Application of Individual Counselling with Attending, Silence, and Giving Advice Techniques in Reducing AuthoPhobia in Students

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Article Information:	ABSTRACT
	The lack of counselling conducted at SMA Negeri 1 Pasawahan has had an impact on the level of anxiety for students in carrying out daily activities. Therefore, it is necessary to take action to help students who experience anxiety/fear so that they are more confident. This study aims to find out about the level and attitude of authoPhobia experienced by students, then to find out about the implementation of individual counselling using Attending, silence, and giving advice techniques carried out on people with authoPhobia then to find out the effectiveness of the implementation of individual counselling using Attending, Silence, and giving advice techniques in reducing authoPhobic attitudes. This research method uses a qualitative approach with research subjects of a number of SMA Negeri 1 Pasawahan students who experience authophobia. Research data were collected through interview and observation techniques using a 10-question questionnaire to 12 students. The results showed that the application of individual counselling with Attending, silence, and giving advice techniques was effective in reducing authophobic attitudes in SMA Negeri 1 Pasawahan students. Students experienced an increased understanding of the attitudes that must be taken in fighting the phobia and felt more comfortable to talk about their fears. In addition, they also gained strategies and skills to manage the anxiety that arises due to authophobic attitudes. **Keywords**: *Individual Counselling, Authophobia, Effectiveness*

INTRODUCTION

Phobia, which is a common term in terms of anxiety or fear of something, is something that is experienced by many people today and has many names, one of which

is authophobia or the fear of loneliness and solitude. This phobia appears when the person is silent in a quiet place and when alone. The loneliness felt is certainly there are many factors as expressed by Roseliyani (2019) Loneliness occurs when there is a mismatch between what is expected and what is received from his interpersonal life which makes the person feel alone and lonely. Furthermore, loneliness will also be accompanied by negative emotional states such as depression, anxiety, unhappiness, dissatisfaction, and self-blame and social shame (Afdal et al., 2019; Alizamar et al., 2019; Ariani & Susilo, 2018; Smeekes et al., 2018).

Similarly, according to Fernando et al., (2020) Similarly, according to people who are lonely feel alienated from the group, do not feel the warmth of love in the people around them. They feel that no one cares about themselves and feel alone, and find it difficult to make friends. Loneliness tends to be unhappy and dissatisfied with oneself, unwilling to listen to openness from others. Unhappy and dissatisfied with oneself, do not want to hear openness from others and tend to not open up, feel a sense of hopelessness, and feel hopeless (El-Matury, Lestari, et al., 2018; El-Matury, Mardiah, et al., 2018; Weda & Sakti, 2018). As a result of this problem, there is a need for treatment, one of which is individual counselling guidance. (Fatchurahman, 2019; Rosmawati, 2018; Tuttle et al., 2019), When in the scope of school in everyday problems, guidance and counselling is shown for students who experience academic problems, behavioural problems or in a bad attitude.

Not only these problems are common in schools with counselling assistance but phobia problems that are less handled such as authophobia and other phobias can also be handled with counselling guidance in schools. Researchers reviewed several journals related to guidance and counselling conducted in schools to overcome phobias that were before this research was conducted, such as research conducted by (Aprian et al., 2019) with the title "The Effect of Behaviouristic Counselling on Zoophobia in Students of SMPN 11 Mataram". The results of this study indicate that there is an effect of behaviouristic counselling on Zoophobia in SMPN 11 Mataram students.

In addition, research conducted by (Hafiz, 2018) with the title "Application of Individual Counselling to Reduce Phobic Attitudes in Class X Students of SMA Swasta Bandung Medan Academic Year 2017/2018". Based on the results of the research conducted, the application of individual counselling to reduce phobic attitudes carried out by guidance and counselling teachers has been running optimally and increased by 70% seen from the laiseg and this is evident in changes in the attitude of students in the classroom, who were phobic about heights now no longer, these changes after receiving group guidance services in an effort to achieve goals carried out jointly between the counselor and the counselor. Thus guidance and counselling plays a very important role. As for the research conducted by (Arif & Widyastuti, 2021) with the title "Narrative Individual Counselling to Reduce Nomophobia in Class X High School Students". The results of the analysis show that nomophobia is seen to be reduced through narrative technique group counselling because nomophobia occurs due to a person's low self management in using a cellphone.

