

## IMPLEMENTATION OF PSYCHOLOGICAL FIRST AID MODULE TO IMPROVE SKILLS IN PROVIDING PSYCHOLOGICAL SUPPORT PEERS AT STUDENTS

Agit Purwo Hartanto<sup>1</sup>, Lukman Harahap<sup>2</sup>, Athia Tamyizatul Nisa<sup>3</sup>

<sup>1,2,3</sup>Universitas Islam Negeri Raden Mas Said Surakarta

Corresponding Email: [agit.purwohartanto@staff.uinsaid.ac.id](mailto:agit.purwohartanto@staff.uinsaid.ac.id)

### Article Information

Received : December 20, 2024

Revised : December 21, 2024

Accepted : December 23, 2024

### Abstract

Psychological first Aid (PFA) is first aid for someone who experiences mild mental health disorders. Through mastery of PFA skills, students are expected to be able to provide support to peers who are experiencing mental health disorders. This study aims to test the effectiveness of the PFA Module to improve soft skills related to providing psychological support to peers in UIN Raden Mas Said Surakarta students. The design used in this study was Pre-experiment with 30 students. After the analysis was carried out with the T-test, the results obtained were  $p < 0.05$ , meaning that the hypothesis was accepted. In conclusion, the PFA module is effective in improving soft skills in students, especially in providing psychological support to peers.

**Keywords:** psychological first aid, module, support

### Introduction

Student life in college is dynamic, followed by existing problems. According to Gale and Parker in Cage et al., (2021), the college environment is identical to a series of potentially challenging changes. Changes begin before entering college, including changes between years, then leaving and entering the workforce or postgraduate studies. Overall, students must understand who they are and how they adjust to college life. Going through the transition can be psychologically demanding and has the potential to play an important role in students' mental health.

Several issues have been identified that reflect that students are at risk of having poor mental health. The results of the study showed that 46% of students at College X had poor mental health status (Suryanto & Nada, 2021). On the other hand, mental disorders are a risk factor for suicide attempts (Ayuningtyas & Rayhani, 2018). In fact, there were 5 cases of student suicide throughout 2023 (Damayanti, 2023). According to Idham et al., (2019) the level of suicidal ideation and attempt tendencies of students is at level 2 categorization (High and Low), where 58.1% have a high tendency of suicidal ideation and attempt tendencies. Real efforts should be made to reduce the negative impacts of mental health problems among students.

According to Hurlock, adolescence is divided into 2, namely early adolescence which is at the age of 13-17 years and late adolescence which is at the age of 17-21 years (Ammang et al., 2017), while students are on average 17-21 years old. One of the

characteristics of adolescents is developing positive social attitudes with peers. Intense interaction with peers will be the beginning of friendships and peer relationships (Nisfiannoor & Kartika, 2004). Utilizing the role of peers is expected to minimize the impact and become a preventive effort in relation to mental health disorders experienced by students. Therefore, increasing the role of peers is very much needed. It is hoped that peers will not only be friends of students when doing assignments and socializing, but also have a role when students have mental health problems.

Increasing the role of peers among students is one of them by understanding the concept and practice of Psychological First Aid (PFA). PFA consists of a series of systematic assistance actions aimed at reducing early post-traumatic stress and supporting short- and long-term adaptive functioning. PFA is designed as an initial component of a comprehensive disaster/trauma response. PFA is built on eight core actions, namely contact and involvement, safety and comfort, stabilization, information gathering, practical assistance, relationships with social support, information about support for coping with problems, and relationships with collaborative services (Reschke et al., 2007).

Based on a preliminary study conducted at UIN Raden Mas Said Surakarta, the majority of students do not know about the concept and use of PFA. Therefore, there is a need to develop a Psychological First Aid (PFA) module in relation to increasing peer social support for UIN Raden Mas Said Surakarta students. Supported by the statement of Reschke et al., (2007) that the development of the PFA Field Operations Guide is very necessary. It is further explained that PFA for adolescents focuses on the same core actions, with modifications to suit their development. PFA is knowledge that can be learned and shared by all groups, especially in the context of preventing and handling difficult problems that arise in life (Prasetyo et al., 2020).

