

OVERVIEW OF EMOTIONAL DYSREGULATION OF STUDENTS VICTIMS OF BULLYING IN JUNIOR HIGH SCHOOL AND ITS IMPLICATIONS FOR COUNSELING INTERVENTIONS

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Abstract

Emotion dysregulation is a problem that occurs in any or all emotion regulation abilities. The occurrence of emotion dysregulation can lead to various mental health problems. This study aims to describe the level of emotion dysregulation of students who are victims of bullying in junior high school and its implications for counseling interventions. The research used a quantitative approach with a survey method. The sampling technique used convenience sampling technique with a total research sample of 108 junior high school students. Data collection was carried out through the Difficulties in Emotion Regulation Scale Short Form (DERS-SF) instrument, while data analysis techniques used descriptive statistics. The category is high in emotion dysregulation if $X \geq 54$, while the category is low in emotion dysregulation if $X < 54$. The results of the analysis on students who are victims of bullying show that 41 students (37.96%) have a high level of emotion dysregulation and 67 students (62.04%) have a low level of emotion dysregulation. Based on the results of this analysis, it is found that the majority of the level of emotional dysregulation of students who are victims of bullying at one private junior high school in East Jakarta is in the low category. However, there are still many students who are victims of bullying in junior high schools who have high levels of emotional dysregulation, so efforts to reduce the emotional dysregulation of students who are victims of bullying in junior high schools are very important for guidance and counseling teachers to do. One of the effective counseling interventions used is Acceptance and Commitment Therapy (ACT).

Keywords: Acceptance and Commitment Therapy (ACT), Guidance and Counseling, Emotion Dysregulation, Bullying Victims, Junior High School Students.

Abstrak

Disregulasi emosi adalah masalah yang terjadi pada salah satu atau semua kemampuan regulasi emosi. Terjadinya disregulasi emosi dapat mengakibatkan berbagai masalah kesehatan mental. Penelitian ini bertujuan untuk mendapatkan gambaran tingkat disregulasi emosi siswa korban perundungan di SMP dan implikasinya terhadap intervensi konseling. Penelitian menggunakan pendekatan kuantitatif dengan metode survei. Teknik pengambilan sampel menggunakan teknik convenience sampling dengan jumlah sampel penelitian 108 siswa SMP. Pengumpulan data dilakukan melalui instrumen Difficulties in Emotion Regulation Scale Short Form (DERS-SF), sementara teknik analisis data menggunakan statistik deskriptif. Kategori tinggi pada disregulasi emosi jika $X \geq 54$, sementara kategori rendah pada disregulasi emosi jika $X < 54$. Hasil analisis pada siswa korban perundungan menunjukkan bahwa sebanyak 41 siswa

(37,96%) memiliki tingkat disregulasi emosi tinggi dan sebanyak 67 siswa (62,04%) memiliki tingkat disregulasi emosi rendah. Berdasarkan hasil analisis tersebut, didapatkan bahwa mayoritas tingkat disregulasi emosi siswa korban perundungan pada salah satu SMP swasta di Jakarta Timur berada pada kategori rendah. Akan tetapi, masih banyak siswa korban perundungan di SMP yang memiliki tingkat disregulasi emosi tinggi, sehingga upaya menurunkan disregulasi emosi siswa korban perundungan di SMP sangat penting untuk dilakukan guru bimbingan dan konseling. Salah satu intervensi konseling yang efektif digunakan adalah *Acceptance and Commitment Therapy (ACT)*.
Kata kunci: *Acceptance and Commitment Therapy (ACT), Bimbingan dan Konseling, Disregulasi Emosi, Korban Perundungan, Siswa SMP.*

INTRODUCTION

Bullying is an aggressive act that is carried out by a group or individual deliberately and repeatedly from time to time against victims who are unable to defend themselves. Currently, (Olweus, 1993) bullying is one of the most common problems in the school environment, one of which is at the junior high school level. As reported by detik.com, the results of data from the Federation of Indonesian Teachers' Unions explained *that bullying cases* most occurred at the junior high school level, which accounted for as much as 50% of cases. Then reporting from tirto.id, results from the Indonesian Education Monitoring Network (JPPI) also noted that in 2024 there will be 573 cases of violence in the educational environment, including schools, of which 31% are cases of bullying (Rosa, 2023). This number is higher than in 2023 with 285 cases and in 2022 with 194 cases (Zuhriyah, 2024).