Based on the above research, the average previous researcher has the same view that guidance and counselling can overcome phobia in students. The purpose of the research in this article is to find out the level and attitude of authophobia experienced by students, in addition to knowing about the implementation of individual counselling using Attending, silence, and giving advice techniques carried out on people with authophobia and also to determine the effectiveness of the implementation of individual counselling using Attending, Silence, and giving advice techniques in reducing the attitude of authophobia. This research is expected to be useful and provide a broader understanding to counsellors and counseling teachers, that individual guidance and counselling with various techniques and stages of counselling conducted to students can reduce the symptoms of phobia both phobias in general and phobias of many types.

RESEARCH METHODOLOGY

The research method used by researchers is descriptive qualitative method with interview techniques. Descriptive qualitative research in the perspective of guidance and counselling can be interpreted as research in the field of guidance and counselling whose purpose is to present a detailed description of the setting of the guidance or counselling process in schools intended for exploration of how guidance or counselling occurs, whether guidance or counselling that has been carried out can be in line to overcome a number of variables related to the problem under study (Almutazam & Irman, 2022; Yuliani, 2020).

The interview technique is used to collect subjective data such as opinions, attitudes and behaviour of sources related to a phenomenon under study (Asmita & Fitriani, 2023; Silvianetri; Silvianetri, Irman, Rajab, et al., 2022; Hansen, 2020). In this study, researchers took two kinds of data, namely primary data and secondary data. Data collection in the form of primary data sources obtained by conducting interviews with 12 students of SMA Negeri 1 Pasawahan, while secondary data sources researchers use collection from article data.

Data analysis in qualitative research is carried out since before entering the field, during the field, and after completion in the field. Qualitative data analysis steps include data reduction, display and conclusion drawing (Yuliani, 2020; Agusta, 2016; Imanina, 2020). This qualitative approach is used because researchers want to know directly what and how the attitudes and individual counselling needed for clients in this authophobia.

RESULT AND DISCUSSION

The level and attitude of authophobia experienced by students were obtained based on the answers to the questionnaires they had filled out. Based on the answers in the questionnaire filled out by 12 respondents on 2 April to 5 April 2023, a description of the level and attitude of authophobia experienced by SMA 1 Pasawahan students was obtained.

The research results are as follows:

Table 1. Questionnaire results

No.	Pertanyaan	Opsi 1 Sering	Opsi 2 kadang-kadang	Opsi 3 Jarang	Opsi 4 Tidak Pernah
1.	Apakah kamu terlalu khawatir ditinggal sendiri?	0%	61,5%	15,4%	23,1%
2.	Apakah Kamu takut dengan berbagai kemungkinan yang belum tentu terjadi saat sendiri?	38,5%	38,5%	15,4%	0%
3.	Seberapa sering Tubuhmu menunjukkan gejala fisik seperti gemetar, berkeringat, nyeri dada, pusing, palpitasi jantung, hiperventilasi, mual dan kondisi tersebut muncul saat hendak atau sudah sendiri	23,1%	23,1%	38,5%	15,4%
4.	Seringkah kamu Merasa seperti sedang ada yang meneror saat sendiri?	0%	23,1%	15,4%	53,8%
5.	Adakah Keinginan besar untuk pergi dari tempat saat sedang sendiri?	15,4%	23,1%	30,8%	23,1%
6.	Seberapa sering kamu mengalami Gangguan kecemasan saat sedang sendiri	7,7%	23,1%	38,5%	23,1%
7.	Seringkah kamu merasa tidak nyaman dengan dirimu sendiri?	15,4%	30,8%	30,8%	15,4%
8.	Apakah sering memberitahukan bila mempunyai phobia ini kepada orang terdekat?	0%	15,4%	23,1%	53,8%
9.	Pernakah kamu menjadikan Phobia alasan untuk terus minta ditemani?	0%	23,1%	23,1%	46,2%
10.	Seberapa sering kamu pernah berpikir untuk menyerah?	30,5%	30,5%	23,1%	7,7%

From the table above, it can be explained that not many respondents experience the symptoms of Authophobia, they only feel it sometimes rarely then never. The answer (Often) was suppressed by the same respondents from large to small numbers. Then in the answer (Often) many answers were not filled in. This certainly has an impact on whether or not the respondent is experiencing symptoms of Authophobia.

