IJECES 5 (2) (2016)



Indonesian Journal of Early Childhood Education Studies



http://journal.unnes.ac.id/sju/index.php/ijeces

Behavior Therapy Application by Relaxation Method to Overcome Children Aggressiveness

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DOI 10.15294/ijeces.v5i2.13925

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Article Info

Received June 2016 Accepted October 2016 Published November 2016

Keywords: Relaxation therapy; aggressive

Abstract

This research is measuring as well as explaining the children's aggressive behavior in Pembina kindergarten. The researcher conducted behavioral therapy by using relaxation method to overcome that aggressive behavior. Applying mixed research methods of qualitative and quantitative by using pre-experiment one shot case study design, it was found that relaxation therapy data have not been optimal yet to reduce the subjects' aggressiveness level. Hence the existence of important family factor should be included in the children's therapy process. Relaxation therapy should be balanced with family therapy, due to subjects' aggressiveness factor is a form of subjects' protest to their family.

How to cite

Deliana, S., Haryadi, S., & Budiningsih, T. (2016). Behavior Therapy Application by Relaxation Method to Overcome Children Aggressiveness. Indonesian Journal Of Early Childhood Education Studies, 5(2), 114-122. doi:10.15294/ijeces.v5i2. 13925

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INTRODUCTION

Children, especially toddlers (under 5 years) are those in the golden age. In this Golden Age, all activities and information they receive will greatly affect them when they grow up. If those children "manage" to pass through this time well, thus the next development will be more mature compared to those who "fail" passing through their toddler ages. These "successful" children will be able to face development and life's challenge before them. These children have positive attitude and be able to manage their wants and self control.

The ability of children to adapt to their environment as well as other positive experiences in doing their social activities is a very essential key element for a successful and happy life in the future. What they have sowed in their childhood will be harvested in their adulthood later. However, we all understand that this socializing skill should be learned. In the early lifetime, children learn from the people surround them, in this case is their parents.

Parents' role in developing socializing skill is very important. Besides giving trust and chance, parents are expected to strengthen through rewards for positive behavior and punishment for wrongdoings. Thus, children could develop to be healthy and responsible social beings.

In children with mal-adaptive behaviors according to behavioral approach, these are due to they have learned to behave mal-adaptively (Martin, 1978). One of the mal-adaptive behaviors often practiced by parents and teachers on the toddlers is aggresiveness.

Aggressivenes is the offensive behavior either physically or verbally. Aggresiveness is one of the behavior forms intended for hurting or disadvantaging one who is opposing one's will. Aggressive behavior involves any form of torturing either psychologically or emotionally (Breakwell:1998:17). The common form of aggressive behavior is acting rudely, scaring, threatening using violence, condemning/ swearing, hitting, kicking, attacking with weapon (Breakwell:1998:21).

This behavior emerges as an emotional reaction to frustration, for instance due to forbidden of doing something. Aggresiveness is often happened because of the previously corroborated aggressive behavior. This happened because in several aggressive children groups, they receive rewards. Moreover, parents' behavior is becoming an effective role model for the children. In other words, children become aggressive because

they imitate their parents. Usually, the behavior is being angry either verbally or being offensive, temper tantrum and destructing. This habit will be done often if children know that by that way their will will be granted or if parents are not consistent in disciplining. Therefore, unconciously parents have made their children learn to behave mal-adaptively because that behavior is learned by children in their interactions with their environment. Based on the observation in Pembina kindergarten, many teachers and parents complained that their children have aggressive behavior disorder, either physically or verbally. Behavioristic therapy has been proven sufficiently effective in overcoming mal-adaptive behavior problems, by directing to the objective of gaining new behavior through eliminating mal-adaptive behavior and strengthening and maintaining desired behavior. One of the techniques developed is relaxation technique. Relaxation is the extension of skeletal fiber muscle, while tension is contraction on the movement of fiber muscle (Beech, dkk, 1982). Relaxation will enable an individual more in avoiding excessive reaction due to stress. Moreover, problems related to stress like hypertension, dizziness, insomnia could be reduced and treated with relaxation. Relaxation could reduce anxiety level and reduce possibility of disorder related to stress, and control anticipatory anxiety before the situation inducing anxiety.

