

The Influence of Solution-Focused Therapy on Quarter Life Crisis in Early Adult Women

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ABSTRACT

Quarter-Life Crisis can be defined as a period where someone feels uncertainty and confusion in their life. Early adult women are the group most frequently vulnerable to experiencing Quarter-Life Crisis because they often face pressures from social and personal responsibilities. Solution Focused Therapy is a therapeutic approach that focuses on finding solutions and is future-oriented. This study aims to fill the knowledge gap by investigating whether SFT therapy can reduce the symptoms of Quarter-Life Crisis in early adulthood women. This research uses a quasi-experimental one-group before and after study design. With two approaches, a quantitative approach using the Hassler questionnaire to measure the level of Quarter-Life Crisis and a qualitative approach using interviews and observations. Respondents consisted of 3 early adult women who experienced a Quarter-Life Crisis. The results of the research prove that there is a difference before and after administering Solution Focused Therapy in the level of Quarter-Life Crisis of respondents, with a mean score in the pre-test of 120.67 and the post-test of 73.67. These results indicate that providing solution-focused therapy can significantly reduce the level of Quarter-Life Crisis.

Introduction

The term "quarter-life crisis," which was first used by Robbins and Wilner (2001) in their study of the younger generation in America, describes the period of uncertainty and bewilderment that people experience when they graduate from college and are thrust into the demands of the real world. Erik Erikson, who saw the passage from adolescence to adulthood as a crucial time that hardly ever saw in-depth study, provided the theoretical foundation for this phenomenon (L. Roberts & Smith, 2019). Nash and Murray (2010) say that what is faced when experiencing a quarter-life crisis are problems related to dreams and hopes, challenges to academic interests, religion and spirituality, as well as work life and career. These problems arise when individuals enter at the age of 18-28 years or when

they have completed secondary education, for example, students. According to Alifandi (2016), the academic jump often experienced by students into the world of work sometimes causes injury and emotional instability, resulting in emotional crises.

The psychological phenomenon known as the "quarter-life crisis" is receiving more and more attention in the psychology literature. A quarter-life crisis is characterized as a time when a person experiences doubt and confusion about their life choices, starts to look for purpose in their life, and encounters major obstacles to their personal growth (A. Roberts, 2020). Expectations that fall short of expectations, career and work pressure, parental and social expectations, romantic relationships, and the mismatch between the demands of adult development be it career, mental, or financial independence and the individual's capacity to meet them are some of the factors that can set off this phenomenon. According to Fischer (2008) quarter-life crisis is a feeling of worry that arises due to the uncertainty of future life regarding relationships, career, and social life that occurs around the age of 20. Some individuals feel happy and enthusiastic and are challenged to explore a new life they have never experienced before, but some feel anxious, depressed, and empty (Nash & Murray, 2010).

Due to the pressures of both personal and social obligations, early adult women are the group most likely to experience a quarter-life crisis. As young adults, they might have to deal with difficulties like beginning a career, making lasting relationships, and adjusting to new social roles. According to Arnett (2000), psychological symptoms like anxiety, depression, dissatisfaction, and self-doubt can be displayed by someone going through a quarter-life crisis. Sociocultural norms, family, and friendship factors can influence how individuals view their problems. The more pressure the individual experiences, the more easily they will develop negative emotions and views towards themselves. However, on the other hand, there are many positive aspects that the individual may have but are not aware of, resulting in disruption of their productivity and social function (Rahmania & Fasaufi, 2020).

Solution Therapy (SFT) was developed by Steve de Shazer, Insoo Kim Berg, and their team at a family therapy center in the mid-1980s. It is described as therapy that focuses on treatment goals and developed from therapy applying a problem-solving approach and systemic family therapy (Gingerich & Eisengart, 2000). According to Gingerich & Eisengart (2000), SFT therapy is effective in treating anxiety and depression among other psychological issues. Studies on the impact of SFT Therapy on young adult women experiencing a quarter-life crisis are scarce, even though the technique is frequently employed in psychological therapy. This study looks into the possibility of SFT Therapy helping young adult women experiencing Quarter-Life Crisis symptoms lessen in an effort to close this knowledge gap.

An intervention that can help someone survive a quarter life crisis situation is supportive group therapy. This is because individuals in the group have the same problems and can share their problems with each other so that new insights regarding more adaptive behavior can emerge. Supportive group therapy is a medium for a group of individuals with the same problems to share opinions and needs with each other. Group members can support each

other and share unpleasant experiences with other participants (Prasyatiani & Sulistyarini, 2018). Future-focused and solution-focused, solution-focused therapy is a type of psychotherapy. This strategy places a strong emphasis on locating people's resources and assisting them in creating positive plans of action to reach their objectives (Shazer & Dolan, 2007). A solution-focused approach will always bring about change, so when solving problems, one must look further into achievable solutions and personal competence rather than the history that leads to problems in the first place (Carlson et al., 2005). The therapy will foster a more optimistic, upbeat, and future-oriented therapeutic environment by altering the viewpoint regarding solutions (Nichols, 2010).

