LAMPIRAN

Lampiran 1

Surat Keputusan pembimbing

UNIVERSITAS GALUH
FAKULTAS ILMU KESEHATAN
S1 KEPERAWATAN – S1 KEBIDANAN – PROFESI NERS – PROFESI BIDAN
Kampus : Jalan. R.E. Martadinata No. 150 Ciamis 46274 Nomor Kontak: 0821-1790-9060
website: fikes.unigal.ac.id / e-mail: fikes@unigal.ac.id

SURAT KEPUTUSAN
DEKAN FAKULTAS ILMU KESEHATAN UNIVERSITAS GALUH
NOMOR : 66 /401/SK/AK/D/XI/2025
TENTANG
PENGANGKATAN PEMBIMBING KARYA ILMIAH AKHIR NERS (KIAN)
PROGRAM STUDI PENDIDIKAN PROFESI NERS TAHUN AKADEMIK 2025/2026
FAKULTAS ILMU KESEHATAN UNIVERSITAS GALUH

DEKAN FAKULTAS ILMU KESEHATAN UNIVERSITAS GALUH

MENIMBANG :
1. Bahwa untuk kelancaran kegiatan Bimbingan Karya Ilmiah Akhir Ners (KIAN) perlu diangkat pembimbing Karya Ilmiah Akhir Ners (KIAN).
2. Bahwa untuk legalitas pembimbing dalam melakukan kegiatan bimbingan Karya Ilmiah Akhir Ners perlu di terbitkan Surat Keputusan Dekan.

MENGINGAT :
1. Undang-undang Nomor 12 Tahun 2012 tentang Pendidikan Tinggi;
1. Peraturan Pemerintah Nomor 4 Tahun 2014 tentang Penyelenggaraan Pendidikan Tinggi dan Pengelolaan Pendidikan Tinggi;
2. Permendikbud nomor 3 Tahun 2020 tentang Standar Nasional Perguruan Tinggi;
3. Keputusan Menteri Pendidikan Nasional Nomor 184/U/2001 tentang Pedoman Pengawasan, Pengendalian dan Pembinaan Program Diploma, Sarjana dan Pascasarjana di Perguruan Tinggi;
4. Surat Keputusan Yayasan Pendidikan Galuh Ciamis Nomor 1 Tahun 2025 tentang Statuta Universitas Galuh;
5. Peraturan Rektor Universitas Galuh Nomor 1 Tahun 2025 tentang Pedoman Akademik Universitas Galuh Tahun 2025;
6. Surat Keputusan Rektor Universitas Galuh Nomor : 262/4123/SK/G/VIII/2023 Tanggal 26 Agustus 2023 tentang Pemberhentian dan Pengangkatan Dekan Fakultas Ilmu Kesehatan Universitas Galuh Masa Jabatan 2023-2027;

MEMPERHATIKAN : Surat Ajuan dari Ketua Program Studi Ilmu Keperawatan Fakultas Ilmu Kesehatan Universitas Galuh Nomor 86/1490/SP/AK/Ka.Prodi_Kep/XI/2025 perihal Permohonan SK Pembimbing KIAN.

MEMUTUSKAN

MENETAPKAN :

PERTAMA :
Nama : **MUTIA RAHMAWATI**
Nomor Pokok : **1490125085**
Program Studi : Pendididkan Profesi Ners

KEDUA : Mengangkat Pembimbing KIAN mahasiswa seperti yang tertulis pada diktum pertama sebagai berikut:
Pembimbing I : **Reni Hertini, S.Kep., Ners., M.Kep.**
Pembimbing II : **H. Asep Wahyudin, S.Kep., Ners., M.Kep.**

KETIGA : Tugas dan wewenang pembimbing KIAN:
a. Pembimbing KIAN ditugaskan untuk membimbing dan mengarahkan, dan memberikan masukan kepada mahasiswa dalam proses penulisan KIAN hingga selesai.
b. Dosen Pembimbing wajib memastikan bahwa KIAN yang disusun sesuai dengan standar akademik yang berlaku di Program Studi Profesi Ners Fakultas Ilmu Kesehatan Universitas Galuh
c. Pembimbingan KIAN dilaksanakan secara berkala sesuai dengan ketentuan yang berlaku.

KEEMPAT : Surat Keputusan ini berlaku sejak tanggal ditetapkan hingga mahasiswa menyelesaikan KIAN dan dinyatakan lulus sidang KIAN, dan apabila di kemudian hari ternyata terdapat kekeliruan dalam Surat Keputusan ini, akan dilakukan perbaikan sebagaimana mestinya.

Ditetapkan : Ciamis
Pada Tanggal : 6 November 2025
Dekan

Dr. Tita Rosita, S.Kep., Ners., MM., M.Kep.
NIK. 11.3112770275

Lampiran 2

JBI *Critical Appraisal*

JBI Critical Appraisal For Randomized Controlled Trials

Reviwer: Mutia Rahmawati

Tanggal: April 2026

Author: Mohr et al. Tahun Publikasi: 2019

Judul : *A randomized noninferiority trial evaluating remotely-delivered stepped care for depression using internet Cognitive Behavioral Therapy (CBT) and telephone CBT*

No	Pertanyaan	Ya	Tidak	Tidak Jelas	Tidak berlaku
1	Apakah proses pengacakan dilakukan dengan benar?	✓			
2	Apakah alokasi pengacakan disembunyikan (*concealed*)?	✓			
3	Apakah kelompok serupa pada awal penelitian (*baseline*)?	✓			
4	Apakah subjek penelitian buta (*blind*) terhadap intervensi?		✓		
5	Apakah petugas pemberi terapi buta terhadap intervensi?		✓		
6	Apakah penilai hasil (*outcome assessors*) buta?	✓			
7	Apakah kelompok diperlakukan sama selain intervensi?	✓			
8	Apakah *follow-up* dilakukan secara lengkap?	✓			
9	Apakah subjek dianalisis sesuai kelompok acaknya?	✓			
10	Apakah hasil diukur dengan cara yang sama antar kelompok?	✓			
11	Apakah hasil diukur secara andal (*reliable*)?	✓			

12	Apakah analisis statistik yang digunakan tepat?	✓			
13	Apakah desain uji coba cukup memadai?		✓		
Overall Appraisal		10/13			
Presentasi		76,9%			

