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The Effective Impact of Integration of Body Oriented Psychotherapy, Spirituality, and Biofeedback Techniques on Discipline Troubled Students of Technical Training Institution

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Abstract:

Multi-disciplinary integration of knowledge has been gaining traction from time to time. The contemporary techniques from a single discipline alone fall short in resolving myriads of conundrums and predicaments that are currently plaguing the society today. The social upheaval in today's society is allegorical to a virulent cancer that is fast spreading among the society. This issue ought to be dealt with expeditiously through various approaches that are deemed pertinent in assisting the members of the society to function by playing their role aptly. This research introduces a particular intervention technique developed from the modules for troubled students in Technical Training Institute (ILT). The compiled technique from all expressive movement technique, known as Body Oriented Psychotherapy (BOP) is the state-of-the-art procedure introduced to Malaysia to be administered upon troubled individuals. In the effort to acclimatize said technique with dominant norm, belief and culture of Malaysia's natives, spiritual Islamic elements are integrated into the technique, known as Spiritual Body Oriented Psychotherapy (SBOP). Said technique is also integrated with biofeedback technique to observe the impact on the student change. The effect of the techniques with and without the spiritual element is juxtaposed and evaluated. Both of techniques efficacies are tested against 56 students from Technical Training Institute in Kuantan. The resulting efficacies technique is evaluated through the relief enjoyed by the participants of the research. The finding of this research demonstrated that that both of the techniques namely, BOP and SBOP are effective in invoking relief upon the respondent, but SBOP showed better performance.

Keywords: *Body oriented Psychotherapy (BOP), Spiritual Body Oriented Psychotherapy (SBOP), Troubled student, biofeedback, Quasi eksperimental.*

1. Introduction

The matter pertaining to the moral collapse and adolescence issue have been put through a continuous study ever since its inception. A series of studies undertaken by researchers in the social field is to no avail in devising the best techniques to deal with said social problem (Sapura Sipon, 2002). This is further exacerbated with the passing of time in addition to the boundless world wherein the access space is endless for the society at large to explore. Consequently, the societal complication in terms of the behavior and norm, especially adolescence, pose to be difficult to curb. Spiritual therapy has begun to attain a center stage among therapist nowadays in light of the exhaustion of the explanations for the behavioral transition among the society in this challenging world. Indeed, a study is underway to improve the existing therapeutic technique. The existing psychotherapy technique which predominantly places a great emphasis on the cognitive and affective, is unable to assist the client with low intellectual level in resolving their respective issues (Prout & Browning, 2011). Various contemporary techniques that have been developed, catch the attention of the therapist from time to time (Mohamad & Mohamad (2014). The studies to observe the adolescence phenomena nowadays to assess the issue confronted by them, are aplenty, albeit lacks an emphasis on teen awareness. In actuality, the most pressing study is that relates teenagers with the deepest sense of awareness, in other words, teenagers should have their religious cognitive well-nurtured (Khaidzir Hj Ismail & Khairil Anwar, 2011). On this account, multi-disciplinary integration is deemed imperative to be developed so as to introduce a comprehensive change on the study clients.

2. Literature Review

2.1. Body Oriented Psychotherapy

The progress in the field of psychotherapy contributed to the conception of non-verbal intervention (Rohricht 2009). The rapid and in-depth development of therapy technique that makes use of individual physique is also termed as Body Oriented Psychotherapy (BOP)

(Röhricht 2011). The term BOP is conceived from the a variety of techniques propounded by thinkers in BOP domain, among them include, *biodynamic psychotherapy, Body-mind approach, Psychomotricity, Tai-Chi, Analytical Body Psychotherapy, Dance Movement Therapy, Rofling, Bioenergetics, Shiatsu, Yoga, Core-Energetics, body Behaviour therapy, Feldenkrais, Concentrative Movement therapy, Thymopraktik, Biosyntesis, Character Analytic Vegetotherapy, Eutonie, Hakomi, Focusing, Functional relaxation.*

