Goal Orientation and Self-Regulation of Job Readiness

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Abstract
This study aims to determine the effect of goal orientation and self-regulation on job readiness. This research method uses a quantitative approach. The subjects of this study were 82 students of the Faculty of Medicine, University of Mulawarman who were selected using a simple random sampling technique. The data collection method is by using a scale of job readiness, goal orientation and self-regulation. The data analysis technique used is multiple linear regression. The data collected was analyzed with the help of the Statistical Package for Social Science (SPSS) version 22.0 for windows program. The results showed that: (1) there was a significant effect of goal orientation and self-regulation on job readiness with a calculated $F$ value = 39.164 > $F$ table = 3.11 and a $p$ value = 0.000 and had an influence contribution ($R^2$) of 49.8%; (2) there is a significant positive effect of goal orientation on job readiness with a coefficient of beta ($\beta$) = 0.464, $t$ count = 4.426 > $t$ table = 1.990, and $p$ value = 0.000 ($p < 0.05$); (3) there is a significant positive effect of self-regulation on job readiness with a coefficient of beta ($\beta$) = 0.310, $t$ count = 2.954 > $t$ table = 1.990, and $p$ value = 0.004 ($p < 0.05$).

1. INTRODUCTION
The education system in Indonesia is divided into several levels, namely Elementary School (SD), Junior High School (SMP), High School/Vocational (SMA / K) and Higher Education (Azyz et al., 2019; Melinda, 2016). Each level of education has its own weight of duties and obligations that must be passed by each student, including students. Students have obligations in their academics such as doing various assignments with deadlines that have been determined by the lecturer, presentation of lecture materials, discussions both with lecturers and discussions in the classroom, as well as exams that are a

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requirement for student graduation to the next level (Ngbea & Kwaghgbah, 2021; Novitria & Khoirunnisa, 2022).

The tasks and obligations that must be completed by students are certainly different from previous levels when they are students (Mahajan, 2015; Nihayah et al., 2021; Novitria & Khoirunnisa, 2022). Students fulfilling obligations on campus certainly cannot be separated from the anxiety they will soon experience and not a few students are also prone to experiencing anxiety due to changes in the learning environment at certain circumstances. Thus, these obligations can make students feel what is called academic anxiety (Azza Nabila & Naqiyah, 2021; Demak & Suherman, 2019; Putri et al., 2021). Basically, the highest level of academic anxiety generally occurs in early and final year students who undergo final projects as a graduation requirement (Novitria & Khoirunnisa, 2022), but it is no exception for third semester students who are still in the stage of adapting to the increasing weight of assignments given by lecturers.

Third-semester student lectures are prone to academic anxiety due to assignments obtained at a higher level, namely universities that become more difficult (Jannata & Nur’aeni, 2020; Jia et al., 2020; Novitria & Khoirunnisa, 2022; Situmorang, 2018). In addition, the college level makes many changes to students and requires them to be able to adapt to their new environment so that new students in college generally have relatively high academic anxiety (Ramadhan, 2019).

Academic anxiety is said to be a feeling of restlessness or distress as a reaction to situations in academic institutions that are considered negative (Attri et al., 2013; Cassady et al., 2019; Hasty et al., 2021; Kayani et al., 2020). Academic anxiety causes various symptoms such as dizziness, nausea, or abdominal pain, sweating in the palms, flushed face, headaches, an increase in tone of voice when speaking, negative thoughts about failures in doing tasks, self-doubt regarding the abilities possessed, and feelings of fear when speaking in public, teachers, or lecturers. The feeling is an unpleasant emotional state for the individual who experiences it (Commodari & la Rosa, 2021; Pizzie & Kraemer, 2019).