One intervention that is deemed appropriate to improve communication within the family is to provide solution-focused therapy. This therapy is deemed appropriate to be given to a family that has problems. This therapy emphasizes the solutions that will be achieved together, rather than the cause of the problem itself so that it does not require a long time, to overcome existing problems in the family and avoid disputes that may occur during therapy sessions (Cheung, S. 2001). This is also to the theory of solution-focused therapy which focuses on change. Small changes can result in big changes in a family. Small changes can restore a situation before there is a problem. Apart from that, changes can make clients able to control themselves (O'Connell, B. 2011)

More information about how well SFT Therapy supports early-adult women in overcoming the Quarter-Life Crisis is the hope of this research. Then, it can also benefit researchers, mental health practitioners, and individuals experiencing a quarter-life crisis.

Method

In this research, a quasi-experimental one-group before and after-study design was used (Kumar, 1992). The goal is to ensure the effectiveness of the recommended interventions. To ensure the efficacy of the study, researchers will take two measurements at the beginning and end of the investigation. In this study, participants' thoughts and emotions regarding the quarter-life crisis they experienced were measured. The modified Hassler (2009) a questionnaire was used as a measuring tool to collect quantitative data regarding participants' feelings during the quarter-life crisis. Qualitative data was also collected through interviews and observations. In between the two assessments, participants will receive intervention from researchers using a solution-focused methodology. The goal is to increase participants' self-confidence to help them get through quarter-life crises, especially when it comes to interpersonal relationships.

This study focuses on the depth and processes that occur in it rather than making generalizations. Therefore, the large number of participants in this study is not highlighted. Three (3) people took part in this research as participants. Non-random or non-probability sampling is the participant selection method used in this research. Initial assessment and overall evaluation of the session using an interview guide. The process of developing a quarter-life crisis and the psychological changes that occur when a person reaches the early adulthood stage (emerging) are some of the questions asked during the session. In addition, it is important to ask about the personal values that a person upholds when

entering into a relationship, the emotions that arise, the efforts that have been made and will be made, as well as the circumstances surrounding the interpersonal relationships that he or she has with other people. During the evaluation phase, researchers will ask about experiences related to any changes (behavioral, affective, or cognitive) the patient may be experiencing.

Results and Discussion

Each individual's response to the tasks and demands of emerging adulthood is different. Individuals who prepare themselves thoroughly will pass through emerging adulthood easily and feel ready to become adults. Others feel that this period is difficult and full of anxiety. Individuals feel unable to overcome the challenges and changes that occur during emerging adulthood. Not all individuals can overcome the challenges of emerging adulthood. Some of them will experience confusion and worry about the future. Individuals experience emotional crises such as feelings of helplessness, isolation, doubt about their abilities, and fear of failure. This condition is known as the quarter-life crisis (Mutiara, 2018).

In general, implementing interventions using the solution-focused therapy approach has proven to be effective in reducing or changing negative feelings and a pessimistic outlook on life in participants experiencing a quarter-life crisis. The choice of solution-focused therapy as an intervention method for this problem was based on the belief that this approach would explore positive aspects within the participants, including their vision of the future. As explained by O'Connell (2001), Solution Focused Therapy helps individuals identify their strengths and provides direction on how to utilize them to achieve desired goals. By realizing their strengths, individuals can develop solutions that are considered effective for them.

Macdonald (2007) added that solution-focused therapy is directly focused on focusing and looking for solutions that come from the client himself. The client is seen as having resources that can be utilized in the process of finding a solution. Therefore, good cooperation between therapist and client is needed. Solution-focused therapy contains two important elements, namely cognitive and behavioral. The basic stages of solution-focused therapy focus on creating solutions to solve problems, focusing on the future that the client wants to have, and improving certain behaviors in daily life. Therapists also help clients obtain expected thoughts, behavior, and interactions and help clients to create solutions that will be implemented (de Shazer, 2007). Key elements of SFT include; problem identification and motivation; miracle questions; possibility/hope; Scaling/establishment goals; exceptions; confidence/strength; and feedback (Safira, 2020).

Tabel 1. Deskriptiv sample

Partisipan	Pre-Test	Post-Test
A	114	82
B	121	77
C	127	62

Table 2. Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	Pretest Quarter Life Crisis	120.67	3	6.506	3.756
	Posttest Quarter Life Crisis	73.67	3	10.408	6.009

The results of research on three early adult female subjects who experienced Quarter Life Crisis, in subject A, the main problem experienced by subject A was felt anxious about the future and was confused about choosing a career and interests after graduating. Furthermore, on the subject of B, the main problem experienced by subject B is that lacks confidence in her abilities, is anxious when she cannot adapt to her environment, and is pessimistic about her future. Lastly, on the subject of C. Subject C experiences problems with bad characteristics such as being selfish, lacking self-confidence and being easily offended. He also feels anxious about his future because he doesn't know for sure about his steps and plans for the future.

