

# DEVELOPMENT OF A GROUP COUNSELING MODEL WITH STIMULUS CONTROL TECHNIQUE TO IMPROVE ADOLESCENT CARE ATTACHMENT IN ORPHANAGES

ALMA YULIANTI <sup>1\*</sup>, NEVIYARNI <sup>2</sup>, NETRAWATI <sup>3</sup>

<sup>1</sup> UIN SULTAN SYARIF KASIM RIAU, INDONESIA

<sup>2,3</sup> UNIVERSITAS NEGERI PADANG, INDONESIA

EMAIL: [alma.yulianti@uin-suska.ac.id](mailto:alma.yulianti@uin-suska.ac.id)<sup>1</sup>, [neviyarni@fip.unp.ac.id](mailto:neviyarni@fip.unp.ac.id)<sup>2</sup>, [netrawati@fip.unp.ac.id](mailto:netrawati@fip.unp.ac.id)<sup>3</sup>

## Abstract

Orphanages play a crucial role in shaping the psychological development of orphaned, half-sistered, and neglected adolescents who have lost the care of their biological parents. However, adolescents in orphanages are vulnerable to mental and emotional problems that can lead to maladaptive behavior in adulthood. Weak attachment between caregivers and adolescents is a major factor affecting their social-emotional development. Positive caregiver-adolescent relationships can be improved through the application of stimulus control techniques in group counseling, where positive behavior is reinforced by supportive stimuli. This study aims to develop a stimulus control-based group counseling model to improve parenting attachment in orphanage adolescents. The approach used is the ADDIE (Analysis, Design, Development, Implementation, Evaluation) development model with descriptive analysis and non-parametric statistical tests (t-test and regression\*) to assess the model's effectiveness. The results of this study are expected to produce a prototype counseling guide that is effective in strengthening emotional attachment between caregivers and adolescents.

**Keywords:** Attachment care, Stimulus control, Orphanage

## INTRODUCTION

Orphanages play a role in providing services for adolescents through direct support to surrogate families (family support) and foster care/orphanage-based institutions to ensure the safety, well-being, and fulfillment of adolescents' permanency needs. Orphanages as institutions engaged in the social sector help adolescents who no longer have parents. There are 7,000-8,000 orphanages in Indonesia, or 500,000-600,000 orphanages under the government or only 18% and the other 82% are organized by the community, especially religious organizations, associations, foundations and non-governmental organizations (Statistik, 2019).

Indonesia's population is 260 million, of which 3.2 million or 1.24% are orphans (Nasional Republika, 2019) and 4.1 million or 1.6% are abandoned children (News detik, 2016). Indonesia ranks sixth in the world with the largest number of orphans (Kavak, Report On World Orphans, 2014).

**Table 1. List of Countries with the Highest Number of Orphans (Kavak, 2014)**  
**Top Ten Countries with Highest Orphan Population**

No.	Country	Number of Orphans
1	India	31,000,000
2	China	20,600,000
3	Nigeria	12,000,000
4	Bangladesh	6,000,000
5	Ethiopia	4,800,000
6	Indonesia	4,700,000
7	Congo	4,200,000
8	Pakistan	4,200,000
9	Brazil	3,700,000
10	South Africa	3,500,000

In reality, not all teenagers can go through foster care with their parents, because they have to live in orphanages. Separation from parents that occurs in teenagers in orphanages causes loss and feelings of loneliness (Brenning et al., 2013). The loss of parents as close figures affects attachment or attachment to the adolescent self (Adam et al., 2013). (Brenning et al., 2013; Vansteenkiste & Ryan, 2013) explained attachment in adolescents is an important issue to be studied seriously with the current development of identity. Studies on developmental issues related to attachment in adolescents, developmental phenomena in society, especially in Eastern cultures like

Indonesia, are often misinterpreted. For example, attachment sometimes interpreted as a restraint because in reality it is teenagers who begin to develop attachment often begins with the emergence of behavior that is not in accordance with family rules (Steinberg & Morris, 2001).

Teenagers living in orphanages experience a state of vulnerability to emotional disturbances (Van Petegem et al., 2013). Studies conducted by previous researchers show that adolescents living in orphanages tend to have a higher vulnerability to emotional disorders (Thakkar et al., 2015). Attitudes that indicate low attachment in the form of hesitant behavior, easily anxious, unsure, tending to avoid, having no initiative, easily discouraged, not daring to appear in front of many people, and other psychological symptoms that prevent someone from doing something and can cause depression, suicide, anorexia nervosa, delinquency, and other adjustment problems (Borelli et al., 2016).