The results of the study on 178 students aged 13 to 19 years old, showed that around 57% of students had experienced Yanwar et al., (2020) *bullying*, with the types of *bullying* experienced including 69% *verbal bullying*, 42% *physical bullying* and 21% *cyberbullying*. The bullying experienced by students was found to affect their ability to regulate their emotions. In line with meta-analysis research that suggests that Azrin et al., (2024) bullying affects emotional regulation in children and adolescents who are victims. These results are reinforced by the explanation that students who are victims of bullying tend to have low emotion regulation skills which results in long-term consequences when they become adults. Sert Rudolph et al., (2009) a Cook, (2022) also emphasized that people who are more vulnerable to having difficulties in regulating emotions and lowering empathy are victims of bullying.

For students who are victims of bullying, emotional regulation has a very important role. This is because emotional regulation is part of emotional competence and an important element for making psychological and social adjustments and achieving greater intrapersonal, interpersonal and social goals. In addition, emotional regulation is also used in taking opportunities, establishing cooperative and friendship relationships with others, helping each other and sharing with others; managing excessive frustration ; concentrate on learning in the classroom to become a coping strategy to deal with feelings of stress, anxiety or fear of failure due to the pressure faced. (Denham, 2019) (Stifter & Agustinus, 2019) (Robertson et al., 2012) (Pusparini, 2017) Primary, 2019)

In students who are victims of bullying with low emotional regulation skills, it tends to be difficult to deal with stressful situations so that they commit destructive actions that can harm themselves and others around them because they are unable to control their emotions. In addition, low emotion regulation ability also causes attitudes that like to blame others, express emotions to negative things such as fighting, irritability, resignation easily, feeling hopeless and having feelings of resentment (Mawardah & Sudewa, 2023) (Maheswari & Chusniyah, 2024).

This low ability to regulate emotions is known as emotional dysregulation. stated that emotional dysregulation is a problem that occurs in one or all of the emotion regulation abilities which include Gratz & Roemer, (2004) awareness and understanding of the emotions felt, the ability to accept emotions, skills in controlling impulsive behavior or in directing these behaviors to be in accordance with the desired goals when dealing with negative emotions, as well as the use of emotional strategies flexibly or not fixated on emotional strategies Certainly.

In addition, another factor that can affect emotional dysregulation in students who are victims of bullying in junior high school is that they are in the early adolescence phase, where there is this phase often referred to as the storm and typhoon period because it describes an erratic emotional state, the occurrence of emotional tension, emotional instability and explosive emotions so that (Izzaty et al., 2008) students experience hormonal changes that are so rapid and result in feelings or emotions that arise are often capricious (Fadul, 2019). In addition, in the early adolescence phase, it was also explained that the brain regions that underlie the occurrence of emotion regulation in adolescents, such as the prefrontal cortex, are still not fully mature so that emotion regulation becomes less efficient so that the brain in adolescents is more emotional than the brains of adults and children (Ahmed et al., 2015) (Gazzillo, 2021).

Based on the data on the prevalence of bullying at the junior high school level, then looking at how bullying can affect the emotional regulation ability of students who are victims of bullying, then further research on the phenomenon of emotional dysregulation of students who are victims of bullying (*bullying*) at the junior high school level is very important to do. Therefore, the researcher will conduct research on the level of emotional dysregulation of students who are victims of bullying in junior high school and the efforts that BK teachers can make to reduce emotional dysregulation in students who are victims of *bullying*. Therefore, the purpose of this study is to get an overview of emotional dysregulation in students who are victims of *bullying* in junior high school and its implications for counseling interventions.

METHODS

This study uses a quantitative approach with a *survey* method. Explains that Sugiyono, (2013) the *survey* method is a method used to obtain data from a certain natural (not artificial) place by using a treatment in the data collection process, such as distributing a questionnaire, tests, structured interviews and so on (the treatment is not like in an

experiment). The sample in the study was students who were victims of bullying in grades VII and VIII at a private junior high school in East Jakarta, while the sampling technique used was *the convenience sampling* technique. The *convenience sampling* technique is a sampling technique based on the availability of elements and the ease of access to get them (Bougie & Sekaran, 2019) . The number of samples in this study was 108 students who were victims of bullying at a private junior high school in East Jakarta.