JBI Critical Appraisal for Text and Opinion

Reviewer: Mutia Rahmawati | **Tanggal:** April 2026

Author: Herres et al. | **Tahun Publikasi:** 2023

Judul: *Combining attachment-based family therapy and Cognitive Behavioral Therapy to improve outcomes for adolescents with anxiety*

No	Pertanyaan	Ya	Tidak	Tidak Jelas	Tidak Berlaku
1	Apakah sumber opini telah diidentifikasi secara jelas?	✓			
2	Apakah sumber memiliki keahlian di bidang tersebut?	✓			
3	Apakah fokus utama adalah kepentingan kelompok/populasi?	✓			
4	Apakah argumen yang dikemukakan logis dan konsisten?	✓			
5	Apakah ada referensi ke literatur yang relevan?	✓			
6	Apakah ada bukti pemikiran kritis terhadap opini tersebut?		✓		
Overall Appraisal		5/6			
Presentasi		83,3%			

JBI Critical Appraisal for Qualitative Research

Reviewer: Mutia Rahmawati | **Tanggal:** April 2026

Author: Zuraidah | **Tahun Publikasi:** 2023

Judul: Peran teknik CBT (*Cognitive Behavior Therapy*) dalam mengelola stres remaja

No	Pertanyaan	Ya	Tidak	Tidak Jelas	Tidak Berlaku
1	Apakah ada kesesuaian antara filosofi dan metodologi?	✓			
2	Apakah ada kesesuaian metodologi dengan metode penelitian?	✓			
3	Apakah ada kesesuaian metodologi dengan penyajian data?	✓			
4	Apakah ada kesesuaian metodologi dengan interpretasi hasil?	✓			
5	Apakah ada pernyataan yang menempatkan peneliti secara budaya?		✓		
6	Apakah pengaruh peneliti terhadap penelitian dijelaskan?		✓		
7	Apakah suara partisipan terwakili secara memadai?	✓			
8	Apakah penelitian etis dan disetujui komite etik?	✓			
9	Apakah kesimpulan mengalir dari analisis data?	✓			
10	Apakah ada keterkaitan antara hasil dan teori?		✓		
Overall Appraisal		7/10			
Presentasi		70,0%			

JBI Critical Appraisal for Randomized Controlled Trials

Reviewer: Mutia Rahmawati | **Tanggal:** April 2026

Author: Ghelbash et al. | **Tahun Publikasi:** 2025

Judul: *Prevention of depression in freshman nursing students based on group cognitive - behavioral therapy: A randomized trial study*

No	Pertanyaan	Ya	Tidak	Tidak Jelas	Tidak Berlaku
1	Apakah proses pengacakan dilakukan dengan benar?	✓			
2	Apakah alokasi pengacakan disembunyikan?	✓			
3	Apakah kelompok serupa pada awal penelitian?	✓			
4	Apakah subjek penelitian buta terhadap intervensi?		✓		
5	Apakah petugas pemberi terapi buta terhadap intervensi?		✓		
6	Apakah penilai hasil buta terhadap intervensi?	✓			
7	Apakah kelompok diperlakukan sama selain intervensi?	✓			
8	Apakah follow-up dilakukan secara lengkap?	✓			
9	Apakah subjek dianalisis sesuai kelompok acaknya?	✓			
10	Apakah hasil diukur dengan cara yang sama antar kelompok?	✓			
11	Apakah hasil diukur secara andal?	✓			
12	Apakah analisis statistik yang digunakan tepat?	✓			
13	Apakah desain uji coba cukup memadai?	✓			
Overall Appraisal		11/13			
Presentasi		84,6%			

JBI Critical Appraisal for Case Series

Reviewer: Mutia Rahmawati | **Tanggal:** April 2026

Author: Djelantik & Spuij | **Tahun Publikasi:** 2025

Judul: *Cognitive Behavioral Therapy for Childhood Prolonged Grief Disorder for Bereaved Children and Adolescents With Comorbid Problems: Case Vignettes*

No	Pertanyaan	Ya	Tidak	Tidak Jelas	Tidak Berlaku
1	Apakah kriteria inklusi jelas?	✓			
2	Apakah kondisi diukur secara standar dan andal?	✓			
3	Apakah metode valid digunakan untuk identifikasi kasus?	✓			
4	Apakah subjek masuk secara berurutan (consecutive)?	✓			
5	Apakah pelaporan demografi lengkap?	✓			
6	Apakah riwayat klinis dilaporkan dengan jelas?	✓			
7	Apakah hasil klinis setiap subjek dilaporkan?	✓			
8	Apakah pelaporan lokasi/pusat penelitian jelas?	✓			
9	Apakah analisis statistik tepat?		✓		
10	Apakah ada potensi bias yang dilaporkan?		✓		
Overall Appraisal		8/10			
Presentasi		80,0%			

JBI Critical Appraisal for Randomized Controlled Trials

Reviewer: Mutia Rahmawati | **Tanggal:** April 2026

Author: Noor et al. | **Tahun Publikasi:** 2025

Judul: *Effectiveness of Cognitive Behavioral Therapy in Managing Anxiety Symptoms Among Adolescents in High-Stress Environments: A Randomized Controlled Trial*

No	Pertanyaan	Ya	Tidak	Tidak Jelas	Tidak Berlaku
1	Apakah proses pengacakan dilakukan dengan benar?	✓			
2	Apakah alokasi pengacakan disembunyikan?	✓			
3	Apakah kelompok serupa pada awal penelitian?	✓			
4	Apakah subjek penelitian buta terhadap intervensi?		✓		
5	Apakah petugas pemberi terapi buta terhadap intervensi?	✓			
6	Apakah penilai hasil buta terhadap intervensi?	✓			
7	Apakah kelompok diperlakukan sama selain intervensi?	✓			
8	Apakah follow-up dilakukan secara lengkap?	✓			
9	Apakah subjek dianalisis sesuai kelompok acaknya?	✓			
10	Apakah hasil diukur dengan cara yang sama antar kelompok?	✓			
11	Apakah hasil diukur secara andal?	✓			
12	Apakah analisis statistik yang digunakan tepat?	✓			
13	Apakah desain uji coba cukup memadai?	✓			
Overall Appraisal		12/13			
Presentasi		92,3%			