Early experiences with caregivers are believed to be prototypes or mental models that influence behavioral patterns and expectations in relationships in future adult individuals. More clearly, (Surcinelli et al., 2010a) state that mental models are prototype attachment, which will continuously influence behavior between behavioral patterns in childhood and adulthood. Some examples of research attachment Factors related to the mental model of self include Trust (Mikulincer, 1998), social attraction and interaction (Sanghera et al., 2012), Social Support (Collins & Feeney, 2004), and adjustment in adolescents (Borelli et al., 2016). Experience attachment is a process of learning for individuals to know themselves and the development of mature emotions.

Conditions that occur in the field using conventional group counseling have not been able to help teenagers to attachment care of adolescents in orphanages. The need for treatment or care to improve attachment in adolescent care in orphanages through group counseling with stimulus control techniques. Group counseling services with stimulus control techniques are basically planned in guidance and counseling programs. (Berg et al., 2024) group counseling process with an emphasis on stimulus control as a guidance and counseling service that allows adolescents to get the opportunity to understand and resolve the problems they experience through group dynamics that are held interactively, inspiring, fun, challenging, motivating adolescents to behave and participate actively, and provide sufficient space for initiative and creativity according to the talents, interests, and physical and psychological development of adolescents (PP No. 57 of 2021 concerning National Education Standards).

Doll & Thomas (1967), explained that the basic assumption of stimulus control in the behaviorist view is that individuals learn and demonstrate behaviors that produce desired outcomes and consequences. Based on this description, this study emphasizes "Developing a Group Counseling Model Using Stimulus Control Techniques to Improve Attachment Care for Adolescents in Orphanages".

Special strategies are needed by the relevant parties to improve adolescent care. Counselors with specialized expertise in guidance and counseling, particularly in addressing adolescent issues, can assist. This research is expected to contribute to the realization of the National Research Master Plan (RIRN), the National Research Priorities (PRN) for 2020-2024, and the 2020-2024 Research Master Plan of Padang State University. The results of the development of this guideline serve as a guideline for Counselors in preventing and managing social conflicts and realizing government performance according to Law Number 7 of 2012 concerning Handling Social Conflicts.

## LIBRARY REVIEW

### State of the Art

Research by Sanghera et al (2012), with the title "Attachment, Emotions and Kinship Caregiving: An Investigation into Separation Distress and Family Relatedness In Post-Soviet Kyrgyzstani Households", reveals that individuals create internal working models as mental representations of parent-child closeness and affective bonds that tend to be stable over time to cope with discomfort, doubt, and distress, and to rebuild hope, optimism, and calm. This study emphasizes the emotions that arise when children are separated from parents and raised by caregivers with informal kinship and how emotional bonds influence support-seeking behavior in adolescence and adulthood.

Research from Kivlighan et al., (2019) entitled "Attachment Anxiety and Attachment Avoidance: Members Attachment Fit with Their Group and Group Relationships", outlines the focus on attachment where the group as a whole has relationships with mature interpersonal functions, this leads to their perception of attachment and shows the aggregate attachment dimension of group members as a predictor of group climate. This study confirms that groups play a major role in the formation of attachment and how individuals perceive attachment to groups as a form of interaction.

The following research from (Surcinelli et al., 2010b) entitled "Adult Attachment Styles and Psychological Disease: Examining the Mediating Role of Personality Traits", explains the presence of dissociation in attachment styles and personality. Attachment seen as a general theory of personality development and has a relationship with personality dimensions. Consistency and sensitive parenting such as attachment leads to personality traits associated with mediating adult relationships, deeper depression and anxiety. Primary experiences with caregivers are internalized by children in the form of internal working models, namely cognitive structures that act as prototype in relationships outside the family. This study emphasizes personality as a mediator and explains psychological disorders in individuals. The relevance of this study lies in designing programs to improve attachment and the object of measurement is youth, but the potential for novelty (novelty) there are differences in the proposed interventions related to handling guidance and counseling service programs through group counseling and the need for efforts to find and develop effective handling and prevention programs. Attachment