Table 1. Demographic Data

CATEGORY	FREQUENCY (N=108)	PERCENTAGE
GENDER		
MALE	49	45,37%
WOMEN	59	54,63%
CLASSES		
VII	59	54,63%
VIII	49	45,37%

Data collection in this study was carried out by disseminating the *instrument Difficulties in Emotion Regulation Scale Short Form* (DERS-SF), developed by which it has been adapted into Indonesian by , consisting of 18 items. Kaufman et al., (2016) Danasasmita et al., (2024) *Difficulties in Emotion Regulation Scale Short Form* (DERS-SF) has six dimensions, namely *Non-acceptance of emotional responses*, *Difficulties engaging in goal-directed behaviors when experiencing negative emotions*, *Difficulties controlling impulses when experiencing negative emotions* (difficulty controlling impulses when experiencing negative emotions), *Lack of awareness of emotional responses*, *Limited access to emotion regulation strategies perceived as effective* and *Lack of clarity of emotional responses*.

The *Difficulties in Emotion Regulation Scale Short Form* (DERS-SF) instrument uses a likert scale model with 5 answer choices, where a higher total score also indicates a higher level of emotional dysregulation. The likert scale model of *Difficulties in Emotion Regulation Scale-Short Form* (DERS-SF) is as follows.

Tabel 2. Bobot Penyebaran Item *Difficulties in Emotion Regulation Scale Short Form* (DERS-SF)

STATEMENT	ALMOST NEVER	SOMETIMES	ABOUT HALF THE TIME	MOST OF THE TIME	ALMOST ALWAYS
FAVORABLE	1	2	3	4	5
UNFAVORABLE	5	4	3	2	1

After the researcher conducts the scoring and then distributes the instrument and obtains data from the participants, then the researcher makes a categorization. Categorization is carried out using the method proposed by Rangkuti , (2017) looking at the theoretical mean value based on the calculation of the formula (number of items x 3) where 3 is the

middle value of the scale response. The categorization of *Difficulties in Emotion Regulation Scale Short Form* (DERS-SF) is as follows.

Tabel 3. Kategori *Difficulties in Emotion Regulation Scale Short Form* (DERS-SF)

CATEGORY	INTERPRETATION OF FORMULA CALCULATION RESULTS
HEIGHT	$X \geq 54$
LOW	$X < 54$

The interpretation of scores on the emotion dysregulation variable was divided into two criteria, namely high and low. If $X \geq 54$, it is included in the "high" score criterion, which is interpreted as the level of emotional dysregulation of the participant is in the high category. Meanwhile, if $X < 54$, it is included in the "low" score criterion, which is interpreted as the level of emotional dysregulation of the participant is in the low category.

RESULTS AND DISCUSSION

Based on the data analysis that has been carried out, the description of the research results that have been obtained is as follows.

Table 4. Distribution of Frequency of Emotional Dysregulation of Junior High School Students Victims of Bullying

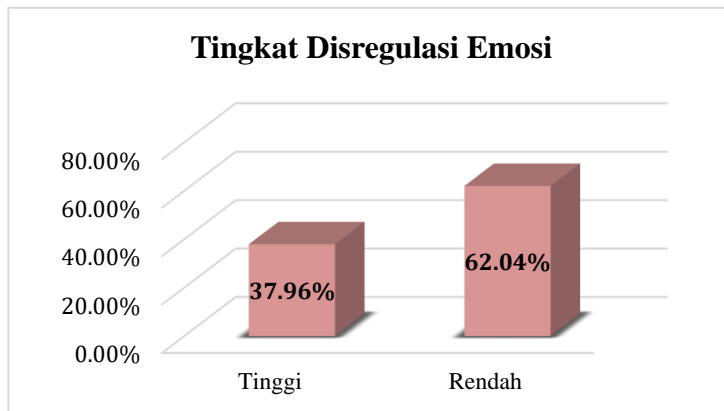
CATEGORY	INTERPRETATION OF FORMULA CALCULATION RESULTS	FREQUENCY	PERCENTAGE
HEIGHT	$X \geq 54$	41	37,96%
LOW	$X < 54$	67	62,04%

Based on table 4, the results of 108 research samples found that as many as 37.96% or 41 students who were victims of *bullying* in junior high school had a high level of emotional dysregulation. Meanwhile, as many as 62.04% or 67 students who were victims of *bullying* in junior high school had a low level of emotional dysregulation. Based on the results of the analysis, it was found that the majority of the level of emotional dysregulation of students who are victims of *bullying* is in the low category. However, it is undeniable that many students who are victims of *bullying* still have a high level of emotional dysregulation. These results are in line with research that stated that as many as 57% of students who are victims of *bullying* have poor emotional regulation (Julistia et al., 2024) and a study that conducted interviews with 4 Byrd, (2023) students who are *victims* of *bullying* aged 13-16 years found that all four have problems with emotional regulation.