From the analysis of the table and the data presented, it can be concluded that the majority of respondents (61.5%) admitted to sometimes feeling too worried about being

left alone. Meanwhile, most respondents (53.8%) stated that they rarely experienced anxiety disorders when they were alone, and never told the closest person. In addition, a number of respondents (46.2%) also admitted that they never used their phobia as an excuse to keep asking for company.

From the many answers given by respondents, the researcher then made to assess those who experience symptoms of authophobia, who will have signs of experiencing it and who do not experience it. Then the researcher made a diagram for the results of his assessment. Below is a diagram of the number of students who experience and never experienceit

Based on the diagram above, it illustrates the level and attitude of authophobia possessed by students. The diagram above shows that there are 3 people who do not have symptoms of authophobia, 6 people who have symptoms or characteristics that are sometimes experienced, and 3 people who often and sometimes experience these characteristics. This conclusion is drawn based on the data that has been taken and managed by researchers.

Implementation of Individual Counselling Using Attending, Silence, and Giving Advice Techniques for People with Authophobia

After the researcher conducts research and finds out who and what symptoms are experienced by the respondents, the next researcher will then conduct individual counselling to respondents who already have symptoms, and give advice to those who will experience these symptoms so as not to let these symptoms develop and become severe. Then for respondents who already have symptoms of authophobia, the researcher asks the respondent for time to attend the individual counselling that the researcher will carry out so that these symptoms can be treated. The following are the stages of counselling carried out. Counselling begins with the initial stage, namely to

build closeness between the counsellor and the sufferer here the counsellor asks how he is doing using attending techniques, giving the respondent time to open up so that what he is experiencing can be conveyed to the counsellor. In this process the counsellor found a good and open impression shown by the respondent, the respondent casually and calmly told how and what he was experiencing. Then here the counsellor uses the silent technique to respond to the story told by the respondent. The results of this observation are supported by interview excerpts from the respondents when the counsellor asked about the client's news, and asked again about the client's problem, and whether the surrounding environment affected the client's condition in counseling, and the answers obtained from the respondents were on average the same, namely the process of introducing problems and exchanging information between the counsellor and the client went smoothly and a comfortable response for the client.

Then the counselling enters the middle or working stage. Here the counsellor begins to analyse how far the counselling stage has gone, and the counsellor begins the stage of assessing what is happening and what the respondent feels. At this stage the counsellor is asked to focus on assessing what the client is talking about after analysing then drawing conclusions and applying the techniques taken to do and give to the respondent. At this stage the counsellor does not ask many questions but gives advice and solutions because the level experienced is still not showing a severe stage, the counsellor does not recommend medication. The observation that was concluded after listening to the client's complaints was that the counsellor could conclude what the client felt, then the counsellor told the client the advice needed before counselling.

Then proceed to the final stage of counselling. At this stage the counsellor invited the respondent back and asked how the patient felt after doing the guidance. Then from the answer the counsellor can conclude whether the symptoms experienced are reduced or there are still experienced, if there are still experienced then the counsellor will continue until the time the client improves and gives a positive response.

From the stages of implementation that have been carried out above, it can be concluded that the implementation of techniques that have been prepared such as Attending, silence, and advice techniques, runs smoothly and the counsellor can assess or analyse clients from what they feel, what they say and from their environment. At this stage the counsellor can also apply the advice technique well to the client and the client also accepts the advice so that there are no obstacles in the counselling.

Effectiveness of Individual Counselling Implementation Using Attending, Silence, and Giving Advice Techniques in Reducing Authophobia Attitudes

To find out the effectiveness of the techniques applied, the counsellor conducted an interview method to the respondents who experienced symptoms and who would experience symptoms. Here the counsellor prepared five questions to ask the three respondents who experienced symptoms and gave advice to those who would experience symptoms. Based on the results of interviews with informants on 7 April 2023, around the school regarding the effectiveness of the implementation of individual

counselling using attending, silence, and giving advice techniques in reducing the attitude of Authophobia, the results were obtained results:

a) Attitudes and feelings after attending guidance and counselling and the changes that occurred

After counselling, many feelings change. In individual guidance and counselling there are many different types of changes including behavioural changes. This occurs in a positive scope that makes the client better, just as it is done in subsequent individual counselling, namely showing changes in feelings that are better or have completely recovered. Clients become more open and can be confident not to be afraid of loneliness and changes in attitude experienced by respondents both physically and emotionally. They became more enthusiastic and could gradually eliminate the shadow of fear when lonely.

