

## The Effectiveness of Group Guidance Utilizing Symbolic Modeling and Behavior Contract to Enhance Self-Resilience Among Former Drug Addicts in Sleman Regency

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### Abstract

Resilience plays a key role in preventing relapse among former drug addicts. This study aims to evaluate the effectiveness of group guidance using symbolic modeling and behavior contract techniques to enhance self-resilience and compare their relative impacts. A quantitative approach with a pretest-posttest control group design was applied to 21 participants in Sleman Regency. Resilience was measured using the adapted Connor & Davidson Resilience Scale (CD-RISC). The Wilcoxon test analyzed within-group effectiveness, while the Kruskal-Wallis and Mann-Whitney tests compared effectiveness across groups. Findings show that symbolic modeling significantly improves resilience, whereas the behavior contract technique does not yield a significant effect. Moreover, there are notable differences in effectiveness among the symbolic modeling, behavior contract, and control groups. These results highlight the greater potential of symbolic modeling in enhancing resilience among former drug addicts in school-based rehabilitation programs.

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## INTRODUCTION

High risk of relapses is often confronted by former drug addicts after their rehabilitation (Kabisa et al., 2021), which are shaped by both internal dan external factors (Rosmaliana & Bahiroh, 2021). Therefore, preventing relapses among former drug addicts, maintaining a high level of self-resilience is crucial (Dallas et al., 2023; Aghdam & Asgharzadeh, 2023). Substance user is extensively regarded as a maladaptive coping strategy, often revealing an individuals' low resilience (Rudzinski et al., 2017).

Self-resilience represents an innate ability to naturally recover from adversity (Yamashita et al., 2021). In addition, it is also a key measure of one's capacity to cope with stress effectively. Core aspect of resilience include "hardiness," which manifests in traits such as flexibility, sense of efficacy, optimism, emotional regulation, and the ability to maintain cognitive clarity under pressure (Connor & Davidson, 2003). Several factors contribute to resilience, including individual characteristics, family support, and external influences (Everall et al., 2006).

Resilience can be strengthened through behavioral interventions, particularly counseling and guidance programs. For former drug addicts, the essential factors in preventing relapse are having role models who exemplify resilience in the face of challenges and receiving positive reinforcement to sustain their commitment to recovery through external factor (Wayoi, 2022). Within the behavioral approach, the symbolic modeling technique has been

shown to effectively reinforce and shape behavior through observational learning, while behavior contracts focus on strengthening commitment through positive reinforcement (Erford, 2016; Miltenberger, 2016).

In the context of guidance and counseling services in school, group guidance serves as a key component of both foundational and responsive interventions. According to Gadza (as cite in Prayitno & Amti, 2018) group guidance in a school setting involves providing information to a group of students with the goal of helping them formulate plans and make well-informed individual decisions. Wibowo (2019) further defines group guidance as structured services in which a counselor or group leader provides information and facilitates discussions on specific topics, aiming to enhance members' social skills and assist them in achieving shared objectives.

Modeling and behavior contract techniques are widely used in various counseling including group counseling services (Suranata et al., 2020), individual counseling (Susanti & Syukur, 2021), group guidance (Fadillah & Muis, 2020; Utomo, 2021; Purba & Harahap, 2023), of classical guidance (Athiyah, 2021). However, a limited exploration of group guidance services designed specifically for adolescent former drug addicts using symbolic modeling and behavior contract techniques is identified. This gap presents an opportunity to investigate the effectiveness of these two techniques-not only as standalone interventions but also a synergistic method that can redefine

strategies for fostering resilience in these vulnerable populations.

Therefore, this research focuses on: (1) Analyzing the effectiveness of group guidance using the modeling technique in enhancing resilience among former drug addicts; (2) Analyzing the effectiveness of group guidance using the behavior contract technique in enhancing resilience among former drug addicts; (3) Comparing the differences in resilience improvement between intervention groups. The research hypothesizes that both interventions will be effective in enhancing resilience among former adolescent drug addicts in Sleman Agency, with differences in effectiveness between the experimental and control groups.

## METHOD

This study includes experimental research with two-factors pre-test and post-test control group design (Edmonds & Kennedy, 2017). This research's complete design is shown in table 1.