Based on the phenomenon above, researchers conducted an initial screening to see the level of student academic anxiety. Researchers conducted an initial screening on psychology students of the class of 2021 who are currently taking the third semester of lectures. Based on the results of the screening that the researchers did, it was found that the average Psychology student of Mulawarman University class of 2021 experienced a level of academic anxiety in the medium and high categories. The subjects involved in this study were 22 people, and of the 22 people, the researchers divided the subjects into 2 groups, namely the experimental group consisting of 11 people and the control group which also consisted of 11 people.
Looking at the results of the initial screening conducted by researchers, it was felt that there was a need for intervention to reduce the level of student academic anxiety. An intervention that can be given to students to overcome academic anxiety problems so as not to cause a greater negative impact on students' mental health is to provide education about academic anxiety and ways to overcome it. In addition, several therapies can also be given to students such as Cognitive Therapy (CT), Behaviour Therapy (BT), Cognitive Behaviour Therapy (CBT), Logo therapy, Therapeutic Group Therapy (TKT), or can also be given Supportive Group Therapy (SGT).

Supportive group therapy (SGT) is a therapy given to clients both individually and in groups that aims to strengthen healthy psychological functioning and adaptive behavior patterns in clients (Azza et al., 2018; Mansouri et al., 2020; Mutiara, 2017; Palmisano et al., 2021; Rahayu & Dinni, 2021). Supportive group therapy is also used to improve an individual's ability to cope with stress, help improve the client's understanding of his or her condition, help the client meet his expectations, improve adaptation, interpersonal functioning, emotional stability, resilience in overcoming problems, as well as improve self-esteem (Brandão et al., 2019; Liyanovitasari et al., 2017; Swasti et al., 2013; X. Yang et al., 2020). This support and encouragement are needed by adolescents to increase confidence and self-esteem.

Based on the explanation above, researchers are interested in conducting supportive group therapy training with an experimental quantitative method entitled "Supportive Group Therapy in Reducing Academic Anxiety Levels" to reduce the level of academic anxiety in Psychology students of Mulawarman University so that they can realize the psychological health and well-being of students.

2. METHODS

The research method used in this study is a quantitative method of experimentation with variables bound to academic anxiety and free variables or treatment, namely supportive group therapy.

Subject of Research
The number of samples used as research was 24 Psychology students of Mulawarman University class of 2021 which were divided into 11 experimental group students and 11 control group students. The sampling technique used in this study used non-probability sampling with purposive sampling technique, which is a sample determination technique based on certain criteria or considerations (Sugiyono, 2017). The sample criteria in this study include:

a. Student
Students are individuals who are in the process of learning and are registered with universities consisting of polytechnics, academics, colleges, universities, and institutes.

b. Universitas Mulawarman psychology students 2021 who have moderate and high levels of academic anxiety scale pre-test scores.

Data Collection Methods
The data collection method used in this study used an academic anxiety scale developed by (Kaur et al., 2022) with a reliability value of 0.884 which means reliable. This scale uses a Likert-type scale. The Likert scale is used to measure the attitudes, opinions and perceptions of a person or group of people about social phenomena (Sugiyono, 2017).

This Likert-type measurement scale has two properties, namely favorable (positively supporting) and unfavorable (negatively not supporting). Each statement consists of four alternative answers, namely highly appropriate (SS), appropriate (S), non-conforming (TS), and highly non-conforming (STS). Alternative answers to the research measurement scale are outlined as follows.

Data Analysis Techniques
The data analysis technique that researchers use is to use hypothesis test analysis, namely the Wilcoxon and Mann-Whitney U tests and assumption tests, namely normality and homogeneity tests. The data normality assumption test is used to determine whether the distribution of distributed data is normal. The normality test used was to use Shapiro-Wilk, as the subjects were less than 50. The homogeneity assumption test is used to show that two or more groups of sample data come from populations that have the same variance. Data analysis techniques are processed with the help of the SPSS (Statistical Packages for Social Science) computer program version 21.0 for Windows.

3. RESULT AND DISCUSSION

Results
Before analyzing further data in the hypothesis test, it is necessary to conduct an assumption test first consisting of a normality test and a linearity test. The results of the research data assumption test are as follows:

Normality Test
The data normality test is used to determine whether the distribution of distributed data is normal. The rule used is that if \( p > 0.05 \) then the distribution is normal, on the other hand, if \( p < 0.05 \) then the
distribution is abnormal (Santoso, 2020). The normality test used was to use Shapiro-Wilk, as the subjects were less than 50.

