

THE ENHANCEMENT OF RESILIENCE OF VOCATIONAL STUDENTS THROUGH GROUP COUNSELING





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THE ENHANCEMENT OF RESILIENCE OF VOCATIONAL STUDENTS THROUGH GROUP COUNSELING

BY

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The aims of the research aims are as follows: (1) to study the resilience of vocational student; (2) to compare the resilience of vocational students in the experimental group before and after participation in group counseling; (3) to compare the difference of resilience of vocational students in the control and experimental groups before and after participation in group counseling. The study subjects were grade one to grade three students in Tongren Early Childhood Normal College, Guizhou Province, with a total of 150 students. The 20 students were divided by random assignment into an experimental and a control group, with 10 students in each group. The present study is a quasi-experimental design with a pre-test and post-test resilience assessment. The experimental group received eight group counseling sessions to enhance mental toughness, while the control group did not receive group counseling. The results were analyzed using descriptive analysis in statistical analysis and paired sample t-test. The results showed the following: (1) the resilience of vocational students was a low-level score; (2) the resilience of the experimental group was significantly enhanced (t=12.324, p< .001), and 3) the level of psychological resilience of the experimental group was enhanced from 44.25 to 55.1, while the psychological resilience of the control group had no significant change. (t= 14.162, p< .001).

Keyword: Resilience, Vocational school students, Group counseling

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CHAPTER 1

INTRODUCTION

Background

Higher vocational education has emerged as the driving force behind the widespread accessibility of higher education in China in recent years. In the 1920s, amid the swift growth of China's economy, the manufacturing industry has been in a state of shortage of talents. As a skill training type of talents, higher vocational students will fill this talent gap, and higher vocational students are an indispensable part of building a country to promote development(Lili, 2016). On the one hand, higher vocational colleges need to impart abundant basic theoretical knowledge to students, and at the same time, carry out relevant professional skills training to make students of higher vocational colleges become talents with solid foundation and certain professional skills. On the other hand, having good psychological quality is an important basis for higher vocational students to exert their ability.

China's education is undergoing a comprehensive reform in the 21st century, especially higher vocational education, which is facing new challenges to adapt to social and economic development in the new era. This is a major impact on the mental health of vocational students in the reform of the education system, and they will encounter new adversity. This also shows that higher vocational education has played an important role in China (Gao, 2020). The study of mental health education of vocational college students not only brings a new orientation of mental quality education, but also broadens the methods and approaches of psychological education, enriches the connotation of psychological quality education, and realizes the education development health of mental from tradition to positive.

Vocational college graduates nominally belong to the category of college students, and vocational college students occupy a fairly high proportion of college students, but because they are considered to be short in academic system and low in academic qualifications, they have to face more changes from physiology, psychology and environment, and bear more pressure from study, employment and interpersonal relations than students in key universities and ordinary undergraduate colleges. Multiple pressures often cause their psychological confusion and obstacles, especially students with poor mental endurance are prone to psychological problems (Chen, 2005).

The adversity faced by vocational students is, the negative experiences of vocational students, such as the difficulties they encounter in their studies or life, such as inability to adapt to higher vocational education, inability to understand professional knowledge, concerns over academic performance and a lack of support from friends, family and teachers, confusion about the future, and pressure from employment situation. Cassidy(2017) found that students are cyberbullied by other students, which negatively impacts their physical and mental health, self-perception, personal and professional life, and personal safety. Kumaraswamy(2013) points out that students' responses to the stress of entering university vary. For some students, the shift from high school to college can be challenging. For others, moving away from home can be stressful. Although stress is essential for personal growth, excessive stress can impair their coping abilities. He also cited Students face emotional and psychological problems, including anxiety about various aspects of their studies, such as exams and presentations, loneliness and homesickness, managing transitions, issues around sex and sexuality, Worries about appearance and so on.

According to the survey, when faced with a crisis, 65% of students turn to their peers for help, and only 14.1% turn to school teachers or psychological counseling agencies for help. It can be seen that students' acceptance and utilization of social resources provided by schools are not high (Xiao&Biao, 2023).

Therefore, research on how to improve students' mental health, in-depth investigation of factors related to mental health, scientific and effective methods for

students, and active intervention to improve students' mental health can make contributions to individuals, schools, society and the country.

Psychology resilience not only focuses on illness, stress and defects, but also focuses on the positive factors shown by individuals in the face of difficulties, especially the growth after trauma, which can guide individuals to find their own advantages and tap their own potential. The quality of psychology resilience is helpful for individuals to maintain good emotions, contribute to the formation of harmonious interpersonal relationships, contribute to the enhancement of tolerance to handle setbacks (Sheng&Li, 2018), and contribute to the enhancement of vocational students' self-efficacy.

Enhancing psychological resilience is crucial for promoting the mental health of vocational college students. Mental health is a potential factor that can affect the present and future development of a person. To a certain extent, it can change the inner environment of a person's growth, and it also plays a positive role in the formation of students' "three views" (Jing, 2023,p1). For educators, it is an important task to master the psychological characteristics of higher vocational students in different stages, pay attention to their mental health, regularly provide psychological counseling for problems, and actively prevent and intervene in psychological crisis, so as to ensure that higher vocational students have a healthy and sustainable development of the best state.

Group counseling to intervene in psychology resilience measures is very suitable for students, because in the school, the community naturally exists. Compared with individual counseling, group counseling has the advantages of saving consulting time, utilizing teachers' resources, improving work efficiency, and focusing on solving some urgent common psychological problems (Xiao, 2012). Further, participants in group counseling usually think that psychological counseling is not for themselves, can be invested in it, so as to achieve better results, and have different help for individuals in the group. Through interaction, participants will also find that their "problem" is not a personality problem, so as to get a better psychological comfort, but also more conducive to seeking a solution to the "problem".

Corey(2012) points out that: "The fundamental principle of group counseling lies in providing life experiences that participants can apply to their daily interactions with others. In essence, group counseling simulates real social situations, thereby enhancing practical skills and bridging the gap between counseling and daily life. This facilitates the effectiveness and transferability of counseling outcomes into everyday experiences. Group interaction facilitates the exchange of information and fosters autonomy, leading to the formation of group dynamics (Chunyan, 2003). In a group setting, group dynamics are crucial for achieving group goals, as members interact and influence each other to collectively address their own issues.

In short, group counseling is a supportive process that involves interpersonal interactions within a group, encouraging individuals to learn new attitudes and behaviors through observation, learning, experience, self-understanding, self-exploration, self-acceptance, adjustment, and improving relationships with others. This helps them to develop effective life coping strategies. Psychological resilience is the positive power accumulated by individuals in daily life, which enables people to maintain a good mood in the face of setbacks and difficulties. The purpose of this study was to explore the effect of group counseling on mental resilience and to provide new methods and ideas for improving the psychology health of Tongren Early Childhood Normal College. Simultaneously, this study will also support the expansion of group counseling applications to other psychological factors and foster innovation and development in education.

Research Question

- 1. What is the resilience level of vocational students?
- 2. Can group counseling improve resilience of students?

Research Objectives

- 1.To study resilience of vocational students
- 2. To compare resilience of vocational students in the experimental group before and after participation of group counseling.

3. To compare difference of resilience of vocational students in the control group and experimental group before and after participation of group counseling.

Research Significance

As people pay more attention to mental health, group counseling is becoming more and more popular, and educators begin to explore the application of group counseling in the mental health of students. The aim of this study was to explore the enhancement of vocational students' psychological resilience through group counseling. And discuss the impact of group counseling on the three factors of psychological resilience (Tenacity, Strength, Optimism). It provides new methods and ideas for improving vocational students' psychological resilience. At the same time, this study will also contribute to promoting the application of group counseling in addressing other psychological factors, and fostering innovation and development in promoting students' mental well-being.

For the school, this study can be carried out in the school, from the perspective of psychology to provide a new vision for the school to educate students, help the school to cultivate talents, improve the school atmosphere, and build an excellent campus.

For teachers, this study can help teachers better grasp the methods of improving students' psychological resilience through group counseling, better use of various counseling techniques, more effective intervention, and improve teachers' educational quality.

For students, this study can help students better adapt to adversity, improve students' tenacity, strength and optimism, cultivate students' self-efficacy, and better face life and study.

For other researchers, this study provides insight into the effects of group counseling on psychological resilience.

Research Scope

Population: This study is mainly aimed at grade one to grade three students in Tongren Early Childhood Normal College, Guizhou Province, with a total of 150 students.

Sample: The participants in this study are students from grades 1 to 3, divided into an experimental group and a control group, totaling 20 students, 10 in each group. These 20 students were selected from an initial pool of 150 students based on similar levels of resilience. To ensure the reliability of the research results, there were no significant differences between the two groups in terms of gender and age, and all students exhibited low levels of resilience.

Variable:

The independent variable is group counseling.

The dependent variable is resilience.

Conceptual Framework of Research

The objective of this study was to explore the enhancement of psychological resilience in vocational students with counseling interventions. Counseling intervention is carried out in the form of group counseling.

Group counseling intervention methods have been used to solve various problems of young people, such as Guo Shikui (2017) social anxiety intervention for college students; Zhuang Lidan (2016) Research on improving the heterosexual communication ability of college students; Zhou Qinghua, Zhang Guangxu, Tan Linfei (2008) The influence of vocational college students on their professional values; Hendar, K., Awalya, A., & Sunawan, S. (2019)increase academic resilience and self-efficacy; Yan Xiangwei (2019) Positive impact on freshmen's mental health. For vocational students, they are still in a critical period of youth development. Numerous studies have shown that group counseling intervention is effective in the psychological influence of young people. Therefore, the conceptual framework of this study is as follows:

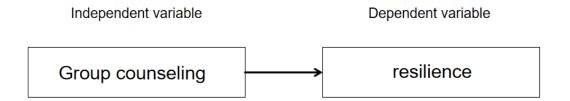


FIGURE 1 Conceptual framework

Research Hypotheses

For the purpose of the study, the following assumptions were used:

- 1. The resilience of experimental group will improve after group counseling.
- 2. There will difference in resilience between the experimental group and control group after group counseling.

Definition of terms

1. Vocational students refer to grade one to grade three students in Tongren Early Childhood Normal College, Guizhou Province.