Most of the studies undertaken in this BOP still revolve around the study of concepts and literature. Researchers have yet to find thorough empirical substantiation and centers upon adolescent groups or specific settings with victims of sexual abuse as an exception. Among the studies conducted by Bloch-atefi & Smith (2014), entitled *The Effectiveness of Body Oriented Psychotherapy* and published in the psychotherapy and counseling federation of Australia (PACFA). This study was conducted through a literature study on the effectiveness of BOP therapy in the counseling setting. This study was conducted as comparative the effectiveness of BOP therapy in Australia and internationally. From the aspect of mental health, this study was conducted by Rohricht (2009), entitled *Body Oriented Psychotherapy - The state of the art in empirical research and evident based practices: A clinical perspective.* The study was published in the *Journal of Body, Movement and Dance in Psychotherapy.* The findings show that BOP can help a variety of mental issues in clinical settings such as PTSD, anorexia nervosa, and schizophrenia, but the lack of research in the BOP field has yet to be recognized as one of the techniques that can contribute to the positive change of the client. Other studies conducted by Price (2002); Price (2007). The BOP study has also been taken out of clinical setting as it is also suitable for various problems involving behavior. The BOP works to reduce psychic pain and support the complete continuity of human function so as to carry on growing and promoting change (Donna, 2005). Studies conducted outside of clinical settings such as studies by Blum, (2015); Johansen, Elisabeth, & Wang, (2014) who applied BOP techniques in social settings.

2.2. *Spiritual Integration in BOP*

Spiritual interventions in counseling are not ritual ceremonies that become individual sensitivities in counseling sessions. It can be performed in a general form that does not directly touch religious issues, but guides the clients to explore and self-reflect themselves in the deepest aspect. According to Samuri et.al (2014), Corey (2009) spiritual intervention can take the form of prayer, meditation, visualization and spiritual imagery, focus, spiritual journal, bibliotherapy, adoption of the holy scriptures or literatures by religious authority, forgiveness and repentance. Among the spiritual interventions commonly employed by counselors during the counseling session are Gubi prayer, (2009); Masters & Spielmans, (2007); Donna (2015); Henry, (2013); Zarrina, (2013). This prayer element is able to produce spiritual energy that can benefit many from the psychological and health perspectives as well as being able to become an element that aids counseling sessions. The next spiritual technique is that of meditation and focus. This technique is employed by (Alwasiti, Aris, & Man, 2010; Hinton, Safren, & Pollack, 2006; Untung, Basuki, & Pd, (2013) Prayers can be categorized as meditations. Pray in Islam can exude spiritual energy through two possible mechanisms. The first mechanism is possible through establishing a direct relationship with God. According to Ladd and McIntosh (2008), prayers allow human connection with God, and this relationship provides them with very strong social partners and promotes a strong sense of control in life. It can also provide a source of reasoning for life and consciousness (Stenger 2001) and a strong emotional and motivational force (Sha- Franske 1996) Prayer is also an element of consciousness and focus on the movement and recital performed in prayer. Zikr is the remembrance of God articulated on the lips and repeated in memory. Zikr can bring tranquility and reduce the anxiety faced (Ahmad Hisham Azizan, 2009; Trading, Zirwatul, King, & Bakar, 2015).

2.3. *Biofeedback*

HRV biofeedback is the latest cutting-edge biofeedback instrument (Lehrer & Vaschillo, 2008). The term "heart rate variability" (HRV) refers to pulse change measurement in RR interval (RRIs) in electrocardiogram (ECG) (Lagos, 2008). Heart rate variability-biofeedback (HRV-BF), also known as respiratory sinus arrhythmia (RSA) biofeedback, involves a decrease in breathing rate at a frequency when HRV amplitude is maximized. This frequency is called the resonant frequency (RF) (Lehrer & Vaschillo, 2008; Lin, 2012); Vaschillo (2008), has found that one's breath stimulates the RF baroreceptor, producing a high HR amplitude due to changes in the characteristics of the cardiovascular system. This method is able to treat various autonomous nervous system problems such as nervous system failure, including asthma, post-traumatic stress disorder (PTSD), fibromyalgia, heart failure, and depression (Lin, 2012). Additionally, this method can be of great assistance in overcoming emotional instability suffered by someone (Lehrer & Vaschillo, 2008). The psychophysical model, known as HRV is a measure of continuous interactions between sympathetic and parasympathetic that influences at heart rate which carries information on autonomic flexibility. This information will guide one's emotional and emotional response (Karavidas, 2008). The results of the study evaluated the effects of dhikr and spiritual therapy on study participants using HRV were positive and contributed to the feeling of calm amongst them as evidenced in the study by Muhammad Nubli & Azham Abd Rahman, 2015; Urme Salam & Muhammad Nubli (2013).