b) Feeling comfortable and better when alone or lonely

In this problem, having a sense of comfort and not being afraid of the symptoms experienced is the result obtained by the researcher and each student has a different reaction to the comfort experienced as said by the first respondent interviewee after conducting counselling: "yes I feel less afraid when I am alone, and even loneliness I can handle it better." (results of interviews with interviewees on 7 April 2023), the second respondent: "yes more comfortable." (result of interview with the informant on 7 April 2023), third respondent: "Alhamdullilah better." (result of interview with interviewee on 7 April 2023). From the exposure of the results of the interviews above, it is concluded that now respondents who have participated in individual counselling guidance feel comfortable and are no longer afraid when they are alone or when they are lonely.

c) Individual counselling to reduce phobic fear

The guidance carried out has different effects for each individual who has done it, some have reduced their phobia and some have eliminated the symptoms as said by the first respondent's source during counselling: "yes, alhamdullilah, it's quite reduced." (results of interviews with sources on 7 April 2023), the second respondent: "actually now I am more comfortable" (results of interviews with sources on 7 April 2023), the third respondent: "from what I feel, it seems to be less." (result of interview with interviewee on 7 April 2023). From the explanation of the interview quotes above, it can be concluded that the respondents experienced a reduction or decrease in the phobic symptoms experienced.

d) What to tell the counsellor

In this case after conducting all the interview sessions and counselling guidance what is expected is feedback to the counsellor for what he has done when the research or counselling takes place as stated by the first respondent in the last session of the interview: "maybe I want to thank the counsellor for conducting this mini research and making me know what is happening to me, then if something happens again I can contact the counsellor". (results of interviews with interviewees on 7 April 2023), second respondent: "First I want to thank the counsellor, secondly I can also get to know myself better, then the guidance is relaxed and comfortable." (results of interviews with interviewees on 7 April 2023), the third respondent: "thanks to the counsellor what was conveyed to me was useful for me." (result of interview with the informant on 7 April 2023). From the exposure of the interview excerpts above, it can be concluded that as far as the counselling process takes place and afterwards it can help a little to the respondents who experience symptoms.

After the interview session ended the counsellor then turned to respondents who would experience symptoms of authophobia, here the counsellor provided counselling in the form of advice using the advice technique to the respondents so that what was sometimes and rarely felt was related to the symptoms that were perfect.

In general, phobia can be defined as an excessive fear of certain objects or situations where this fear is not easily controlled, irrational, the threat is not proportional to the fear caused, and the sufferer will try to avoid the cause (Darajat et al., 2016; Mulia et al., 2017; Rezkinda & Abraham, 2016). It is clear that in situations of excessive fear, this can interfere with the actions that are supposed to be performed. This of course cannot be tolerated and ways or efforts must be found to treat or reduce the level of phobia (Cari et al., 2016; Novita, 2016; Verbeek et al., 2015). The sufferer does not know the cause of the unreasonable fear and cannot avoid or control it. In research (Ilman & Vonna, 2022). In the case of this phobia, according to the Diagnostic and Statistical Manual of Mental Disorders 5th edition (DSM-V), phobias can be classified into three types, namely agoraphobia or fear of crowds or open places, social phobia or fear of being observed and humiliated in public, and third is specific phobia or irrational fear of certain situations or objects. The most common phobia is specific phobia. It is generally experienced by 13.2% of the population. Individuals who experience specific phobia will experience excessive fear of specific objects or situations, such as blood, animals, dark situations, and so on (Herawan et al., 2015; Szakály et al., 2021; Yanto et al., 2012; Fitriani & Supradewi, 2019). These specific objects or situations generally do not pose a threat, but make individuals avoid them intentionally.

Similarly, research conducted by (Kusuma, 2016), The results of the level felt by students are phobias that experience excessive fear of situations where a respondent experiences fear of loneliness (authophobia), and has problems in that regard. The

results obtained by the researcher using the media in android which was distributed online, obtained good results from the respondents. These results suggest that some people have this phobic disorder and some do not. This research is based on expert knowledge of psychology obtained through the interview method. This diagnostic application runs on android mobile devices with Java programming language and uses expert system methods. At this stage the data that has been obtained is then processed using the appropriate method. This diagnosis application uses an expert system method where an expert (eg psychologist) often analyses existing information by connecting premises and conclusions. In the research conducted by researchers using google form media as a shared media, while previous research used applications developed specifically for Nomophobia. This research has something to do with the research conducted by (Fatimah et al., 2015) The results obtained are easy and practical in managing research data, in research conducted on high school students the level sought by asking some of the characteristics of authopobia symptoms has several phases, the phase has no symptoms, will have symptoms, and already has symptoms (Ifdil et al., 2023; Siddiqui et al., 2022; Sulistiyani et al., 2022). The results of this phobia disorder require expert knowledge and experience used in the design of expert systems, namely an expert from psychology and literature scholars.