Resilience is the ability to adapt well in the face of adversity, trauma, tragedy, threats, or significant stressors. After experiencing trauma, the individual did not appear pathological state, but also showed better psychological quality to adapt to the environment, which is the embodiment of psychology resilience. Including Tenacity: Facing challenges, calm, firm,quick, sense of control. Strength: Can not only recover but also develop and grow through setbacks. Optimism: Have the confidence to overcome adversity and look at things from a positive perspective.

Operational definitions

2. Group counseling refers to the offline resilience counseling program created based on the concepts of psychological crisis intervention and individual psychological growth as well as the application of group counseling theories and techniques. The role of team leader should help team members build a relationship, give them the same opportunities, build mutual trust, and be able to tell each other. the group leader

understands the problems, causes, and needs through the consulting skills of listening, questioning, reflecting of feelings and being silent. Then leader gives information and suggestions, Indicating the decision. Each session takes approximately 1.0-1.5 hours, and group counseling meets 3 times a week. A total of 8 group consultations were completed within 4 weeks. In all sessions except the first, take 10 minutes for member to discuss the gains and feelings of the previous group counseling. This allowed group members to quickly get into good communication, realize their importance in the group, and sense their emotional responses. The group itself serves as a mini-society where members can openly discuss emotions and behaviors from their daily lives in a safe environment, and apply the experiences gained within the group to their personal lives. A brief overview of each meeting is below.

- 1) Session1 is the stage of group formation. The main task is to initially establish the relationship between group members and connect them with each other through verbal and non-verbal communication. The group atmosphere at this time is polite, polite, tentative.
- 2) Session2 is the self-survey stage. It is designed to gain insight into one's emotions and deepen the depth of one's self-knowledge through thinking about oneself.
- 3) Session3 is the stage of self-acceptance. The goal is to reduce resistance, anxiety, and defensiveness, as well as the fear that they will not be accepted by others.
- 4) Session4 is the stage to build awareness of psychology resilience. It aims to establish, through the use of scientific methods, from the three aspects of strength, resilience and optimism, that mental resilience can be improved, so that the group members can then more clearly understand what kind of mental state to cope with adversity.
- 5) Session5 is the stage to master the methods to improve resilience. It aims to provide advice on how to improve mental resilience and allow participants to find their own solutions by sharing their past successes in overcoming adversity, using the group to solve their own problems, and showing genuine concern for other members.

Members try to change their lives through self-exploration and feedback from others.

And get the support and encouragement of other members. The theme for this stage was

Tenacity

- 6) Session6 is also the stage to master the methods to improve resilience. The theme of this stage is Strength.
- 7) Session7 is also the stage to master the methods to improve resilience. The theme of this session is Optimism.
- 8) Session8 is the stage of summary and integration. At this stage, members should summarize and evaluate their experiences and gains throughout the process, and whether there are changes in behavior and emotions. The leader of the group should provide psychological support to members, assist them in sorting out what they have learned in the group, and give them time and opportunities to deal with unfinished events in the group. Affirm everyone's growth. Inspire confidence and apply the skills learned in the group to daily life, so that the skills are consolidated and strengthened.

Resilience refers to the resilience questionnaire adopted by Yu Xiaonan and Zhang Jianxin to reassess the scoring dimension based on the Connor-Davidson resilience scale of Connor and Davidson. Yu Xiaonan and Zhang Jianxin's study "comparison of self-resilience scale and Connor-Davidson resilience scale" proves that Connor-Davidson resilience scale can be widely applied in China. The original scale factor analysis by Connor and Davidson identified five factors: personal competence, high standards, and tenacity; trust in one's instincts, tolerance of negative affect, and the strengthening effects of stress; positive acceptance of change and secure relationships; control; spiritual influences. In this paper, based on these studies, will The resilience assessment measures three aspects of resilience: tenacity, Strength and optimism as The main direction of The study.

CHAPTER 2 LITERATURE REVIEW

This study applied group counseling program to enhance vocational students' resilience. This chapter reviews the literature on the definition of psychological resilience, research on psychological resilience and group counseling, and probes into the enhancing effect of group counseling on psychological resilience of vocational students. Below is an outline of the literature to be reviewed here:

2.1 Resilience

- 2.1.1 Definition of Resilience
- 2.1.2 Component of Resilience
- 2.1.3 Research of Resilience and enhancement of Resilience
- 2.2 Group counseling
- 2.2.1 Definition of Group counseling
 - 1)Rationale for Group work
 - 2) Group counseling stages
- 2.2.2 Group counseling theory
- 2.2.3 Research of Group counseling

2.1 Resilience

2.1.1 Definition of Resilience

The term resilience comes from the Latin verb "resilire" which means to rebound or "leap back" (Fletcher & Sarkar, 2013). Resilience, originally used in ecology, is defined as the ability of an ecosystem to recover or avoid damage when disturbed. Resilience is now used in the field of psychology, and the term resilience is generally accepted to have a psychological meaning (Vella & Pai ,2019). Early studies of resilience can be traced back to Emmy E. Werner's longitudinal study of 689 children on the Hawaiian island of Kauai in the 1950s. These children live in conditions of extreme deprivation, experience great emotional deprivation and neglect, have no one to hug or comfort them, and nearly a third of them live in poverty-stricken and stressful

environments, such as families with mental illness or alcoholism. Two-thirds of children develop mental health or behavioral problems in childhood, such as being unemployed, becoming addicted to drugs, and becoming pregnant during adolescence. But Werner found that a third of these children were not affected by their environment, but were successful in study, career and family, and had personality traits that were confident, excellent, competent and caring(Werner, 1955). Werner's study found that in the absence of other factors, some children can still adapt and develop well in adversity, and identified the factors that affect the resilience of high-risk children, laying the foundation for later psychological resilience as an important research content.

Rutter(1987) definition of resilience focuses on an individual's ability to endure and recover from significant adversity. Resilience, in this context, relates to one's capacity to withstand challenging situations and eventually return to a state of well-being.

Garmezy(1991) definition emphasizes resilience as an individual's ability to maintain relatively stable and healthy levels of psychological and physical functioning, even in the face of highly disruptive or adverse events.

Benard(1955) defined concept of resilience builds upon prior research and theories in human development, which have clearly established the biological drive for growth and development inherent in the human organism. This unfolds naturally in the presence of certain environmental characteristics. We are all born with an innate capacity for resilience, enabling us to develop social competence, problem-solving skills, critical consciousness, autonomy, and a sense of purpose.

Elder(1998) definition views resilience as the capability of individuals to seek out and utilize various psychological, social, cultural, and physical resources that support their well-being. It also involves the ability to navigate obstacles when necessary.

Masten(2001) definition of resilience emphasizes that resilience is a dynamic system's capacity to successfully adapt to disturbances that may threaten the

functioning, viability, or development of that system. It underscores the idea that resilience is not a fixed trait but a process.

Although a large number of studies have defined psychological resilience, there is still no unified understanding of this concept in the academic community(Li & Zhang, 2006). However, the element of adversity is included in all studies, that is, psychological resilience is the factor that people play a role in adversity. Psychologists have different definitions of adversity for different research objects and research objectives. This paper summarizes the academic research and definition of psychological resilience, and combines its own research direction, and defines it as: Resilience is both the process and outcome of successfully adapting to difficult or challenging life experiences, particularly through strength, tenacity, and optimism in response to external and internal demands.

2.1.2 Component of Resilience

Bonanno(2004) explored the remarkable resilience and resilience of humans in the face of extreme adversity and emphasizes the importance of positive emotions, adaptive cognition, and flexible coping strategies. Luthar(2000) evaluated the development and measurement of mental resilience constructs, emphasizing the role of emotional regulation, social support, and self-efficacy in mental resilience. Southwick(2014) synthesizes interdisciplinary research to define different components of mental resilience, such as biological, psychological, and socio-environmental factors. Fredrickson(2003) studied the role of positive emotions in crisis and found that positive emotions help to enhance mental resilience and promote the ability to cope with adversity.

Resilience is made up of multiple components, each of which plays a different role in different situations. The following are the main components of resilience:

1.Emotion regulation

1) Emotion recognition and expression: Being able to accurately identify and express your emotions helps to deal with stressors.

2) Emotional regulation: effectively manage and regulate emotional responses to avoid excessive emotional fluctuations.

2. Cognitive flexibility

- 1) Emotional regulation: effectively manage and regulate emotional responses to avoid excessive emotional fluctuations.
- 2) Sense of reality: Ability to assess situations objectively and avoid being overly pessimistic or optimistic.
- 3) Problem solving skills: The ability to solve problems and find effective strategies to solve difficult situations.

3.Interpersonal relationship

- 1) Social support: Having a good social support network, including family, friends, and community support.
- 2) Communication skills: The ability to communicate effectively with others and ask for help and support.
- 3) Empathy: Understanding and consideration for the feelings of others and building meaningful social relationships.

4.Self-efficacy

- 1) Confidence: Belief in your ability to cope with challenges and solve problems.
- 2) Self-esteem: Having a positive opinion and affirmation of yourself and having a healthy self-image.
- 3) Autonomy: The ability to make decisions and act independently in the face of difficulties.

5.Goal orientation

- 1) Goal setting: Set realistic and achievable goals to give yourself a clear direction.
- 2) Motivation and persistence: Maintain intrinsic motivation, work firmly towards the goal, and never give up even when faced with setbacks.

3) Sense of meaning: Having a clear understanding of the meaning of life and work, and being able to find the value and purpose of existence.

6.Adaptability

- 1) Flexibility: The ability to adjust your behavior and strategies as circumstances change.
- 2) Learning ability: Learning from experiences and applying those experiences to future challenges.
- 3) Frustration tolerance: In the face of setbacks, can remain tough and patient, not easily defeated.

2.1.3 Research of Psychology Resilience and enhancement of Resilience

In early studies on psychological resilience, researchers identified the impact of resilience in high-risk children Werner (1989) analyzed the developmental process of high-risk and resilient children in a 1955 study in Kauai, Hawaii. Using a prospective longitudinal study design that involves continuous observation and evaluation of a specific group of individuals over an extended period of time, the researchers followed a group of high-risk children from birth to age 32, aiming to understand their developmental trajectories, the factors that affect their lives, and their outcomes as adults. Personal characteristics such as temperament, cognitive ability, family factors such as parental support, socioeconomic status, and external factors such as school environment and community resources were the main variables in this study. Different data collection methods, such as interviews, surveys, psychological assessments, and observations, were used to gather information about participants' development, experiences, and well-being. Based on comprehensive data collected over 32 years, the study reached several key conclusions:1. Diverse Developmental Trajectories: High-risk children exhibited diverse developmental trajectories.2. Protective Factors:Strong social support networks, access to quality education, and the development of coping strategies that played a crucial role in promoting resilience among high-risk children.3. Long-Term Impact:The study highlighted the long-term impact of early life experiences and family circumstances on individuals' well-being in young adulthood.4. Variability in Outcomes: Not all high-risk children experienced negative outcomes.