Based on the phenomena that there are still many toddlers experiencing aggressive disorder, therefore the author felt that it was important to give behavioral therapy treatment by using relaxation method for children which later on helping kindergarten teacher to reduce aggresive behavior.

Research Objective

To know the effectiveness of behavior therapy with relaxation method in overcoming aggressiveness disorder on children.

LITERATURE REVIEW

Aggresiveness

According to various experts, aggressiveness has several definitions. Sears, et al (1985: 4) defined aggressiveness as an action intended to hurt others. Otherwise Breakwell (1998: 15) defined aggressiveness as a form of behavior intended to hurt or disadvantage someone opposing one's will.

Caplin (2000 :15) also defined that aggresive behavior as an attack or could be defined as a opposing action aimed at a person or a thing. According to Freud, considering aggression as a

thrust resulted from frustration and is a reaction typically resulted from anger (eventhough it may occur due to other factors). While Murray defines aggression as a need to attack, rape/ force or hurt others to belittle, do harm, disturb, endanger, destruct, do evil, mock, scorn or malign, severely punish or do other sadistic actions.

Berkowitz (2003:4) defined that aggression is all forms of behavior intended to harm one either physically or mentally. Different from Barron dan Byrne (2005:136), they describe that aggression is a torture aimed intentionally from all kinds of violence to others.

Based on the explanation above it could be concluded that aggressive behavior is the action aimed to harm or hurt others physically or verbally for a certain objective.

Theory of Aggression

According to Dayakisni (2003 : 196-206) up to now, there have been three theories about aggression which is quite influential, they are:

a. Instinct Theory

The main characters of this instinct theories are Sigmund Freud, Konrad Lorenz dan Robert Ardrey. The instinct theories are devided into two, they are:

1. Pshycoanalysis Theory

Conforming to Freud, aggression could be included in the death instinct which is an expression of death wish (drive) in the unconscious level. In expressing death wish, this could be in form of aggression aimed at others. Aggression expression to oneself will be hindered by ego which always tries to repress desire of death do it will be still in unconscious level. While aggression expression on others can not be accepted and always faces society control (with value and sanction set). In that individual self, there is a controlling agent over death instinct expression (also sexual instinct) which is superego playing the role as the representative of parents and society. The warning (controlling) of superego is manifested in the warning to id which will be experienced (felt) by individual as self punishment causing guilty feeling enabling that individual to withdraw the death drive expression. In controlling the death instinct, ego does the control on the direct death wish expression through sublimination, which is conveying that instinct in non aggression activities socially acceptable.

2. Ethology Theory

Ethology theory was pioneered by Konrad Lorensz and Robert Ardrey. According to Lorenz (in Dayakisni: 2003: 198) there is an aggression

drive in every being or in other words they have *survival* value..

In line with Freud, Lorenz formulated instinct by using emergence process or hydraulic model mechanism to explain the emergence process of instinct behavior mechanism/ naturally having energy source called action specific energy and this performance is locked by innate releasing mechanism, therefore a natural behavior performed is the certain stimulus suitable with that innate releasing mechanism, and also in form of specific behavior aimed by the same species' members. Lorenz also said that nature provides inhibitory mechanism for predatory animals to avoid killing each other in the same species' environment (intra species aggression).

Innate releasing mechanism is the most important part of that inhibitory mechanism of intra species aggression. While the non predatory animals which do not have the inhibitory mechanism, aggression will be more advantageous for their safety or survival to the ability of avoiding aggressor. The ability to escape is the weapon to face intraspecies aggression.

b. Frustration – Aggression Theory

Pshycology group in Yale University: Dollard, Doob, Miller, Mower dan Sears, 1939 (in Dayakisni: 2003: 200) hypothesized that frustration causes aggression. That hypothesis was postulated "frustration always leads to some form of aggression". This postulate was accepted fast and widespread by pshycologists. However, this theory could not survive long due to its simple formulation, according to Wrighsman dan Deaus, 1981 (in Dayakisni: 2003:200).

Medinus dan Johnson , 1976 (in Dayakisni:2003:214) classified aggressions into four categories, which are:

Attacking physically, which are hitting, pushing, spitting, kicking, biting, punching, scolding and confiscating.

Attacking an object, which is attacking an object or (dead) animal

Attacking verbally or symbolically, which are verbal threatening, speaking ill of others, threatening and demanding.