JBI Critical Appraisal for Randomized Controlled Trials

Reviewer: Mutia Rahmawati | **Tanggal:** April 2026

Author: Nwadi et al. | **Tahun Publikasi:** 2025

Judul: *Impact of cognitive-behavioral therapy and mindfulness-based stress reduction in mitigating test anxiety and enhancing academic achievement among vocational education students at Nigerian universities*

No	Pertanyaan	Ya	Tidak	Tidak Jelas	Tidak Berlaku
1	Apakah proses pengacakan dilakukan dengan benar?	✓			
2	Apakah alokasi pengacakan disembunyikan?	✓			
3	Apakah kelompok serupa pada awal penelitian?	✓			
4	Apakah subjek penelitian buta terhadap intervensi?		✓		
5	Apakah petugas pemberi terapi buta terhadap intervensi?		✓		
6	Apakah penilai hasil buta terhadap intervensi?	✓			
7	Apakah kelompok diperlakukan sama selain intervensi?	✓			
8	Apakah follow-up dilakukan secara lengkap?	✓			
9	Apakah subjek dianalisis sesuai kelompok acaknya?	✓			
10	Apakah hasil diukur dengan cara yang sama antar kelompok?	✓			
11	Apakah hasil diukur secara andal?	✓			
12	Apakah analisis statistik yang digunakan tepat?	✓			
13	Apakah desain uji coba cukup memadai?	✓			
Overall Appraisal		11/13			
Presentasi		84,6%			

JBI Critical Appraisal for Qualitative Research

Reviewer: Mutia Rahma | **Tanggal:** April 2026

Author: Izhan et al. | **Tahun Publikasi:** 2025

Judul: Metode *Cognitive Behaviour Therapy* dalam Penyembuhan Remaja Pengidap Gangguan Mental di Pusat Pemulihan Kuantan Pahang Malaysia

No	Pertanyaan	Ya	Tidak	Tidak Jelas	Tidak Berlaku
1	Apakah ada kesesuaian antara filosofi dan metodologi?	✓			
2	Apakah ada kesesuaian metodologi dengan metode penelitian?	✓			
3	Apakah ada kesesuaian metodologi dengan penyajian data?	✓			
4	Apakah ada kesesuaian metodologi dengan interpretasi hasil?	✓			
5	Apakah ada pernyataan yang menempatkan peneliti secara budaya?		✓		
6	Apakah pengaruh peneliti terhadap penelitian dijelaskan?		✓		
7	Apakah suara partisipan terwakili secara memadai?	✓			
8	Apakah penelitian etis dan disetujui komite etik?	✓			
9	Apakah kesimpulan mengalir dari analisis data?	✓			
10	Apakah ada keterkaitan antara hasil dan teori?	✓			
Overall Appraisal		8/10			
Presentasi		80,0%			

JBI Critical Appraisal for Qualitative Research

Reviewer: Mutia Rahmawati | **Tanggal:** April 2026

Author: Wulandari et al. | **Tahun Publikasi:** 2025

Judul: Konseling Kelompok Teknik *Cognitive Behavior Therapy* Dalam Mengelola Stres Akademik Santri Beasiswa di Pesantren

No	Pertanyaan	Ya	Tidak	Tidak Jelas	Tidak Berlaku
1	Apakah ada kesesuaian antara filosofi dan metodologi?	✓			
2	Apakah ada kesesuaian metodologi dengan metode penelitian?	✓			
3	Apakah ada kesesuaian metodologi dengan penyajian data?	✓			
4	Apakah ada kesesuaian metodologi dengan interpretasi hasil?	✓			
5	Apakah ada pernyataan yang menempatkan peneliti secara budaya?		✓		
6	Apakah pengaruh peneliti terhadap penelitian dijelaskan?		✓		
7	Apakah suara partisipan terwakili secara memadai?	✓			
8	Apakah penelitian etis dan disetujui komite etik?	✓			
9	Apakah kesimpulan mengalir dari analisis data?	✓			
10	Apakah ada keterkaitan antara hasil dan teori?	✓			
Overall Appraisal		8/10			
Presentasi		80,0%			

JBI Critical Appraisal for Study Protocol (RCT Instrument)

Reviewer: Mutia Rahma| **Tanggal:** April 2026

Author: Moner et al. | **Tahun Publikasi:** 2026

Judul: *Protocol of a French assessor-blinded randomized trial comparing eye movement desensitization and reprocessing (EMDR) and trauma-focused Cognitive Behavioral Therapy (TF-CBT) in young children with post-traumatic stress disorder*

No	Pertanyaan	Ya	Tidak	Tidak Jelas	Tidak Berlaku
1	Apakah proses pengacakan dilakukan dengan benar?	✓			
2	Apakah alokasi pengacakan disembunyikan?	✓			
3	Apakah kelompok serupa pada awal penelitian?	✓			
4	Apakah subjek penelitian buta terhadap intervensi?		✓		
5	Apakah petugas pemberi terapi buta terhadap intervensi?		✓		
6	Apakah penilai hasil buta terhadap intervensi?		✓		
7	Apakah kelompok diperlakukan sama selain intervensi?	✓			
8	Apakah follow-up dilakukan secara lengkap?	✓			
9	Apakah subjek dianalisis sesuai kelompok acaknya?	✓			
10	Apakah hasil diukur dengan cara yang sama antar kelompok?	✓			
11	Apakah hasil diukur secara andal?		✓		
12	Apakah analisis statistik yang digunakan tepat?		✓		
13	Apakah desain uji coba cukup memadai?		✓		
Overall Appraisal		7/13			
Presentasi		53,8%			

Lampiran 3

Jurnal-Jurnal Penelitian

Al-Isyraq: Jurnal Bimbingan, Penyuluhan, dan Konseling Islam
Vol. 8, No. 1 (2025), pp. 337-354
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METODE *COGNITIVE BEHAVIOUR THERAPY* DALAM PENYEMBUHAN REMAJA PENGIDAP GANGGUAN MENTAL DI PUSAT PEMULIHAN KUANTAN PAHANG MALAYSIA

COGNITIVE BEHAVIOR THERAPY METHOD IN HEALING ADOLESCENTS WITH MENTAL DISORDERS AT THE RECOVERY CENTER KUANTAN PAHANG MALAYSIA