Masten, Karin, and Garmezy(1990) then studied children who overcome adversity to illustrate the significance and potential of psychological resilience for understanding normal development. Using a hybrid approach, which combines qualitative and quantitative methods to gain a comprehensive understanding of the resilience and development of children facing adversity, they selected children who experienced different forms of adversity, such as trauma, poverty or family challenges, as differentiators, representing different backgrounds and experiences. Data were collected on participants from childhood through adolescence and beyond using indepth interviews, standardized psychological assessments, surveys, and observations at multiple time points to capture change and developmental trajectory. Finally, through the use of qualitative content analysis and quantitative statistical techniques to analyze the data, the following conclusions are drawn: 1. Resilience is a dynamic process: resilience is not a fixed feature, but a dynamic process that evolves over time. Children can develop and strengthen resilience through a variety of experiences and coping strategies.2. Protective factors: The study identified protective factors that contribute to resilience, including supportive relationships with caregivers or mentors, access to educational opportunities, the influence of environmental factors, and the development of adaptive coping mechanisms.3. Adversity can promote growth: Although adversity can have negative effects, it can also serve as a catalyst for personal growth and development. Some children who face adversity show remarkable resilience and achieve positive outcomes.4. Individual differences: Individual differences play an important role in mental resilience. Children with different personality traits, temperaments, and coping styles may cope with adversity in unique ways.

Rutter(1987) explores the protective mechanisms of resilience, focusing not on broadly defined protective factors but on the developmental and situational mechanisms involved in the protective process. He argues that the protective mechanisms of psychological resilience interact prominently with varying degrees of

risk, emphasizing the importance of how individuals navigate life changes and manage stressful or adverse circumstances. The protective mechanism is influenced by psychological factors and social factors. The psychological factors include self-esteem and emotional regulation, positive outlook on life, self-efficacy and optimism, which represent high adaptability. Social factors include family dynamics, peer support, positive social relationships, and the influence of community resources. He identified four main processes that protect individuals from psychological risks associated with adversity: 1. Reducing the effects of risks. 2. Breaking negative chain reactions. 3. Building and maintaining self-esteem and self-efficacy. 4. Opening up opportunities. Special attention is given to mechanisms that operate during critical turning points in people's lives. His research has implications for a variety of fields, including psychology, education, and clinical practice, demonstrating the role of helping individuals recover from adversity, maintain psychology resilience, and positively adapt to challenges.

Benard(1991) discussed the main protective factors that contribute to the development of psychological resilience in adolescents and how to establish effective prevention programs. He proposed that family, school and community are important protective factors in the development of psychological resilience in children and adolescents, and that support, high expectations and encouragement from family, school and community are essential for at-risk students. If we can identify individual and environmental sources of social competence and health, we can better design preventive interventions that emphasize developing and enhancing personal and environmental qualities (Benard, 1991). Establish systems that foster social connections within family, school, and community settings where individuals are nurtured and supported, held to high expectations, and engaged as active contributors in their family, school, and community. It is important to create systems based on reciprocity and collaboration, rather than control.

Through research, it is not difficult to find that psychological resilience not only appears in children in adversity. Many scholars later conducted studies on groups in different adversity and proposed different strategies to improve psychological

resilience. Martin(2006) focused on students and studied academic resilience and its relevance in psychology and education. Academic resilience is pertinent to every student, as all students may encounter periods of academic under performance, adversity, challenges, or pressure at some stage(Martin & Marsh, 2006). Their research proposes a 5-C model of academic resilience: confidence (self-efficacy), coordination (planning), control, composure (low anxiety), and commitment (persistence). It also points out that the intervention for students' academic flexibility should focus on students' 5-C. Some strategies are as follows: Cultivating students' ability to set effective goals and enhancing students' belief in their academic abilities can improve selfefficacy; Clear their expectations and requirements in the study and learning plan, regularly check their completion, and reasonable use of time, determine the priority of the task, can enhance the ability to persist; To show students successful cases of hard study and establish effective learning strategies can improve the concept of academic performance, so that students have a certain choice in course objectives, grading standards and achievement tests, which can help students increase control; Finally, reduce anxiety: shift students' attention to controllable factors (effort and strategy), away from uncontrollable factors and factors that reduce their value, reduce students' stress in a competitive environment, and prevent students from associating achievement with personal value.

Another study from Suranata et al(Suranata, Atmoko, & Hidayah, 2017) compare the effect of cognitive-behavioral counseling and strengths-based counseling The effects of two counseling methods on improving psychological resilience were discussed. The researchers took 7th grade students as research objects and divided them into three groups. The first group adopted cognitive-behavioral counseling, the second group adopted strengths-based counseling, and the third group did not receive any intervention. The results indicate that students in the first group exhibit higher levels of psychological resilience compared to those in the second group, and students in the second group show higher levels than those in the third group. This suggests that psychological counseling interventions can significantly enhance students'

psychological resilience. Furthermore, cognitive-behavioral counseling is found to be more effective than the strengths-based counseling model.

A study on improving mental resilience comes from Mak, et al. The study group was university students in Hong Kong, China, Through the positive cognitive triad, they found the mechanism of the enhancement of well-being on students' psychology resilience. The Positive Cognitive Triad refers to resilient individuals who maintain a positive outlook on themselves, the world, and the future. This positive perspective enhances their emotional well-being and life satisfaction while shielding them from depression(Mak, Ng, & Wong, 2011). The Positive Cognitive Triad was shown to be significantly associated with psychological resilience, meaning that psychology resilience can be enhanced by improving the view of self world and future.

Ungar, et al discussed the impact of school-based Interventions on secondary School students. In their evaluation of the outcomes of 36 interventions, they found that programs that do not include a cultural component or ignore the impact of student environmental factors tend to be less effective. And the bias of program implementers can affect the outcomes of interventions to promote resilience provided by schools. They noted that resilience is a multidimensional construct, influenced by both exposure to risk and access to various internal and external resources (Ungar, Russell & Connelly, 2014). Based on this, the researchers propose effective interventions, such as focusing on changing the environment rather than making a difference in resource-poor environments. Children exposed to higher levels of adversity benefited more than low-risk children who participated in the same school program. Improve parent-child interaction and encourage non-punitive disciplinary strategies.

In general, psychological resilience is closely related to mental health, and the study of psychological resilience is of great significance for the development of positive and healthy psychology. Moreover, psychological resilience can be improved in various ways, and enhancing psychological resilience plays different roles in different fields, especially in the field of education. Improving students' psychological resilience can help students improve their academic performance, improve students' interpersonal

communication, establish a harmonious family atmosphere, and develop students' self-efficacy. To enable students to have good personal development in the face of adversity.

2.2 Group counseling

2.2.1 Definition of Group counseling

Participating in groups is an essential part of how we interact with the world. Groups are present in all aspects of our lives, including participation in family, work, social and community group relationships. Without groups, we would not know the full meaning of our humanity (Trotzer, 2013).

Slavson(1952) pointed out that a group must consist of at least three people, as it is the third and subsequent individuals who introduce problems and stress that do not typically arise in two-person relationships (Slavson, 1952). Its definition represents the minimum number of people necessary for a group process to occur. Three or more people bring new strength to the team when team members are making connections, communicating with others, and achieving goals.

Homans (1950) defined a therapeutic group as a "number of persons who communicate directly with one another over a period of time, in small enough numbers that each person can communicate face-to-face with others, rather than second-hand through intermediaries" (Homans, 1950).

To some extent, the purpose and type of the group, the personal characteristics of the group members, and the experience and expertise of the group leaders matter to the largest size of the group. In general, when the group members exceed the range of 8-12 people, the therapeutic effect and impact of group counseling will become less obvious. A general guideline for an effective small group size is typically 5 to 12 members (Roark & Roark, 1979).

Group counseling is characterized by the contact between counselor and counselee to help clients find, understand and propose solutions when facing difficulties in life or certain uncontrollable situations. The counselor should develop trust, acceptance, respect, warmth and communication atmosphere among the group

(Trotzer, 1972). Its definition distinguishes counseling or therapy groups from other small groups. The purpose of Group counseling is to realize helping group members make changes in their personal lives, rather than completing the tasks of the group. The key point is that, first of all, the advisory group as a human network represents a human process that reflects the problems that members are experiencing in the field of human relations. Second, the significance of the therapeutic network can only be exerted in the context of the relationship, where trust, acceptance, respect, warmth, communication and understanding can only exist if the interpersonal relationship exists. Third, mutual help between members can better drive the internal interpersonal growth momentum. Finally, advisory groups are set up to solve problems.

In the view of Corey(2012), group counseling has both preventive and therapeutic purposes. Advisory groups are usually issue-oriented, with participating members largely dependent on their purpose or issue. In general, advisory groups are created to focus on a particular topic, such as personal, career, education, society. Conducting group work emphasizes how the participants are thinking, feeling, and behaving in the present moment. Group counseling is typically growth-oriented, focusing on discovering inner strengths rather than extensive personality reconstruction. Participants may experience situational crises, temporary conflicts, or interpersonal communication problems. The group provides members with compassion and support to foster a trusting atmosphere where they can explore and resolve these issues, enhancing their ability to handle similar challenges in the future.

1) Rationale for Group work

Berg, Landreth & Fall(2013) rationale for the group is conceptualized as a unique interplay between factors associated with the self (I elements), understanding and relating to others (You elements), and the complex interpersonal dynamics of the group as a whole (Us elements).

Opportunity for Self-Discovery and Redefining of Self (I)

One potential concern is that clients in a group may fear their needs won't be fully addressed because the group leader's time is divided among group

members. Group workers must recognize that the primary distinction between individual and group counseling lies in the opportunities for self-discovery. Group counseling fosters an atmosphere of acceptance where members can experiment with new, more effective behaviors. This process facilitates each member's exploration of a new self and its expression to others, helping them to answer the question, 'Who am I?' As the group evolves, the self ('I') is shaped and refined through dynamic interactions with others ('you') and the group as a whole ('us').