Table 1. Research Design

Group	Pretest	Technique Intervention	Post-tests
GG-SM	→ O1	→ X	→ O2
GG-BC	→ O1	→ X	→ O2
CG	→ O1	→	O2

Note: GG-SM: Group Guidance Using Symbolic Modeling; GG-BC: Group Guidance Using Behavior Contract; CG: Control Group; O1 : Pre-test, O2 : Post-test, X: Intervention with certain technique

The population of this research consists of former drug addicts who have successfully recovered and are in the maintenance phase following rehabilitation. The total number of respondents is twenty-one people,

divided into three experimental groups. The first experimental group consists of seven people (n=7) who receive treatment in the form of group guidance on symbolic modeling techniques. The second experimental group also consists of seven people (n=7) undergoes guidance using the behavior contract technique. The next seven people in control group (n=7) participate in group counseling session without any specific technique. All Groups engage in a total of seven group counseling sessions, with the first session used for pre-test administration and the final session for post-test administration. Each session lasts about 60 minutes (Jacobs et al., 2016; Gladding, 2016; Wibowo, 2019).

Connor & Davidson Resilience Scale or CD-RISC is a briefing assessment tool designed to evaluate an individual's resilience before undergoing interventions such as counseling or guidance services (Connor & Davidson, 2003). In Accordance with research objectives and hypotheses, this research adapts it as the main measurement instrument. The scale includes key resilience indicators, indicates hardiness, which consist of five dimensions: Flexibility, Sense of efficacy, Ability to regulate emotion, optimism, and Cognitive focus or maintaining attention under stress. The instrument consists of a 5-point Likert scale ranging from a 0 score which means "strongly disagree" to a 4 score which means "strongly agree". Higher scores indicate greater resilience, while lower scores indicate greater resilience, while lower scores reflect weaker resilience (Campbell-Sills & Stein, 2007). The CD-RISC has demonstrated

strong internal consistency and construct validity. In this research, the instrument yielded a Cronbach's Alpha coefficient of 0.716, indicating high reliability.

The data collected were analyzed using SPSS 2 (statistical package for the social sciences). To determine whether there was a significant change in resilience levels before and after the intervention, the Wilcoxon signed-rank test was applied. The Kruskal-Wallis test was conducted to compare the effectiveness of the three intervention groups. Additionally, the Mann-Whitney U test was used for pairwise comparisons between groups, specifically: (1) The modeling technique group with the behavior contract technique group; (2) The behavior contract technique group with the control group; and (3) The modeling technique group with the control group.

## FINDING AND DISCUSSION

The Wilcoxon signed-rank test was conducted to determine the effectiveness of each experimental and control group. The results are presented in Table 2.

Table 2. Hypothesis Testing Results for the Effectiveness of Group Guidance Using the Modeling Technique

	Post-test Experimental Group 1- Pre-test Experimental Group 1	Post-test Experimental Group 2- Pre-test Experimental Group 2	Post-test Control- Pre-test Control
Z	-2,366	-1,590	-1,890
Asym p. Sig. (2- tailed)	0,018	0,112	0,059

As shown in the Wilcoxon test output (Table 2), the Z-value for the first experimental group is -2,366, with a significance value (p) of 0.018. Since the significance value (p=0.018) is smaller than the alpha threshold ( $\alpha = 0.05$ ), the null hypothesis ( $H_0$ ) is rejected, and the alternative hypothesis ( $H_1$ ) is accepted. It indicates that there is a significant difference in resilience scores before and after the intervention.

In addition, the results of the Wilcoxon test for the second experimental group are presented in Table 2. The Z-value for this group is -1.897, with a significance value of 0.112. Since the significance value (p=0.112). Since the significance value (p=0.112) is greater than  $\alpha=0.05$ , the null hypothesis ( $H_0$ ) is accepted, while the alternative hypothesis ( $H_1$ ) is rejected. It indicates that there is a significant difference in resilience score before and after the intervention.

To analyze differences between groups, the Kruskal-Wallis test was conducted, and the results are summarized in table 3.