Previous research shows that PFA has a significant impact in relation to mental health management. Wastuti & Izar (2020) explained that there is a significant influence on the implementation of PFA in reducing student anxiety. Furthermore, according to Edmawati et al., (2022), there is a difference in the average mental health awareness score between before and after Psychological First Aid Training, so that PFA Training is effective in increasing mental health awareness in adolescents in the Covid-19 pandemic era. Meanwhile, according to Prasetyo et al., (2020), PFA psychoeducation is an initial activity in disseminating ideas related to the importance of psychological support to prevent suicidal behavior in adolescents. The research to be conducted focuses on module development and implementation as a guide field operations especially for UIN Raden Mas Said Surakarta students in terms of improving peer social support capabilities in order to create good mental health.

Psychological First Aid (PFA) is the provision of first psychological assistance to relieve emotional reactions to traumatic events and personal crises experienced by using the concept of strengthening resilience. Asih, Utami and Kurniawan (2021) explain that PFA is the first response in a relatively short duration given to someone who is experiencing psychological stress due to a traumatic event or causing anxiety or even stress. WHO (2011) explains that PFA is a basic treatment that is practical, supportive, humanistic to create a sense of comfort and security, calm and full of hope for victims or their families. PFA is not a traditional professional or psychiatric mental health care, but rather a strategy to reduce stress reactions by providing additional support to those affected by traumatic or emergency incidents. Edmawati, et al. (2023) explain that PFA is a method used to provide support to someone who is experiencing stress or anxiety to be calmer in facing life's problems and challenges. The support provided can come from various parties such as peers.

PFA is designed to reduce the initial distress caused by a traumatic event and to promote short- and long-term adaptive functioning and coping. Eweida, et al. (2022) explained that PFA is recommended to deal with crisis situations such as those that occurred during the Covid-19 pandemic, everyone experiences anxiety related to the impact of the virus. So that professional nurses are not able to overcome the panic situation, what is needed is to equip every medical personnel to master PFA in order to be able to neutralize anxiety and anticipate conditions getting worse by providing educational information. The core actions of PFA are the basic goal of providing initial assistance within a few days or weeks after an event. Someone who provides assistance in the form of PFA must be flexible, and base the amount of time they spend on each core action on the needs and concerns felt by the victims. These core skills are designed to help address the needs and concerns of victims and the helper. PFA is designed for delivery in a variety of anxieties. Zhang, et al. (2022) through his research explained that PFA has been internationally recognized to provide early psychological support to the general public by both professionals and non-professionals. So that the provision of PFA services does make a positive contribution to the mental health of the community and can be carried out by non-professionals.

Furthermore, the positive contribution of PFA was also conveyed by Kilic and Simsek (2019) that providing skills to the community related to providing first aid to someone who needs psychological support when facing problems that have an impact on their life stress, so PFA is one of the recommended methods to be carried out. Urusano (2022) explains the 8 keys to PFA including (1) contact and involvement, meaning that eye contact and attention are needed and an accepting attitude to provide comfort to PFA recipients. (2) Security and Comfort are actions that aim to improve immediate and ongoing safety, as well as provide physical and emotional comfort. Furthermore, (3) Stabilization is an effort to calm and direct victims who are experiencing emotional disorientation.

Then the next key (4) Collecting information about current needs and concerns is used to identify needs, feelings felt and collect additional information and adjust the interventions needed in PFA. (5) Offering practical assistance to victims in dealing with urgent psychological needs due to the crisis being experienced. (6) Social Support Relations are used to establish brief contact with victims and try to provide primary support while seeking other sources of support such as family, other friends and community assistance resources. In addition, PFA providers can also (8) provide information on how to cope with stress and reduce pressure and improve adaptive functioning. Finally (9) PFA needs to carry out collaborative services so that the services provided can provide optimal impact in efforts to increase resilience and maintain mental health.