Furthermore, to get clearer analysis results, a bar chart will be presented that describes the visualization of categories from the research results to make it easier to show the comparison of different category levels in the categorization of emotional dysregulation of junior high school students who are victims of *bullying*. The following graph of emotional dysregulation of junior high school students who are victims of *bullying* is as

follows.

Graph 1. Emotional Dysregulation Levels of Junior High School Students Victims of Bullying



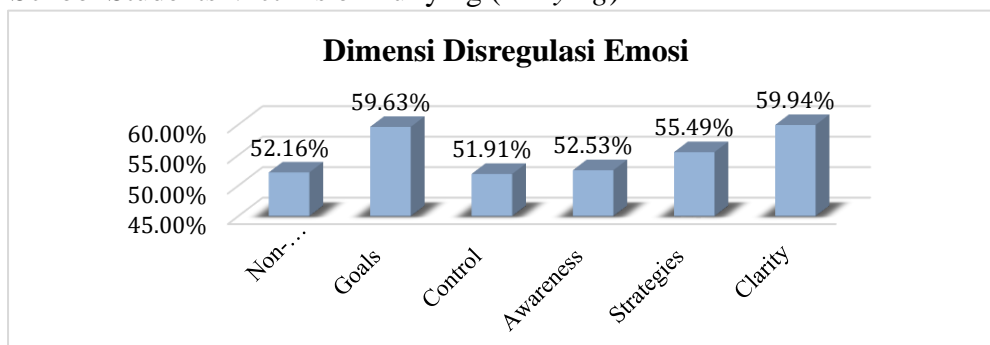
Based on the level of emotional dysregulation above, the following results were obtained.

1. Junior high school students who were victims of bullying as many as 37.96% or 41 students had a high level of emotional dysregulation.
2. Junior high school students who were victims of bullying as many as 62.04% or 67 students had a low level of emotional dysregulation.

This means that the level of emotional dysregulation experienced by junior high school students who are victims of bullying is still not optimal because there are still students who have a high level of emotional dysregulation.

After obtaining the results of the category of emotional dysregulation, the next analysis was an analysis of the dimension of emotional dysregulation consisting of six dimensions, namely the first dimension (*Non-acceptance*) 52.16%; the second dimension (*Goals*) 59.63%; the third dimension (*Control*) 51.91%; the fourth dimension (*Awareness*) 52.53%; the fifth dimension (*Strategies*) 55.49% and the sixth dimension (*Clarity*) 59.94%. For more details, you can see the following graph.

Graph 2. Overview of the Dimension of Emotional Dysregulation of Junior High School Students Victims of Bullying (*Bullying*)



The first dimension (*Non-acceptance of emotional responses*) indicates that a person tends to have a negative secondary emotional response to negative emotions or a reaction of rejection and lack of acceptance to stress (Gratz & Roemer, 2004). The results of the study showed that the dimension (*Non-acceptance*) was the fifth triggering factor in

causing emotional dysregulation in students who were victims of *bullying* by contributing 52.16%. This shows that students who are victims of bullying tend to hold back/deny/be ashamed because they feel that the negative feelings that arise such as sadness, anger, disappointment and fear should not arise and consider the emotions of sadness, anger, disappointment and fear as weaknesses or mistakes.

The second dimension, namely (*Difficulties engaging in goal-directed behaviors when experiencing negative emotions*) indicates that a person tends to have difficulty concentrating and achieving goals when experiencing negative emotions (Gratz & Roemer, 2004). The results of the study showed that the dimension (*Goals*) was the second triggering factor in causing emotional dysregulation in students who were victims of bullying by contributing 59.63%. This shows that students who are victims of bullying tend to find it difficult to focus and concentrate on learning, find it difficult to complete schoolwork and homework, have difficulty expressing opinions and presentations in class, withdrawing from the surrounding environment because they are easily distracted by their own emotions so that it is difficult to achieve the desired or set targets.