Muhammad Izhan[1], Muaz Tanjung[1], Annisa Arrumaisyah Daulay[1]
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Abstract

This study aims to explore the effectiveness of Cognitive Behavioral Therapy in treating an adolescent diagnosed with depression and erotomania. The subject experienced overwhelming emotions of worthlessness and regret, had difficulty concentrating, and had difficulty focusing. The method used in this research is the case study technique in this research is qualitative. This research uses a single case study or case study with a single level of analysis as its case study design. Data collection techniques were obtained through interviews, observations, psychological tests, and CBT evaluations during the study. The subject in this study is a 15-year-old adolescent in one of the Community Mental Health Centers (MENTARI), located at Jalan Masjid, 26100 Kuantan, Pahang, Malaysia. The results of the intervention showed that CBT helped the subject reduce the symptoms of depression and erotomania experienced by the subject. After undergoing the intervention, the subject experienced positive changes, such as reduced obsessive thoughts, improved emotion regulation, and better ability to control reactions to social situations. The subject also began to participate in daily activities again with a more realistic perspective of herself and her future.

Keywords: *CBT; Adolescents; Mental Disorders; Malaysia.*

Abstrak

Penelitian ini bertujuan untuk mengeksplorasi efektivitas terapi perilaku kognitif (*Cognitive Behavioral Therapy*) dalam menangani seorang remaja yang didiagnosis depresi dan erotomania. Subjek mengalami emosi yang luar biasa dari tidak berharga dan penyesalan, mengalami kesulitan berkonsentrasi, dan mengalami kesulitan fokus. Metode yang dilakukan pada penelitian ini adalah dengan teknik studi kasus dalam penelitian ini bersifat kualitatif. Penelitian ini

frontiers | Frontiers in Psychiatry

TYPE Hypothesis and Theory
PUBLISHED 24 April 2023
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OPEN ACCESS

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Herres J, Krauthamer Ewing ES, Levy S, Creed TA and Diamond GS (2023) Combining attachment-based family therapy and cognitive behavioral therapy to improve outcomes for adolescents with anxiety.
Front. Psychiatry 14:1096291.
doi: 10.3389/fpsyt.2023.1096291

Combining attachment-based family therapy and cognitive behavioral therapy to improve outcomes for adolescents with anxiety

Joanna Herres[1*], E. Stephanie Krauthamer Ewing[2], Suzanne Levy[2], Torrey A. Creed[3] and Guy S. Diamond[2]

[1]Department of Psychology, The College of New Jersey, Ewing, NJ, United States, [2]Counseling and Family Therapy Department, Drexel University, Philadelphia, PA, United States, [3]Perelman School of Medicine, University of Pennsylvania, Philadelphia, PA, United States

Increases in adolescent anxiety over the past several years suggest a need for trauma-informed, culturally responsive interventions that help teens cope with environmental stressors like those associated with the COVID-19 pandemic. Although abundant evidence supports the efficacy of cognitive behavioral therapy (CBT) in treating adolescent anxiety, not all teens respond positively to CBT. CBT does not typically include strategies that address important family factors that may be impacting the teen's functioning, such as the attachment relationship. Attachment-based family therapy (ABFT) addresses the attachment relationship and other factors that contribute to the adolescent's anxiety and related distress. By enhancing positive parenting behaviors, such as acceptance and validation of the adolescent's distress and promotion of their autonomy, ABFT sessions may repair the attachment relationship and increase the family's ability and willingness to engage in CBT tasks aimed at reducing anxiety. This theoretical paper describes the ABFT model and proposes that implementing ABFT sessions prior to CBT could result in better clinical outcomes for adolescents with anxiety disorders by improving the context within which the anxiety symptoms and treatment are experienced. Given that ABFT is sensitive and responsive to family and other contextual factors, adolescents from marginalized communities and those from less individualistic cultures may find the model to be more acceptable and appropriate for addressing factors related to their anxiety. Thus, a combined ABFT+CBT model might result in better outcomes for adolescents who have not historically responded well to CBT alone.

KEYWORDS

cognitive behavioral therapy, attachment, culturally responsive and trauma-informed practice, parent-adolescent relationship, adolescent anxiety

Introduction

Anxiety among adolescents in the United States is extremely prevalent and has risen in recent years due to escalating environmental stressors related to the COVID-19 pandemic, experiences of racism, and other forms of discrimination, pressures related to social media use, mounting pressures to succeed, and school shootings (1–5). Prevalence rates suggest that an

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journal homepage: www.elsevier.com/locate/ejtd

Explorations and perspectives

Protocol of a French assessor-blinded randomized trial comparing eye movement desensitization and reprocessing (EMDR) and trauma-focused cognitive behavioral therapy (TF-CBT) in young children with post-traumatic stress disorder

Nina Moner *, Philippine Villard, Florence Askenazy, Andrea Soubelet

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ARTICLE INFO

Keywords:
PTSD
EMDR
TF-CBT
Young child
Study protocol
Randomized comparison

ABSTRACT

Context: Young children with posttraumatic stress disorder (PTSD) require interventions tailored to their unique trauma reactions and their cognitive, social, and emotional development. While both EMDR therapy and TF-CBT are highly recommended for PTSD treatment and seem developmentally appropriate for early childhood, neither is yet evidence-based for children under 6 years with PTSD, and EMDR has not been evaluated in this population through a randomized group comparison.

Objective: To describe the design of a French assessor-blinded randomized trial comparing EMDR and TF-CBT efficacy in young children (aged 3 to 6 years) with PTSD, which notably considers both the child's level of cognitive development and parental symptomatology in addition to the child's symptoms.

Method: This study includes children aged 3 to 6 years and 11 months with a diagnosis of PTSD and no other specific pathological condition. After recruitment, the study takes place in three stages: 1/ assessment of the child's various cognitive functions and symptomatology, and the parents' distress and PTSD; 2/ either EMDR or TF-CBT treatment is administered over 6 to 12 sessions; 3/ reassessment of the symptomatology (at end of treatment and three months later).

Discussion: This paper describes the study design of the first assessor-blinded randomized trial comparing EMDR therapy and TF-CBT in French children aged 3 to 6 years. The findings of this study, once completed, may offer support for the efficacy of EMDR and TF-CBT, potentially paving the way for future recommendations in the treatment of PTSD in young children.

