Resipatisme: A psychoeducation to reduce the tendency of klithih behavior in adolescents

Detty Putri Pratiwi Oktavia¹, Nur Azmi Zulhida¹, Laila Rachim¹, Ahmad Affan², Wulan Suci Fitrianingsih¹, Sri Kushartati¹

¹Faculty of Psychology, Universitas Ahmad Dahlan, Indonesia
²Faculty of Literature, Culture, and Communication, Universitas Ahmad Dahlan, Indonesia
Corresponding author: sri.kushartati@psy.uad.ac.id

ABSTRACT

Klithih, a Javanese term, was originally an ordinary night stroll without a clear purpose. Klithih becomes an act of violating the law if it is accompanied by aggressive or violent behavior. In recent years, klithih cases in Yogyakarta have increased and become public attention, with almost the average perpetrators being students. This study aimed to reduce aggressive behavior in adolescents with a tendency to klithih behavior by developing Resipatisme, a psychoeducation intervention consisting of emotion regulation, empathy, assertiveness, and altruism. A quasi-experimental quantitative method, with one group pretest-posttest design, was applied in this study. An aggressive behavior scale was used to collect the data. The Wilcoxon Signed Rank Test was applied to compare the data before (pretest) and after (posttest) intervention. The results show a significant difference between pretest scores and posttest scores. This finding implies that Resipatisme psychoeducation can reduce aggressive behavior in adolescents. Therefore this psychoeducation may be applied to prevent the tendency of klithih behavior.

Introduction

The Special Region of Yogyakarta is one of the regions in Indonesia famous for its diverse culture and the friendliness of its citizens. Many local and foreign tourists make Yogyakarta the primary destination for their visit during the holidays. In addition, Yogyakarta is dubbed the city of students because many prestigious schools and universities are the leading destinations for young people in the archipelago to study. Even so, Yogyakarta is not an area that is free from cases of violence. One of the cases that became viral and disturbed the public was the klithih case. Klithih behavior itself is a form of aggressive behavior.

In Javanese, klithih is a vocabulary that means a form of ordinary walking activities at night without a clear purpose (Jatmiko, 2021). If taken literally, the term klithih is not a criminal act. Still, klithih behavior can be an act of violating the law if it is accompanied by aggressive or violent behavior. However, the term klithih in Yogyakarta is a group of teenagers who go around using vehicles to look for teenagers or other school students who are considered enemies (Fuadi et al., 2019). Klithih perpetrators usually consist of junior high school and senior high school students, including vocational high schools, or even teenagers who dropped out of school (Septiani & Zuhdy, 2020).

An increasing statistical data on klithih cases in Yogyakarta from 2020 to November 2021 was found based on the Regional Police record, with 25 reports and 65 perpetrators in...
2020 to 55 reports and 95 cases in 2021. From these data, it is known that klithih perpetrators consist of 80 students and nine unemployed people with 28 cases of abuse, 23 cases of using sharp weapons, and 1 case of destruction of public facilities. Moreover, Jogja Police Watch (JPW) recorded 12 street crimes known as klithih throughout 2022.

The negative impacts of klithih behavior carried out by groups of adolescents include (Septiani & Zuhdy, 2020): (1) Death and serious injuries suffered by perpetrators, victims, and victims public; (2) Damage to public facilities in the vicinity of the incident location; (3) Victims and the community will experience fear and trauma; (4) The mental breakdown of students as the next generation of the nation's youth in Indonesia; (5) The quality of education in Indonesia is declining because it cannot be a place for youth to develop positively.

From a social psychology perspective, aggression is physical or verbal behavior intended to hurt someone. Dehue reveals that it includes both physical aggression (hurting someone’s body) and social aggression (such as bullying, cyberbullying, insults, harmful gossip, or social exclusion that hurts feelings (Myers & Twenge, 2018). Berkowitz distinguishes between hostile and instrumental aggression (Aronson et al., 2016). Hostile aggression is an act of aggression stemming from feelings of anger and is aimed at inflicting pain or injury. There is an intention to hurt the other person in instrumental aggression, but the hurting takes place as a means to some goal other than causing pain. Buss and Perry (1992) state aggressive behavior as behavior or behavioral tendencies intended to harm others physically and psychologically. This theory explains that aggressive behavior has four main aspects: physical, verbal, anger, and hatred. This aggressive behavior is a problem that often occurs in adolescents (Yunalia & Etika, 2020).