parenting is measured based on the dimensions of attachment in Adolescent Attachment Questionnaire (AAQ) as also done by (Guarnieri et al., 2010). The indicators measured in terms of aspects of Adolescent Attachment Questionnaire (AAQ) namely: Angry Distress namely describing anger that originates from the individual's emotional system as a reaction to frustration between the needs and responses of adolescents towards caregivers. Availability namely adolescents' trust in figures, attachment, both in the form of responsive behavior in fulfilling emotional needs and adolescents' trust in caregivers, refers to a sense of mutual understanding and respect for adolescents' needs and desires. Individuals are born with attachment, which encourages them to get closer significant other (attached figure). This system aims to obtain protection and a sense of security which are basic human needs, according to Ainsworth (1978 (in Bee, 1994). Goal-Corrected Partnership the perception and response to figure attachment who are involved in planning and setting goals for the future of adolescents. So, there are three aspects in attachment parenting, namely angry distress, availability and goal-corrected partnership. As for efforts to improve attachment, adolescent care has been carried out Efforts to improve attachment, Psychological parenting is carried out by building hope, trust, optimism, and calm towards emotional relationships (Kivlighan et al., 2019). Efforts are made to improve attachment Care in the field of education can also be carried out by counselors, one of which is through group counseling services.

Human perception and action can be understood as stimulus control intentional (Markham et al., 2002) That is, models of human behavior need to explain how action-related perceptual processes will produce perceptual experiences and lead to intended actions (McIlvane, 1992). Stimulus control controlled by the presence or absence of a discriminative stimulus this. Term discriminative stimulus, is the basis of stimulus control Operant behavior develops because behavior is reinforced in the presence of a particular stimulus only. This behavior will continue to appear in the future only if stimulus control that which is given has existed beforehand with the existence discriminative stimulus (DS) which makes behavior stronger (Markham et al., 2002). When a response is reinforced and in the presence of one stimulus a new stimulus appears that is physically similar, and the level of response usually varies as a function of the physical similarity between the new stimulus and the original stimulus (stimulus generalization). (Bootzin & Epstein, 2011) states that in the counseling process stimulus control therapy requires at least 10 sessions, each session is systematically and planned. The SCT counseling process can be seen in the following table:

The conceptual framework developed formulates a model for improving attachment between caregivers and adolescents in orphanages. The following is a summary of the research framework.

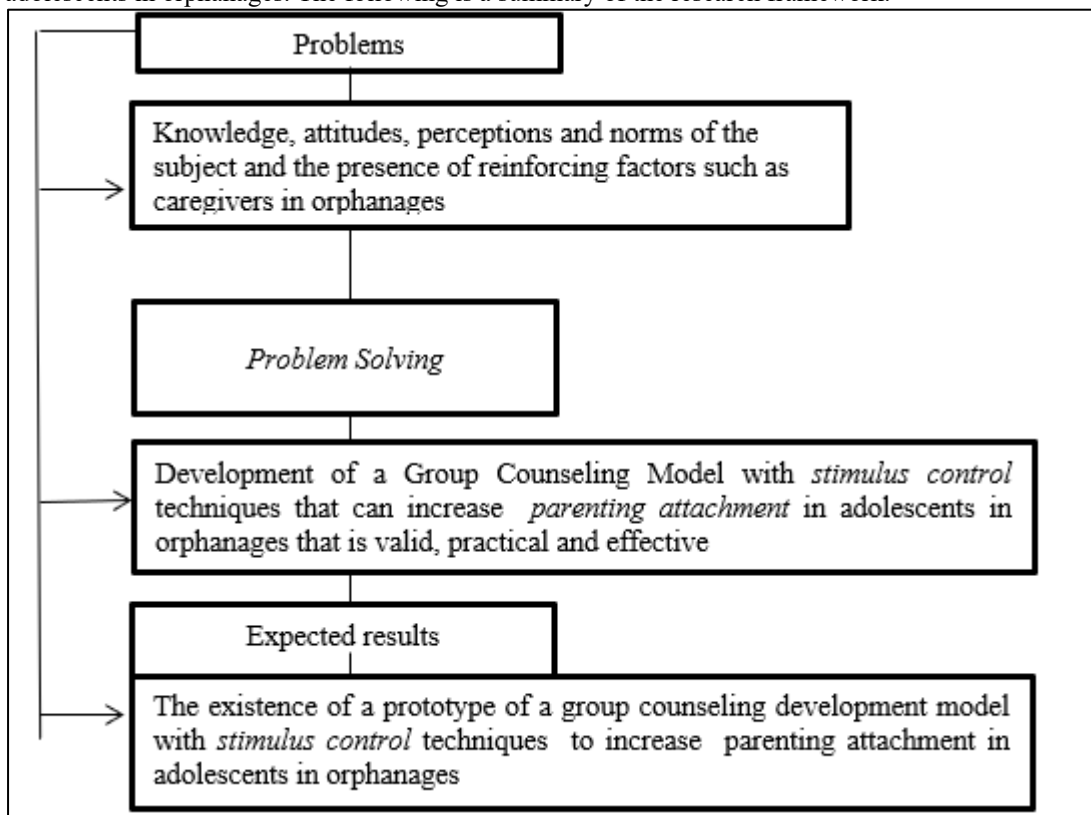


Figure 1 Conceptual framework

## METHOD

Research and development methods are techniques used to produce specific products and evaluate their effectiveness (Sugiyono, 2013). This type of research is development research or research and development which is research to produce a product, in the form of innovation from the problems found. This research aims to find a group counseling model using the technique of stimulus control to increase attachment care for teenagers in

