The Influence of Positive Thinking Therapy For Anxiety on Students

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ABSTRACT

This study investigated the impact of positive thinking therapy on anxiety levels in third semester psychology students. Using a One Group Pretest-Posttest design, which involved 20 participants with (17 female, 3 male). In the normality test results, the significance value of the pretest is included in the normal distribution with a Sig value = 0.365 (p> 0.05) as well as the significance value of the posttest is included in the normal distribution with a Sig value = 0.371 (p> 0.05). in the pretest the significance value is 0.583 (≥0.05) and in the posttest the significance value is 0.560 (≥0.05) thus in the initial test (pretest) and the final test (posttest) both have homogeneous data. Finally, in the Hypothesis test using the Paired Sample T-test, the Significance value of the pretest and posttest is <0.001 so that H1 is accepted, thus the researcher can conclude that the therapy succeeded in reducing anxiety levels for most participants, only three did not experience changes. Statistical analysis supports this conclusion, showing the effectiveness of therapy in reducing anxiety.

Keywords: Positive Thinking Therapy, Anxiety, Psychology Students

INTRODUCTION

A student is generally an individual who is in the process of pursuing higher education at an educational institution such as a university or college. However, their journey in higher education is often not only full of academic achievements, But it is also filled with emotional and psychological challenges, including anxiety. Rakhmat (2006) states that anxiety makes individuals feel inferior, underestimate themselves, consider themselves unattractive and consider themselves unpleasant to others. Individuals who tend to experience anxiety are characterized by muscle tension and a very high level of alertness. Then, the individual will withdraw from people around them.

In previous studies, researchers obtained research results that discussed and explained that there was an effect of positive thinking on reducing anxiety

e-ISSN: 2963-7635 p-ISSN: 2986-2426 in a student. In line with the description above according to Peale (2009), he explains that individuals who think positively will see every difficulty in a clear and simple way and are not easily influenced, so they are not easily discouraged by various challenges or obstacles faced. Individuals who think positively have a tendency to always think based on the fact that every problem must have a solution or the right solution and always go through various healthy (intellectual) thought processes. Then according to the results of research conducted by Sabati (2010) stated that the higher the level of positive thinking of a person, the lower the anxiety and vice versa, the lower the level of positive thinking of a person, the higher the anxiety.

Anxiety itself is a manifestation of what a person thinks. According to Russel (2003), the whole form of mood in a person is formed by thoughts or cognition. A person can feel what he is currently doing because of the thoughts he has. When someone feels depressed, especially when caused by thoughts that are dominated by negativity or negative effects that can cause everything to be bad when imagined so that it can cause anxiety. One way to overcome anxiety is with positive thinking therapy. Seligman (2008) explains that people who think positively will tend to interpret their problems as temporary, controllable, and only specific to one situation. People who think negatively on the contrary believe that their problems last forever, destroy everything they do and are uncontrollable. Positive thinking is an attempt to fill the mind with positive things or positive content. Putting positive content in the mind space is a positive action but the action is at a low level if the positive content is not realized in real action. The role of the thinking process also has a big influence on a person's feelings, what the environment and individual demands of him will ultimately lead to the decision-making process of an event he is facing.

Based on the literature review conducted by researchers on previous research, researchers found that the research discusses anxiety in general which is caused by a lot of factors or dimensions involved such as self-confidence, emotions, etc. In this study, the scale used was positive thinking therapy with a value of U = 62,000 and p = 0,000. In research conducted by Adriansyah et al., (2015) the results of his research showed that there was a decrease in anxiety in subjects after being given positive thinking therapy with a value of U = 62,000 and p = 0.000. in this study the scale used is an

anxiety scale adapted from the Depression Anxiety Stress Scale (DASS) developed by Lovibond and Lovibond in 1995. This DASS test consists of 42 items that measure general psychological distress (GPD) such as depression, anxiety and stress.

Based on the results of previous research, the researcher is inspired to conduct an experiment aimed at determining and knowing whether it is true that positive thinking therapy or giving positive affirmations to others (students) can reduce the level of anxiety in themselves? so that it can make these students more relaxed (relax) and more confident in themselves in carrying out their daily activities that have the potential to cause them anxiety..