PFA certainly has a purpose as previously explained in the basic concept of the definition of PFA. Prianka, Laras, and Sirait (2022) explain that the purpose of providing PFA can overcome distress in adolescents in Indonesia. So that it can prevent depression and other more severe mental health disorders. Edmawati, et al. (2023) stated that providing PFA aims to help individuals who are facing difficult situations from a psychological perspective to get social support that can provide comfort to regulate emotions and reduce stress. Furthermore, Sahrah, Rengganis, and Yuniasanti (2023) explained that providing PFA can provide a sense of security and comfort and increase the resilience of victims in facing life's problems. In addition, PFA also aims to reduce excessive anxiety and worry about an event. Referring to several of these opinions, the purpose of providing PFA to provide comfort and security in regulating emotions, increase resilience, and prevent depression in a person due to events that can suppress their psychological condition.

There are several steps in implementing PFA in an educational environment. Wong (2020) explains that in implementing PFA, a helper needs to carry out 4 stages, namely listen, protect, connect, and model. The first step is listening, the helper needs to provide an opportunity for the person being helped in this context is someone who is experiencing a crisis to express more freely about what is felt explicitly and in detail. The helper can also ask some opening questions related to the conditions that are happening to him. At this stage, the helper needs to build trust as soon as possible so that the person who is experiencing the problem is open to telling the events that happened to him.

The next step is protect, in this step the helper tries to build physical and emotional security and provide support that the helper is on the side of the person being helped. So that this bias can provide a sense of security and comfort to the person being helped. Simple actions that can be taken in this step include taking him to a safe and comfortable place, then asking about basic needs that can be met (getting tissues, or offering water), then observing to identify other needs that are needed to feel safe. In this step the helper can make various efforts such as providing enlightening information or reinforcement that can foster self-efficacy to rise from the slump and be sure that he will be able to overcome the difficult situation, thereby increasing his resilience to have the resilience to develop beyond the current conditions to move to a better level of quality of life.

Then the next step is connect. At this stage, the helper begins to rebuild self-confidence in the person being helped. In difficult and traumatic situations, the most common is emotional and social isolation and a sense of loss of social support. In certain situations, there are conditions where people are sad and remember past events, so the helper can use techniques that can be used to return the person being helped to the "now" and "now". And not in the past condition that made him sad. So that the helper restores his social relations in the environment so that he can return to living a normal life as before the difficult situation came into his life. The last step in PFA is modeling, the helper can provide concrete examples as modeling to raise spirits from the depressed condition that many individuals experience the same problems but can overcome difficult situations well and return to living life as whole individuals. This means that in this session the helper wants to provide reinforcement and concrete evidence that he is not the only one experiencing these problems and situations, there are many people experiencing them and can rise from their slump.

The provision of PFA is a real form of providing social support. In essence, humans are created as monodualism creatures. Having a dual role as individuals who certainly have their own life goals and as social beings who have a moral responsibility to carry out social interactions and social support as well as social concern in daily life. Social support refers to social assets, social resources, or social networks that can be used when needed assistance, advice, approval, help, comfort, protection so that individuals feel cared for and appreciated which then leads to contributions to psychological well-being.

Social support is a reciprocal interpersonal relationship exchange where one person provides assistance to another. Social support is positive assistance or support given by certain people to individuals in their lives and in their social environment so that individuals feel accepted, cared for, comfortable, appreciated, respected and loved (Sarafino and Timothy, 2011; Taylor, 2009; King, 2012). Social support is manifested in various forms, including emotional support, appreciation support, instrumental support, information support and social network support (Taylor, 2009; Sarafino and Timothy, 2011; , Olsson, Hagekull, Giannota, and Ahlander, 2016).