Violating proprietary or attacking other's authority/ property.

While Buss, 1987 (Dayakisni, 2003:214) classified people's aggression in eight types, which are:

a. Physical active direct: physical active directly done by individual or groups facing directly with other targeted individual or groups and there is a direct physical contact such as hitting, pus-

hing, shooting.

- b. Physical Passive Indirect: aggression which is done by individual/ group by facing other targeted individual / group, however there is no physical contact directly, like demonstration, strike, refusal to move.
- c. Physical Active indirect: Physical aggression which is done by other individual/ group by not facing directly with other targeted individual/ groups, such as destructing the victim's property, burning the house, hiring a bouncer.
- d. Physical Passive Indirect: physical aggression action conducted by other individual/groups by indirectly interact with other targeted individual/groups and there is no direct physical contact such as indifferent, apatis, unconcerned.
- e.Verbal Active Direct, is an aggression conducted by individual or group by facing other individual/ group and there is a direct verbal contact such as insulting, swearing, angry and cursing.
- f. Verbal Passive Direct, is verbal aggression done by individual/ group by confronting with other individual/ groups but there is no direct verbal contact such as refusing to speak, silent.
- g. Verbal Active Indirect, is verbal aggression done by individual/ groups by confronting other targeted individual/ group such as spreading malicious rumors or gossip, pitting.
- h. Verbal Passive Indirect is verbal aggression done by individual/ group by confronting other targeted individual/ group and there is no direct verbal contact, such as not supporting, not voting.

The type of aggression discussed in this research is the Physical Active Direct and Verbal Active Direct.

Factors affecting aggressive behavior

In certain condition, individual could behave aggressively to an object, this is affected by several factors. The factors controlling aggressive behavior and the factors arousing anger are equally important (Sears, 1985:5) which are:

a. Attack

An individual does unpleasant thing to others depending on how is the view of the individual who is at lost, disturbed or attacked. Generally, an individual will be angry and act aggressively to the attack source. Therefore various stimuli which are not in favor could cause aggression, for example a suspect interrogated by the police but does not give clear explanation, tend to be quiet and beating around the bush will raise aggressiveness (Sears et al: 1985:6)

b. Frustration

Frustration is the disruption in achieving goals. If a person does something or wants something and that person is blocked, thus that peson could be said is experiencing frustration. One of the pshycological principals is that frustration tends to arouse aggresiveness. Frustration occurs if wish and want intensively struggled are hampered. (Gerungan: 2002:176)

c. Attribution Role

An event will cause anger and aggressive behavior if the disadvantaged individual monitors the attact or attribution as an endangering act

Aggression Behavior Aspects

According to Sceneiders (1975) the aspects of aggressions are:

Self defence by offensing, either offensing object or human, which is the tendency to release wish and uncomfortable or unsatisfied feeling to the surrounding environment by attacking others or the surrounding environment.

Disciplinary Resistance, is an individual act which violate rules for personal pleasures.

Egocentric is behavior or individual trait which tends to prioritize self/ personal interest by violence unconcerning other's interests.

Superior is that an individual thinks he/she is better than others.

Causes of Aggression

Research's results show that aggression comes from many variables, situational factors. Baron (2005 : 169) indicated that aggression is resulted from various determinants, which are:

- a. Social Determinant
- 1) Frustration

Frustration defined as internal emotional reaction caused by an impediment. Dollard et al (in Berkowitz: 1993:42) translated frustation as an external condition causing a person could not gain the expected pleasure. Frustation could emerge due to failure in reaching goal. Frustration is able to be strong trigger of aggression, but only in certain circumstances.

2) Direct Provocation

Provocation is an action by others which is tend to trigger aggression on the receiver, often because that action is perceived coming from a bad intention. Provocation from others becomes one of the strong triggers of aggression. Individual behavior is rarely gives up furthermore it tries to get even or be more from others.

3) Exposure to violence in media

The violence meant in the media is the de-

piction of violence through mass media. The exposure to violence is through media. That exposure could enhance aggression between audience. Initial exposure could trigger thought of aggression tendency which will weaken the defense to refuse aggression to occur.

4) Increasing Stimulation

Increasing stimulation could increase aggression if that stimulation still exist after getting through a circumstance which it occurs and misinterpreted as anger. In excitation transfer theory, stimulation resulted during the next circumstance.