Discovering Others (You)

For some individuals who are uncomfortable with individual counseling, the relative anonymity of the group model can make them feel less scrutinized. Another benefit is that when group members feel anxious and fearful, they engage with the group by listening to what others share. Whether speaking or listening, group members discover that their problems are not unique to them and start to feel less unwelcome, different, and isolated. Realizing they are not alone in the group helps them relax and lower their defenses. As individuals discover that other members also face challenges during group interactions, empathy and a sense of belonging can arise, even if the specific issues are different (Kline, 2003). Through these interactions, group members can explore questions such as, 'Who am I in this group?' and more importantly, 'How have I influenced others?'.

Developing Interpersonal Awareness and the Reality Testing Lab (Us)

In group counseling, the concept of care forms a multidirectional matrix where group members learn to both give and receive help. Each member participates in this reciprocal process, experiencing personal growth through helping others. As team members recognize how their individual identities ('me') integrate with others ('you'), connections are formed within the team as a whole ('us'). In navigating these complex dynamics, team members address questions such as, 'Who are we?' and 'What is our purpose here, and what makes this team valuable and unique?'.

2) Group counseling stages

Definition of group counseling stage:

According to Corey's (2012) theory, group counseling can be divided into six stages:

Stage 1: Pre-group Issues—Formation of the Group

The process begins with a comprehensive planning document that includes the primary goals of the group, the target population, a clear rationale for the group's necessity and purpose specific to that population, group announcements and member recruitment, screening and selection procedures, group size and duration, meeting frequency and schedule, group structure and format, member preparation methods, whether the group is open or closed, and whether membership is voluntary or involuntary. It also outlines follow-up and evaluation procedures.

Stage 2: Initial Stage—Orientation and Exploration

This stage is usually characterized by a certain level of anxiety and insecurity about the group. At this stage, members learn how the group works. Set your own goals, be clear about your expectations, and find your place in the team. Leaders need to remove the distance between group members and allow them to express themselves openly.

Stage 3: Transition Stage—Dealing With Reluctance

At this stage, members begin to solve problems and deal with their anxieties, defenses, conflicts, and the purpose of participating in the group. If members have established trust in the group in the earlier stages, they are often willing to express certain thoughts and feelings that they may have been reluctant to express in the early stages. Leaders help members learn how to deal with the issues that bring them to the group.

Stage 4: Working Stage—Cohesion and Productivity

At this point, participants have learned to engage in group interactions more spontaneously. The group leader intervenes much less compared to

earlier stages, encouraging members to decide which issues to explore in the group and to integrate into the group while maintaining their individuality.

Stage 5: Final Stage—Consolidation and Termination

This is a summary and integration stage, and the most important task in this stage is for the team leader to develop the ability of the members to transfer what they have learned in the team to the external environment, that is, to continue to be useful outside the team.

Stage 6: Post-group Issues—Evaluation and Follow-Up

After the group consultation, there are two indicators to consider: evaluation and follow-up. Evaluation refers to the discussion of the knowledge and methods acquired throughout the group process. Follow-up refers to checking the effectiveness of the results by returning visits to members after a period of time.

2.2.2 Group counseling theory

There are many forms of group psychotherapy, and group therapy may have specific topics, such as alcohol, smoking, Internet addiction, emotional problems; There can also be no fixed theme, such as interpersonal interaction groups. In this study, personal-center therapy, cognitive behavioral therapy and Solution-focused Brief Therapy were mainly used. The basic theories of these three therapies are explained as apv: follows:

Person-centered therapy:

Person-centered therapy focuses on the uniqueness of human beings, advocating that human beings are free and rational beings with the potential for personal development, and are fundamentally different from animals. To fully understand human behavior, we must take into account that people have a basic need that points to personal growth.

Person-centered therapy was created by Carl Rogers (1977). Based on phenomenology and existentialist philosophy, this therapy aims to provide a good psychological atmosphere, mobilize the client's internal resources for self-understanding and self-correction, remove the internalized part of himself that does not belong to him, find his own thoughts, emotions and behavior patterns, and, in Rogers' words, "turn back to himself" and "walk out from behind the mask". Only such people can give full play to their individual functions to achieve mental health(Rogers, 1977).

Human beings are inherently trustworthy. They have significant potential to understand themselves and solve their problems without the direct intervention of a healer. As long as a suitable environment is provided, a good relationship with therapeutic function is established, the parties can experience those feelings denied and distorted by themselves, learn to accept themselves, and enhance self-awareness, they can grow in the direction of self-guidance.

The content of the Person - centered therapy is: Unconditional respect and acceptance to the client, shows complete positive concern, accepts the full presence of the client, and does not judge its behavior and feelings. To understand the hearts of visitors, empathy to experience their feelings and experiences, and through verbal and nonverbal feedback shows that understanding. Be honest in the process of consultation and truly show their feelings and reactions, not to hide or disguise, in order to establish a relationship of trust and openness.

Person-centered therapy purpose to:

To explore and understand: Help clients explore their own inner world, to understand their feelings, needs, and values, promote self-understanding and self-acceptance.

- 2) Promoting Self-actualization: By providing support and understanding, to help visitors to realize their potential and personal goals, promote self realization and personal growth.
- 3) Improve self-esteem and confidence: Through unconditional positive regard and accept, help clients enhance self-esteem and confidence, build a positive self-image.
- 4) Building resilience:To help visitors to develop effective coping strategies, enhance their ability to cope with life's challenges and pressures.

5) Promoting inner harmony: Through exploration and resolve internal conflict, help clients achieve inner harmony and balance, improve the overall level of mental health.

The basic principles of "Person-centered" psychotherapy are as follows:

1)As a person, man is beyond the sum of the various components that make up a person, and man cannot be reduced to its components.

2)Man has his unique existence, which is in a specific human and ecological background.

- 3)Man is conscious and aware of his own existence.
- 4)People have the ability to choose:
- 5)People have intentionality and their actions are purposeful. The purpose of behavior makes people pursue meaning, value and self-realization.

Person-centered therapy techniques:

The key to success in consulting is consulting relationships, not technology. On this basis, techniques conducive to the attention, acceptance and empathy of the counselor, such as open questions, content/emotional responses, clarification, etc., are not excluded.

Cognitive Behavioral Therapy:

Cognitive Behavioral Therapy (CBT) is a form of talk therapy based on the theory that our perception of facts affects how we feel and behave. If you take a pessimistic view of something, you are likely to feel negative emotions, and these emotions will affect you to do the next thing.

CBT aims to break down difficult problems into smaller parts, making them easy to solve. It combines both cognitive therapy and behavioral therapy and is a practical, problem-solving focused approach to therapy. By changing the way we think or behave in a situation, CBT can change how we feel about life. Through daily activity planning, we transform our negative ways of thinking and bad behaviors into positive coping skills.

The content of CBT is: Help clients identify automatic negative and distorted thoughts. Guide review and challenge the authenticity and rationality of negative thinking. Cultivating and practicing more positive and realistic way of thinking, to replace the original negative thinking. Encourage clients to engage in positive and meaningful activities to improve mood and reduce depression. In safety and control environment gradually exposed to cause anxiety situation or stimuli, reduces avoidance behavior and fear responses. Specific skills such as social skills, stress management, time management, etc. are taught to help clients cope more effectively with life's challenges. Identify and understand their emotions, learn to health to express and manage emotions.

CBT purpose to:

- 1) Change negative thinking: Help the visitor to identify and challenge unreasonable or distorted cognition, cultivating more realistic and positive way of thinking.
- 2) Improving Emotional Management: By changing the thinking and behavior patterns, relieve anxiety, depression, anger and other negative emotions, improve the overall emotional health.
- 3) Adjust the behavior: Identify and change adaptive behavior, develop healthy coping strategies and behavior habits, in order to more effectively deal with the pressure and challenges in life.
- 4) The ability of problem solving: By learning and practicing effective strategy thinking and behavior, enhance visitors problem solving and ability to cope with life's difficulties.
- 5) Relapse prevention: To help visitors coping skills for the development of long-term, to prevent recurrence of the psychological problems, promote mental health.

The basic principles of CBT are:

- 1) Cognitive awareness
- 2) Verifying the adequacy of cognition and conclusions

- 3) Correcting irrational Settings
- 4) Transfer the corrected Settings to specific behaviors

Cognitive Behavioral Therapy techniques:

- 1) Cognitive focusing: Helping clients clarify their emotional reactions to specific stimuli; assisting clients in clearly identifying the causes of their personal unhappiness; shifting irrational core beliefs and replacing them with more rational beliefs.
- 2) Alternative interpretation: Encouraging clients to withhold judgment until they have obtained more information and to perceive the situation more objectively.
- 3) Providing constructive criticism: Resolving conflict in a more positive manner.
- 4) Creating what you want: Assisting clients in planning for their vision of the future.
- 5) Affirming new positive behaviors: Strengthening or teaching new behaviors.
 - 6) Developing New Positive Behavior: To develop new behavior.
 - 7) Stopping Inappropriate Behavior: To stop inappropriate behavior. Solution-focused Brief Therapy:

Solution-Focused Brief Therapy (SFBT) is a short-term psychotherapy technique that emphasizes goal achievement. SFBT embodies the concepts of postmodernism and constructivism. It asserts that "reality" is not an external world existing independently of human consciousness, but a spiritual construct shaped by human perception. The reality individuals construct is influenced significantly by the language system in which they operate. People construct their reality through language, and personal knowledge motivates them to construct, create, control, and give meaning to their experiences.

The core principle of SFBT is to prioritize problem-solving over identifying the causes of problems, and to promote change with a positive, future-

oriented, goal-directed approach. This counseling technique is effective for addressing issues related to academic stress and workplace stress.

The content of SFBT is: To help client externalize their goals and expectations. Break big goals down into concrete, manageable steps that can be achieved gradually. Encourage visitors to take specific small steps, gradually close to the target. Periodically assess the progress of the client and adjust the action plan to ensure continuous improvement.

SFBT purpose to:

- 1) Solve the problem rapidly: Help clients find practical and feasible solutions in a short period of time and quickly improve the current situation.
- 2) Enhance resources and advantages: Identify and take advantage of the client of the existing resources, and the successful experience, to promote positive changes.
- 3)Set clear goals: With the client set clear, specific, achievable goal ,and guide the consultation process.
- 4)Promoting positive change: Enhance client confidence and motivation by focusing on positive changes and success stories to facilitate continuous improvement.