Furthermore, social support has benefits for someone to be able to maintain their mental health. Social support can make someone feel meaningful in their social life, help solve problems and burdens in their life, facilitate all activities carried out and prevent someone from experiencing problems (Sarafino and Timothy, 2011; Antaniou and

Cooper, 2005; Olsson, Hagekull, Giannota, and Ahlander, 2016). Referring to this opinion, social support is needed to prevent someone, especially students, from getting caught in a crisis situation. Students are individuals who are studying life and certainly have various problems. The various problems faced by students are a challenge in themselves. Murni, Ananda and Mukhyar (2023) explain in their research that students have complex problems related to personal, social, career and academic problems. Fatchurrahmi (2022) explained that students also experience the threat of a quarter-life crisis. So that this threat can endanger the mental health of students.

The problems that are challenges for students need to get social support by providing PFA. In implementing PFA, a guide in the form of a module is needed so that the implementation of PFA can be applied systematically. The module in implementing PFA contains basic concepts, intervention objectives, techniques used and steps in implementing PFA. So far, there is no concrete guideline regarding the implementation of PFA in a university environment. In fact, students' understanding of the implementation of PFA is very important. Therefore, it is necessary to develop a module to equip students to be skilled in responding immediately to other people who are in need of psychological assistance, including efforts to strengthen social sensitivity according to its nature.

## Method

This study uses a quantitative approach with a pre-experimental design. This design uses a comparative score between the pretest, namely before the intervention in the form of providing the PFA module and the posttest, namely after the module is given. The subjects of this study were 30 students of the State Islamic University of Raden Mas Said Surakarta. The subject selection technique was purposive sampling with the criteria of UIN Raden Mas Said students who did not yet have PFA skills and moderate social support.

The technique of data collection in this study used the Peer Psychological Support questionnaire. According to Creswell (2015), a questionnaire is a data collection technique in which respondents are presented with a series of questions or written documents to be answered. Survey questions are divided into two types: open-ended and closed-ended, with the number of questions. Open-ended questions are questions that require respondents to write down answers in the form of an explanation of something. While closed questions are questions that expect short answers or require respondents to choose alternative answers from all available questions.

The Peer Psychological Support questionnaire includes understanding the definition, stages of PFA, implementation of PFA, emotional support, tangible or instrumental support, information support, companion support. The results of the analysis with the help of Microsoft Excel with Pearson correlation, the results of 25 items are only item number 11 which is invalid or does not meet the requirements, the calculated  $r$  is lower than the table  $r$  (0.2319). Then the results of the reliability value  $<0.05$  (0.798) means that the instrument meets the criteria for high reliability. So based on a series of instrument trials that have been carried out, the instrument is suitable for use to measure PFA competence. The scale used by both instruments uses a Likert scale. The analysis technique used was the t-test.

## Result and Discussion

Before conducting a hypothesis test, prerequisite tests need to be carried out, namely the normality test and the homogeneity test. In the Normality Test, Kolmogorov-Smirnov  $\alpha$  is used, which is part of the classical assumption test. The normality test aims to determine whether the residual value is normally distributed or not. A good regression

model has a normally distributed residual value. The basis for decision making if the Sig. value  $> 0.05$  then the residual value is normally distributed. If the Sig. value  $< 0.05$  then the residual value is not normally distributed. Residual normality testing is carried out using the Kolmogorov-Smirnov Test statistical technique. Residual normality test results with Kolmogorov-Smirnov shows an Asymp.Sig value of 0.004. Based on the output table, the Asymp.Sig test value  $< \alpha$  value (0.05), so it can be concluded that the residuals of the regression model are not normally distributed.

Homogeneity test is a statistical method used to test whether two or more data groups have the same variance (data distribution). In the context of statistical analysis, equality of variance means that the data groups have the same level of variance, an important consideration in many statistical tests such as ANOVA (analysis of variance). If the equality test shows that the differences between groups are not significantly different, then the assumption of equality of variance is met and the analysis can be carried out more precisely. Conversely, if the differences are different, a different analysis approach is needed. This study uses the Levene test as a homogeneity test technique. The results of the homogeneity test with Levene show an Asymp.Sig value of 1,000. Based on the output table, the Asymp.Sig test value  $> \alpha$  value (0.05), so it can be concluded that the data is homogeneous.