1. Introduction

1.1. Context

Unfortunately, young children (aged 6 years and under) are commonly exposed to potentially traumatic events and adversities (Briggs-Gowan et al., 2010; Egger & Angold, 2004; Finkelhor et al., 2015; Woolgar et al., 2022). For a long time, it was believed that young children were protected from developing posttraumatic stress disorder (PTSD), as their limited cognitive and verbal development was thought to prevent them from experiencing or expressing trauma symptoms in the same way as older children. Contrary to these earlier beliefs, it is now well established that exposure to potentially traumatic events makes young children as likely as older children to develop post-traumatic symptoms (Dunn et al., 2017; Salmon & Bryant, 2002; Scheeringa et al., 2006). A recent systematic review and meta-analysis estimated the prevalence of PTSD among trauma-exposed preschool children at 21.5% (95% CI = 13.8%-30.4%; Woolgar et al., 2022). This meta-analysis included 1,941 young children (under 6 years, with an estimated mean age of 4.5 years across all studies) who had been exposed to various types of trauma, such as interpersonal, single-event, repeated, and group trauma.

Posttraumatic stress disorder (PTSD) is considered the most common psychopathological response to traumatic exposure (Hornor, 2013). It is characterized by intrusive symptoms, avoidance symptoms, changes in mood and cognition, changes in arousal, and functional impairment

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Impact of cognitive-behavioral therapy and mindfulness-based stress reduction in mitigating test anxiety and enhancing academic achievement among vocational education students at Nigerian universities

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Abstract

Background The inclusion of behavioral therapy and stress reduction techniques among vocational students of the Nigerian universities is crucial for enhancing their practical skill acquisition and career prospects in challenging academic scenarios. This study explored the combined effects of cognitive-behavioral therapy and mindfulness-based stress reduction in reducing test anxiety among business education students in a measurement and evaluation course.

Methods Employing a randomized control trial with a pretest-posttest design, the research draws responses from 483 students from two universities in Southeast Nigeria. The participants were randomly assigned to either the treatment or waitlist control groups on the basis of set inclusion criteria. Data collection was conducted via four different instruments, and the treatment group participated in a Cognitive-Behavioral Therapy and Mindfulness-Based Stress Reduction (CBT-MBSR) program. Evaluations of both groups were conducted at three different stages: before the intervention, immediately after the intervention, and during the follow-up period. Analysis was carried out via repeated-measures ANOVA and multivariate analysis of covariance (MANCOVA).

Results The results indicated that TVET students who underwent the CBT-MBSR intervention had significantly lower post-treatment test anxiety scores than those in the wait-list control group. The intervention also had a significant multivariate effect on reducing test anxiety, improved mindfulness, students' academic achievement, and their well-being (F value = 1168.52 (p = .001, η^2 = 0.752).

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Konseling Kelompok Teknik Cognitive Behavior Therapy Dalam Mengelola Stres Akademik Santri Beasiswa di Pesantren

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Academic stress,
CBT techniques for students,
Group counseling in islamic boarding school,
Scholarship students

ABSTRACT

This study aims to analyze the application of group counseling with Cognitive Behavioral Therapy (CBT) techniques in helping students manage academic stress at the Tahfizh Daarul Qur'an Takhassus Cikarang Islamic Boarding School. The academic pressure faced by students is caused by various factors, including the demands of meeting the target of memorizing the Qur'an, difficulty in memorizing, and a busy schedule of activities. This study uses a qualitative descriptive method with data collection techniques through interviews, observations, and documentation. The qualitative descriptive approach provides an in-depth understanding of changes in students' mindsets, emotions, and coping strategies after participating in the CBT group counseling intervention. The results showed that 5 students experienced academic stress levels, characterized by low motivation to memorize and anxiety about memorization targets. The results showed that after participating in the CBT group counseling session, students experienced a decrease in academic stress levels, increased awareness in managing negative thoughts, and the development of skills in dealing with academic pressure more positively. Around 85% of students reported that they felt calmer and less burdened when facing academic stress, compared to before participating in counseling. The results of this study indicate that group counseling using CBT techniques plays a role in helping students understand and manage academic stress through a more systematic approach. Thus, this method can be a reference in developing guidance and counseling services in Islamic boarding schools to improve psychological well-being and student learning motivation.

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Pendahuluan

Santri adalah individu yang menempuh pendidikan di pesantren dengan fokus utama pada pembelajaran agama, termasuk menghafal Al-Qur'an. Santri ialah peserta didik yang belajar atau menuntut ilmu di pesantren (Megawaty, M., & Saputra, 2021). Pesantren Tahfizh Daarul Qur'an Takhassus Cikarang sebagai salah satu lembaga pendidikan berbasis Islam yang menekankan pada hafalan Al-Qur'an sekaligus pembinaan akademik. Dalam lingkungan pesantren, santri beasiswa dituntut untuk tidak hanya menghafal Al-qur'an, tetapi juga pemahaman terhadap ilmu keislaman serta menjalani kehidupan dengan disiplin yang tinggi.

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Cognitive Behavioral Therapy for Childhood Prolonged Grief Disorder for Bereaved Children and Adolescents With Comorbid Problems: Case Vignettes

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Mariken Spuij, *Utrecht University and Mental Health Institution TOPP-zorg, Driebergen*

The cognitive behavioral therapy (CBT) protocol for prolonged grief disorder in children and adolescents has demonstrated effectiveness in multiple studies, including a large randomized controlled trial. However, in clinical practice, we frequently encounter children with prolonged grief disorder who also present with comorbid conditions, such as other mental health disorders (e.g., posttraumatic stress disorder) and developmental disorders (e.g., autism spectrum disorder). This paper aims to describe the CBT protocol for prolonged grief in children and adolescents and to illustrate, through case vignettes and clinical observations, how this protocol may be adapted for use with children with comorbid conditions. We show that thorough clinical assessment is crucial for adapting techniques from other protocols into PGD treatment. Future research should prioritize the inclusion of detailed case studies of children with PGD and comorbidities to advance our understanding and optimize the individualization of treatment strategies.