3. **Methodology**

This study will employ the quasi-experimental design as it entails a rigorous and strong quasi-experimental design due to its similarity through random assignment (Creswell, 2012). The distribution of random subjects is highly imperative in ensuring that each member has the same opportunity to be selected as a member of the group (Wilson & MacLean, 2011). The design of this study also uses pre and posttest. The pre and posttest design is used to see the effects of treatment given. Pre-test provides measurements to an attribute or character accessed from the study participants before they receive treatment. And the post-test is a measurement to measure the attribute or character of the study participants after undergoing training (Creswell, 2012).

The research group is divided into two groups namely treatment groups and control groups. The treatment group received a spiritual-oriented module treatment while the control group received the BOP module only. The use of more than one of these experimental groups is to determine which approach is more effective, appropriate and significant to deliver the contents of the module. Sampling method is user friendly for researcher in this study. This method is selected due to the equal opportunity it provides to be involved as a research participant (Creswel, 2012).

For clinical experimental studies, the tools used were Heart mart biofeedback tools along with the software programmed in the laptop of the researcher. HRV value readers are taken before and after the study. The instrument used in this method is shown as per figure below.



Figure 1: Heart Math EM Wave Tools

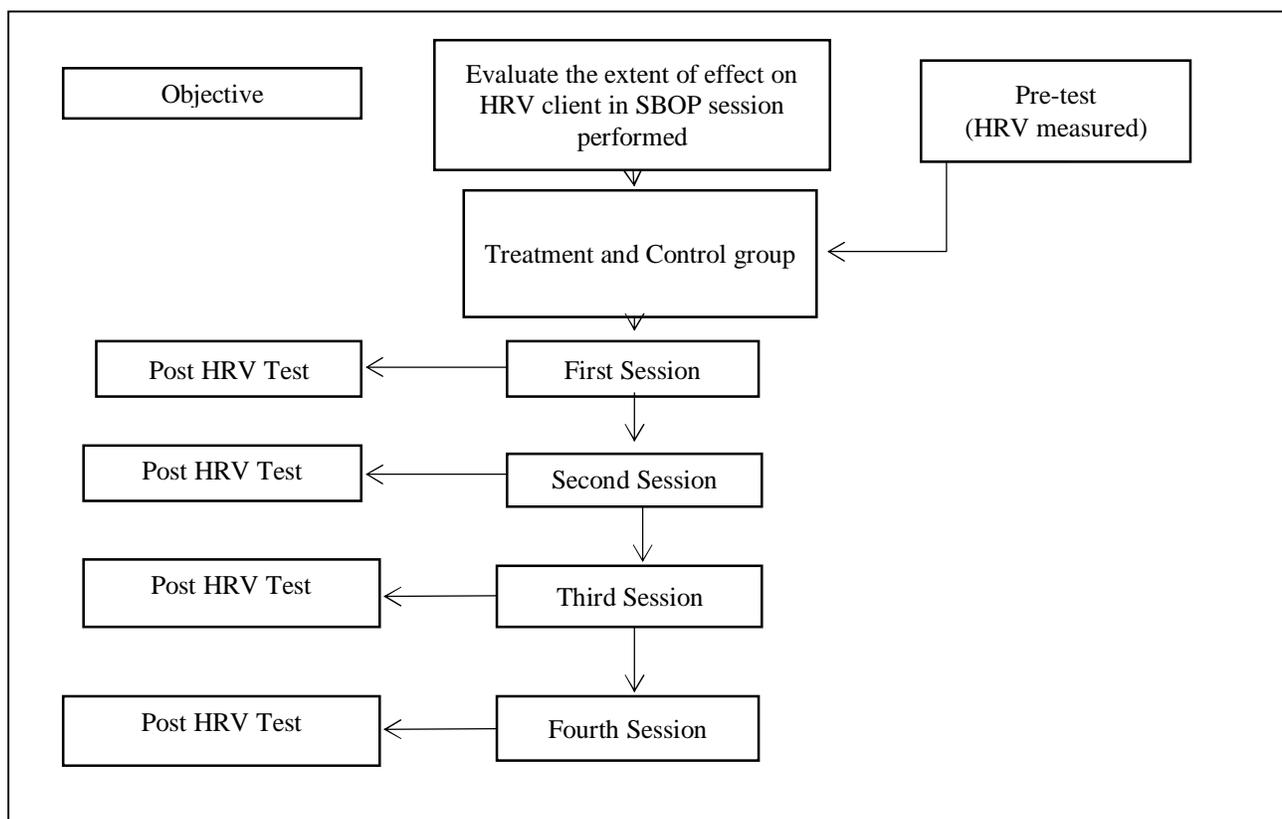


Figure 2: Research Procedure

Based on the diagram 2 above, the field study was commenced with pre-study sessions first followed by traditional BOP and SBOP therapy sessions which were integrated with spiritual elements. Upon completion of each session, the study participants will go through the Emwave biofeedback test to obtain the HRV data of the study participants. Data per session is recorded to see the impact of changes on the students who undergo BOP and SBOP module exercises.

4. Research Finding

Category	Group	Test	Min	SD