- b) Personal Characteristic Determinant
- 1) Type A Behavioral Pattern

The type A behavioral pattern is a pattern consisted of competitive level, time urgency and high hostility. This type A behavioral pattern individual has a very competitive characteristic, haste, very sensitive, emotional and tends to behave aggressively. This differs from type B behavior pattern which is a pattern not including characteristics related to type A behavioral pattern.

2) Hostile Attribution Bias (perceiving bad intention on other individuals)

Individual having high hostile attribution attributes other's act on hostile action. aggressive than individual who has lower level of this characteristic.

3) Gender

Men in general are more aggressive than women, they tend to perform direct type of aggression. Myers , 1976 (Sarwono:2002:302) explains aggressive behavior from active process or genetic theory (heredity) that aggressive behavior is determined by a certain process occured in brain and central nervous system. Likewise the testosterone is believed as aggressive trait drive. The comparison of testosterone production is more in men than it is in women – not dominant thus it can be said that it doesn't affect women's behavior.

- c. Situational Determinant
- 1) High Temperature

High temperature tends to increase aggression to certain point and above certain level it will decrease as the temperature raises.

2) Alcohol

Individuals with low aggressive tendency turn to be more aggressive under alcohol influence. On the contrary, individuals with high aggression tendency turn to be less aggressive under alcohol influence.

3) Cultural Belief and Values

Aggression is considered as the result of

socio-cultural demand. A number of social or cultural groups and sub group supports the development of aggression in socialization process because aggression is considered as accepted behavior, even is needed to maintain their survival of physical and socio-cultural life. The society (tribe) as a whole has pride if their children grow strong, brave, aggressive because therefore oneness, physical and socio-cultural life survival of the society in the future will be kept.

BEHAVIOR THERAPY

Behavior therapy or behavioristic in pshycotherapy is one of several "revolutions" in pshycological science world, especially pshycotherapy. Behavioral therapy is the therapy which considered that behavior could be understood as a result of combination of (1) past learning in relation to the similar circumstances; (2) present motivational circumstances and its effect to environmental sensitivity; (3) biological differences either genetically or because of physiologic disorder.

Conforming to Masters, et al (1987), various techniques are applied in the behavior therapy which are:

- a. Relaxation
- b. Systematic Desensitization
- c. Sensitivity training
- d. Role model imitating
- e. Active conditioning (operant)
- f. Self controlling (including biofeedback)
- g. Saturation
- h.Conditioning by aversion

RELAXATION

Relax is the circumstance when a person is in the calm state, tranquil emotion and not the opposite which is tense or emotional. Relaxation is the extension of skeletal muscle fibers, while tension is the contraction to the movement of the fiber muscles (Beech, dkk, 1982).

Relaxation Types

There are several types of relaxation, which are muscle relaxation, sense awareness relaxation and relaxation through hypnose, yoga and meditation.

a. Muscle Relaxation

Muscle relaxation is aimed to reduce tension and anxiety by enervating body muscles (Bernstein dan Borkovec, 1973; Goldfried dan Davison, 1976; Walker dkk, 1981). In the muscle relaxation exercise, individual is asked to strain muscle to certain level and then is asked to enervate it. Before enervating, it is important to feel the strain, thus an individual could differentiate

between the strained muscle and the relax one.

b. Sense Awareness Relaxation

Relaxation is developed by Golfried learned from Weitzman (Goldfried dan Davidson, 1976). In this technique an individual is given a series of questions not to be answered verbally, but to be felt as what can be experienced or not by an individual at the moment the instruction is given.