**Table 1. Normality Test Results**

<table>
<thead>
<tr>
<th>Variable</th>
<th>Shapiro-Wilk</th>
<th>P</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experiment</td>
<td>0.834</td>
<td>0.002</td>
<td>Abnormal</td>
</tr>
<tr>
<td>Control</td>
<td>0.604</td>
<td>0.000</td>
<td>Abnormal</td>
</tr>
</tbody>
</table>

Based on the results of the test of the assumption of normality of distribution to academic anxiety variables, in the experimental group produced a value of \( p = 0.002 \) (\( p < 0.05 \)) and in the control group produced a value of \( p = 0.000 \) (\( p < 0.05 \)). Based on the rules, it shows that the distribution of the items of the pretest academic anxiety variable in the experimental and control groups is abnormal. Based on table 2 above, it can be concluded that the data has an abnormal data distribution. Thus, the data analysis is carried out in a non-parametric manner.

**Homogeneity Test**

The homogeneity test aims to show that two or more groups of sample data come from populations that have the same variance. In this study, homogeneity was tested between the experimental group and the control group, so that it was known that the data of the two groups were the same. The rule of homogeneity test is, variable data is considered homogeneous, when the \( p \)-value > 0.05. Calculations using the Levene’s test method of homogeneity test results are presented in the following table 13. The rule used in the homogeneity test is that if the value of Levene’s Test for Equality Of Variance \( p > 0.05 \) and the \( F \) value is calculated < \( F \) table at a significance level of 5% or 0.05, then the relationship is declared linear (Santoso, 2015).

**Table 2. Homogeneity Test Results**

<table>
<thead>
<tr>
<th>Levene’s Test for Equality of Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sig</td>
</tr>
<tr>
<td>0.475</td>
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</table>

Based on the table above, the calculation results show the value of the results in the experimental and control group \( p = 0.475 \) (\( p > 0.05 \)) which means that the data of academic anxiety variables are homogeneous.

After the assumption test, the researcher conducted a Wilcoxon hypothesis test, which is a test of the difference between two paired samples. The rule is that if \( p < 0.05 \), then \( H1 \) is accepted and \( H0 \) is rejected, but if \( p > 0.05 \) then \( H1 \) is rejected \( H0 \) is accepted. The results of the Wilcoxon test in the experimental group and the control group obtained the following results:

**Table 3. Wilcoxon Pretest Test Results – Posttest Academic Anxiety in Experimental and Control Groups**

<table>
<thead>
<tr>
<th>Group</th>
<th>Z</th>
<th>Sig</th>
<th>Mean</th>
<th>Information</th>
</tr>
</thead>
</table>

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Based on table 3 above, in the pretest and posttest scores in the experimental group, a statistical calculation (Z) result of -2.943 was obtained with a significance value (2-tailed) of 0.003 (p < 0.05). This suggests that H1 is accepted and H0 is rejected which means there is a difference in academic anxiety scores before and after being given supportive group therapy treatment. So, there was a significant decrease in academic anxiety after being given supportive group therapy treatment.

In the pretest and posttest scores of the control group, a statistical calculation (Z) of -0.256 with a significance value (2-tailed) of 0.798 (p > 0.05) was obtained. This showed that there was no difference in academic anxiety scores before and after in the control group that was not given supportive group therapy treatment.

The second hypothesis in the study was to determine the difference in the level of decrease in academic anxiety in subjects after (posttest) was given treatment in the form of supportive group therapy, namely the experimental group and the posttest control group that was not given treatment which can be known as follows:

**Table 4. Results of the Mann-Whitney U Academic Anxiety Test in the Experimental and Control Group**

<table>
<thead>
<tr>
<th>Group</th>
<th>Z</th>
<th>Sig</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experiment-Control</td>
<td>-3.950</td>
<td>0.000</td>
<td>Significant</td>
</tr>
</tbody>
</table>

Based on table 4 above, the posttest score in the experimental and control group obtained a calculated statistical result (Z) of -3.950 with a significance value (2-tailed) of 0.000 (p < 0.05). This suggests that H1 is accepted and H0 is rejected which means there is a difference in decreased levels of academic anxiety between the experimental group given the supportive group therapy treatment and the control group that did not provide supportive group therapy treatment.

