidance.

ALZ
The supervisor should provide guidance by pointing out what is appropriate and inappropriate, instead of letting the student do it.

Change the question from asking for validation to asking for opinions or asking for references that need to be added.

Catastrophizing

Not being given validation will make me not pass the exam and retake the exam.

Believe in what you have done, if in the end you are still blamed, it's okay, students have limited knowledge compared to lecturers. Retaking the exam is not the end of the world.

Based on Table 2, it can be seen that participants have the same cognitive distortion "should" statement, which is how others should behave or behave towards themselves, but it does not match what happens in reality, which then leads to negative conclusions and behavior.

### Table 3. Behavioral Change in Participants

<table>
<thead>
<tr>
<th>Subject</th>
<th>Behavior</th>
<th>Before</th>
<th>After</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALP</td>
<td>Passive in guidance</td>
<td>The subject chose to remain silent when asked questions for fear of not being able to answer further questions.</td>
<td>Reveal the answers you want to convey by designing answers to questions that may be asked so as to answer questions in the guidance process.</td>
</tr>
<tr>
<td></td>
<td>Not knowing or being confused about what to do</td>
<td>The subject was confused about what to do next and ended up feeling depressed.</td>
<td>Communicate with the lecturer and prepare a plan to answer the follow-up questions.</td>
</tr>
<tr>
<td>ACO</td>
<td>Passive in guidance</td>
<td>Preferring to remain silent during the group guidance process for fear of not being able to answer the next question.</td>
<td>Prepare questions and answers that may arise in the group guidance process, so that he can be more active in the guidance process.</td>
</tr>
<tr>
<td>WAO</td>
<td>Passive in guidance</td>
<td>Choosing to be more silent or passive in the group guidance process for fear of being wrong and feeling pressured.</td>
<td>Prepare questions and answers that may arise in the guidance process, so that he can be more active in the guidance process.</td>
</tr>
<tr>
<td></td>
<td>Lack of communication with friends</td>
<td>Lack of communication because they are afraid that what they say will hurt their friends.</td>
<td>Confirming what the client is feeling with what his friends are feeling, &quot;is it true that his friend is hurt?&quot;</td>
</tr>
<tr>
<td>SWR</td>
<td>Passive in guidance</td>
<td>Choosing to remain silent rather than answering a question but getting it wrong, which will make the lecturer angry or raise his voice.</td>
<td>Prepare answers to questions that may arise, so that he can answer questions from the lecturer. Things that can be controlled: answering questions. Things that cannot be controlled: the lecturer's response/the lecturer gets angry.</td>
</tr>
</tbody>
</table>
Lack of communication with friends

Lack of communication for fear of being considered troublesome or making their friends uncomfortable.

Confirming what they are feeling with their friends.

ALZ

Passive in guidance

Choosing to be more silent and not asking questions during the guidance process because they will definitely get the same answer.

Changing the questions during guidance so as not to get the same answers so that they can be more active in the guidance process.

Cries a lot

Crying because I didn't know what to do about the guidance process that was considered stuck by the client.

Changing questions to lecturers during guidance, from questions asking for validation to questions asking for opinions or additional references needed.

Believing in what has been done and asking for additional references needed.

Based on Table 3, it can be seen that participants have similar behaviors, namely passivity in guidance, which is the impact of their communication apprehension.

Discussion

This research shows that communication apprehension can also appear in final year students, not only in new students who are adapting to their new environment (Pratama, 2021; Fitriyana & Niko, 2020; Fitriyana, Karmiyati, Yuniardi, & Widiantoro, 2020; Sidauruk, 2016). Group counseling using the CBT approach can also be used to reduce communication apprehension experienced by students to support their thesis work.

The complexity of the thesis that is being faced can lead to different responses in each student, including the anxiety of communicating with the supervisor. Communication apprehension in members of this counseling group can occur due to cognitive distortions that arise in students, which is in accordance with the results of research by Berger & Mc Croskey (1982), which states that communication apprehension is a cognitive process.

The type of cognitive distortion that appears most in students is should statement (see table 2), where each student member has the expectation that they will get certain treatment from their lecturers, but these expectations are not in accordance with what students feel. This led to negative emotions that made group members uncomfortable in carrying out the guidance process and made members display passive behavior in guidance, such as not wanting to answer questions from lecturers and only wanting to answer when called by name. In addition, group members tend to avoid thinking about how the next guidance process will be, compared to focusing on the progress that has been achieved in working on the thesis. This is also in accordance with research conducted by (Ayres, Keereetaweep, Chen, & Edward, 1998).

Students who have high communication apprehension also tend not to think or do not want to imagine how the next guidance process will be because imagining the situation makes their level of worry and discomfort increase. Students who are members of the counseling group are also given a form of intervention in the form of cognitive restructuring, modeling, role playing, and homework.

Cognitive restructuring is given to group members to identify and change cognitive distortions that have been appearing. This process makes group members have a more positive thought process than before. This is in accordance with the research of Leahy & Rego (2012) which proves that cognitive restructuring is an important and effective intervention technique that has been applied to various disorders, such as anxiety, PTSD, depression and others.
Modeling is provided with the aim of identifying models from group members, who are considered to have better communication than others. Modelling can help individuals to move from conceptual to practical understanding more quickly (Twohig & Dehlin, 2012). This process also gave rise to a model who was considered to have better communication than the other members. Unfortunately, group members could not identify the model's ability in more detail. This shows that group members have not been able to observe or analyze people who are considered to have better communication skills. Group members could not imitate the model because they did not know what to imitate from the model.

Role playing is applied with the aim of imitating or practicing scenes or situations that raise communication anxiety, so that group members are more accustomed to situations that are better prepared than before. Group members also practiced the question and answer scene in guidance with the scenario that had been prepared together. Group members were able to express whatever they really wanted to express or answer during the guidance process, which had never been able to be said or conveyed before due to the emergence of anxiety beforehand.

ALP was the most active member in each session, especially the role playing session, ALP did not hesitate to offer to role play together, he also always agreed if asked to role play together because ALP was considered the most similar when playing the role of a lecturer. ALP was also the member who experienced the most decrease in communication anxiety scores compared to the other members. This is because activeness in each session is very important for individual development in the therapy process (Twohig & Dehlin, 2012).

Group members were also given homework, where they were asked to create scenes or scenarios containing questions and answers that might arise in the guidance process that had made them uncomfortable and anxious. Each group member also made a scenario that was quite different from one another and this actually made group members have more choices of answers to the lecturer's questions that were considered difficult to answer in the guidance process.

WAO was the member who made the most homework, where he made two different scenario themes, namely friends and supervisors, besides that the questions and answers for each theme were also quite a lot. WAO also experienced a significant decrease in communication apprehension scores compared to the others, which is in accordance with the results of research (Callan, et al., 2019). This is because homework is considered important in the CBT process, where individuals can implement the techniques provided in everyday life (Cattie, Buchholz, & Abramowitz, 2020).

Conclusions

The results of this study prove that the intervention in the form of group counseling using the CBT approach can reduce the level of communication apprehension experienced by students who are undergoing thesis.

Group members understand a more positive thought process and that they have done actions that can reduce their communication apprehension.

Group members are also able to develop scenarios in the implementation of role play, which can help group members to reduce anxiety by simulating things that need to be said or done.

Recommendation

Suggestions for counseling group members are to apply CBT techniques that have been practiced together to reduce communication apprehension that may appear in the future. Suggestions for future researchers to consider the activeness of all group members to participate in every
discussion conducted in the group so that each member can get the expected therapeutic effect.

References


Matsuoka, R., & Rahimi, A. (2011). The