AGGRESSIVE BEHAVIOR AND RELAXATION

Aggressive behavior is the action aimed to hurt or harm others physically or verbally for a certain goal. This action is certainly due to physiological process causing a person to perform aggressively and also pshycological reaction such as tense, nervous, angry and worry therefore the aggressive behavior emerges. Relaxation method is allegedly a method capable of overcoming aggressive behavior. The rationale of relaxation method is that human nervous system containing central nervous system and autonomous nervous system. The function of central nervous system is controlling the desired movements, for example limbs (hands and feet) neck and fingers' movement. Autonomous nervous system is functioned to control automatic movements such as digestive, cardiovascular functions and sexual arousal. The autonomy nervous system consists of two subsystems work contrary, which are: (1) sympathetic nervous system which functions to raise stimuli or enhance body organs, enhance pulse and breath, and also cause constriction to pheriperal arterial and enlargement to vascular center, and also lowering skin temperature, skin endurance and also hampering digestive and sexual process (2) Parasympathetic nervous system stimulates decreasing seamus, function increased by sympathetic nerves and stimulates increasing all function lowered by sympathetic nerves. As long as the systems functioned normally in balance, the increasing of one system activity will hamper or push effects on other system. When a person is tense and anxious, sympathetic nerve system will work, while in relax time para sympathetic nerve system works. Therefore relaxation could supress tense and anxiety reciprocally, thus counter conditioning and elimination will emerge (Bellack dan Hersen, 1977; Prawitasari, 1988).

METHOD

This research applied *Mix-method of Qualitative and quantitave*. Quantitative method is using pre-experiment method which is a research at-

tempting to find independent variable's effect on dependence variables in manipulated circumstances. Qualitative approach is to elaborate subject's psychological dynamics. By using case study approach, this research is trying to understand subject's mental condition during treatment. Case study approach is a model emphasizing on exploration of a bounded system in a case or several cases in details, along with deep data mining involving various information sources which is affluent in context (Cresswell, 1998). Pre experiment method could be explained as follows:

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Research Variable Identification

Independent Variable

- Behavior Therapy with relaxation met-

hod

Dependent Variable

- Aggressive Behavior

Research Variable Operational Definition

Behavior therapy with relaxation method::
A method using behavior therapy in order to reduce tense and anxiety by enervating body muscles.

Research Subjects

The research subjects are two Pembina Kindergarten students, in Class B on Jl. Kelud Raya, Semarang. Subjects' names are Rama and Viki. They are students with aggressivenes. Rama is motorically aggressive, however Viki is verbally and motorically aggresive.

Research's Term and Procedure

This research is experimental study aimed to examine whether there was an alteration of aggressive behavior of the kindergarten students after they were given behavior therapy with certain relaxation method for children.

This is One-Shot Case Study. It is quite simple since it didn't use control group. This design is chosen because the subjects are children, and to see its effectiveness, the researcher's therapy used observation to monitor students' aggressive behaviors.

The experiment design is as follows: Infromation :

X: Behavior Therapy relaxation method O: Aggressive behavior measurement

This research gave a therapy. The therapy

were conducted in three sessions, each sessions took one hour.

Data Collecting Method

To measure aggressive behavior after they were given treatment, observational checklist was applied. Observation was done after subjects were treated. Aggressive behavior blue print could be seen in the table below:

Data Analysis Method

Data analysis was conducted quantitatively by measuring the effectiveness of therapy on children and qualitative descriptive which is describing or depicting the collected data as they are without any intention to conclude or generalize. Beside that there are additional data reported qualitatively which perhaps did not included in the description. The percentage is 60% quantitative and 40 qualitative.

RESULTS AND DISCUSSION

The research subjects are Rama (6 years) and Viki (5 years). Rama is the last child of two siblings. His brother is 9 years old and is hiperactive. Rama's parents divorced and after that divorce Rama is

Is hiperactive and tends to be motorically aggressive. In his daily life, he lives with his father while his mother is in Jakarta. It seems that he was not convenient that he has to stay with his father thus he manifested his protest in aggressive behavior at school. However, when his mother visited him, Rama became a person who was active and cooperative. Viki (5 years) is also the last from two siblings. Viki's father had died for a long time and he lives with his mother and his brother. Viki has verbal and motoric aggression. According to his mother, Viki has never been stayed still, he always has big energy to do activities. When he is at home, he doesn't have a father figur thus he does not pay respect to his mother.