Factors influencing klithih behavior are poor parent-child relationships, commitment to deviant peer groups, and low academic motivation (Febriani, 2018). At the same time, the factor determining klithih behavior is conformity with friends (Fuadi et al., 2019). This study develops psychoeducation to reduce the tendency of klithih behavior in adolescents titled Resipatisme. This psychoeducation combines emotion regulation, empathy, assertiveness, and altruism, along with discovering the causes. Resipatisme was chosen as a form of intervention because every aspect may reduce aggressive behavior in adolescents.

A previous study conducted an emotional regulation training program with 17 participants aged 15 to 17 years old, resulting in the level of aggressiveness of the participants decreased after being given emotional regulation training (Putra et al., 2019). The results of this study indicate that the emotion regulation given effectively reduces aggressive behavior and increases positive emotions in adolescents. Emotional regulation is a process of recognizing, maintaining, and regulating positive and negative emotions, automatic or controlled, visible or hidden, and conscious or unconscious (Gross, 2014). Emotion regulation involves changes in the dynamics of emotions from the time they arise to the magnitude, duration, and offsets of behavioral, experiential, and physiological responses. Emotion regulation can influence, strengthen, and maintain emotions, depending on the individual's goals.

Research on empathy training found that empathy training was effective in reducing the tendency of aggressive behavior in junior high school students (Lika, 2019). Students become more aware of their own emotions and learn to be sensitive to the feelings of others around them. In addition, they also become motivated to pay attention to their friends because a high ability to empathize makes individuals behave prosocially. Empathy is the ability to feel the emotional state of others, feel sympathetic, try to solve problems, and take the perspective of others (Baron & Byrne, 2002).

Research on assertive training found that assertive training can reduce aggressive behavior in 29 teenage boys (Sari et al., 2015). Assertiveness is a positive self-statement by always respecting others to add satisfaction to individual life and the quality of relationships with others (Alberti & Emmons, 2002). Previous research among high school students in Iran
found an increase in assertiveness, resulting in a decrease in aggression (Mofrad & Mehrabi, 2015).

Altruism is a voluntary action taken by a person or group to help others without expecting anything in return (Myers, 2012). A previous study found a negative relationship between altruism and aggression; the higher the altruism, the lower the aggression, and vice versa (Rushton et al., 1986). Moreover, a study among African American adolescents found altruistic behavior in boys is critical in moderating antisocial behavior among adolescents who face community violence (Rious & Cunningham, 2018).

Previous studies have not found an intervention that simultaneously covers all aspects of adolescent emotion regulation, empathy, assertiveness, and altruism. Some studies only focus on one aspect, even though the results obtained effectively reduce the tendency of aggressive behavior. Therefore, this study develops psychoeducation to reduce the tendency of klithih behavior in adolescents by combining emotion regulation, empathy, assertiveness, and altruism. This study aimed to determine changes in aggressive behavior in adolescents before and after being given the Resipatisme psychoeducation intervention. The hypothesis proposed in this study is that Resipatisme psychoeducation may reduce aggressive behavior in adolescents. Resipatisme psychoeducation is expected to benefit the community, including the school to provide appropriate treatment early as a preventive effort against increasing cases of klithih in students. And in particular, adolescents to be able to manage their emotions and psyche so that they do not fall into aggressive behavior, especially being perpetrators of klithih.

Method

Research Design

This study used a quasi-experimental quantitative research method. A quasi-experimental design is an experiment that does not place the participant into the experimental or control group randomly (Hastjarjo, 2019). This study has no control group as a comparison due to the limited number of research participants. This study used a one-group pretest-posttest design with Resipatisme psychoeducation as an intervention for a group of research participants. The dependent variable score data was taken first before the intervention as a pretest score. The pretest score will be compared with the posttest score to determine the changes that occur after treatment (Azwar, 2017). Table 1 describes the research design of one group pretest-posttest design (Hastjarjo, 2019).

<table>
<thead>
<tr>
<th>Table 1</th>
<th>Experimental Design</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Pretest</td>
</tr>
<tr>
<td>T1</td>
<td></td>
</tr>
</tbody>
</table>

T1 : test before intervention
T2 : test after intervention
X : intervention carried out to the participants by conducting Resipatisme psychoeducation

Participants

Twenty students of a senior high school in the city of Yogyakarta who were selected using screening with the aggressive behavior scale participated in this study. The screening was administered to all grade XI students, and the scale score was also used as a pretest data.
Only students with a high tendency of *klithih* behavior or aggressive behavior based on the scale score are invited to participate in this study.