The third dimension, namely (*Difficulties controlling impulses when experiencing negative emotions*) indicates that a person tends to have difficulty controlling behavior when experiencing negative emotions (Gratz & Roemer, 2004). The results of the study showed that the dimension (*Control*) was the sixth trigger factor or the last in causing emotional dysregulation in students who were victims of bullying by contributing 51.91%. This shows that students who are victims of *bullying* tend to find it difficult to control or resist the urge to react impulsively to perceived emotions such as when they feel angry they will slam objects, hit or scream.

The fourth dimension (*Lack of awareness of emotional responses*) reflects that a person tends to pay less attention and acknowledge his emotions (Gratz & Roemer, 2004). The results of the study showed that the dimension (*Awareness*) was the fourth triggering factor in causing emotional dysregulation in students who were victims of bullying by contributing 52.53%. This shows that students who are victims of bullying tend not to realize that they feel stressed or depressed if they do not have physical complaints such as headaches or difficulty sleeping because they never think about and are aware of their emotions.

The fifth dimension, namely (*Limited access to emotion regulation strategies perceived as effective*), reflects that a person tends to have the belief that when feeling upset, there is not much that can be done to manage emotions effectively (Gratz & Roemer, 2004). The results of the study showed that dimensions (*Strategies*) were the third triggering factor in causing emotional dysregulation in students who were victims of bullying by contributing 55.49%. This shows that students who are victims of bullying feel negative emotions such as anger, sadness, disappointment or fear, they tend to feel depressed so they keep it secret and choose not to reveal it to anyone, so that when they feel sad they

tend to drag on and when angry they will overflow and vent it in an unhealthy way such as throwing things, hitting, saying rudely, shouting or hurt yourself.

The sixth dimension (*Lack of clarity of emotional responses*) reflects that a person tends to not know clearly about the emotions they are experiencing (Gratz & Roemer, 2004). The results of the study showed that dimension (*Clarity*) was the first or largest triggering factor in causing emotional dysregulation in students who were victims of bullying by contributing 59.94%. This shows that students who are victims of bullying do not understand negative feelings such as sadness, anger, disappointment, fear that arise so that they tend to only feel uncomfortable, hurt or even confused with their own feelings because they are unable to ascertain what they feel like whether they feel sad, angry or afraid, then become more sensitive and end up blaming themselves.

Based on the results of the analysis of the dimension of emotional dysregulation in this study, it is shown that *Clarity* and *Goals* have the largest contribution to the problem of emotional dysregulation in students who are victims of *bullying*. These results are different from the study Kennedy & Brausch, (2024) that found that the dimensions that have the greatest contribution to the problem of emotional dysregulation of students who are victims of *bullying* are *Non-acceptance* and *Strategies*. The difference in the results of the study can occur due to differences in demographic characteristics such as age, research place, research sample, and culture between Indonesia and abroad. This is in line with the explanation that the ability to regulate emotions is influenced by age, environment and culture (Gross, 2015).

Emotional dysregulation in students who are victims of *bullying* itself can occur due to the repetitive nature of the bullying, the victim of bullying has difficulty getting support that makes them hold back negative emotions and choose not to express them, the victim feels frustrated and hopeless because they feel that there is no way/strategy to cope with the pressure received by them; the victim Bullying (Kennedy & Brausch, 2024) is also unable to manage stress and pressure, unable to control emotions so that they become more sensitive (Declaration et al., 2024) and then lose their sense of security and comfort so that they feel afraid and depressed (Azrin et al., 2024). Then another study also explains that emotional dysregulation in students who are victims of bullying can be seen in the way they are easily angry, want to hit, cry excessively, vent anger by grumbling and criticizing others around them harshly; difficulty regulating emotions, becoming irritable, sad, frustrated, wanting to vent anger on others, not being able to concentrate, having anxiety to be able to become a perpetrator because they are unable to control impulsive behavior due to negative emotions that arise (Baiti, 2023) (Declaration et al., 2024)

The occurrence of emotional dysregulation in students who are victims of bullying will have various impacts such as difficulty concentrating in learning, decreased motivation to learn, withdrawing from the social environment, especially in class, feeling afraid to go to school until they don't want to go to school, declining academic achievement,

considering that their emotions are invalid and not worthy of expressing, having low self-esteem and not being able to express their emotions. felt by her. Furthermore, emotional dysregulation that is not resolved in the long term in victims of (Baiti, 2023) (Wiyani, 2012) (Abbate & Porcelli, 2017) (Livesley et al., 2017) *bullying* can result in mental health problems such as anxiety, depression, anger, borderline personality traits and sleep disorders. (Van Beveren & Braet, 2015) (Zafar et al., 2021)