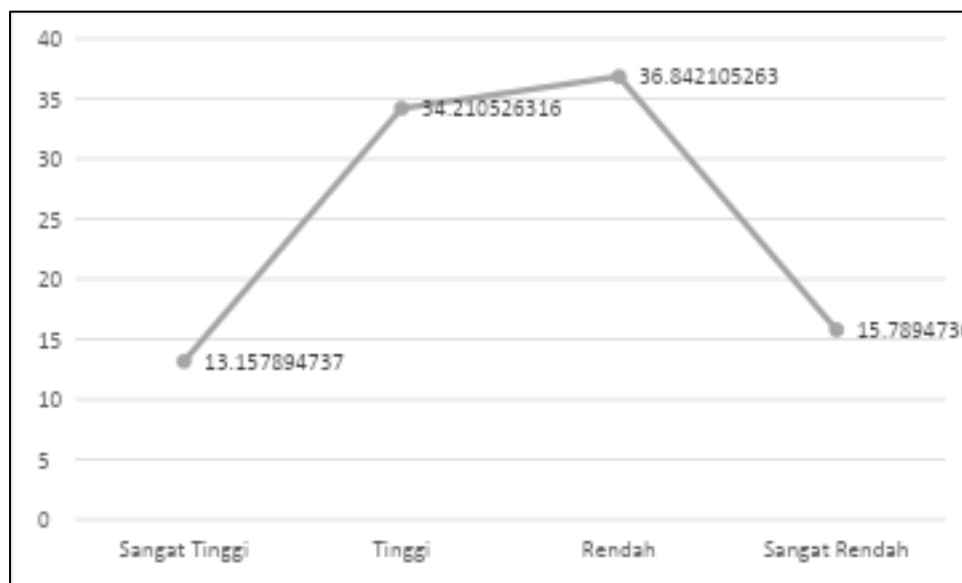
orphanages.

After conducting the research, the overall results obtained indicated that the parenting attachment was in the low category, as shown in Table 1 below.

**Table 1. Attachment Foster Care of Adolescents in Orphanages (n=38)**

Category	Class Interval	F	%
Very high	> 22,383	5	13,16
High	18,684 -22,383	13	34,21
Low	14,985 - 18,684	14	36,84
Very Low	<14,985	6	15,79
	AMOUNT	38	100

From table 1, it is known that the teenagers in the orphanage who attachment the attachment of caregiving is in the very high category with a percentage of 13.16%, then in the high category with a percentage of 34.21%, in the low category with a percentage of 36.84%, and the very low category is at 15.79%. So it can be concluded that the attachment of caregiving for adolescents in orphanages before being given treatment is in the low category. For more details, see the line graph below.



**Figure 2: Distribution of Attachment Levels of Parenting in Adolescents in Orphanages**

The research subjects were the caregivers and teenagers in several orphanages under the Social Services in Pekanbaru City who had been determined by the researcher based on a two-stage sampling, where two steps are taken in determining research sampling. The initial step uses the technique of cluster random sampling. Cluster random sampling is, researchers divide the population into several separate groups called clusters. The second step, namely, teknik purposive sampling in groups that have been found randomly, where the researcher determines the selection of samples based on predetermined criteria (Sugiyono, 2013), the criteria are as follows: the subjects are teenagers who are orphans, orphans, orphans and have never been cared for by their parents. The subjects are teenagers who live in orphanages, teenagers from orphanages who have filled out the research instrument and received measurements Attachment care is in the low category.

The data analysis used was quantitative. The form of quantitative analysis carried out was to examine the model development process and was used as a basis for compiling the final group counseling model using the technique of stimulus control to increase attachment care of teenagers in orphanages.

Research and development are the foundation of this approach. The ADDIE model, as the basis for producing products (Branch & Varank, 2009), is the reason for using the ADDIE approach in this study, as it has been modified to meet development needs.

The development procedure at the analysis stage is that the researcher carries out needs analysis (needs analysis) by identifying problems of attachment between caregivers and adolescents in orphanages. Through a literature review to explore the concepts and constructs of group counseling models using techniques, stimulus control and

empirical review. At the design stage, a hypothetical group counseling model was designed using the technique of stimulus control to increase attachment care and adolescents in orphanages derived from the results of the previous needs analysis. This stage includes the vision, mission, goals, content, format, philosophy, and acceptance of the model by the target users.