**Instruments**

The aggression behavior scale was used to collect the pretest and posttest data. The aggression behavior scale is modified from an instrument used in a previous study that contained aspects of physical, verbal, anger, and hatred (Saputra & Handaka, 2017). Based on the instrument try-out, 12 items on the aggressive behavior scale has an item discrimination index ranging from .361 to .646. The reliability index of the scale is .870. In addition, focus group discussions were carried out with participants to gather data on the causes of adolescents' aggressive behavior and to find out what they felt before and after participating in Resipatisme psychoeducation.

**The Resipatisme Psychoeducation**

The Resipatisme psychoeducation combines four psychological aspects, emotion regulation, empathy, assertiveness, and altruism. Table 2 shows the structure of the Resipatisme psychoeducation intervention plan.

**Table 2**  
*Intervention Plan*

<table>
<thead>
<tr>
<th>Meeting</th>
<th>Session</th>
<th>Activity</th>
<th>Time</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>I</td>
<td>Conducting rapport building, forming group norms, and administering pretest sheets</td>
<td>30 minutes</td>
<td>Participants</td>
</tr>
<tr>
<td></td>
<td>II</td>
<td>Emotion regulation psychoeducation</td>
<td>60 minutes</td>
<td>Participants</td>
</tr>
<tr>
<td></td>
<td>III</td>
<td>Assertiveness psychoeducation</td>
<td>90 minutes</td>
<td>Participants</td>
</tr>
<tr>
<td>2</td>
<td>IV</td>
<td>Empathy psychoeducation</td>
<td>180 minutes</td>
<td>Participants</td>
</tr>
<tr>
<td>3</td>
<td>V</td>
<td>Altruism psychoeducation</td>
<td>180 minutes</td>
<td>Participants</td>
</tr>
<tr>
<td>4</td>
<td>VI</td>
<td>Forming focus group discussions and administering posttest sheets</td>
<td>120 minutes</td>
<td>Participants</td>
</tr>
</tbody>
</table>

This study consists of several stages, as follows:

1. Interviews with guidance and counseling teachers and distributing aggression behavior scales to research participants were conducted in the first stage. The interviews were conducted to determine the participant's characteristics and record students' aggression behavior who will be the research participants. The scale score was used as an initial screening for research participants and a pretest score.

2. The second stage was conducting Resipatisme psychoeducation for four meetings within three weeks.
   a. The first meeting held two psychoeducation, emotional regulation psychoeducation, and assertiveness psychoeducation. Emotional regulation psychoeducation contained material about emotions, the introduction of emotion sheets, and the practice of breathing and muscle relaxation techniques. Participants were directed to recognize and understand their own emotions, then were trained to regulate the emotions being felt through relaxation by psychologists as facilitators. Assertive psychoeducation uses the role-play method. Participants were divided into small groups and did mini-dramas according to the case studies that had been prepared. Afterward, the participants were asked to discuss their experiences during the role-playing session.
b. Empathy psychoeducation was conducted in the second meeting. Participants were invited to watch a bullying-themed film and an interactive discussion while being given an empathy sheet. The purpose of the empathy sheet was to find out what the participants felt and did when they became a victim or perpetrators of bullying.

c. Altruism psychoeducation was implemented in the third meeting at the Indonesian Cancer Child Care Foundation Yogyakarta. Participants were directed to play and learn through science experiments with children having cancer. Gas balloon experiments, miniature volcanoes, and water ink experiments were carried out. In addition, the participants wrote down good wishes for children having cancer in a special place called the wishing tree. This altruism psychoeducation aimed to foster a sense of mutual help among participants.

3. The last stage was giving the participants a posttest within one week after the last psychoeducation. The posttest aimed to determine Resipatisme psychoeducation to reduce aggressive behavior among participants after being given the intervention.

Data Analysis

Wilcoxon test was applied to determine the difference between pretest and posttest data. Data analysis was conducted with SPSS 19.0 program.

Results

Table 3 shows the results of the Wilcoxon test analysis of pretest and posttest data on aggression behavior among adolescents. The finding shows a significant difference in aggressive behavior between the pretest and posttest scores ($Z = -3.824; p < .001$). It can be concluded that Resipatisme psychoeducation reduce aggressive behavior in adolescents. The hypothesis is accepted.