Referring to the prerequisite test that the data is not normal and homogeneous, the hypothesis analysis used is non-parametric data analysis with the Wilcoxon test. The descriptive data is described as follows.

**Table 1. Descriptive Statistics**

Kategori	Nilai
Minimal	149.95
Maksimal	215.01
Mean	178.87
Standar Deviasi	16.284
Jumlah Responden	30

Based on table 1, it can be seen that the minimum value of the subject is 149.95, then the maximum value is 215.01 with an average value of 178.87. Then after the Wilcoxon test was carried out with the help of SPSS 26, the following data were obtained.

**Table 2. Hypothesis Test Statistics**

Test Statistics <sup>a</sup>	
	Posttest - Pretest
Z	-4.548 <sup>b</sup>
Asymp. Sig. (2-tailed)	.000

a. Wilcoxon Signed Ranks Test  
b. Based on negative ranks.

Referring to table 2, the p value  $< 0.05$  means that  $H_a$  is accepted or in other words that the Module is effective in improving Psychological First Aid (PFA) in Students. So it can be seen that the Module that has been developed can have a significant effect in developing students' PFA skills as an effort to provide peer social support.

The implemented module is actually a product of development and has now reached the limited field test stage. Waruwu (2024) explains that limited field tests are used to test the effectiveness of a product to improve PFA skills in students. The method used for limited field tests is the experimental method with the results of  $H_a$  being accepted, meaning that the developed module is effective in improving PFA skills in

students. Mangesa and Mappiasse (2019) similarly explain that modules can be used to improve competency effectively. Furthermore, Mandasari (2022) also explains that the effectiveness of modules can improve learning outcomes. Referring to several studies, it shows that modules are an effective means to help users master competencies that will be achieved independently. So this is in accordance with the research and development of modules carried out in the development of PFA modules to improve the quality of UIN Raden Mas Said students in providing peer support through the implementation of psychological first aid (PFA) which is expected to reach all UIN Raden Mas Said students because of course the University's ability is limited to hold PFA training for all students so that the development of this module is expected to be a solution for universities in particular and the community in general.

Peer support is claimed to provide psychological benefits. Individuals who receive positive peer support are able to form good mental conditions. Ali et al., (2015) reviewed the effectiveness of online peer support for young people related to mental health problems. The targets of mental health problems include depression and anxiety, general psychological problems, eating disorders, and drug use (tobacco). Still related to mental health, Oluwaseyi (2024) explained that peer support has been shown to be very beneficial for mental health and well-being. Through the provision of emotional, informational, and practical support, peer support offers unique benefits that help overcome specific challenges.

## Conclusion

Referring to the research results and discussions that have been presented, it can be seen that the PFA module is effective in increasing social support in providing positive assistance to peers. Through the implementation of PFA, students will have the skills to provide first aid to students or others. In addition, the use of the module as a learning tool makes it easier for everyone to learn it independently with flexible time. So it is hoped that the results of this study can be used by the community to be aware of the response to poor psychological conditions and be able to provide first aid contributions to everyone who needs help.