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After the death of a loved one, most children eventually find ways to continue with their lives. However, some children and adolescents experience prolonged grief, with an incidence rate of approximately 10–32% following nonviolent bereavement (Falala et al., 2024). Prolonged Grief Disorder (PGD) is characterized by persistent and intense yearning for the deceased, accompanied by symptoms such as disbelief, preoccupying memories of the deceased, and, in children, significant impairment in daily functioning for more than 6 months following the loss (American Psychiatric Association, 2013; World Health Organization, 2020). In cases of violent loss (e.g., accidents, disasters, suicides, or homicides), the risk of prolonged grief may increase to as much as 50% (Djelantik et al., 2020). Moreover, childhood bereavement is associated with a range of adverse health outcomes that can persist into adulthood, particularly for children who lose a parent before the age of 7 or w traumatic losses such as suicide or ho et al., 2012; Cerel et al., 2006; Ellis et al.,

Bereavement is among the most commonly reported and distressing forms of trauma in young people (Alisic et al., 2008; Kaplow, et al., 2010). Approximately 4% of children in Western countries lose a parent (Pearlman, et al., 2010). In the Netherlands, there are an estimated 100,000 young people under the age of 25 who have lost a parent (CBS, 2023). The number of children and adolescents who lose a sibling or other close family member is unknown. With the recent inclusion of PGD in the DSM-5 text revision (American Psychiatric Association, 2013), it is anticipated that clinicians will increasingly recognize and diagnose prolonged grief in their clients (Prigerson et al., 2021).

Significant effort has been devoted in recent decades to developing evidence-based treatments for PGD in children and adolescents. Cognitive behavioral therapy (CBT) has shown promise as a treatment for PGD in both young people and adults, effectively reducing prolonged grief symptoms and related mental health issues, including posttraumatic stress (Keyes et al., 2014), depression (Cerel et al., 2006), substance use (Kaplow et al., 2010), suicidal behaviors (Hill et al.,

Keywords: children; adolescents; bereavement; cognitive behavioral therapy; prolonged grief disorder

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A randomized noninferiority trial evaluating remotely-delivered stepped care for depression using internet cognitive behavioral therapy (CBT) and telephone CBT

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ARTICLE INFO

Keywords:
Depression
Non-inferiority
CBT
Internet
Psychotherapy

ABSTRACT

This trial examined whether a stepped care program for depression, which initiated treatment with internet cognitive behavioral therapy, including telephone and messaging support, and stepped up non-responders to telephone-administered cognitive behavioral therapy (tCBT), was noninferior, less costly to deliver, and as acceptable to patients compared to tCBT alone. Adults with a diagnosis of major depressive episode (MDE) were randomized to receive up to 20 weeks of stepped care or tCBT. Stepped care (n = 134) was noninferior to tCBT (n = 136) with an end-of-treatment effect size of $d = 0.03$ and a 6-month post-treatment effect size of $d = -0.07$ [90% CI 0.29 to 0.14]. Therapist time in stepped care was 5.26 (SD = 3.08) hours versus 10.16 (SD 4.01) for tCBT ($p < 0.0001$), with a delivery cost difference of $-364.32 [95% CI $-423.68 to $-304.96]. There was no significant difference in pre-treatment preferences ($p = 0.10$) or treatment dropout (39 in stepped care; 27 in tCBT; $p = 0.14$). tCBT patients were significantly more satisfied than stepped care patients with the treatment they received ($p < 0.0001$). These findings indicate that stepped care was less costly to deliver, but no less effective than tCBT. There was no significant difference in treatment preference or completion, however satisfaction with treatment was higher in tCBT than stepped care.
Trial registration: clinicaltrials.gov Identifier: NCT01906476.

1. Introduction

Depression is prevalent and imposes a very high societal burden in cost, morbidity, quality of life, and mortality (Greenberg, Fournier, Sisitsky, Pike, & Kessler, 2015; Wells et al., 2002). While psychotherapy is both effective and acceptable to patients, a variety of barriers exist both to initiating and completing psychotherapy (Bedi et al., 2000; Mohr et al., 2010). Psychotherapy delivered remotely via telephone has been shown to increase treatment retention while being no less effective than face-to-face psychotherapy (Mohr et al., 2012; Mohr, Vella, Hart, Heckman, & Simon, 2008). Indeed, telephone psychotherapy is increasingly being used to overcome access barriers (Godleski, Darkins, & Peters, 2012; Turner, Brown, & Carpenter, 2018). However, increased treatment retention resulting from telephone psychotherapy may also increase treatment costs to healthcare organizations and payers.

Internet interventions, which combine digital tools with brief support from a coach or therapist, are another form of remote treatment. A large number of trials have consistently shown them to be effective at reducing depression (Andrews et al., 2018). As the evidence base for internet interventions accumulates, care systems are trying to understand how to integrate it into existing mental health services. The Dutch healthcare system, for example, has begun using blended care models, in which therapists can use internet treatments in combination with standard psychotherapy delivered in person or remotely. However, preliminary results suggest the use of internet interventions in blended care may actually increase therapist time and costs without improving outcomes (Kenter et al., 2015).

Stepped care has been proposed to be a solution for integrating technology-based treatments into existing care resources. However, the benefits of internet therapy as a low-intensity first step for treatment of

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Original Article

Effectiveness of Cognitive Behavioral Therapy in Managing Anxiety Symptoms Among Adolescents in High-Stress Environments: A Randomized Controlled Trial

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Authors' Contributions: Concept and design: Concept: IN; Design: RS; Data Collection: SA; Analysis: QA; Drafting: AO, FY
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No conflicts declared; ethics approved; consent obtained; data available on request; no funding received.