From the above research it can be concluded that the level of phobia experienced by students is not many who experience authophobia disorder and some only experience mild symptoms, seen from the data taken online with google form media asking all about the characteristics of authophobia, clients answer the questions asked honestly and firmly, although there are some who are less sure but most think they answer sure. And from here the counsellor can assess for the next stage.

Implementation of Individual Counselling Using Attending, Silence, and Giving Advice Techniques for People with Authophobia

Individual counselling is a counselling service provided by a counsellor to a counselee in order to alleviate the counselee's personal problems (Bryan et al., 2011; Cicchetti et al., 2016; Crothers & Hughes, 2011). In a face-to-face atmosphere, direct interaction is carried out between the counselee and the counsellor to discuss various matters about the problems experienced by the counselee. The discussion is in-depth touching important things about the counselee, even very important which may concern the personal secrets of the counselee; the point is widespread covering various sides related to the problems experienced by the counselee, but also this Individual counselling is specific towards the alleviation of the problem point (Ko & Lee, 2021; Makhashova et al., 2016; Moir-Bussy et al., 2016; Yii-Nii, 2016; Abdi & Karneli, 2020). Here the researcher uses three techniques in the counselling carried out, namely Attending, silence and giving advice. Attending is a technique used by counselling teachers to focus attention on clients so that clients feel valued and feel guided by counselling teachers. Attending is an attitude in the form of giving attention to clients (Cohen et al., 2013; Crothers & Hughes, 2011; Fakhrozi et al., 2023; Musfiroh, 2016). The technique of giving advice is an attempt to advise the counsellor to the client so that

the client is able to determine his choice in taking certain actions. The purpose of giving advice is to help clients make decisions, especially if the client has had a long discussion with the counsellor but still cannot make a decision about the problem being faced (Ko & Lee, 2021; Reba, Y. A., Saud, H., Saputra, A. A., & Pristanti, 2022; Rosmawati, 2018; Tuttle et al., 2019; Sanyata, 2010).

After the researcher conducts research and knows who and what symptoms are experienced by the respondents, the next researcher will then conduct individual counselling to respondents who already have symptoms, and provide advice to those who will experience these symptoms so as not to let these symptoms develop and become severe. Then for respondents who already have symptoms of authophobia, the researcher asks the respondent for time to attend the individual counselling that the researcher will carry out so that these symptoms can be treated. From the stages of implementation that have been carried out, it is found that the implementation of techniques that have been prepared such as Attending, silence, and advice techniques, runs smoothly and the counsellor can assess or analyse clients from what they feel, what they say and from their environment. At this stage the counsellor can also apply the advice technique well to the client and the client also accepts the advice so that there are no obstacles in the counselling.

In this study, it is the same as the research conducted by (Amelia et al., 2017; Rahmawati et al., 2021; Nurmaya et al., 2021) In carrying out their main task of realising the counselling process, counsellors strive to build a good interpersonal relationship between counsellors and counsellors by using various counselling techniques in each stage of counselling. The client's openness in the early stages of counselling determines the effectiveness of the counselling process in the later stages. This is where the counsellor must be able to apply counselling techniques appropriately and correctly. However, with the good impression of each counsellor on the implementation of counselling on him, it proves to be able to use counselling techniques well. In the advice technique, the researcher provides advice and input to the client about what the client should do, reflect and understand. Because in this case there are not many symptoms, therefore the counsellor can be more in-depth and know what the client's needs are (Roza et al., 2022; Silvianetri, 2018; Akhmadi, 2016; Mutakin et al., 2016).

The success of solution-focused brief counselling to improve students' learning responsibilities cannot be separated from several influencing factors. One of them is the counselee's self-understanding of the level of learning responsibility he has and the counselee is able to build goals and solutions to be carried out as a change (Putri & Ramadhani, 2022; Rati et al., 2023). A counsellor in using this solution-focused concise counselling approach is expected to have attitudes that are characteristic of other approaches, such as being enthusiastic, receptive to new things or ideas and flexible, patient, a good listener, warm and friendly, strong character, having a positive view of others, careful, and having respect for others. Some of the above attitudes have the aim

of creating a pleasant atmosphere and a feeling of comfort from the counselee in the counselling process.