<table>
<thead>
<tr>
<th>Test Statistics</th>
<th>Pretest</th>
<th>Posttest</th>
</tr>
</thead>
<tbody>
<tr>
<td>$Z$</td>
<td>-3.824</td>
<td></td>
</tr>
<tr>
<td>Asymp. Sig (2-tailed)</td>
<td>.000</td>
<td></td>
</tr>
</tbody>
</table>

Before the intervention, the aggressive behavior of all participants was in the high category ($X > 24$). Meanwhile, after the intervention, the participants experienced a decrease in their scores. Figure 1 shows the detailed changes in each participant's scores. By observing the decrease in the score, there are three categories of participants:

1. Four participants experienced a decrease in the score of aggressive behavior but were still in the high category.
2. 14 participants experienced a decrease in the score and turned into a moderate category.
3. A participant experienced a decrease in the score and changed into a low category. However, one participant has the same score between the pretest and posttest.
Table 4 shows the pretest and posttest scores using the aggression behavior scale. It can be seen that nearly all participants have a decrease in the score of aggressive behavior and also a change in the category.

Table 4  
**Pretest and Posttest Scores**

<table>
<thead>
<tr>
<th>Name</th>
<th>Pretest Score</th>
<th>Category</th>
<th>Posttest Score</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>35</td>
<td>High</td>
<td>14</td>
<td>Medium</td>
</tr>
<tr>
<td>B</td>
<td>33</td>
<td>High</td>
<td>15</td>
<td>Medium</td>
</tr>
<tr>
<td>C</td>
<td>32</td>
<td>High</td>
<td>17</td>
<td>Medium</td>
</tr>
<tr>
<td>D</td>
<td>31</td>
<td>High</td>
<td>21</td>
<td>Medium</td>
</tr>
<tr>
<td>E</td>
<td>31</td>
<td>High</td>
<td>26</td>
<td>High</td>
</tr>
<tr>
<td>F</td>
<td>29</td>
<td>High</td>
<td>26</td>
<td>High</td>
</tr>
<tr>
<td>G</td>
<td>28</td>
<td>High</td>
<td>21</td>
<td>Medium</td>
</tr>
<tr>
<td>H</td>
<td>28</td>
<td>High</td>
<td>15</td>
<td>Medium</td>
</tr>
<tr>
<td>I</td>
<td>28</td>
<td>High</td>
<td>24</td>
<td>Medium</td>
</tr>
<tr>
<td>J</td>
<td>28</td>
<td>High</td>
<td>16</td>
<td>Medium</td>
</tr>
<tr>
<td>K</td>
<td>28</td>
<td>High</td>
<td>18</td>
<td>Medium</td>
</tr>
<tr>
<td>L</td>
<td>27</td>
<td>High</td>
<td>19</td>
<td>Medium</td>
</tr>
<tr>
<td>M</td>
<td>27</td>
<td>High</td>
<td>18</td>
<td>Medium</td>
</tr>
<tr>
<td>N</td>
<td>27</td>
<td>High</td>
<td>16</td>
<td>Medium</td>
</tr>
<tr>
<td>O</td>
<td>27</td>
<td>High</td>
<td>21</td>
<td>Medium</td>
</tr>
<tr>
<td>P</td>
<td>26</td>
<td>High</td>
<td>25</td>
<td>High</td>
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<tr>
<td>Q</td>
<td>26</td>
<td>High</td>
<td>26</td>
<td>High</td>
</tr>
<tr>
<td>R</td>
<td>26</td>
<td>High</td>
<td>20</td>
<td>Medium</td>
</tr>
<tr>
<td>S</td>
<td>25</td>
<td>High</td>
<td>13</td>
<td>Medium</td>
</tr>
<tr>
<td>T</td>
<td>25</td>
<td>High</td>
<td>3</td>
<td>Low</td>
</tr>
</tbody>
</table>

The results of the interviews obtained from the focus group discussion at the last session illustrated that the participants previously behaved aggressively both verbally and physically. They bully others, involved in student brawls, hitting, kicking, fighting, and joining motorcycle gangs. Internal family problems, being a victim of bullying in the past, defending
friends who are bullied by others, considering verbal bullying such as ridicule or cursing as joking material, and feeling satisfaction after doing violence are several main causes for the emergence of aggressive behavior. In addition, the participants admitted having difficulty recognizing and controlling their emotions during unpleasant conditions. However, after being given Resipatisme psychoeducation, the participants can recognize the emotions that were felt consciously, control the negative emotions that were being felt, dare to express what they felt when invited to negative things, and be able to empathize with the surrounding environment.