ABSTRACT

Background: Anxiety disorders affect up to 30% of adolescents globally and are particularly prevalent in those exposed to high-stress environments such as socioeconomic disadvantage, academic competition, and family dysfunction. These conditions often disrupt psychosocial development and academic performance, underscoring the need for effective, context-appropriate interventions. Cognitive Behavioral Therapy (CBT) is an established first-line treatment for anxiety, but evidence in adolescents from resource-constrained, high-stress settings remains limited. Objective: To evaluate the effectiveness of CBT in reducing anxiety and depressive symptoms and improving overall functioning among adolescents living in high-stress environments. Methods: A randomized controlled trial was conducted at Therapy Plus Clinics, Lahore, Pakistan, including 42 adolescents aged 12–18 years diagnosed with anxiety disorders. Participants were randomly allocated to 12 weekly CBT sessions (n = 21) or standard care (n = 21). Primary outcome was anxiety (Beck Anxiety Inventory, BAI), with secondary outcomes of depression (Beck Depression Inventory-II, BDI-II) and functioning (Global Assessment of Functioning, GAF). Assessments were conducted at baseline, post-intervention, and three-month follow-up. Results: CBT resulted in significant reductions in anxiety (−52.3%) and depression (−55.5%) and improvement in functioning (+31.2%) compared with minimal changes in controls (≤8%). Between-group differences were statistically significant ($p < 0.001$), with large effect sizes (Cohen's $d > 1.0$). Conclusion: CBT is a highly effective intervention for adolescents in high-stress environments, producing sustained improvements across mental health outcomes. Larger-scale trials are warranted to confirm these findings and guide implementation.

Keywords: Cognitive Behavioral Therapy, adolescents, anxiety, depression, functioning, randomized controlled trial, high-stress environments

INTRODUCTION

Anxiety disorders are among the most prevalent psychiatric conditions in adolescents, with global prevalence estimates ranging from 15% to 30% (1). This developmental stage is characterized by rapid cognitive, emotional, and social changes, which may heighten vulnerability to mental health problems. When coupled with adverse contextual factors such as academic pressure, socioeconomic hardship, or exposure to interpersonal and community violence, adolescents become particularly prone to developing anxiety disorders (2). These high-stress environments not only exacerbate anxiety but also impede normal psychosocial development, academic achievement, and long-term mental health trajectories (3).

Cognitive Behavioral Therapy (CBT) has consistently been established as the first-line psychotherapeutic approach for anxiety disorders across age groups. Its structured focus on identifying maladaptive cognitions, modifying dysfunctional behaviors, and reinforcing adaptive coping strategies is supported by extensive evidence in adult populations (4). Meta-analyses demonstrate robust efficacy of CBT for anxiety and depressive disorders, with medium to large effect sizes across diverse clinical settings (5). However, while its effectiveness in adults is well-documented, evidence in adolescents remains less consistent, particularly for those embedded in high-stress contexts where developmental needs and environmental demands may complicate therapy delivery (6).

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Peran teknik CBT *(Cognitive Behavior Therapy) d*alam mengelola stres remaja

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Abstract.*The rapid increase in emotional levels during early adolescence is known as a period of storm and stress. So parents complain and find it difficult to deal with teenagers, in this transition period. This emotional growth is the result of physical changes, especially the hormones of adolescence. If it is related to social conditions, this increased emotional level is a sign that teenagers are experiencing conditions that are different from previous times. This condition triggers teenagers to become stressed and confused. Adolescence is a transition period, so the counselees studied were teenagers who experienced feelings of anxiety due to the confusion experienced by the absence of the father's role, making the counselees stressed, emotional and demanding a lot of attention from their parents, fighting, disobeying and resulting in decreased concentration in learning. The OV counselor, a 12 year old male teenager, was given the CBT (Cognitive Behavior Therapy) technique. Cognitive therapy helps the counselor learn to recognize mistakes and change them. Apart from positive thinking, cognitive therapy is also related to happy thinking. Behavioral therapy helps link problematic situations and habits of responding to problems. Clients learn to change their behavior, calm their mind and body to feel better, think more clearly and help them make the right decisions. understand thought patterns by showing empathy so that you feel expected to be present with love and attention.*

Keywords*: CBT techniques, stress, teenagers*

Abstrak. Meningkatnya tingkat emosi secara cepat selama awal masa remaja yang dikenal sebagai periode badai dan stres. Maka para orang tua mengeluh dan merasa sulit menghadapi remaja, di masa transisi ini. pertumbuhan emosi ini merupakan hasil dari perubahan fisik, terutama hormon masa remaja Jika dikaitkan dengan kondisi sosial, tingkat emosi yang meningkat ini merupakan tanda bahwa remaja memang demikian dengan kondisi yang berbeda dengan masa-masa sebelumnya.Kondisi ini memicu remaja menjadi stress dan bingung. Masa remaja adalah masa peralihan maka konselie yang diteliti adalah remaja yang mengalami rasa cemas diakibatkan kebingunagn yang dialami ketidak hadiran peran ayah membuat konselie menjadi stress, emosi dan banyak menuntut perhatian dari orang tua, melawan, membangkang dan berakibat menurunnya konsentrasi belajar. Konselie OV remaja pria usia 12 tahun diberikan dengan Teknik CBT *(Cognitive Behavior Therapy),* Terapi kognitif membantu konselie belajar mengenali kesalahan dan mengubahnya. Selain berpikir positif, terapi kognitif juga terkait dengan berpikir bahagia Terapi perilaku membantu menghubungkan situasi bermasalah dan kebiasaan merespons masalah. konselie belajar untuk mengubah perilaku mereka, menenangkan pikiran dan tubuh mereka untuk merasa lebih baik, berpikir lebih jernih dan membantu mereka membuat keputusan yang tepat. memahami pola fikir dengan menunjukkan rasa empati agar merasa di harapkan kehadirannya dengan kasih sayang dan perhatian.

Kata Kunci : *Teknik CBT, Stres, Remaja*

1. LATAR BELAKANG

Masa remaja adalah peralihan dari masa kanak-kanak menuju masa dewasa, yang mencakup semua perkembangan yang berhubungan dengan persiapan menuju masa dewasa. Perubahan perkembangan tersebut meliputi aspek fisik, psikologis dan psikososial. Masa muda adalah masa

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Prevention of depression in freshman nursing students based on group coagnitive - behavioral therapy: A randomized trial study

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Keywords:
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Student
Nursing
Depression

ABSTRACT

Background: University students are frequently vulnerable to psychological disorders, particularly depression, which may arise from both academic and personal stressors. Given the adverse consequences of depression on students' well-being and academic performance, this study aimed to evaluate the effectiveness of group-based Cognitive Behavioral Therapy (CBT) in reducing depressive symptoms among nursing students.