Seeing the impact of emotional dysregulation on students who are victims of bullying in life and mental health, the efforts that will be made by guidance and counseling teachers in schools are very important. This is because guidance and counseling are an integral part of education which aims to help each individual develop optimally in accordance with the stage of development and all predispositions they have (such as talents and abilities), background (such as family, education and socioeconomic status) and all positive demands from the (Prayitno & Amti, 2004) surrounding environment. One of the efforts that can be made by guidance and counseling teachers to deal with the problems of students who are victims of bullying with high emotional dysregulation is through curative/alleviation services, namely counseling. Counseling services that can be carried out by guidance and counseling teachers in schools, one of which is *Acceptance and Commitment Therapy* (ACT).

Acceptance and Commitment Therapy (ACT) was introduced by psychologist Steven C. Hayes and his colleagues in the 1980s. They seek to address the limitations of traditional CBT approaches and explore new ways to improve flexibility and psychological well-being. *Acceptance and Commitment Therapy* (ACT) offers a different paradigm by placing experiential avoidance as a core process inherent in what we commonly refer to as disorders. In the ACT perspective, suffering does not come from the thoughts, memories, feelings or physical sensations we experience but from our own response to those internal events (Twohig et al., 2020). The main goal of *Acceptance and Commitment Therapy* (ACT) boils down to psychological flexibility that serves to help students to find meaning in life through the values embraced by them (Turrell & Bell, 2022). This psychological flexibility is important for the regulation of students' emotions, because the regulation of emotions will affect behaviors that are initially adaptive to maladaptive when psychological flexibility is low (Cobos-Sánchez et al., 2022).

Furthermore, *Acceptance and Commitment Therapy* (ACT) in the study Saccaro et al., (2024) was also found to be effective in reducing emotional dysregulation in students both in individual and group settings. This therapy has a lasting and long-lasting effect on the student (Montgomery et al., 2011); it is very versatile in raising awareness, emphasizing the acceptance of any form of negative experience or emotion without forcing it to make changes/avoidance/resistance; the main goal comes down to psychological flexibility that helps the student to remain engaged in meaningful actions despite the negative emotions that arise; The application is more flexible because instead of managing behavior, this approach emphasizes the personal values embraced so that students can live their lives more flexibly without feeling burdened to change drastically.

Acceptance and Commitment Therapy (ACT) also encourages bullying students to observe their thoughts separately, such as when bullying students have "I'm useless or not good enough" thoughts, ACT will guide bullying students) to admit that the mind is just a series of words that have no inherent meaning, so as to reduce their impact and influence on emotions and behavior (Resilience Lab, 2024) .

Based on the description above, this study provides implications for guidance and counseling teachers, especially at the junior high school level, to pay more attention to the ability to regulate the emotions of students who are victims of *bullying*. Efforts that can be made to reduce emotional dysregulation of students who are victims of bullying (*bullying*) are curative services, namely counseling interventions through *the Acceptance and Commitment Therapy* (ACT) approach. In addition, guidance and counseling teachers can also provide *preventive services* as a preventive effort carried out by providing information services, through classical guidance or cross-class services for students who are victims of bullying who already have a low level of emotional dysregulation.

CONCLUSION

The results of the study showed that the emotional dysregulation of students who were victims of bullying in one of the private junior high schools in East Jakarta was mostly in the low category. However, there are still many students who are victims of bullying who have high emotional dysregulation. This study provides implications for guidance and counseling teachers, especially at the junior high school level, to pay more attention to the ability to regulate the emotions of students who are victims of bullying. For this reason, special efforts are needed from guidance and counseling teachers to reduce the emotional dysregulation of students who are victims of bullying (*bullying*) by providing appropriate curative services, namely counseling interventions, one of which is through the *Acceptance and Commitment Therapy* (ACT) approach. Meanwhile, for students who are victims of bullying who already have a low level of emotional dysregulation, BK teachers can provide *preventive services* as a preventive effort such as information services, through classical guidance or cross-class services. For future researchers who want to research about emotional dysregulation, it is expected to conduct research on other effective interventions to reduce emotional dysregulation in students who are victims of *bullying*.