SFBT basic assumptions are:

- 1) Each visitor is unique, with innate strengths and resources to help them. Believe that visitors are experts in their own living environment.
- 2) The therapist cannot change the visit, only the visit can change himself, and the goal of therapy is determined by the visit.
- 3) Nothing is always negative: the exception to a problem that does not exist is the building block of a solution.
- 4) Change is constant and inevitable, and small changes lead to big changes. Positive change must exist.
- 5) There is no absolute causality. The problem cannot necessarily be solved, but the solution can still be attempted to be constructed.

- 6) If there is no problem, there is no need to deal with it. If the method is effective, use a little more, and if it is ineffective, change the method.
- 7) Therapeutic goals should be feasible, practical, specific, step-by-step, and narrated in positive language.
- 8) There is no such thing as resistance, and the therapist works cooperatively with the client.

Solution-focused Brief Therapy techniques:

- 1) Goal development questions: Ask one or more target development questions. These may include asking the visitor to describe their best hope for what will happen differently after receiving treatment, what needs to happen after the visit.
- 2) Pre-Session change question: Once the customer has identified the goal, ask a different version of the question and decide whether to follow up based on the customer's answer.
- 3) Looking for previous solutions: Most people have solved many, many problems before and probably have some ideas on how to solve the current problem. To help customers discover these potential solution elements, ask questions about previous solutions.
- 4) Looking for exceptions: No problem occurs to the same degree all the time. For example, sometimes there may be a problem that doesn't actually occur.
- 5) Present and future-focused questions vs. past-oriented focus: The best way to solve a problem is to focus on what has happened and how the customer wants their life to be, rather than focusing on the past and the root of the problem.
- 6) Compliments: Praise during therapy can emphasize and verify that what the client is doing is effective.
- 7) Inviting the clients to do more of what is working: Gently invite the customer to do more of what worked before, or to try a change they've suggested they'd like to try.

8) Miracle Question: Ask questions about things that are normally unlikely to happen and lead the client to implement the solution described in the context of the miracle problem.

2.2.3 Research of Group Counseling

Sa'ad, et al(2014) investigated the effects of person-centered therapy and cognitive psychology in group counseling for unmarried pregnant adolescents. It focused on the counseling's impact on self-concept, depression, and psychological resilience within the target group. The research included two treatment groups and a control group, comparing different therapeutic approaches. The theories differ in their approaches, goals, roles, and functions within the group. Person-centered group counseling is secular, while Ad-Din cognitive psychology is religious in nature (Sa'ad, et al, 2014). After the participants received 7 consecutive weeks of group counseling, they compared the measurements before and after the intervention to conclude that: person-centered therapy and cognitive psychology ad-din both significantly lowered the degree of depression and enhanced self-concept and psychological resilience of unmarried adolescents, and the intervention effect of the treatment group was significantly different from that of the control group.

Hendar(2019) the study utilized Solution-Focused Brief Therapy (SFBT) in group counseling to enhance academic resilience and self-efficacy. It employed an experimental group and a control group, employing a pre-test and post-test design. Fourteen students were selected as the target sample and then randomly divided into two groups of seven for a total of six planned group counseling sessions. The experimental results indicate that group counseling using the Solution-Focused Brief Therapy approach effectively improves academic resilience and self-efficacy. Compared to the control group that did not receive SFBT, the experimental group showed significant increases in academic resilience and self-efficacy.

Nuryanto(2022) in the research of Cognitive Behavioral Therapy in group counseling, some scholars have discussed the effectiveness of internet-based and conventional counseling. He took 150 high school students as research objects and

divided the 150 students into three groups, 50 students in traditional counseling, Fifty students were in the group that received internet counseling, and 50 students served as a control group. In order to follow the principle of group counseling, they divided two groups of 100 students into 10 groups, each group of 10 people, and spent a total of two months to complete all session for all students. The results show that both internet-based and conventional counseling can significantly improve the psychological resilience of students. The psychological resilience of students receiving Cognitive Behavioral Therapy is higher than that of students in the control group. The difference between internet-based and conventional counseling is not significant, which means that internet-based counseling can effectively improve students' psychological resilience while occupying fewer resources.

In conclusion, Personal-centered therapy, Cognitive Behavioral Therapy and Solution-Focused Brief The application of Therapy in group counseling can enhance students' psychological resilience.

CHAPTER 3

METHODOLOGY

Research design

In this study, quantitative quasi-experimental research design was adopted to explore the influence of group counseling intervention on the psychological resilience of vocational students. The psychological resilience of the experimental group was measured before and after intervention, and the control group was also measured twice at the same time node. Get the change of psychological resilience of vocational students before and after intervention and the change of psychological resilience of control group in a period of time without intervention. Randomization ensures that the treatment is not systematically linked to other observable or unobservable factors, thereby ruling out other explanations for the observed results to draw causal conclusions, ensuring that differences in outcomes can be attributed to the treatment, Rather than other factors associated with receiving treatment systems (Gopalan, Rosinge, & Ahn, 2020). The objective of this study was to examine whether group counseling intervention can enhance vocational students' psychological resilience.

X1	0	X2	Intervention group
Y1	- 34	Y2	Control group

X1 refers to the resilience level of participants in the intervention group prior to receiving the resilience counseling intervention.

X2 refers to the resilience level of participants in the intervention group following the resilience counseling intervention.

O refers to the resilience intervention or counseling program.

Y1 refers to the resilience level of participants in the control group at the outset of the study.

Y2 refers to the resilience level of participants in the control group after the 4-week interval without the resilience counseling intervention.

Population and participants

Population

The subjects of this study were 150 vocational students. They attend Tongren Early Childhood Normal College, Guizhou Province, and are students in grades one through three.

Participants

The survey sample for this study, identified by destination sampling. The study sample consisted of 20 people, who were randomly divided into experimental group and control group with 10 people in each group. After measuring the psychological resilience of 150 students, 20 students with low level of psychological, The score of the psychological resilience questionnaire ranges from 40 to 50. resilience were selected as research samples to ensure the representativeness and reliability of the samples. Sample students must agree to participate in the study and sign an informed consent form. The experimental group received group counseling intervention, while the control group received no intervention. There were no significant differences in gender, age and family environment between the two groups, which ensured the comparability and reliability of the experiment.

Inclusion Criteria

In this study, participants were selected using 4 criteria. The selection criteria are as follows:

- 1) Undergraduate students aged 18-21.
- 2) They want to improve their resilience to adversity.
- 3) They are agree to participate in this study.
- 4) Can spend time to participate in 8 session group counseling projects.

Exclusion criteria

Participants would be exclusion from this study follow under 2 criteria:

- 1) Unable to participate in all 8 group counseling.
- 2) Do not conform to the scope of the study in the research.

Research instrument

This study used the CD-RISC scale developed by Connor and Davidson (2003), which originated from the study of PTSD. The scale shows effectiveness relative to other measures of stress and hardiness ,and reflects the different levels of resilience shown by the general population and people, and can distinguish between strong and weak resilience, with good psychometric characteristics (Connor & Davidson, 2003). The questionnaire is available for public use, academic research in this paper, on the basis of this questionnaire according to the research objective and research group has made the corresponding adjustment.

The CD-RISC scale has been widely used in Western countries and proved to have good reliability and validity. However, due to differences in geographical, cultural, historical, and social contexts, it is not possible to determine whether the measurements of CD-RISC in the Chinese population have the same reliability and validity. Therefore, Yu Xiaonan and Zhang Jianxin (2007) conducted measurement verification among 560 people in Guangdong Province and Beijing, China. The research samples included workers, teachers, businessmen, farmers, retirees, college students and others, and the number of men and women was almost equal. Their study demonstrates that the application of CD-RISC requires a cross-cultural comparison of import structures and their measurements from West to East. Therefore, they summarized the five-factor structure of the scale into a three-factor that is more suitable for Chinese people. The assessment included three measurement factors.

- 1.tenacity: people were calm, firm, agile, and in control of their challenges.
- 2. strength: people can both recover and grow in adversity.
- 3. Optimism: confidence to overcome adversity and see things in a positive light.

The total number of projects for this resilience assessment is 25. Each project requires respondents to complete a self-reported assessment based on their own circumstances. Project problems are presented in declarative sentences. Each item is scored on a Likert 5-point scale (0-4), from 0 (never), 1 (rarely), 2 (sometimes), 3 (often),

and 4 (always). The total score of the assessment is 100 points. Scores below 60 points are poor psychology resilience, 61-69 is average psychology resilience, 70-79 is good psychology resilience, > =80 is excellent in mental resilience.

TABLE 1 Example of resilience assessment

	1		T	T	
title	never	a fat lot	sometimes	often	That's all
					the time
I can adapt to	0	1	2	3	4
change					
I have a close,	0	181-	2	3	4
safe relationship	A STATE OF THE PARTY OF THE PAR	SEE SOLL SEE	A		
Sometimes, fate	0	1	2	3	4
or God can help			- 1 4 :		
I can handle it	0	1	2	3	4
whatever			-/5:		
happens	+		100		
Past successes	0	1	2	3	4
give me the	34	M3			
confidence to	•	••••			
face the					
challenges					
I can see the	0	1	2	3	4
humorous side					
of things					
Coping with	0	1	2	3	4
stress makes me					
feel powerful					
	I can adapt to change I have a close, safe relationship Sometimes, fate or God can help I can handle it whatever happens Past successes give me the confidence to face the challenges I can see the humorous side of things Coping with stress makes me	I can adapt to change I have a close, safe relationship Sometimes, fate or God can help I can handle it whatever happens Past successes or give me the confidence to face the challenges I can see the humorous side of things Coping with or stress makes me	I can adapt to change I have a close, safe relationship Sometimes, fate or God can help I can handle it whatever happens Past successes or 1 give me the confidence to face the challenges I can see the humorous side of things Coping with or 1 I can adapt to or 0 I can see the humorous side or 1 Stress makes me	I can adapt to change I have a close, safe relationship Sometimes, fate or God can help I can handle it whatever happens Past successes of the confidence to face the challenges I can see the humorous side of things Coping with stress makes me	I can adapt to change I have a close, safe relationship Sometimes, fate or God can help I can handle it whatever happens Past successes of the confidence to face the challenges I can see the humorous side of things Coping with stress makes me

The validity and reliability of measurement

The reliability of the elasticity scale was tested by three experts to ensure that the questionnaire content was reasonable, appropriate and could reflect the level of psychological resilience. The questionnaire content was modified after receiving feedback from experts. In the case of reliability, before the experiment started, 50 people who were similar to the experimental subjects were selected as samples to fill in the questionnaire. The reliability analysis of the elasticity scale of this experiment was conducted based on these 50 questionnaires. Then the questionnaire was tested by three experts, and the IOC value of the test was 0.67 to 1.00, which showed good reliability.