From the exposure of the research above, it can be concluded that the implementation of individual counselling using Attending, silence, and giving advice techniques goes well to clients and clients receive counselling comfortably and thoroughly. From other researchers also confirmed that during the counselling process the clients answered well, therefore the counselling went well with the results that the counsellor could understand to be further followed up in his healing efforts.

Effectiveness of Individual Counselling Implementation Using Attending, Silence, and Giving Advice Techniques in Reducing Authophobia Attitudes

Individual counselling is the key to all Guidance and Counselling activities. Because if you master individual counselling techniques, it will be easy to carry out other counselling processes. The individual counselling process has a big effect on student improvement because in individual counselling the guidance and counseling teacher has a big effect on student improvement (Cicchetti et al., 2016; Getachew & Tekle, 2020; Moir-Bussy et al., 2016; Zlatkin-Troitschanskaia et al., 2020; Siregar, 2018). Mastery of counselling techniques or skills by counsellors in the counselling process is absolute. Because in the counselling process good technique is the key to success in achieving counselling goals. An effective counsellor must be able to respond to the counsellor with the correct technique, according to the counsellor's current situation, both verbal and nonverbal responses (Bryan et al., 2011; Cicchetti et al., 2016; Crothers & Hughes, 2011; Haolah et al., 2018).

The implementation and effectiveness research made by the researcher and then carried out on the respondents produced positive results and helped the respondents from not knowing to knowing and carrying out what the counsellor suggested, making them able to gradually adapt to more positive things, then helping researchers to complete their research results well because of the cooperative and continuous participation of respondents, hence these results were obtained.

In this study, it is the same as the research conducted by (Daulay, 2022) that the efforts made by counseling teachers in dealing with students who are victims of broken homes are optimising the implementation of individual counselling services. Individual counselling means how a person talks to another person with the aim of helping another person with the aim of helping to make positive behavioural changes from the person being helped. So there are two parties in counselling, namely the helping party and the helped party. After providing individual counselling services, the BK teacher follows up as a form of evaluation of whether the implementation of the counselling services carried out has been successful or not. The things that become material for the evaluation of the BK teacher are changes in students' interest in learning in class, changes in behaviour, student confidence and a decrease in students' emotional levels, as well as the process of implementing counselling such as the use of counselling techniques that are in accordance with the needs of the students concerned. And this research is also supported by (Wulandari & Suhertina, 2020) the use of the technique of

giving advice by the counseling teacher by directing students not to violate discipline again. The technique of giving advice is used by counseling teachers for students who have repeatedly violated discipline by directing students that this is good to do and this is not good to leave, after being given advice it is hoped that students can make decisions for themselves, especially in overcoming discipline problems.

Based on the research exposure and the results obtained, it can be concluded that the results obtained by the researcher gave a positive response to the student, which made him more open and gave a good impression to the counsellor. Likewise, the two previous studies said more or less the same results got support from students and students felt comfortable, in contrast to one of the previous studies which stated that students were less comfortable and not enthusiastic, so the results obtained were not optimal.

CONCLUSION

Based on the results of the research above, it can be concluded that the level and attitude of authophobia experienced by students with the percentage of the majority of respondents (61.5%) admitted that they sometimes feel too worried about being left alone. After carrying out the implementation of individual counselling using Attending, silence, and giving advice techniques carried out on people with authoPhobia, with techniques that have been prepared as above, the implementation runs smoothly and the counsellor can assess or analyse the client from what he feels, what he says, and from his environment. Then in the effectiveness of the implementation of individual counselling using Attending, Silence, and giving advice techniques in reducing authoPhobia attitudes has effective results and makes clients who experience the disorder less. Positive results and helping respondents from not knowing to knowing and carrying out what the counsellor suggested, making them able to gradually adapt to better things.

The research conducted at SMA Negeri 1 Pasawahan has a limitation where the effectiveness carried out can only reduce not cure completely, researchers are well aware of the limitations that occur in this study. Further research is recommended to improve, expand and deepen the subject matter so that it can be better understood by readers. As well as being able to increase the number of respondents in each study so that the data is more accurate.

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