REFERENCES

- Abbate, L., & Porcelli, P. (2017). *Rorschach Comprehensive System. Manuale di siglatura e interpretazione*. Raffaello Cortina.
- Ahmed, S. P., Bittencourt-Hewitt, A., & Sebastian, C. L. (2015). Neurocognitive bases of emotion regulation development in adolescence. *Developmental Cognitive Neuroscience*, 15, 11–25. <https://doi.org/10.1016/j.dcn.2015.07.006>
- Azrin, C. P., Amilia, R., Ingtyas, F. T., & Ginting, L. (2024). Meta-Analisis Pengaruh Bullying Terhadap Regulasi Emosi dan Kemampuan Empati Pada Anak dan Remaja. *Psikofusi: Jurnal Psikologi Integratif*, 6(12), 1–8.

Baiti, N. F. (2023). Studi Tentang Regulasi Emosi Pada Peserta Didik Korban Bullying di SMP Negeri 58 Surabaya. *Jurnal BK UNESA*, 13(2).

Bougie, R., & Sekaran, U. (2019). *Research methods for business: A skill building approach*. John Wiley & sons.

Cobos-Sánchez, L., Fluja-Contreras, J. M., & Becerra, I. G. (2022). Relation between psychological flexibility, emotional intelligence and emotion regulation in adolescence. *Current Psychology*, 41(8), 5434–5443. <https://doi.org/10.1007/s12144-020-01067-7>

Cook, C. R. (2022). Peer Victimization and Social-Emotional Outcomes: A Meta-Analytic Review. *Child Development*, 1377–1395.

Danasasmita, F. S., Pandia, V., Fitriana, E., Afriandi, I., Purba, F. D., Ichsan, A., Pradana, K., Santoso, A. H. S., Mardhiyah, F. S., & Engellia, R. (2024). Validity and reliability of the Difficulties in Emotion Regulation Scale Short Form in Indonesian non-clinical population. *Frontiers in Psychiatry*, 15. <https://doi.org/10.3389/fpsy.2024.1380354>

Denham, S. (2019). *Handbook of Emotional Development* (V. LoBue, K. Pérez-Edgar, & K. A. Buss, Eds.). Springer International Publishing. <https://doi.org/10.1007/978-3-030-17332-6>

Fadul, F. M. (2019). *Konsep Anak Dan Fase Perkembangannya Dalam Perspektif Psikologi*.

Gazzillo, F. (2021). *Fidarsi dei pazienti. Introduzione alla Control-Mastery Theory. Nuova edizione*. Raffaello Cortina.

Gratz, K. L., & Roemer, L. (2004). Multidimensional Assessment of Emotion Regulation and Dysregulation: Development, Factor Structure, and Initial Validation of the Difficulties in Emotion Regulation Scale. *Journal of Psychopathology and Behavioral Assessment*, 26(1), 41–54. <https://doi.org/10.1023/B:JOBA.0000007455.08539.94>

Gross, J. J. (2015). *Handbook of Emotion Regulation*. Guilford Publications.

Izzaty, R. E., Suardiman, S., Ayriza, Y., Purwandari, H., & Kusmaryani, R. (2008). *Perkembangan Peserta Didik*. UNY Press.

Julistia, R., Muna, Z., Anastasya, Y. A., Natasya, A., & Husna, M. (2024). Regulasi Emosi pada Korban Bullying di Dayah Terpadu Kota Lhokseumawe. *Jurnal Diversita*, 10(2), 184–189. <https://doi.org/10.31289/diversita.v10i2.12838>

Kaufman, E. A., Xia, M., Fosco, G., Yaptangco, M., Skidmore, C. R., & Crowell, S. E. (2016). The Difficulties in Emotion Regulation Scale Short Form (DERS-SF): Validation and Replication in Adolescent and Adult Samples. *Journal of Psychopathology and Behavioral Assessment*, 38(3), 443–455. <https://doi.org/10.1007/s10862-015-9529-3>

Kennedy, A., & Brausch, A. M. (2024). Emotion dysregulation, bullying, and suicide behaviors in adolescents. *Journal of Affective Disorders Reports*, 15, 100715. <https://doi.org/10.1016/j.jadr.2023.100715>