Table 3. Kruskal-Wallis Test Results for Pre-Test Scores of Experimental Groups 1, 2 and Control Group

	Pre-test
Kruskal-Wallis H	17,426
df	2
Asymp. Sig.	0,000

The results of the Mann Whitney U test indicate an Asymp. Sig. value of 0.000, which is smaller than the significance threshold (p<0.05). This finding suggests that there is a statistically significant difference in the

pre-test scores among the three groups. Given the significant differences observed in the pre-test, the next step involves analyzing the differences between groups based on the gain score, with the results presented in table 4.

Table 4. Kruskal-Wallis Test Results Based on Gain Scores for 1<sup>st</sup> and 2<sup>nd</sup> Experimental Groups and the Control Group

	Gain-Score
Kruskal-Wallis H	14,950
df	2
Asymp. Sig.	0,001

The Mann Whitney U test based on gain score (table 4) indicates that the Asymp. Sig. value = 0.001, which is smaller than the significance threshold ( $p=0.05$ ). Given that the significance value is less than 0.005, the null hypothesis ( $H_0$ ) is rejected, and the alternative hypothesis ( $H_1$ ) is accepted. It indicates that there is a significant difference in resilience improvement between the experimental and control groups is accepted.

The Mann-Whitney U test was further used to compare between groups, specifically: (1) The modeling technique group with the behavior contract technique group; (2) The behavior contract technique group with the control group; and (3) The modeling technique group with the control group. The results of these comparisons are presented in Table 5.

Table 5. Mann-Whitney U Test Results Between Groups

	Group 1&2	Group 2&3	Group 1&3
Mann-Whitney U	3,000	6,000	0,000

Wilcoxon W	31,000	34,000	28,000
Z	-2,750	-2,420	-3,158
Asymp. Sig. (2-tailed)	0,006	0,016	0,002
Exact Sig. [2*(1-tailed Sig.)]	0,004	0,017	0,001

According to Table 5, the Asymp. Sig. (2-tailed) value for Comparison 1 is 0.006, indicating a statistically significant difference with a confidence level of 99.4% ( $\alpha = 0.05$ ). This suggests that the modeling technique intervention (Experimental Group 1) is significantly more effective in enhancing resilience compared to the behavior contract technique intervention (Experimental Group 2). Since the significance value ( $p = 0.006$ ) is smaller than 0.05 ( $p \leq 0.05$ ), the null hypothesis ( $H_0$ ) is rejected, and the alternative hypothesis ( $H_1$ ) is accepted.

Furthermore, Asymp. Sig. (2-tailed) value for Comparison 2 is 0.016, also indicating a statistically significant difference at a confidence level of 99.4% ( $\alpha = 0.05$ ). This result demonstrates that the behavior contract technique intervention (Experimental Group 2) is more effective in increasing resilience compared to the control group (which received group guidance without a specific technique). Since the significance value ( $p = 0.016$ ) is less than 0.05 ( $p \leq 0.05$ ), the null hypothesis ( $H_0$ ) is rejected, and the alternative hypothesis ( $H_1$ ) is accepted.

Finally, the Asymp. Sig. (2-tailed) value for Comparison 3 is 0.002, further confirming a statistically significant difference at a confidence level of 99.4% ( $\alpha = 0.05$ ). This indicates that the modeling technique intervention

(Experimental Group 1) is significantly more effective in enhancing resilience than the control group (group guidance without a specific technique). So as a result, the rejected result was the null hypothesis ( $H_0$ ).

The findings from the analysis conducted in Sleman Regency indicate that group guidance using the modeling technique is effective in enhancing the resilience of former drug addicts. This research demonstrates that the experimental group receiving symbolic modeling-based group guidance experienced a notable improvement in resilience. These findings confirm that the modeling technique is an effective intervention for strengthening resilience among former drug addicts in the post-rehabilitation phase. This result is further supported by Segrin (2008) in Corey (2015), who emphasized that modeling is effective in addressing attention-deficit/hyperactivity disorder (ADHD), substance abuse, bullying, social anxiety, emotional and behavioral issues in children, depression, , and behavioral therapy for couples. Additionally, video modeling has been successfully implemented for individuals with disabilities and externalizing behaviors, such as disruptive or aggressive tendencies (Erford, 2016).