The three participants experienced almost the same crisis, namely more negative feelings such as worry, and confusion in finding the right partner as well as feelings of lack of self-confidence and uncertainty about the steps to be taken in the future. According to Robbins & Wilner (2001) one of the main dilemmas faced by individuals in their 20s who have not yet had a romantic relationship is how to find a suitable partner. Compared with other age groups, people in their 20s face greater difficulty meeting potential partners than making new friends. This is due to the transition from a structured college environment, where they can develop criteria for an ideal partner, to a diverse world of work with different lifestyles. Therefore, they struggle to find practical and general solutions to find a suitable partner. Robbins & Wilner (2001) also emphasize that the hope of achieving a balance between a love life and a future career is also a major concern for those who do not yet have a partner. Therefore, for those who do not yet have a partner, the question of how to find the right partner often arises along with considerations regarding their career plans.

Positive aspects in participants are often overlooked because they are too focused on the difficult situations they experience, unresolved problems, and negative emotional turmoil such as doubt, lack of self-confidence, anxiety, and hopelessness. This condition is in line with many case examples described by Robbins & Wilner (2001) regarding individuals experiencing a quarter-life crisis. Therefore, therapy is an option that can be given to individuals like the three participants in this study. Robbins & Wilner (2001) also point out the need for therapy that helps individuals look back on their lives from a different perspective and helps them focus on making the best decisions according to their desires and values. For the three participants, the effectiveness of the solution-focused therapy approach was clearer because the focus of the session was directed at aspects that were directly related to them. These sessions focus more on uncovering positive qualities that participants possess, such as work performance, educational background, specific plans, and personal characteristics that can be developed. There is no reliance on the considerations of others outside the family when making decisions. This finding is in line with the results of research by Lanz & Tagliabue (2007), which emphasizes the importance

of interpersonal relationships in early adult women. Those who do not have a partner tend to find self-fulfillment through career and involvement in social relationships.

According to Dickerson (in Agustin, 2012), the quarter-life crisis is experienced more by women than men because women's demands now are not only limited to getting married and caring for their family, but also being able to work, having a good career and financial condition, and build social life. Even so, women are still required to marry before the age of 30 because Asian nations, especially Indonesia, adhere to a collectivistic culture (Arnett, 2004). When they reach the age of 30, women tend to direct their life goals towards new values, goals, and a work-oriented life. Ultimately, confusion arises in finding and developing a relationship that leads to marriage and family because fewer men are considered suitable in terms of performance and income to be a life partner (Whitehead, 2003). In practice, finding and choosing a partner is not an easy matter. According to De Genova (2008), choosing a life partner is a long and complicated process because it is based on choosing a candidate who can complete what the individual needs. Women often express negative emotions. This is because women prioritize their emotions and feelings in assessing things. When prioritizing emotions and feelings, women will be more sensitive to themselves, feel worried about their abilities and appearance, and pay enough attention to what other people say about themselves (Suhron, 2016).

One important aspect that needs to be noted is the issue of communication, namely the way participants convey their feelings and opinions to avoid unpleasant situations. The research results showed awareness that silence and passive attitudes should be changed because participants realized that this attitude only gave rise to negative feelings and prevented them from achieving their goals. This finding is consistent with the explanation of Bowles et al. (2001) that the solution-focused therapy approach can increase self-confidence in communicating without having to take on the role of an expert or party who has to fulfill other people's wishes. The decision to maintain, change, or overhaul a solution that participants have constructed is influenced not only by their characteristics, but also by family roles, culture, and held values, all of which influence how participants reevaluate the solution they have discovered.

The Solution Focused Therapy approach also has flexibility in determining the number of sessions to be conducted. Theoretically, it is usually carried out in a range of 3 to 5 sessions, known as Solution-Focused Brief Therapy, depending on the context of the problems faced by the individual (Jong & Berg, 2002). To ensure the effectiveness of the delivery of the material, four sessions have been arranged which were designed by utilizing Solution-Focused techniques such as scaling questions, miracle questions, exception questions, giving homework, giving praise, planning goals, and setting solutions. The basic therapeutic scheme in SFT to start in various cases is to foster efforts to build relationships, trying to work with the Subject to clarify the goals to be achieved from therapy in each session. This is done using the miracle question technique or other future-oriented questions. After this has been done, the therapist can carry out exceptions, namely situations where the problem exists but does not occur, or occurs with a lower degree of severity, and also scaling questions which ask the subject to give a rating on the changes

experienced. In other words, thinking is used more to build solutions than just solving problems (de Shazer & Molnar, 1984).

Conclusion

Therapy using the Solution Focused Therapy approach has proven to be effective in helping participants overcome negative feelings and views of themselves and the problems they face. However, this therapy has not been completely successful in bringing participants out of the Quarter Life Crisis phase but has to go through a fairly long process or stages so that someone can get out of that phase and make peace with the situation. Quantitatively, there are differences in results that can be observed through a decrease in scores on the pre-test and post-test questionnaires from all participants.

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