**Discussion**

The study results imply that Resipatisme psychoeducation reduces aggressive behavior among adolescents, known as *klithih*. Resipatisme psychoeducation involves four aspects, emotion regulation, empathy, assertiveness, and altruism. Several previous studies examined the role of each aspect to aggressive behavior. This study's results align with a previous study that found emotional regulation can reduce aggressive behavior in school-age children (Syahadat, 2013). Data from the focus group discussion implies before participating in emotion regulation psychoeducation, the participants have difficulty recognizing and controlling their emotions during unpleasant conditions. However, after being given emotion regulation psychoeducation, they could recognize their emotions and control the negative emotions. Based on the emotion regulation sheet results, the participants gave a high rating to the trigger of their emotions. However, the emotional rating decreased after performing breathing and muscle relaxation techniques.

The results of this study are also in line with a study on children that group plays therapy increased empathy and then reduced aggressive behavior (Iswinarti & Hidayah, 2020). Other research also found empathy training based on specific deficits can help in the intervention and prevention of certain aggressive behaviors (Yeo et al., 2011). In empathy psychoeducation, participants watched the entire film with the theme of bullying and being active during the discussion session. Based on the results of the empathy sheet filled in by the participants, after watching the film, they also felt empathy for the victim because they could feel the events experienced, the pain of being a victim of bullying, feeling sorry, sad, and wanting to help the victim. In addition, the focus group discussion results found that a sense of empathy emerged when they saw the victim of bullying. The participants did not want to be a bully like in the film because they understood that these were negative actions that hurt others.

A study among adolescents found a relationship between assertive communication skills and aggressive behavior (Yunalia & Haryuni, 2020). In the assertive psychoeducation of this study, participants were trained to dare to express their feelings and opinions to others with mini-drama role play. Each participant was tasked with playing a character in a given case study. Based on the focus group discussion session, participants could not be assertive by saying "no" when faced with situations that were not in accordance with what they wanted. However, after playing a role using a role-playing technique, the participants admitted that they were more daring to express their feelings when invited to negative things. As a result, if they agree, the participants will say agree. If not, they will refuse in the right ways.

This study result is also in accordance with research, which found that prosocial altruistic behavior was negatively related to aggression, particularly proactive aversive aggression (Persson, 2005). Based on the reflection sheet in altruism psychoeducation, the participants feel happy, satisfied, and grateful after participating in the activity. In the focus group discussion session, the participants admitted that they were more grateful for their life and became more concerned with fellow human beings without distinction.
Based on the results of group interviews after participating in Resipatisme psychoeducation, the participants admitted to being more sensitive and aware of every emotion that was felt consciously. They know how to control negative emotions that are being felt, say no and act decisively if invited to negative things, feel empathy with people who have less good conditions than themselves, and are more grateful for life and the surrounding environment. However, one participant did not experience a change in the scores. This participant was identified as unable to communicate his feelings and opinions. Therefore, he was less involved in the psychoeducation process.

Based on this study's findings, Resipatisme psychoeducation may be adapted to the conditions of the research participants and the area where the intervention is carried out. However, this study has limitations. First, not being thorough in ensuring that the school will be used as the place for the intervention because when approaching implementation, there must be permission from other parties so that schools can grant psychoeducation permits. Second, the psychoeducation schedule that has been prepared beforehand does not match the implementation, causing delays in carrying out Resipatisme psychoeducation.

**Conclusion**

Resipatisme psychoeducation is an effective intervention to reduce aggressive behavior in adolescents, known as *klithih*. A significant difference in aggressive behavior between before and after being given Resipatisme psychoeducation has been found. Participating in student brawls, bullying others, hitting, kicking, and fighting, and being members of motorcycle gangs are the type of aggressive behavior found in this study. These aggressive behaviors are caused by internal family problems, having been a victim of bullying in the past, defending a friend who is bullied by others, considering verbal bullying such as ridicule or cursing as a joke, and feeling satisfaction after doing the behavior aggression. Therefore, it is essential to understand the risk factors and forms of aggressive behavior, and Resipatisme psychoeducation may be applied to prevent *klithih* among adolescents.

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**Declarations**

**Author contribution.** All authors develop the research topics. DPPO, NAZ, LR, AA, and WSF develop research proposals and become experiment co-facilitators. DPPO, NAZ, LR, WSF, and SR develop the Resipatisme psychoeducation module. NAZ and LR prepare research instruments. AA designed all research materials. SR assists and guides research preparation and supervises research implementation.

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**Conflict of interest.** The authors declare no conflict of interest.

**Additional information.** No additional information is available for this paper.
References