Based on the results of research that has been done before, the researcher proposes the hypothesis of this study, namely:

- 1) H1: there is a decrease in anxiety in Raden Fatah Islamic University students after being given positive thinking therapy.
- 2) H0: there is no decrease in anxiety in Raden Fatah Islamic University students after being given positive thinking therapy.

RESEARCH METHOD

The research method used is an experimental quantitative research method. In the research design to be carried out, researchers chose the One-Group Pretest-Posttest Design type according to Christinsen (2001) this research design also has another name, namely before-after design. In this type of research design in the initial stage, measurements are made of the dependent variable that the subject already has and then after being given manipulation, measurements are made again on the dependent variable with the same measuring instrument. The effectiveness or influence of the free variable on the dependent variable can be seen from the difference between the pretest and posttest results.

Arikunto (2003) defines population as the entire research subject. The population in this study were all students of the Islamic Psychology Study Program, Faculty of Psychology Semester 3 Batch 2022. Arikunto (2003) further explains that a portion of the population disebut sebagai sampel. The sampling technique used in this study uses the results of the anxiety test

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screaning, which means that if the student gets a high or very high anxiety score, the student will become a research sample.

The data collection tool in this study uses an anxiety subscale with 14 items adapted from one of the scales developed by Antony et al., (1998) from two scales, namely Depression Anxiety Stress (DASS) with 41 items and Depression Anxiety Stress Scale-21 (DASS-21) with 21 items. In summary, the DASS with 41 items in his research is an excellent instrument for measuring anxiety, depression and stress traits in clinical and nonclinical groups. While the DASS-21 with 21 items in its measurement although it has some advantages compared to the DASS with 41 items, namely fewer items, cleaner factor structure, and smaller correlations between factors, the findings for the DASS-21 scale still have to be replicated or changed in certain parts independently.

In his research Antony et al., (1998) suggested continuing to use the DASS with a 41-item version because more information is obtained even though the DASS-21 is still recommended because of its practicality and convenience. Based on the description above, the researcher decided to use the DASS with a 41-item version with subscales: stress as many as 14 items, depression as many as 14 items, and anxiety as many as 14 items because the researcher's focus is only on anxiety so that only uses the anxiety subscale with 14 items from the DASS with a 41-item version.

The test answers from the anxiety subscale in this DASS consist of 4 choices arranged in the form of a Likert scale, namely:

Table 1

Value	Description
0	Never (Doesn't suit me at all).
1	Sometimes (Suits me to some degree).
2	Quite often (Suits me to a considerable extent).
3	Very often (It suits me very well).

Furthermore, research subjects will be asked to rate at which level they experience or feel. The scores from each sub-scale are summed up and compared with the existing norms to find out an overview of the individual's anxiety level. The assessment in this measuring instrument is in accordance

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with the norms that have been standardized in research conducted by Adriansyah et al. (2015), namely:

Table 2

Score	Category
0 - 7	Normal
8 – 9	Mild Anxiety
10 - 14	Medium Anxiety
15 – 19	Severe Anxiety
20+	Very Serious Anxiety

The data analysis technique used in this research is statistical analysis, namely the T-test using SPSS software to test the hypothesis that has been determined by the researcher beforehand

RESULTS AND DISCUSSION

Personal Data and Characteristics of Respondents

The individuals who were the subjects in this study were students of the Islamic Psychology Study Program at the Faculty of Psychology with a total of 20 subjects.

Table 3

Name	Class	Gender
A B	PI3	Female
МЈА	PI6	Male
R	PI1	Female
ΙΙ	PI1	Female
A D	PI1	Female
M R	PI2	Male
A A	PI7	Female
M B P	PI1	Male
ADS	PI2	Female
GDS	PI1	Female
A	PI1	Female
M D	PI6	Female
SAFP	PI2	Female

ARE	PI5	Female
VE	PI3	Female
N A	PI5	Female
M	PI7	Female
N	PI2	Female
ZH	PI6	Women
S	PI6	Female

Based on the table, it can be seen that the number of subjects who are male is 3 people and the number of subjects who are female is 17 people. All of the respondents mentioned above are students who are actively studying and are currently pursuing academic education in semester 3.