In the first session, Rama was accompanied by his mother. When he entered the therapy room – he directly played jumping game with big balloon toy. On the contrary, Viki came with the teacher then he directly ran and did not want to enter the therapy room, even he hid in the toy bin in front of the therapy room. However after being persuaded by the teacher, he finally was willing to enter the therapy room. In the room, he directly ran and did not want to stop, after he was persuaded with toys, at last he sat and listened to the therapist. Firstly, Rama and Viki were given a piece of paper and were asked to draw anything

they wanted. The aim of the drawing activity is for screening of how far is their aggressiveness potential. Both of them drew, but Viki drew more spiritfully while Rama tried to copy his motorcycle toy in his drawing book. After 5 minutes, they were bored and did not want to continue their drawing. Viki took motorcycle toy by force from Rama's hand, Rama protested and took it back. Viki shouted "Please lend me", Rama refused, then Viki cried and asked the same tou to his mother who happened to be there and were able to pick him up. Viki's mother persuaded him and told him that she would buy the same toy after school but Viki was still angry and said "Wheee...mom, you must be lying" then he rolled on the floor. The therapist tried to get Viki's concentration back by doing breathing.

In the breathing session, they were quite cooperative. They liked the breathing activity which seemed like blowing balloon. This session was aimed to reduce tenses they felt. Breathing was repeated up to five times and they did it quietly.

After that, they continued to hold their toys, and when therapist ended the first session, they took leave. Rama shook the therapist hand and said greeting and directly went to the class. So did Viki, he said goodbye quite loudly in Javanese "All, I bid you goodbye." Then he shook the therapist's hand and also ran to the gate.

In this first session, was the introduction session between subject and therapist. This is done in order to familiarize these children with the therapist for the next session. Based on the observation, Rama and Viki had not gained influence much in the first session.

However for Rama, since he was accompanied by his mother thus he was quite controllable. On the contrary, Viki had not yet able to control his big energy to do activities calmly. This is normal since the first session had not been able to alter one's behavior due to short period of time.

The second session, in the therapy room in Pembina kindergarten. Rama and Viki were summoned again, for this session the treatment is different from the first. They were given therapy individually, each by different therapist. Rama was asked to play swimming in the honey sticky pond. By laying on his stomach, Rama imitated the therapist's movement. The slow swimming was as if the water is so sticky as honey. The movements were constant in order for Rama could control his movement calmly. Rama laughed when he was imitating the therapist's movement. After the tenth movement, the therapist asked Rama to get back to his seat and took deep bre-

ath. On the other hand, Viki was not as calm as Rama when he did the swimming activity. Viki was more active but had less concentration in doing the therapy. In the therapy process, verbally Viki said "Come on Rama, let's swim". His motoric movements (motor skill) were still rough, but the therapist tried to control his movements. Slowing movement could even be followed by Viki after he was given example for five times. After the swimming session ended, Viki seemed to start concentrating and was able to sit quite calmly. The secon session was ended by relaxation. Rama and Viki were asked to sleep on the carpet with pillows. With relaxation music, they were asked to close their eyes. Viki often opened his eyes and showed that he wanted to get up, but then the therapist gave Viki a sign to go back to sleep. On the contrary, Rama was calm and closed his eyes, but after five minutes Rama fell asleep. Different from Viki, during the relaxation process he still moved his body several times. After the simple relaxation was over, then Viki immediately got up and sat down, while Rama was still asleep. Then we showed Viki emotional picture (attached), he was asked to show emotion he felt at the moment. Viki was smiling and pointed at a smiling person picture. When the second session was over, Viki said goodbye, he used to run and jump on his way out, but at that time he walked nearly ran. The therapist waited until Rama got up 20 minutes later. He smiled when he woke up. Then the therapist asked why he fell asleep. Rama answered that he was tired (because before the session got started he played with his friends). Rama was showed the emotion picture as we did to Viki and Rama pointed at the laughing person picture. Then the therapist stated that the secon session was over and Rama said goodbye and kissed the therapist's hand.

Third Session, Rama and Viki were once again summoned to the therapy room. They ran to the therapy room, they were asked about how they were. Rama and Viki answered that they were fine while seated and turned around. Rama was calmer than before, but Viki had not been as calm as Rama yet. Then they were asked to play Robot vs Doll. The therapist asked them to stand up and imitate the gawky robot movement. They were happy and imitated the robot movement. Then they were asked to imitate the supple doll movement. Their bodies were limp like dolls. Rama and Viki laughed and enervate their bodies as practiced by the therapist. Then they were asked to do robot and doll movement alternatively. The aim is to release tension, as this is the part of muscle relaxation therapy. They could do

the therapy's instruction quite well, eventhough they sometimes exaggerated due to their energy excess.