Discussion

The results of this study prove that group therapy interventions are supportive to lower anxiety levels in academics. This is in accordance with the research of (Das et al., 2014b; Kaur et al., 2022; Rimonda et al., 2020; Sharma, 2017; Sriferina et al., 2019) positing that group therapy is one of the intervention techniques that aims to improve and solve psychological problems. These results are also supported by the advantages of group therapy itself whereby with group therapy the subject gains calmness and support knowing many people who have similar, even more severe problems (Boutin, 2007; Lai et al., 2021; Müller & Barash-Kishon, 1998; Widayati et al., 2018).

They can also learn from the experiences of others by observing how others behave and they can examine traits and reactions through
interactions with a wide variety of people, not only with therapists. With the establishment of good social relations in group therapy resulting in decreased levels of anxiety in academics, this is in accordance with research conducted by (Alam, 2017; Das et al., 2014a; Nihayah et al., 2021; Prajapati, 2020; Situmorang, 2017; Ul Rehman, 2016) stating that people who have many social ties (spouses, friends, relatives, and group members) live longer and are less prone to anxiety-related diseases than people who have little supportive social contact.

In addition, the superiority of supportive group therapy in reducing the level of academic anxiety cannot be separated from the problem of intervention in accordance with the stages that should be carried out (Garland et al., 2022; Hooda & Saini, 2017; Jia et al., 2021; Z. Yang et al., 2019). The following is an explanation of each of the stages carried out in this study. 1) The beginning stages. At this stage, the group members and the facilitator or therapist introduce themselves to each other, build an interpersonal relationship, then jointly determine the goals to be achieved, set goals and set rules that will be enforced throughout the process. In addition, therapists and members are divided into two groups and then the group explores each other and fosters mutual trust between fellow group members and between group members and therapists.

In this stage the therapist creates a structure so that the group can achieve the objectives of this stage and can enter the next stage. 2) The work stage at this stage of work the members of the group must focus on their problems and their goals following group therapy. During this process the group members also discuss the problems that are the source of the level of academic anxiety, confront the inconsistencies that occur in the group therapy process, explore the problems, and share personal knowledge and experiences with other group members. Meanwhile, the therapist keeps each member of the group focused and listens to the complaints of his members. 3) The closing stage in the final stage or closing group members measure and evaluate each other’s what they have learned, discuss plans for change, and explore their feelings during group therapy. At this stage, the group members must solve problems that have not been resolved before, then evaluate the group’s performance, and say goodbye.

4. CONCLUSION

Based on the results of data analysis and discussions that have been carried out in this study, the following conclusions can be drawn:

1. There are differences in academic anxiety levels between students before and after being given supportive group therapy.

2. There are differences in academic anxiety levels between students who take supportive group therapy and students who do not attend supportive group therapy.
Based on the explanation above, it can be concluded that the supportive group therapy training is effective in reducing the level of academic anxiety in students in the face of demanding a lot of tasks in lectures.

It is hoped that the subject can be more serious in following the process of supportive group therapy, because there are some subjects who are still looking at their gadgets while the therapy is taking place, and there are some subjects who still do not pay attention to the facilitator. In addition, the subject is expected to be more serious in doing his lecture assignments, because most of the subjects admit that they are not serious about doing the tasks at hand so most of the subjects do the tasks the day before the deadline. Most subjects also procrastinate therefore it must be reduced and the subject can map tasks according to their level of difficulty so that the subject can work in advance. Researchers should then be able to examine more broadly what can reduce academic anxiety and conduct research with more time to do. Supportive group therapy more than once so that it can be more beneficial for the subject.

Bibliography