Table 4. Summary of Score Data and Classification of Anxiety LevelsBefore and After Therapy Treatmen

Name	Posttest	Category	Pretest	Category	Status
A B	5	Normal	5,5	Normal	Decrease
MJA	6,25	Normal	7	Medium	Decrease
R	7,25	Normal	7,75	Normal	Decrease
ΙΙ	8,25	Mild	8,75	Medium	Decrease
A D	8,25	Mild	8,75	Mild	Decrease
M R	6,75	Normal	8	Mild	Decrease
A A	7,25	Normal	8	Mild	Decrease
MBP	8,25	Mild	8,75	Mild	Decrease
ADS	7	Normal	7,75	Normal	Decrease
GDS	6	Normal	8,25	Mild	Decrease
A	6	Normal	8,75	Mild	Decrease
M D	5,75	Normal	6,5	Normal	Decrease
SAFP	8	Mild	8	Mild	Fixed
ARE	6	Normal	7,25	Mild	Decrease
VE	8,75	Mild	9,25	Mild	Decrease
N A	6,75	Normal	7,25	Normal	Decrease
M	8	Mild	9	Mild	Decrease
N	6,75	Normal	7,5	Normal	Decrease
ZH	8,75	Mild	9,25	Mild	Decrease

S 9	Mild	9,5	Mild	Decrease
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Based on the data presented, it can be seen that the majority of participants experienced a decrease in anxiety scores at the time of the Posttest compared to the Pretest, so their Status was "Decreased." Only one participant had a Status of "Fixed," namely S A F P Thus, in general, the results of the Posttest tend to show the effect of the therapeutic treatment given by the researcher to the research subjects, from the number of subjects who experienced a decrease in anxiety scores showed good results because it means that the results of the provision of positive thinking therapy have an effect on reducing anxiety levels in individuals who are research subjects. The provision of positive thinking therapy treatment also even helps participants (research subjects) to maintain their normal anxiety criteria and ensure their anxiety conditions do not increase.

Normality Test Results

Table 5. Tests of Normality

	Kolmogorov-Smirnov ^a			Shapiro-Wilk			
	Statistic	df	Sig.	Statistic	df	Sig.	
Pretest	.158	20	.200*	.950	20	.365	
Posttest	.155	20	.200*	.950	20	.371	

^{*.} This is a lower bound of the true significance.

a. Lilliefors Significance Correction

The normality test is carried out with the aim of seeing the deviation of the studied observation frequency from the theoretical frequency. The normality assumption test itself uses analytical statistical techniques. The reason for using the Saphiro-Wilk normality test is because the subjects studied were <50 based on the statement put forward by Razali, N.M & Wah, Y.B (2011). The rule used according to Reza, I.F. (2017) is if the Significance value> 0.05 then the distribution is normal but if the Significance value < 0.05 then the distribution is not normal.

In the results of the normality test that has been carried out, it can be seen that the Significance value of the pretest is included in the normal distribution with a Sig value = 0.365 (p> 0.05) as well as the Significance value of the posttest is included in the normal distribution with a Sig value = 0.371 (p> 0.05).

Homogeneity Test Results

Table 6. Tests of Homogeneity of Variances

			'		
		Levene			
		Statistic	df1	df2	Sig.
Posttest	Based on Mean	.353	1	18	.560
	Based on Median	.688	1	18	.418
	Based on Median and with adjusted df	.688	1	17.619	.418
	Based on trimmed mean	.363	1	18	.554
Pretest	Based on Mean	.312	1	18	.583
	Based on Median	.371	1	18	.550
	Based on Median and	.371	1	17.777	.550
	with adjusted df				
	Based on trimmed mean	.328	1	18	.574

According to Reza, I.F. (2017) The provisions of the homogeneity test (Levene's) homogeneous data are characterized by a significance value ≥ 0.05 . Based on the data above, it can be concluded that in the pretest the significance value is $0.583 (\ge 0.05)$ and in the posttest the significance value is $0.560 (\ge 0.05)$ thus in the initial test (pretest) and the final test (posttest) both have homogeneous data.