On the premise of ensuring reliability, the validity of the questionnaire was analyzed, and Cronbach's α coefficient of each factor and Cronbach's α coefficient of 25 items were obtained. The Cronbach's α coefficient of 13 items of tenacity was 0.620. The Cronbach's α coefficient of Strength8 was 0.682. The Cronbach's α coefficient of the 7 items of OPTIMISM was 0.605. The Cronbach's α coefficient of 25 items was 0.933.

Data collection

The data of students' psychological resilience were collected through questionnaire survey. Data from the control and intervention groups were collected before the psychological resilience counseling program began, and all samples were measured and collected again after the program ended.

Study materials

The material for this study is an 8-session resilience enhancement group counseling program. This program was developed based on an extensive review of the history of psychological resilience, its definition, models of protective factors for developing psychological resilience, and resilience enhancement programs for vocational students. After a thorough review of psychological resilience, the study identified tenacity, strength, and optimism as key influencing factors. Therefore, the

psychological resilience enhancement project was developed around these three factors, and the Online and offline combination was adopted in this group counseling.

TABLE 2 The 8 sessions of resilience enhancement group counseling

Objectives	Activities	Theories and techniques
Session1	1) Welcomes the member,	In Person-centered therapy
1) Inform the group of the	says hello to the member,	of attention, acceptance
objectives of the	and then introduces	and empathy of the
counseling and possible	himself.	counselor, such as open
good results.	2) Each member tells about	questions,
2) Inform the group of the	a recent adversity he or she	content/emotional
rules, roles, responsibilities	has faced.	responses, clarification.
and privacy guidelines of	3) Give members	
the counseling and obtain	homework to think about	
consent.	adversity they can't face	
3) Create a safe and open	right now.	
environment for group		
members to share	Sun	
experiences and feelings.		
Allows deep understanding		
between members.		

TQBLE 2 (Continue)

Objectives	Activities	Theories and techniques
Session2	1) Introduces the theme of	In Person-centered therapy
1) Further strengthen the	the counseling to the group	of attention, acceptance
bond between group	members.	and empathy of the
members.	2) Ask each member to	counselor, such as open
2) Let the group know what	count their score according	questions,
psychology resilience is.	to their answers to the	content/emotional
3) Make group members	questionnaire.	responses, clarification.
understand the role of	3) Give members	
tenacity in psychology	homework and ask them to	In CBT therapy of Cognitive
resilience.	think about whether they	focusing.
	have used tenacity in	
	psychology resilience.	In SFBT therapy of Present
		and future-focused
		questions vs. past-oriented
		focus
	JUN .	

TQBLE 2 (Continue)

Objectives	Activities	Theories and techniques
Session3	1) Ask the group members	In Person-centered therapy
1) Enhance tenacity in	to discuss their own	of attention, acceptance
resilience of group	solutions to similar	and empathy of the
members.	problems.	counselor, such as open
2) Ways for group	2) Review the whole	questions,
members to enhance	counseling process and	content/emotional
tenacity in psychology	discuss the gains of this	responses, clarification.
resilience.	counseling.	
3) Enable group members	3) Ask team members to	In CBT therapy of
to use methods to enhance	set goals and expected	Alternative interpretation.
their tenacity in psychology	progress.	
resilience later on.		In SFBT therapy of Looking
		for previous solutions.
	1111	: /

TQBLE 2 (Continue)

Objectives	Activities	Theories and techniques
Session4	1) Guide group members	In Person-centered therapy
1) Let the group know the	to consider whether they	of attention, acceptance
strength of psychology	have played a role in	and empathy of the
resilience.	strength in psychology	counselor, such as open
2) Get group members to	resilience in their past	questions,
understand the role of	experiences.	content/emotional
strength in psychology	2) Asks questions of each	responses, clarification.
resilience.	member and answers	
	questions about the low	In CBT therapy of Stopping
	scores of members.	Inappropriate Behavior.
	3) Ask members to	
	distinguish between the	In SFBT therapy of Looking
	role of tenacity and	for exceptions.
	strength.	:/

TQBLE 2 (Continue)

Objectives	Activities	Theories and techniques
Session5	1) Review the whole	In Personal-centered
1) Enhance the strength of	counseling process and	therapy of attention,
mental resilience of group	discuss the gains of this	acceptance and empathy
members.	counseling.	of the counselor, such as
2) Ways for group	2) Ask team members to	open questions,
members to enhance the	set goals and expected	content/emotional
strength of their psychology	progress.	responses, clarification.
resilience.	JUST	
3) Enable group members		In CBT therapy of Giving
to use methods to enhance		constructive criticism.
strength in psychology		
resilience later on.		In SFBT therapy of Inviting
		the clients to do more of
	111	what is working

TQBLE 2 (Continue)

Objectives	Activities	Theories and techniques
Session6	1) Assesses the group	In Person-centered therapy
1) Let the group know what	members' scores on	of attention, acceptance
the optimism of psychology	psychological resilience	and empathy of the
resilience is.	optimism.	counselor, such as open
2) Get group members to	2) Let members distinguish	questions,
understand the role of	the different roles of	content/emotional
optimism in psychology	optimism, tenacity and	responses, clarification.
resilience.	strength.	
		In CBT therapy of Create
		what you want.
	1	In SFBT therapy of Goal
		Miracle Question
	Jun.	

TQBLE 2 (Continue)

Objectives	Activities	Theories and techniques
Session7	1) Explain the significance	In Person-centered therapy
1) Enhance the optimism of	of enhancing psychology	of attention, acceptance
group members'	optimism in resilience.	and empathy of the
psychology resilience.	2) Let team members	counselor, such as open
2) Ways for group	master and absorb different	questions,
members to enhance their	methods, make	content/emotional
optimism of psychology	adjustments according to	responses, clarification.
resilience.	their own situations, and	
3) Allow group members to	get the most suitable	In CBT therapy of Affirming
use methods to enhance	method for themselves.	new positive behavior
optimism in psychology		
resilience later on.		In SFBT therapy of
		Compliments
Session8	1) Ask what members have	Reviewing the consultation
1) Provide feedback on	learned from the eight	process.
group counselings.	counselings.	
2) Summarize what	2) Ask the group how they	Setting future goals.
members have learned	feel about the eight	
from their own and group	sessions overall.	Processing leave mood.
counseling.	3) Thank group members	
3) End the group	for their participation.	
counseling.		

This group counseling was approved by three experts, and the each session IOC value of each Session was in the range of 0.5-0.67. Its content after through expert review on the corresponding modification.

Data analysis

Statistical methods were used to analyze the data statistically and descriptively. Descriptive analysis was used in the intervention group and the control group. The quantitative data of pre-test and post-test were analyzed statistically. The t-test was selected to determine whether there was a significant difference between the two groups.

The paired sample t- test was used to analyze the changes or differences in the resilience level of the intervention group before and after the counseling program of the resilience enhancement group.

An independent t- test was used to analyze and compare the differences between the experimental and control groups.

CHAPTER 4

DATA ANALYSIS

This study investigated the impact of a group counseling intervention on vocational students' resilience. The first objective was to examine the extent of improvement in resilience among vocational students. The second objective was to compare the effects of the resilience enhancement group counseling program between the intervention group and the control group that did not receive the counseling program. The third objective was to compare the differences in resilience among vocational students in the control group and the experimental group before and after participating in the group counseling sessions.

The results of this study for the four parts:

- 1.Descriptive analysis of the study population.
- 2. The resilience of vocational students.
- 3. The comparison of resilience between the control group and the experimental group before and after participating in group counseling.
- 4. The difference of experimental group resilience before and after group counseling.
- 5.The difference of control group resilience before and after group counseling.
- 6. The differences between experimental and control groups after the experiment.

Analytical signs and meanings

n Number of participants

M Mean score

Max Maximum score

Min Minimum score

Std Standard deviation

T t-value

P p-value

Analysis

The first part is Descriptive analysis of the study population.

The study examined the resilience of 150 students. Participants are They attend Tongren Early Childhood Normal College, Guizhou Province, and are students in grades one through three. The participants' descriptive data are analyzed as follows.

TABLE 3 Descriptions of participants (n = 150)

TABLE 3 Descriptions of participants (n = 150)				
General data of vacation students	Amount	Percentage		
Gender				
Male	74	49.34		
Female	76	50.66		
Total	150	100		
Z	T			
	33	22.00		
	38	25.34		
	36	24.00		
	43	28.66		
	150	100		

Table 3: According to the data analysis in the table, the age range of the samples collected in this study is 18-21 years old, and the average age is about 20 years old. There was no significant difference between the number of men and women in the sample. The level of psychological resilience of men was slightly higher than that of women, but it was still low.

The second part is resilience of vocational students.

The descriptive statistical analysis of the psychological resilience level of 150 students were as follows:

TABLE 4 Vocational students resilience(n=150)

Resilience	М	Max	Min	Level
Resilience	48.193	90	13	Low

Table4: The results show that the highest evaluation value of psychological resilience is 90, the lowest value is 13, and the average value is 48.193, indicating the low level of psychological resilience of vocational students in this age group.

The third part is comparison of resilience between the control group and the experimental group before and after participating in group counseling.

In this study, we collected the data of 20 students from Tongren Early Childhood Teachers College, who were randomly divided into experimental group and control group. According to the scoring criteria of CD-RISC scale, choose students in both the experimental group and the control group were assessed as samples with low psychological resilience. Then compared the results of experimental group and control group before and after participating in the experiment.

TABLE 5 Descriptive statistics for both groups are as follows:Data description: Pre-test and Post-test results.(n=20)

Resilience	Group	Before experiment		After experiment	
		М	Std	М	Std
Resilience	Experimental(n=10)	44.25	2.673	55.1	6.48
	Control(n=10)	45	2.956	45.6	4.946

Table 5: Analysis of differences in resilience between the experimental group and the control group before the experiment It can be seen from Table that the average value of the experimental group was 44.25 and that of the control group was 45..After the experiment, the experimental group's average of 55.1, averages 45.6, a comparison of the experimental group and control group in resilience level have obvious difference. The level of resilience in the experimental group was enhanced, but there was no significant enhancement in the control group.

The fourth part is the difference of experimental group resilience before and after group counseling.