Very Low Frequency	BOP (Control)	Pre	69.9	22.8925
		Post	12.5	10.0646
	SBOP (Treatment)	Pre	60.5	27.4800
		Post	4.4	6.5622
Low Frequency	BOP (Control)	Pre	18.4	15.2369
		Post	19.9	8.5024
	SBOP (Treatment)	Pre	21.9	18.8384
		Post	11.4	11.3380
High Frequency	BOP (Control)	Pre	11.9	13.3482
		Post	66.8	10.8014
	SBOP (Treatment)	Pre	17.4	17.5424
		Post	84.2	13.1517

Table 1: Mean and standard deviation for VLF, LF and HF for treatment and control group

Based on the table above, HF demonstrates the sense of relief experienced by the study participants. Mean difference can be seen between the group i.e. pre-session, pretest VLF shows high mean for both groups of 69.9 and 60.5. The high mean of VLF indicates that the study participants are experiencing high pressure problems. The VLF value shown by the study participants at the same time affects the value of HF study participants. Initially the pre-HF values were low for control groups and treatment groups. The HF min value of the control group was 11.9 while the pre-HF value for the treatment curve was 17.4. The change is evident in the post-test test that the VLF value starts to decline for both treatment and control groups making each with a value of 12.5 and 4.4. The decline in VLF value indicates that the BOP and SBOP modules have an impact on the stress faced by students who have disciplinary problems in the Institution. Post HF values showed a high increase in both treatment groups and control groups with mean values of 66.8 and 84.2 respectively. This shows a significant difference between BOP and SBOP modules against LF and VLF changes.

Sources	SS	df	Mean square	F	Sig.
category * group* Test	2007.804	2	1003.902	4.033	.019
	80649.286	324	248.918 ^f		

Table 2: Test relate the effect of the subject

The hypotheses were significant with the significant differences between the treatment group and the control group through the F value of 4.033. The results showed significant differences in the BOP module (control group) and SBOP (Treatment Group) between pre-test and post-exposure test in the HRV power spectrum.

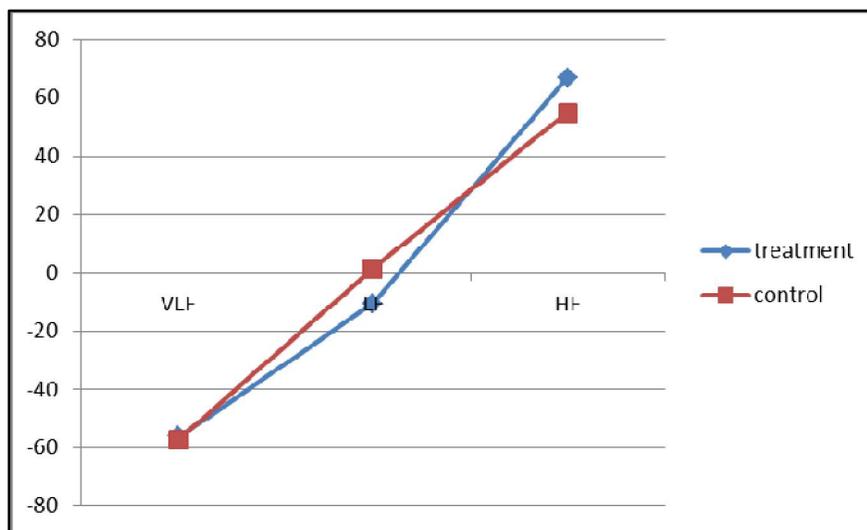


Figure 3: Visual image difference of HRV between treatment and control.