- Livesley, W. J., Dimaggio, G., & Clarkin, J. F. (2017). *Trattamento integrato per i disturbi di personalità. Un approccio modulare*. Raffaello Cortina Editore.
- Maheswari, S. R., & Chusniyah, T. (2024). Pengaruh Pelatihan Problem Solving untuk Meningkatkan Regulasi Emosi Remaja. *Jurnal Penelitian Psikologi*, 15(2).
- Mawardah, M., & Sudewa, Agung. (2023). Hubungan Antara Regulasi Emosi dengan Interaksi Sosial pada Remaja Pemain Game Online Free Fire. *Jurnal Psikologi Malahayati*, 5(2).
- Montgomery, K. L., Kim, J. S., & Franklin, C. (2011). Acceptance and Commitment Therapy for Psychological and Physiological Illnesses: A Systematic Review for Social Workers. *Health & Social Work*, 36(3), 169–181. <https://doi.org/10.1093/hsw/36.3.169>
- Olweus, D. (1993). *Bullying at school: What we know and what we can do*. Blackwell.
- Pratama, G. O. (2019). Peran Regulasi Emosi Terhadap Prokrastinasi Akademik pada Siswa Kelas VIII SMP. *Indonesian Journal of Guidance and Counseling: Theory and Application*, 8(2), 119–124. <https://doi.org/10.15294/ijgc.v8i2.19693>
- Prayitno, Afdal, Ifdil, & Ardi, Z. (2017). *Layanan Bimbingan Kelompok & Konseling Kelompok yang Berhasil*. Ghalia Indonesia.
- Pusparini, D. (2017). *Gambaran Umum Regulasi Emosi Siswa SMP dan Implikasinya Terhadap Program Bimbingan Pribadi Sosial*. Universitas Pendidikan Indonesia.
- Rangkuti, A. A. (2017). *Statistika inferensial untuk psikologi dan pendidikan*. Kencana.
- Resilience Lab. (2024, March 1). *What Is Acceptance and Commitment Therapy (ACT)?* Resiliencelab.Us.
- Robertson, T., Daffern, M., & Bucks, R. S. (2012). Emotion regulation and aggression. *Aggression and Violent Behavior*, 17(1), 72–82. <https://doi.org/10.1016/j.avb.2011.09.006>
- Rosa, N. (2023, October 3). *Data Kasus Bullying di Sekolah, FSGI: 50% di Jenjang SMP*. Detik.Com.
- udolph, K. D., Troop-Gordon, W., & Flynn, M. (2009). Relational victimization predicts children's social-cognitive and self-regulatory responses in a challenging peer context. *Developmental Psychology*, 45(5), 1444–1454. <https://doi.org/10.1037/a0014858>
- Saccaro, L. F., Giff, A., De Rossi, M. M., & Piguet, C. (2024). Interventions targeting emotion regulation: A systematic umbrella review. *Journal of Psychiatric Research*, 174, 263–274. <https://doi.org/10.1016/j.jpsychires.2024.04.025>
- Stifter, C., & Agustinus, M. (2019). *Handbook of Emotional Development* (V. LoBue, K. Pérez-Edgar, & K. A. Buss, Eds.). Springer International Publishing. <https://doi.org/10.1007/978-3-030-17332-6>
- Sugiyono. (2013). *Metode Penelitian Kuantitatif Kualitatif dan R&D*. Alfabeta.

- Turrell, S. L., & Bell, M. (2022). *ACT for adolescents: Treating teens and adolescents in individual and group therapy*. New Harbinger Publications.
- Twohig, M. P., Levin, M. E., & Ong, C. W. (2020). *ACT in steps: A transdiagnostic manual for learning acceptance and commitment therapy*. Oxford University Press.
- Van Beveren, M.-L., & Braet, C. (2015). *Emotion regulation in adolescent depression: a developmental psychopathology perspective*. In *Emotion regulation: processes, cognitive effect and social consequences*. Nova Science Publishers.
- Wiyani, N. A. (2012). *Save our children from school bullying*. Ar-Ruzz Media.
- Yanwar, R. P., Soetikno, N., & Mar'at, S. (2020). Bullying in Adolescents. *Proceedings of the 2nd Tarumanagara International Conference on the Applications of Social Sciences and Humanities (TICASH 2020)*. <https://doi.org/10.2991/assehr.k.201209.092>
- Zafar, H., Debowska, A., & Boduszek, D. (2021). Emotion regulation difficulties and psychopathology among Pakistani adolescents. *Clinical Child Psychology and Psychiatry*, 26(1), 121–139. <https://doi.org/10.1177/1359104520969765>
- Zuhriyah, U. (2024, December 30). *Data Kasus Bullying Terbaru 2024, Apakah Meningkat?* Tirto.Id.