## References

- Abadijah, N. D., Ulfa, T. Y., Rahmania, S. D., Nadia, G., Febrianti, E., Kanthi, S. R., & Sholikhah, Z. (2015). Meningkatkan empati pada siswa di sekolah dasar inklusi dengan metode reinforcement dan media bangku pertemanan.
- Alaei, M. M., & Hosseinneshad, H. (2020). The Development and validation of peer support questionnaire (PSQ). *Journal of Teaching Language Skills (JTLS)*, 39(2), 67–109. <https://doi.org/10.22099/jtls.2021.38853.2906>
- Ali, K., Farrer, L., Gulliver, A., & Griffiths, K. M. (2015). Online peer-to-peer support for young people with mental health problems: A systematic review. *JMIR Mental Health*, 2(2), 1–9. <https://doi.org/10.2196/mental.4418>
- Amin, Z. (2017). Portofolio teknik-teknik Konseling. *Journal Mahasiswa UNNES*.
- Aminah, S. (2018). Pentingnya mengembangkan ketrampilan mendengarkan efektif dalam konseling. *Jurnal EDUCATIO: Jurnal Pendidikan Indonesia*, 4(2), 108–114.
- Ammang, W., Sondakh, M., & Kalesaran, E. . (2017). Peran komunikasi keluarga dalam mengatasi perilaku merokok pada anak usia remaja. *Acta Diurna*, VI(1), 1–14.
- Antonioni, A.S.G. dan Cooper, C. L. (2005). *Research companion to organizational health psychology*. Northampton : Edward Elgar Publishing Limited



- Asih, M. K., Utami, R. R., & Kurniawan, Y. (2018). Psychological first aid (PFA) untuk Pendamping balai pemasyarakatan (Bapas Kelas 1) Semarang. *SNKPPM*, 1(1), 450-453.
- Asih, Gusti Y. & Pratiwi Mageretha M.S. 2010. Prilaku Prososial ditinjau dari empati dan kematangan emosi. *Jurnal Psikologi Universitas Muria Kudus*. Vol.1 No.1
- Asmani. (2010). *Panduan efektif bimbingan dan konseling di sekolah*. Yogyakarta: DIVA Press.)
- Ayuningtyas, D., & Rayhani, M. (2018). Analysis of mental health situation on community in indonesia and the intervention strategies. *Jurnal Ilmu Kesehatan Masyarakat*, 2018(1), 1–10. <http://www.jikm.unsri.ac.id/index.php/jikm>
- Cage, E., Jones, E., Ryan, G., Hughes, G., & Spanner, L. (2021). Student mental health and transitions into, through and out of university: student and staff perspectives. *Journal of Further and Higher Education*, 45(8), 1076–1089. <https://doi.org/10.1080/0309877X.2021.1875203>
- Cahyono, W. (2015). *Psychological first aid: Sebuah kesiapsiagaan dari kita untuk kita*. E- book). Pusat Krisis Fakultas Psikologis Universitas Indonesia, Depok.
- Creswell, John W. (2015). *Penelitian Kualitatif & Desain Riset*. Yogyakarta : Pustaka Pelajar.
- Demaray, M. K., Malecki, C. K., Davidson, L. M., Hodgson, K. K., & Rebus, P. J. (2005). The relationship between social support and student adjustment: A longitudinal analysis. *Psychology in the Schools*, 42(7), 691–706. <https://doi.org/10.1002/pits.20120>
- Dennis, C. (2003). *Peer support within a health care context: a concept analysis*. 40(April 2002), 321–332.
- Edmawati, M. D., Susanto, B., Maulana, M. A., & Kumalasari, R. (2022). Psychological first aid training untuk meningkatkan mental health awareness pada remaja di era pandemi covid-19. *Jurnal Terapan Abdimas*, 8(1), 1. <https://doi.org/10.25273/jta.v8i1.12362>
- Efendy, M., & Nainggolan, E. E. (2022). Pendekatan behavioral untuk mengurangi perilaku mengganggu pada siswa di sekolah. *Jurnal Pendidikan dan Konseling (JPDK)*, 4(6), 12653-12661.
- Eweida, R. S., Rashwan, Z. I., Khonji, L. M., Shalhoub, A. A. B., & Ibrahim, N. (2023). Psychological first aid intervention: rescue from psychological distress and improving the pre-licensure nursing students' resilience amidst COVID-19 crisis and beyond. *Scientific African*, 19, e01472
- Fatchurrahmi, R., & Urbayatun, S. (2022). Peran kecerdasan emosi terhadap quarter life crisis pada mahasiswa tingkat akhir. *Jurnal Psikologi Teori dan Terapan*, 13(2), 102-113
- Fradinata, S. A., & Sukma, D. (2023). Keterampilan Dasar konselor dalam melakukan konseling individu. *Jurnal Ilmu Pendidikan dan Sosial*, 2(2), 119-128.
- Hariastuti, dkk. (2007). *Keterampilan-keterampilan dasar dalam konseling*. Unesa University Press
- Hehanussa, J. M. N. (2023). Konseling pastoral dan seni berkomunikasi. *GEMA TEOLOGIKA: Jurnal Teologi Kontekstual dan Filsafat Keilahian*, 8(2), 219-238.
- Heaney, C. A., & Israel, B. A. (2008). Social networks and social support. In K.Glanz, B.K. Rimer, & K. Viswanath (Eds.), *Health Behavior and Health Education: Theory, Research, & Practice* (4th ed., pp. 189–210). San Francisco, CA: John Wiley & Sons; Jossey-Bass