The robot vs doll session was conducted for 30 minutes. After that they were asked to sleep and they could not move their bodies. They were asked to close their eyes and listen to the relaxation music rhthym while the therapist gave affirmation that calm is fun. During the relaxation, Rama and Viki were given simple massage by the therapist. The aim was to help the relaxing process on children. The music played was the instrumental music which could release the tension in children.

DISCUSSION

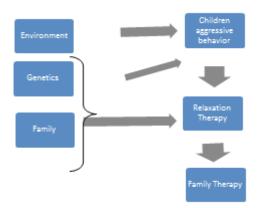
The treatment results gained during three sessions and conducted in class arranged as therapy room showed that Rama and Viki still had quite high aggresiveness from their teacher's observations. This was proven by the checklist showing that their aggressiveness were still above average. Rama and Viki's mean were 3.09 and Viki 3.11, quantitatively the relaxation therapy had not been optimum yet in decreasing subjects' aggresiveness level drastically. However, even generally subjects still had high aggressiveness level, there was something changed from them. According to their class' teachers, Rama and Viki were friendlier and were more polite to the teachers after the therapy, since before that they were indifferent and always shouted. This was because they did not understand others' expression responding their behavior. In the second and third session, they were given suggestion that if they are angry they should take deep breath, then their anger will be gone. They had never done that reactive action before.

The treatment was not really effective since several factors were not quite supporting the success of the therapy. First is the therapy room. The position of the room was between classes thus the situation was less calm, so when the therapist played the relaxation music, the sound was distorted by the the noise outside the class. Moreover, from the interview results with teacher and subject's mother, it can be concluded that there is a big family factor causing children to experience aggression. Rama, lived in boarding house with his father. His parents were in the divorce process, then his mother continued her study in the other city and only visited Rama once in two weeks. In fact Rama was so close to his mother, within that narrow house, Rama often heard his parents quarreled thus he recorded the "negative" words of swearing from his parents' mouth.

He imitated those negative words and often said them at school. Besides, he felt that he could not accept the reality that he had to separate from his mother and moreover to accept another woman causing his parents to divorce. This another woman often came to his father's room and Rama was often told to go out with his nanny. Rama felt that his mother was not treated fairly and implemented it in the aggressive behavior either at school or at his playing environment. According to (Lochman & Dodge, 1998), in Kendall 2006, children who experience external disorder like aggressiveness show egocentric and experience diorder to their social environment. Rama had two aggressiveness causing factors, first is genetic and the most influential is the parents' divorce. Rama's aggressive behavior was the protest form to his parents.

Relaxation therapy given was not optimum since Rama also needed family therapy. Family therapy is the therapy involving oarents and children. In the therapy what children and parents' wants are revealed and they try to make agreement. Hostility between Rama's parents did not support the family therapy, thus before Rama was given relaxation therapy so he could control his aggressiveness. However, in fact the relaxation therapy had not helped sufficiently in helping to control Rama's aggressive behavior.

On the other hand, Viki had more aggressiveness than Rama, either physically and verbally. After the treatment, Viki changed. He was more friendly and able to lower his voice tone. However, for his physical aggression he was still above average. For Viki, he also needed family therapy. Since he lost a father figure, and his mother was lenient thus made Viki's aggressiveness less controllable. Therefore, parenting pattern change was needed so that Viki's aggressiveness would be reduced. Moreover, breathing therapy everyday in the morning was necessary to be done so that Viki would reduce the tense he felt.



This research shows that family role is very important in child's development. Therapy for child with aggressiveness is not only a pshycologist's task but parents should be involved in the child's healing process.

The weakness of the research is that the researcher paid less attention on family factor, in fact the cases of both subjects are affected more by their families. Therefore beside continuous relaxation therapy, family therapy is also needed for Rama and Viki's case.

CONCLUSION

Research's results showed that relaxation therapy had not been optimum yet to reduce subject's aggressive behavior. Subjects who had started to change, reduced shouting in class and acted politely and friendly to teachers. The therapy was less optimum because it has to be done continuously, either at school or at home. Moreover, family factor which forms aggressive behavior was less involved therefore at home, children were not taught relaxation. However, the most important, this research results are the base for the next therapy, which is the family therapy. Family therapy is the therapy involving parents and children thus, at home children will have therapy process concerning that children spend their time at home and also based on the analysis that subject with aggressive behavior is expressing a protest manifestation to their parents.

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