5. Discussion and Limitation

The SBOP concept is one of the new methods used as one of the interventions that helps students with disabilities in ILT. The results of the intervention conducted showed that students at ILT showed significant changes after undergoing the intervention module. Among the effects of the module on the student is the effect of relief i.e. catharsis seen through the emotion of emotion and strongness

when completing an activity performed. The results of this study were supported by a study conducted using an extracurricular technique (Mohamad & Mohammad, 2015). Additionally, the study uses this method to provide a great opportunity to deal with the problems faced by the student by simply doing movements that stretch the body. This technique also reduces the pressure on the body that causes the human body to feel less pain. As a result of these techniques impact the academic and practical performance of troubled students able to control the problems faced from outside the Institution on their own by using only the resources available on the body.

The effective effect of the module integration was proven through the results of the study. The three integrated components show a good and positive study result. BOP technique is one of the body-based psychotherapy techniques that are rarely used in counselling settings especially in Malaysia. So far, only expressive art techniques are used in counselling and psychotherapy sessions. Even the use of this technique creates the enrichment of therapeutic field with new teammate introduction and at the same time this technique is very suitable and compatible is used by students especially technical flow students because this technique does not focus on cognitive and affective like Prout & Browning (2011) This study is very helpful in helping students to build self-confidence and to develop student identity. This technique also helps students to deepen their inner self and while at the same time helping to treat psychological problems in a subconscious state

Therapeutic integration serves as one of the intervention techniques; this therapy is also identified as one of the client's self-exploration techniques in counseling sessions. The results of this study are supported by (Malchiodi, 2005). Extensions can be identified when respondents use members as much as repeated movements. Increasing the spiritual integration technique makes this technique more complete by adding the focus element that forms to embodied feelings within the client. The results of this study are consistent with the results of the study by (Blum, 2015; Wiggins, 2014). This technique is also able to build high self-confidence and self-esteem among ILT students. This result is supported by a study by Schuyler (2010).

Spirituality integration also provides a clear goal to the client during the study session. The variety of spiritual techniques used in this study is the appropriate technique amongst the study groups such as the Fatimah Purwoko (2012) meditation technique; Norizan & Nubli (2016). Zikir techniques (Ahmad, Suliaman, Ariffin, & Zulkifli, 2014); Che Haslina Abdullah, 2013; Ikrom, 2008; Salam et al., 2012; Salasiah Hanin Hamjah & Noor Shakirah Mat, 2013; Sholikhah, 2009) Muhasabah technique. All of these components were conducted in the session and the researchers provided homework to the study participants. The findings reveal that the integrity of this spiritual technique gives rise to god's dependence, while at the same time establishing a good personality and personal character of a good self-esteemed self-respecting personality, timely and unwilling to stuck in discipline.

The biofeedback technique used to measure the psychophysical changes of the study participants using SBOP module scripts also showed a positive effect. Higher HF scores were different before the end of the study and after the study showed that the third integrase of these three elements creates secrecy. This selem only covers all of these techniques separately, but this combination combines an effective method of intervention to assist in the cognitive, affective, behavioural and student spirituality.

However, each study has some limitations that need to be fixed. The limitation in this study is that this study is conducted only on a small scale of 56 ILT students in Kuantan. This study cannot be generalized to the public. This study also has weaknesses from the respondents i.e. only problematic students from the Technical Training Institute only involved in this study. The limitation of the study participants led to the results of this study only suitable for this group of students. Therefore, this study needs to be developed to some other social groups in society.

6. Conclusion

Application of a new module that is appropriate to the teenage condition is very important. Innovations and research in social development and social quality enhancement need to be continued to ensure that interventions provided to the community are relevant and in line with current needs. Even academicians and the community need to be open to accepting innovation in their field of profession to create a parallel community development, knowledge, skills, ideas and personality that eventually become a prescription that affects teenagers' problems.

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