- Idham, A. F., Sumantri, M. A., & Rahayu, P. (2019). Ide dan upaya bunuh diri pada mahasiswa. *Intuisi*, 11(3), 177–183. 2023.
- Kurniawan, M. F., & Ernawati, S. (2020). Proses Konseling individu dengan teknik reinforcement untuk meningkatkan motivasi belajar pada anak tunarungu (studi kasus di Yayasan Dharma Anak Bangsa) (*Doctoral dissertation*, IAIN SURAKARTA).
- Kılıç, N., & Şimşek, N. (2019). The effects of psychological first aid training on disaster preparedness perception and self-efficacy. *Nurse education today*, 83, 104203.
- King, A. Laura (2012). *Psikologi umum*. Jakarta : salemba Humanika.
- Lianawati, A. (2018). Implementasi keterampilan konseling dalam layanan konseling individual. In *Seminar Nasional Bimbingan dan Konseling Jambore Konseling 3. Ikatan Konselor Indonesia (IKI)*.
- Lumongga, N. (2017). *Orang Kelompok*. Jakarta: Kencana.
- Martha Kurnia Asih, R. R. (2021). Psychological first aid (pfa) untuk pendamping balai masyarakatan (Bapas Kelas 1) Semarang. *Tematik*, 36-37.
- Monalisa, Y. M., Andika, Y., & Savitri, D. (2022). Teacher's emotional approach to students in Monsieur Lazhar film and film La Cour de Babel. *Franconesia*, 1(2), 87-94.
- Mulyasa, E. (2019). *Menjadi guru profesional; menciptakan pembelajaran Kreatif dan Menyenangkan*, (Bandung: PT Remaja Rosdakarya, 2010), 77-78.
- Murni, D., Ananda, A., & Mukhaiyar, M. (2023). Problematika mahasiswa yang gagal dalam perkuliahan (studi fenomologi pada mata kuliah aljabar linear elementer). *Menara Ilmu*, 17(1). Halaman 223-232
- Nisfiannoor, M., & Kartika, Y. (2004). Hubungan antara regulasi emosi dan penerimaan kelompok teman sebaya pada remaja. *Jurnal Psikologi*, 2(2), 160–178.
- Nurlatifah, A. I. (2016). Komunikasi konseling peka budaya dan agama. *KONSELING RELIGI: Jurnal Bimbingan Konseling Islam*, 7(1), 231-258.
- Olsson, I., Hagekull, B., Giannotta, F., Ahlander, C. (2016). *Adolescents and social Interactions*. New Jersey: John Willey & Sons, Inc
- Oluwaseyi, J. (2024). *peer support and its role in promoting mental health among nursing students. March*.
- Pande, N. luh, Wulandari, N. P. D., & Wijaya, I. P. A. (2024). *ORIGINAL ARTICLE NEGERI 2 ABIANSEMAL The Correlation Between Peer Support on The Levels of Anxiety , Stress , and Depression on the Ten Grade Students at Senior High School 2 Abiansemal*. 3, 1–11. <https://doi.org/10.55887/nrpm.v3i1.48>
- Prasetyo, T. D., Darmayanti, K. K. H., Rosandi, F. H., Winata, E. Y., & Sakti, P. (2020). Lihat-dengar-hubungkan : efektivitas program dukungan psikologis awal untuk generasi milenial, 2019, 6.
- Prianika, F. N., Laras, I. A., & Sirait, W. D. (2022). Perancangan kampanye psychological first aid (pfa) sebagai penanggulangan distress pada remaja. *Linimasa: Jurnal Ilmu Komunikasi*, 5(2), 179-191.
- Reschke, K., Bikadamova, A., & Sarbassova, G. (2007). Psychological first aid. Traumatic Experiences and Dyslexia, February 2018, 19–23. <https://doi.org/10.17744/mehc.29.1.5racqxjueafabgwp>
- Sahrah, A., Rengganis, D. R. P., & Yuniasanti, R. (2023). Psychology first aid virus corona (covid 19)(sebagai upaya penanganan awal di masyarakat). *Jurnal Pengabdian Masyarakat Bumi Raflesia*, 6(1), 59-66.
- Santrock, J. W. (2014). *Adolencence*. McGraw-Hill Education.
- Situmorang, I. H., Hutapea, N. G., Cibro, S. L. H., Wastina, I., Simatupang, F. J., & Sinaga, R. (2023). Konsep konseling krisis. *Pediaqu: Jurnal Pendidikan Sosial Dan Humaniora*, 2(4), 5–24. <http://repo.iain tulungagung.ac.id/5510/5/BAB 2.pdf>