Hasil Uji Hipotesis

Table 7. Paired Samples Test

	Paired Differences							Signific	ance	
				95% Confidence						
			Std.	Std.	. Interval of the					
			Deviati	Error	Difference				One-	Two-
		Mean	on	Mean	Lower	Upper	T	df	Sided p	Sided p
Pair	Pretest	8375	.64008	.14313	.53793	1.13707	5.851	19	<,001	<,001
1	Posttest	0								

P.54-63

The hypotheses to be tested in this study are

- 1) H1: there is a decrease in anxiety in Raden Fatah Islamic University students after being given positive thinking therapy.
- 2) H0: there is no decrease in anxiety in Raden Fatah Islamic University students after being given positive thinking therapy.

The assessment criteria according to Nurgiyantoro, B. et. al., (2017) is reject H0 if Sig. \leq a 0,05. Based on the results of the hypothesis test table using the paired sample t test above, it can be concluded that H0 is rejected because the pretest and posttest Significance values are <0.001, this also means that H1 is accepted. Because H1 is accepted, it can be concluded that there is a decrease in anxiety in Raden Fatah Islamic University students after being treated with positive thinking therapy.

CONCLUSION

This study concluded that positive thinking therapy is effective in reducing anxiety levels in psychology students. The results showed that both male and female participants experienced a significant decrease in anxiety levels after undergoing therapy. Most of the participants showed a decrease in anxiety levels, while only one participant experienced no change. The positive thinking therapy treatment even helped the participants (research subjects) to maintain their normal anxiety criteria and ensure their anxiety condition did not increase. The normality test showed that the post-test data was normally distributed, while the pre-test data was not. The homogeneity test showed that the variance of anxiety levels was the same for both pre-test and post-test data. Hypothesis testing confirmed that there was a significant decrease in anxiety levels after therapy. Overall, this study concluded that positive thinking therapy was effective in reducing anxiety levels in participants.

In the normality test that has been carried out by researchers, it can be seen that the Significance value of the pretest is included in the normal distribution with a value of Sig = 0.365 (p> 0.05) as well as the Significance value of the posttest is included in the normal distribution with a value of Sig = 0.371 (p> 0.05). Then in the homogeneity test results in the pretest the significance value is 0.583 (≥ 0.05) and in the posttest the significance value is 0.560 (≥ 0.05) thus in the initial test (pretest) and the final test (posttest)

both have homogeneous data. Finally, in the results of hypothesis testing using the paired sample t test, it can be concluded that H0 is rejected because the pretest and posttest significance values are <0.001, thus meaning that H1 is accepted. Because H1 is accepted, it can be concluded that there is a decrease in anxiety in Raden Fatah Islamic University students after being treated with positive thinking therapy.

Overall, researchers can conclude that the results of this experimental research are sufficient to answer the curiosity and questions that arose in the minds of researchers at the beginning, namely is it true that positive thinking therapy or giving positive affirmations to others (students) can reduce the level of anxiety in themselves? so that it can make these students more relaxed (relax) and more confident in themselves. Although the results of the research conducted by researchers show good results, there are still shortcomings, namely that researchers have not been able to find subjects who really have severe or very severe anxiety levels so that the application of positive thinking therapy to subjects with these criteria can have results that may be much different from the subjects that researchers are currently researching.

The addition of other types of therapy is also likely to increase the effectiveness of reducing anxiety levels in research subjects in accordance with the opinion of Adriansyah et al., (2015) in his research he concluded that positive thinking therapy is more effective when juxtaposed with other types of therapy, namely CBT (Cognitive Behavioral Teraphy) so that the results can also be maximized, especially for research subjects who suffer from anxiety that falls into the criteria of severe and very severe.

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