Methods: This pre-test post-test clinical trial study utilized both intervention and control groups. The sampling method employed was a census, and participants were assigned to these groups through a simple randomization method executed by a computer utilizing a table of random numbers. A total of 30 students, who were in their first semester at the Nursing and Midwifery College in 2019, were enrolled in the study. Beck's Depression Inventory was administered to the participants on three separate occasions. The intervention comprised eight 90-minutemin sessions, while the control group did not receive any training. Data analysis was conducted using SPSS statistical software, employing independent sample t-tests, Chi-square tests, and ANOVA. A significance level of $P < 0.05$ was used to determine statistical significance.

Results: The mean depression score after the intervention in the intervention group was 13.7 ± 2.9, and in the control group was18.4 ± 5.9, which showed a significant difference between the two groups ($P < 0.001$). The analysis showed that in the intervention group, one year after the end of the intervention (19.4 ± 5.9), there was a significant increase in the depression score compared to immediately after the intervention (13.7 ± 2.9) ($P = 0.001$).

Conclusion: The results indicated that CBT had positive effects on students' mental health and reduced depression.

Trial registration: The trial was registered with Iranian registry of clinical trial and registration number IRCT Code: IRCT20160404027216N7((Date of first registration: (08/12/2018).

1. Background

Student life entails numerous challenges that may adversely influence mental health. The university environment, particularly for individuals under the age of 24, often exposes students to a variety of personal and academic stressors that can compromise psychological well-being (Becker et al., 2018; Fateh et al., 2020). Accordingly, student mental health has emerged as a critical public health concern. Evidence from a large-scale cross-national survey involving 17,348 students aged 17–30 across 23 countries indicated that exposure to psychological trauma not only diminished students' motivation to pursue their education but also highlighted inadequate provision of mental health support for this vulnerable population (Auerbach et al., 2016).

University students are more susceptible to psychological problems compared to individuals employed in other settings (Reddy et al., 2018). Mental disorders have been shown to adversely affect students' learning capacity and overall academic performance (Fauzi et al., 2021). Evidence from a study conducted in Germany revealed alarming prevalence rates, with 35.9 % of students reporting moderate-to-severe depression, 27.7 % experiencing moderate-to-severe anxiety symptoms, and 25.1 % perceiving high levels of stress (Karing, 2021). Furthermore, research on university populations has demonstrated a strong association between depression and suicidal ideation, suggesting that students with depressive symptoms face a significantly elevated risk of suicidal thoughts (Ladi-Akinyemi et al., 2023). Depression, one of the most prevalent psychological disorders among students, is often attributed to the

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Lampiran 4

Lembar Konsultasi Pembimbing I

PROGRAM STUDI KEPERAWATAN
FAKULTAS ILMU KESEHATAN
UNIVERSITAS GALUH CIAMIS

Nama Mahasiswa : Mutia Rahmawati
Pembimbing I : Rani Herani, S.Kep., Ners., M.Kes
Judul : PENERAPAN COGNITIVE BEHAVIORAL THERAPHY (CBT) UNTUK MENGELOLA STRES DAN KECEMASAN PADA REMAJA

NO	HARI/TANGGAL	SARAN	PARAF
1.	Jumat 31 Oktober 2025	Pengajuan Judul "Penerapan Cognitive Behavioral Therapy (CBT) untuk mengelola Stres dan kecemasan pada remaja	
2.	Sabtu. 01 November 2025	Acc Judul	
3.	kamis 21 mei 2026	-Bimbingan BAB 1-3 - Lengkapi dan teruskan sampai BAB 5	
4.	Rabu 03 Juni 2026	-Bimbingan BAB 5 - Acc	

Lampiran 5

Lembar Konsultasi Pembimbing II

PROGRAM STUDI KEPERAWATAN
FAKULTAS ILMU KESEHATAN
UNIVERSITAS GALUH CIAMIS

Nama Mahasiswa : Mutia Rahmawati
Pembimbing II : H. Asep Wahyudin, S. Kep., Ners., M. Kep
Judul : PENERAPAN COGNITIVE BEHAVIORAL THERAPHY (CBT) UNTUK MENGELOLA STRES DAN KECEMASAN PADA REMAJA

NO	HARI/TANGGAL	SARAN	PARAF
1.	Jumat 31 Oktober 2025	Pengajuan Judul KIAN "Penerapan Cognitive Behavioral Theraphy (CBT) untuk mengelola stres dan kecemasan pada remaja	
2.	Rabu 3 Juni 2026	Bimbingan BAB 1-5 - Revisi tambahkan manfaat bagi Remaja - Revisi Penulisan, margin di BAB II - Revisi tambahkan Pembahasan di BAB IV	
3.	Kamis 4 Juni 2026	- ACC	

RIWAYAT HIDUP PENULIS

Mutia Rahmawati adalah nama dari penulis KIAN ini, lahir di Ciamis, pada taggal 03 Februari 2003. Peneliti merupakan anak kedua dari 2 bersaudara, dari pasangan suami istri dengan ayahanda Dedi Sutardi dan Ibunda Diah Heryani. Peneliti berasal dan tinggal bersama keluarga di Dusun Selacai, RT/RW 006/008, Desa Selamanik, Kecamatan Cipaku, Kabupaten Ciamis.

Penulis menyelesaikan Pendididkan Sekolah Dasar di Sd Negeri 3 Selamanik dan lulus pada tahun 2015, Sekolah Menengah Pertama di SMP Negeri 1 Cipaku dan lulus pada tahun 2018, serta Sekolah Menengah Atas di SMA Negeri 1 Baregbeg dan lulus pada tahun 2021. Pada tahun yang sama pula, penulis diterima diperguruan tinggi Universitas Galuh ciamis pada Program Studi S1 Keperawatan Fakultas Ilmu Kesehatan dan penulis dinyatakan lulus pada bulan Agustus 2025. Pada tahun yang sama dan tempat yang sama juga, penulis melanjutkan ke jenjang profesi dan masuk Pendidikan Profesi Ners, hingga sampai dengan KIAN ini penulis masih terdaftar sebagai mahasiswa aktif di Fakultas Ilmu Kesehatan Universitas Galuh Ciamis dan telah di pertanggung jawabkan pada tanggal 09 Juni 2026.

"Allah tidak mengatakan hidup ini mudah. Tetapi Allah berjanji, bahwa sesungguhnya bersma kesulitan ada kemudahan".

(QS. Al-Insyirah:5-6)