Modeling is a technique rooted in observational learning presses (Erford, 2016). In this research, it is expected that the imitation presses facilitated by intervention can lead to behavioral changes in former drug addicts, particularly in aspects related to resilience. This intervention aims to replace maladaptive behaviors associated

with low resilience with more adaptive coping mechanisms. Previous research has also demonstrated the effectiveness of other group therapy approaches in improving mental health outcomes for former drug addicts, including coping skills training (Jafari et al., 2010) as well as Acceptance and Commitment Group Therapy (ACT) & Cognitive Behavior Therapy (CBT) (Choobdari et al., 2022). Thus, this research contributes to the growing body of research by introducing a synergistic approach to guidance and counseling services, redefining strategies for building resilience in this vulnerable population.

In contrast, the result show that group guidance using the behavior contract or contingency contract technique isn't effective in enhancing the former drug addict's resilience. The experimental group that received this intervention showed limited progress in resilience, particularly among respondents in the maintenance phase of post-rehabilitation.

Previous research has found the effectiveness of behavior contract technique to decrease cocaine addict compared to standard treatment programs, particularly when combined with other approaches or techniques such as CBT (López-Toro et al., 2022) and ACT (Burke et al., 2024). Furthermore, Erford (2016) suggests that behavior contracts are most effective when applied at an individual treatment rather than adapted for group settings. Despite these findings, some research has indicated that group counseling using the behavior contract technique can still foster positive behavior changes. For example, it has

been shown to improve social etiquette or reduce negative behavior such as exceeding online gaming habits.

Descriptive analysis shows that one respondent (OHP) experienced a decline in resilience scores following the intervention, as indicated by a negative gain score (-2) between pre-test & post-test score. A closer test of individual items and resilience indicators suggests that optimism played a critical role in the intervention's limited effectiveness. This finding is further supported by researcher observations during the experiment, which indicated a low enthusiasm from the respondent during intervention process.

The effectiveness of the intervention in the second experimental group was also hindered by another respondent (DM). Who showed no change in resilience result between the pre-test & post-test, with zero (0) gain-score. During intervention, this respondent seemed confused about the steps involved in identifying the antecedent and target behavior using the behavior contract technique. This suggests that the intervention failed to enhance the indicators of resilience for this participant. highlighting the potential influence of other factors such as group dynamics during the process or individual motivation. These findings are in accordance with pervious studies indicating that individual's personal characteristics, social environment and support, and drug-centric behaviors, play a vital role in the effectiveness of intervention programs (Smith, 2021).

Mann-Whitney U test score revealed statistically significant

differences among the intervention, indicating that the intervention had a significant impact on this group. Further analysis confirmed that each pairwise comparison also demonstrated significant differences, reinforcing the influence of the intervention techniques on resilience outcomes.

A comparison of mean ranks indicate that the modeling technique better results than behavior contract technique and the control group. This finding is accordance with social learning theory from Bandura Concept (Bandura, 1977), which emphasizes that modeling allows participants to observe and directly imitate adaptive behaviors, making it an effective approach for developing coping skills. Additionally, while the behavior contract technique also demonstrated greater effectiveness compared to the control group, its impact was slightly lower than that of the modeling technique. This aligns with Kazdin (2012) who found that reinforcing behavior through behavioral contracts can help individuals develop commitment and responsibility toward behavioral change. However, its effectiveness is limited compared to modeling due to the lack of direct visual examples.

Given these findings, group guidance using the modeling technique can be a valuable approach for enhancing the self-resilience of former drug addicts in school- or Islamic boarding-based rehabilitation programs. However, for future researchers interested in exploring the effectiveness of the behavior contract technique in this population, it is recommended to expand the research

scope by including a larger sample size and incorporating a more diverse range of participants, particularly in terms of gender.

## CONCLUSION

Examining the effectiveness of group guidance using the symbolic modeling and behavior contract techniques in enhancing the resilience of former drug addicts in Sleman Regency was the objective of this research. The findings show that the symbolic modeling technique is effective in strengthening resilience among former drug addicts, but on the contrary, behavior contract techniques are not effective in enhancing this ability. The significant differences in effectiveness among the three groups further reinforce the conclusion that group guidance using the modeling technique is a suitable intervention for improving resilience in this population. However, if the behavior contract technique is to be used, further research is necessary to explore its potential applications and refine its implementation.

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