TABLE 6 Results of the experimental groups before and after the experiment(n=10)

Resilience	Before Experiment		After Experiment		t	р
	М	Std	М	Std		
Resilience	44.25	2.673	55.1	6.48	-12.324	0.001***

Table 6: The results of the paired samples T-test show that based on the variables of the experimental group pre-test paired experimental group post-test, the significance p value is 0.001***, showing a level of significance, rejecting the null hypothesis, so there is a significant difference between the experimental group pre-test paired experimental group post-test. The absolute value of t is 12.324, indicating that the difference is very large.

The fifth part is the difference of control group resilience before and after group counseling.

TABLE 7 Results for the control group before and after the experiment(n=10)

Resilience	Before Experiment		After Experiment		t	р
	М	Std	М	Std		
Resilience	45	2.956	45.6	4.496	-0.979	0.340

Table 7: The results of the paired sample t-test show that the P-value of significance is 0.340 based on the variable control group's pre-test and the paired control group's post-test, which is not significant at the level and cannot reject the null hypothesis. Therefore, there is no significant difference between the pre-test and the paired control group's post-test. The absolute value of t value is 0.979, and the difference is small.

The sixth part is The differences between experimental and control groups after the experiment.

TABLE 8 Results for the control group and experimental group after the experiment(n=20)

Resilience	Control group		Experimental group		t	р
	М	Std	М	Std		
Resilience	45.6	4.496	55.1	6.48	-14.162	0.001***

Table8: The results of the paired sample T test showed that the control group post-test matched the experimental group post-test, the significance P value was 0.001***, the level showed significance, and the null hypothesis was rejected, so there was a significant difference between the control group post-test and the experimental group post-test.

In summary, the results of data analysis show that group counseling is effective in enhancing vocational students. Students' mental resilience has enhanced significantly.

CHAPTER 5

DISCUSSION AND CONCLUSION

Introduction

The aim of this study was to investigate the impact of group counseling on the psychological resilience of vocational students. Specifically, it sought to assess the baseline psychological resilience of these students, evaluate changes in resilience among secondary vocational students in the experimental group following group counseling sessions, and compare these changes with those observed in a control group. A quasi-experimental design was employed, utilizing pre-test and post-test assessments to measure the effects of group counseling on the psychological resilience of both the experimental and control groups. The study focused on first- to third-year students at Tongren Early Childhood Normal College in Guizhou Province. A total of 150 students from these grades participated in a questionnaire survey. Based on the CD-RISC questionnaire scoring criteria, 20 students with low psychological resilience were randomly selected and evenly divided into control and experimental groups, each consisting of 10 students.

The resilience psychology group counseling intervention project in this study is based on the concepts of psychological crisis intervention and individual psychological growth. The elastic psychological counseling project was created by using the Personal-centered therapy, Cognitive Behavioral Therapy and Solution-focused Brief Therapy in group counseling theory and technology. Based on the group consultation project, a total of 8 times, Each session takes approximately 1.0-1.5 hours, and group counseling meets 3 times a week. A total of 8 group consultations were completed within 4 weeks.

All participants underwent a pre-resilience test and a post-resilience test adapted from Connor and Davidson's (2003) Resilience Assessment Scale. The scale classifies resilience into three factors, the three-factor that is more suitable for Chinese people. The assessment included three measurement factors: Tenacity: Facing challenges, calm, firm, quick,sense of control. Strength: Can not only recover but also

develop and grow through setbacks. Optimism: Have the confidence to overcome adversity and look at things from a positive perspective.

All pre- and post-test data were analyzed using statistical methods. An independent t-test was conducted to compare the psychological resilience scores between the intervention group and the control group. Additionally, a paired sample t-test was used to examine the changes in psychological resilience scores within the intervention group before and after the intervention.

Result and discussion

The results of this study show that group counseling intervention has a positive effect on the psychological resilience of secondary vocational students.

The first objective is "To study resilience of vocational students". According to the survey, the psychological resilience of vocational students is low.

The second objective is "To compare resilience of vocational students in the experimental group before and after participation of ", the average score of the experimental group before receiving group counseling intervention was 45 points, and the average score of psychological resilience after group counseling intervention was 55.1 points. After 8 group counseling interventions, the T-test results of paired samples showed that, based on the pre-test and post-test variables of the experimental group, The P-value of significance was 0.001^{***} , indicating that there were significant differences between the pre-test and post-test of the experimental group, and the psychological resilience of the experimental group was significantly improved.

The third objective "To compare difference of resilience of vocational students in the control group and experimental group before and after participation of group counseling. "Students in both the experimental and control groups were assessed as having lower mental resilience. The average score of the experimental group before group counseling intervention was 45 points, and that of the control group before group counseling intervention was 44.25 points. After independent sample t test, the significance test was greater than 0.05, indicating that there was no significant difference between the two groups of subjects before group counseling intervention.

After group counseling intervention, the psychological resilience of the experimental group was significantly improved, while that of the control group was not significantly changed. The T-test results of the paired samples showed that the P-value of significance was 0.001^{***} , which had a significance level, indicating that there were significant differences between the pre-test and post-test of the experimental group. The T-test results of paired samples in the control group showed that its significance P-value was 0.340, which was not significant in level, so the difference between pre-test and post-test in the paired control group was not significant. After group counseling intervention, the average score of mental resilience in the experimental group was 55.1 points, and that in the control group was 45.6 points. The average score of the experimental group was higher than that of the pre-test, and there was no significant change in the control group, indicating that the psychological resilience of the experimental group was enhanced.

Chen (2020) group psychological counseling intervention for poor students has played an effective role in psychological assistance to them, improved their mental health, enhanced their interpersonal communication level, enhanced their selfconfidence, and better helped students to establish a good interpersonal relationship model. Shen (2020) found that the catharsis of the negative emotions of the members in group psychological counseling can help them establish a sense of acceptance and identity of learning and environment in the process of group mutual assistance, and effectively improve the depression and improper behavior of college students, and the influence is very stable and lasting. Li(2022) research on group psychological counseling for self-development of poor college students focuses on students' positive cognition, optimism and problem-solving ability in the process of group counseling, so that group members can talk to each other and discuss the confusion encountered, and understand, find and solve problems from multiple perspectives. So as to eliminate some psychological suppression behavior, improve the level of self-esteem and psychological stress resistance of students. Lin&Qian(2020) focused on training students' positive cognition, positive emotion, positive relationship and positive coping

in the intervention of positive psychology oriented group assistants on freshmen's subjective social status, which enhanced students' positive strength, anti-setback ability and developmental optimism. Liang&Liu(2017) took the theoretical basis of Lutans' psychological capital and intervention model as guidance and combined with the characteristics of left-behind experience college students to improve their optimism, resilience and quality of hope through group counseling in their research on improving the psychological capital of left-behind experience college students. Enhance students' ability to deal with setbacks and solve problems, and make students more positive and optimistic.

In this study, psychological resilience was classified into tenacity, strength and optimism. The experiment proved that students' tenacity, strength and optimism had varying degrees of enhancement after group counseling intervention. The results of other researchers also confirm that group counseling has a positive impact on the mental health of students.

In many studies on the positive psychological effects of group counseling on students, although the psychological factors and perspectives of the studies are different, the core idea is to improve some qualities of students through group counseling, so that students can better cope with problems such as interpersonal communication, learning pressure, intimate relationship and family harmony. At the same time, it also improves students' self-identity, self-drive, self-control, self-esteem, self-confidence and other abilities.

Limitations and suggestions

The results of this study showed that the intervention of group counseling on psychological resilience had a significant effect on the psychological resilience of vocational students. The purpose of this counseling intervention was to improve participants' tenacity, strength and optimism. However, there are some limitations to this study.

The conclusion of this study has practical significance for group counseling as a method to improve students' psychological resilience. From the school level, the school can observe the level of psychological resilience of students in time, and better implement specific programs to help students improve psychological resilience and improve the overall quality of students. From the perspective of teachers, mastering the technology of group counseling can better understand the adversity students are in, help students out of adversity, narrow the distance with students, and promote the improvement of teaching quality. From the perspective of students, receiving group counseling can better adapt to the school environment and social environment, more clearly recognize their own problems, master more methods to solve problems, and correctly face emotions and pressure.

As for the recommendations for future studies, future studies should include larger sample sizes, different age ranges, and different educational backgrounds. In addition, future research could expand beyond youth to include children and adults to discuss the extent to which group counseling affects psychological resilience at different ages.

The second recommendation is to tailor appropriate group counseling programs to students from different cultures and backgrounds. Respect and integration of various cultural characteristics help to improve the effectiveness and receptivity of consultation.

The third suggestion is to combine scientific and technological innovation with tradition, apply modern technology to the consultation, and conduct a deeper and more comprehensive analysis and assessment, so as to continuously optimize the consultation plan and improve the psychological resilience of students.

The fourth is the use of more psychological treatment theories and techniques, the use of a variety of treatment theories and techniques can better adapt to and respond to the uniqueness of each patient, you can choose the most appropriate treatment according to the patient's situation, rather than fixed use of one method. Different treatment theories provide different perspectives and tools to understand and

solve patients' problems more comprehensively, and combined with different technologies, their respective advantages can be comprehensively utilized. This diversified treatment approach not only better meets the needs of patients, but also improves the quality and effectiveness of overall psychotherapy.



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Connor-Davidson Resilience Scale

order	title	never	а	sometimes	often	That's
number			fat			all the
			lot			time
1	I can adapt to change	0	1	2	3	4
2	I have a close, safe relationship	0	1	2	3	4
3	Sometimes, fate or God can help	0	1	2	3	4
4	I can handle it whatever happens	0	1	2	3	4
5	Past successes give me the confidence to face the challenges	0	1	2	3	4
6	I can see the humorous side of things	0	1	2	3	4
7	Coping with stress makes me feel powerful	0	1	2	3	4
8	I tend to recover quickly after hardship or illness	0	1	2	3	4
9	There is always a reason why things happen	0	1	2	3	4
10	No matter what the result is, I will try my best	0	1	2	3	4
11	I can achieve my goal	0	1	2	3	4
12	I don't give up easily when things seem hopeless	0	1	2	3	4
13	I know where to go for help	0	1	2	3	4
14	Under pressure, I was able to concentrate and think clearly	0	1	2	3	4
15	I like to take the lead in solving problems	0	1	2	3	4
16	I will not be discouraged by my failure	0	1	2	3	4
17	I consider myself a powerful person	0	1	2	3	4
18	I can make unusual or difficult decisions	0	1	2	3	4
19	I can deal with the unhappy things	0	1	2	3	4
20	I had to follow a hunch	0	1	2	3	4
21	I have a strong sense of purpose	0	1	2	3	4
22	I feel in control of my own life	0	1	2	3	4
23	I like to challenge	0	1	2	3	4
24	I work hard (and study) to achieve my goal	0	1	2	3	4
25	I am so proud of my achievements	0	1	2	3	4



Resilience counseling program

Group Counseling Program on Enhancement of Vocational students

Session 1 : Getting to know and building relationships

Objectives:

1. Inform the group of the objectives of the counseling and possible good results.

2.Inform the group of the rules, roles, responsibilities and privacy guidelines of the counseling and obtain consent.