- Sulfemi, W. B., & Yasita, O. (2020). Dukungan sosial teman sebaya terhadap perilaku bullying. *Jurnal Pendidikan*, 21(2), 133–147. <https://doi.org/10.33830/jp.v21i2.951.2020>
- Sarafino, Edward P. & Smith, Timothy W. 2011. Health Psychology: Biopsychosocial support situations. *Scandinavian Journal of Psychology*, Volume 57 Edisi 3
- Shultz, J. M., & Forbes, D. (2014). Psychological first aid: Rapid proliferation and the search for evidence. *Disaster health*, 2(1), 3-12.
- Suryanto, A., & Nada, S. (2021). Analisis kesehatan mental mahasiswa perguruan tinggi pada awal terjangkitnya covid-19 di indonesia. *Jurnal Citizenship Virtues*, 1(2), 83–97
- Taylor, S.E. (2009). *Health psychology*. New York: McGraw Hill.
- Ursano, R. J. (2021). Principles of psychological first aid: core elements of disaster care, COVID-19 pandemic care and supportive psychotherapy. *Psychiatry*, 84(4), 309-310.
- Wastuti, S. N. Y., & Izar, S. L. (2020). Penerapan Psychological first aid dalam mereduksi kecemasan mahasiswa semester akhir bimbingan dan konseling fkip umsu. *Psikodidaktika: Jurnal Ilmu Pendidikan, Psikologi, Bimbingan Dan Konseling*, 5(2), 149. <https://doi.org/10.32663/psikodidaktika.v5i2.1528>
- Wong, M. (2020). *Psychological First Aid. USA: North American Center for Threat Assessment and Trauma Response*
- Zhang, J., Cao, M., Ma, D., Zhang, G., Shi, Y., & Chen, B. (2022). Exploring effect of psychological first aid education on vocational nursing students: A quasi-experimental study. *Nurse Education Today*, 119, 105576

Copyright Holder

© Hartanto, A. P., Harahap, L., Nisa, A. T.

First Publication Right

COUNSENEsia: Indonesia Journal of Guidance and Counseling

This Article is Licensed Under