3. Create a safe and open environment for group members to share experiences and feelings. Allows deep understanding between members.

Beginning stage:

1. The counselor and members shall meet at the group counseling location.

2. The counselor welcomes the member, says hello to the member, and then introduces himself.

3. The counselor informed of the theme of the group counseling and the expected benefits.

4.The counselor informs the members and himself of his role and responsibility in the group counseling, and informs him of the principle of confidentiality.

Working stage:

1. The counselor asked each member to introduce his/her full name.

2. The counselor explains adversity to the group.

3. Each member tells about a recent adversity he or she has faced.

4. Each member describes the emotions that arise from adversity.

5.Ask each member to share whether they have overcome adversity, can explain the reason, the process.

Closing stage:

1.The counselor asked the members to summarize the group counseling, what they had learned and how they felt.

2. Give members the right to ask questions without confusion.

3. Give members homework to think about adversity they can't face right now.

4. Thank the members for their active cooperation. And set a time for the next group counseling period evaluation.

Evaluation:

Members are willing to share their own stories, experiences and feelings.

Members are communicative and will not interfere with normal counseling and communication.

Session 2: Recognize tenacity of resilience

Objectives:

1. Further strengthen the bond between group members.

2.Let the group know what psychology resilience is.

3. Make group members understand the role of tenacity in psychology resilience.

Beginning stage:

1. The counselor and members shall meet at the group counseling location.

2.The counselor welcomes the members and further deepens the ties of the group through conversation.

3. The consultant introduces the theme of the counseling to the group members.

Working stage:

- 1. The counselor explains the concept of psychology resilience to the group members.
- 2.Guide group members to consider whether they have played a role in psychology resilience in their past experiences.
- 3. The counselor explained to the group members the tenacity of psychology resilience.
- 4. According to the questions investigated in CD-RISC, point out the corresponding personality qualities.
- 5. Ask each member to count their score according to their answers to the questionnaire.
- 6.The counselor assesses the group members' scores on mental resilience.
- 7.The counselor asks questions of each member and answers questions about the low scores of members.

Closing stage:

- 1. The counselor asked the members to summarize the group counseling, what they had learned and how they felt.
- 2. Give members time to talk to each other.
- 3. Give members homework and ask them to think about whether they have used tenacity in psychology resilience.
- 4. Thank the members for their active cooperation. And set a time for the next group counseling period evaluation.

Evaluation:

Group members are more connected and able to share more.

Increased participation of group members.

Group members think more.

Session 3: How enhance tenacity

Objectives:

- 1. Enhance tenacity in psychology resilience of group members.
- 2. Ways for group members to enhance tenacity in psychology resilience.
- 3. Enable group members to use methods to enhance their tenacity in psychology resilience later on.

Beginning stage:

- 1. The counselor and members shall meet at the group counseling location.
- 2. Group members are invited to express their views on tenacity in psychology resilience.
- 3. Explain the significance of enhancing tenacity in psychology resilience.

Working stage:

- 1.According to the questions in the tenacity in psychology resilience part of the questionnaire, ask the group members to summarize whether they have unconsciously played the role of tenacity in psychology resilience in their past experience.
- 2. Ask the group members to discuss their own solutions to similar problems.

3. Provide team members with corresponding methods to improve their tenacity in psychology resilience.

4.Let team members master and absorb different methods, make adjustments according to their own situations, and get the most suitable method for themselves.

Closing stage:

1. Review the whole counseling process and discuss the gains of this counseling.

2.Ask team members to set goals and expected progress.

3. Thank the members for their active cooperation. And set a time for the next group counseling period evaluation.

Evaluation:

The group members have different personalities, different scores, different opinions, and different methods.

Team members can adjust to their own circumstances.

Session 4: Recognize strength of resilience

Objectives:

1.Let the group know the strength of psychology resilience.

2.Get group members to understand the role of strength in psychology resilience.

Beginning stage:

1. The counsellor and members shall meet at the group counseling location.

2. The counsellor welcomes the member and reviews the previous content.

3. The counsellor introduces the theme of the counseling to the group members.

Working stage:

- 1.The counselor explains the concept of strength in psychology resilience to the group members.
- 2.Guide group members to consider whether they have played a role in strength in psychology resilience in their past experiences.
- 3.Each member was asked to make statistics on his/her psychology resilience strength score according to the questionnaire responses.
- 4.The counselor assesses the scores of the group members in the strength of psychology resilience.
- 5. The counselor asks questions of each member and answers questions about the low scores of members.

Closing stage:

- 1. The counsellor asked the members to summarize the group counseling, what they had learned and how they felt.
- 2. Give members time to talk to each other.
- 3. Give members homework to think about whether they have exercised the strength of psychology resilience.
- 4. Ask members to distinguish between the role of tenacity and strength.
- 5. Thank the members for their active cooperation. And set a time for the next group counseling period evaluation.

Evaluation:

Group members have a better understanding of the role of resilience in adversity.

After three sessions of counseling, group members were able to articulate their thoughts

in the face of adversity.

Group members think more.

Session 5: How enhance strength

Objectives:

1.Enhance the strength of mental resilience of group members.

2. Ways for group members to enhance the strength of their psychology resilience.

3. Enable group members to use methods to enhance strength in psychology resilience

later on.

Beginning stage:

1. The counsellor and members shall meet at the group counseling location.

2. Group members are invited to express their views on the strength of psychology

resilience.

3. Explain the significance of improving the strength of psychology resilience.

Working stage:

1. Provide team members with corresponding methods to improve their strength in

psychology resilience.

2.Let team members master and absorb different methods, make adjustments

according to their own situations, and get the most suitable method for themselves.

Closing stage:

1.Review the whole counseling process and discuss the gains of this counseling.

2. Ask team members to set goals and expected progress.

3. Thank the members for their active cooperation. And set a time for the next group counseling period evaluation.

Evaluation:

Group members can learn more quickly how to enhance their psychology resilience through prior counseling.

There is more exchange of methods among team members.

Members are willing to offer their own methods and insights to others.

Session 6: Recognize optimism of resilience

Objectives:

- 1.Let the group know what the optimism of psychology resilience is.
- 2.Get group members to understand the role of optimism in psychology resilience.

Beginning stage:

- 1. The counsellor and members shall meet at the group counseling location.
- 2. The counsellor welcomes the member and reviews the previous content.
- 3. The counsellor introduces the theme of the counseling to the group members.

Working stage:

- 1. The counselor explains the concept of optimism in psychological resilience to the group members.
- 2.Guide group members to consider whether they have played a role in optimism in psychological resilience in their past experiences.
- 3.Each member was asked to make statistics on his/her optimism in psychological resilience score according to the questionnaire responses.

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4. The counselor assesses the group members' scores on psychological resilience

optimism.

5.The counselor asks questions of each member and answers questions about the low

scores of members.

Closing stage:

1. The counselor asked the members to summarize the group counseling, what they had

learned and how they felt.

2. Give members time to talk to each other.

3. Give members homework to think about whether optimism plays a role in psychology

resilience.

4.Let members distinguish the different roles of optimism, tenacity and strength.

5. Thank the members for their active cooperation. And set a time for the next group

counseling period evaluation.

Evaluation:

Group members fully understand the three elements of mental resilience.

After six sessions of counseling, the group members were able to distinguish which

capacities to use under different adversities.

Session 7: How enhance optimism

Objectives:

1.Enhance the optimism of group members' psychology resilience.

2. Ways for group members to enhance their optimism of psychology resilience.

3. Allow group members to use methods to enhance optimism in psychology resilience later on.

Beginning stage:

- 1. The counsellor and members shall meet at the group counseling location.
- 2.Group members were invited to express their views on the optimism of psychological resilience.
- 3. Explain the significance of enhancing psychology optimism in resilience.

Working stage:

- 1.According to the questions in the optimism part of the questionnaire, ask the group members to summarize whether they have unconsciously played the role of optimism in their past experience.
- 2. Ask the group members to discuss their own solutions to similar problems.
- 3.Based on Personal-centered therapy, Cognitive Behavioral Therapy and Solutionfocused Brief Therapy, provide group members with corresponding methods to enhance optimism in psychology resilience.
- 4.Let team members master and absorb different methods, make adjustments according to their own situations, and get the most suitable method for themselves.

Closing stage:

- 1. Review the whole counseling process and discuss the gains of this counseling.
- 2. Ask team members to set goals and expected progress.
- 3. Thank the members for their active cooperation. And set a time for the next group counseling period evaluation.

Evaluation:

The ability of group members to enhance their mental resilience was improved.

Group members can handle more complex situations.

The group members had a good grasp of different methods of improving mental resilience.

Session 8: Saying goodbye

Objectives:

- 1. Provide feedback on group counselings.
- 2. Summarize what members have learned from their own and group counseling.
- 3.End the group counseling.

Beginning stage:

- 1. The counsellor and members shall meet at the group counseling location.
- 2. The counsellor informed the group that this counseling would be the last.

Working stage:

- 1.Ask what members have learned from the eight counselings?
- 2. Ask what the group members have learned from other members.
- 3. Ask the group members what they think they offer to the other members.
- 4. Ask the group how they feel about the eight sessions overall?
- 5. How will the issues assessed by the advisory meeting be addressed?

Closing stage:

- 1. The group leader asked the group members to give feedback on the 8 group counselings and what other suggestions and opinions they had for the group counselings and the group leader.
- 2.Members of the group should be able to keep in touch with each other after the end of the group and keep in touch with the group leader.
- 3. Thank group members for their participation.

Evaluation:

Members were able to summarize what they gained from the group counseling.

Members are willing to share their methods.

The overall completion of counseling is high.