Developing a model or measuring instrument in a study requires discussion of the content with experts who have expertise in the model variables. Therefore, at this stage or development, is carried out Focus Group Discussion (FGD) was conducted with guidance and counseling experts, including lecturers, counselors, and experienced psychologists. In the implementation stage, the model was used with caregivers and adolescents at the orphanage to measure attachment, caregivers and adolescents, and meet the basic feasibility of the model obtained from guidance counseling experts and developmental psychologists. Using an experimental pretest-posttest control group design (there is an experimental group that receives treatment and a control group that does not receive treatment). The evaluation stage is carried out with the aim of obtaining a complete picture of the model.

The research for the initial trial of this measuring instrument involved a sample of 90 adolescents from the Al Istiqlal orphanage and the Limper orphanage in Pekanbaru. The tryout data collection was conducted on August 5, 2023. The presentation of the data collection instrument was carried out with the assistance of caregivers at the orphanage. Based on the distribution of the scale to 90 adolescents from the orphanage, the answers given were then scored for data analysis, which included validity and reliability tests as well as item discrimination tests. Through the intended test, valid and reliable items will be produced so that the measuring instrument can be used on a wider scale. The validation used in this study is Content Validity with professional judgment. Validation was carried out by 3 professionals who have scientific backgrounds and are highly competent in the fields of guidance and counseling and personality psychology. The validator of the measurement instrument is .....

The results of computerized calculations on the attachment scale obtained a z-score that ranged from -8.549 to 4.526. The total number of items consisted of 60 items representing each aspect of attachment. All items were then analyzed using the SPSS version 25 for Windows program. A total of 60 items were tested for their discrimination index. Based on the item discrimination test, there were 44 valid items.

**Table 2 Blue Print Attachment Parenting**

Aspect	Indicator	Invalid Item	Item Valid	Valid Item Count
Variable Attachment Parenting It is an emotional bond or relationship that is affectively meaningful for the individual and the attachment figure, lasts a long time and produces a close emotional system.				
Angry/Distress	1. Teenage stress due to indifference from caregivers/attachment figures	3, 6	1, 2, 4, 5	4
	2. Anger at the absence of a caregiver/attachment figure	7, 8, 9, 13	10, 11, 12	3
Availability	3. Disappointment to Caregiver/Attachment Figure	14, 16	15, 17, 18, 19, 20	5
	4. Belief in the existence of a caregiver/attachment figure	22, 28	21, 23, 24, 25, 26, 27, 29, 30	8
	5. Caregiver/Attachment Figure Response to Adolescents' Emotional Needs	37, 39	31, 32, 33, 34, 35, 36, 38, 40	8
Goal Corrective Partnership	1. Perception of empathy towards the caregiver/attachment figure	—	41, 42, 43, 44, 45, 46	6
	2. Attachment to the needs of the caregiver/attachment figure	52	47, 48, 49, 50, 51	5
	3. Involvement of caregivers/close figures in the future of adolescents	57, 58, 59	53, 54, 55, 56, 60	5
Total		16	44	

Making variable measuring instruments attachment parenting using a scale Liked which has five alternative answers, namely, Very Appropriate (SS), Appropriate (S), Undecided (R), Not Appropriate (TS), Very Not Appropriate (STS). After the trial, a reliability test was calculated using JASP software. The results of the analysis Alpha Cronbach of 0.816 (point estimate). This illustrates that attachment parenting is said to be reliable and trustworthy and reliable for use in this study.

**Table 3 Reliability Test Results**

Frequentist Scale Reliability Statistics	
Estimate	Cronbach's $\alpha$
Point estimate	0.816



Frequentist Scale Reliability Statistics		
Estimate	Cronbach's $\alpha$	
95% CI lower bound	0.755	
95% CI upper bound	0.864	
Note. The following items correlated negatively with the scale: V5_1, V5_2,		

## RESULTS AND DISCUSSION

**Item Discrimination Power Test** The item discrimination power test is an indicator pattern of alignment or consistency of item function with the overall scale function known as item-total consistency. The working principle that is used as the basis for selecting items, in this case, is to choose items whose measuring function is in accordance with the scale measuring function as desired by the researcher. The item discrimination power test is carried out by calculating the correlation coefficient between the item score distribution and the scale score distribution itself. This computation will produce an item-total correlation coefficient (rix). In this study, the product moment correlation technique from Carl Pearson was used for the discrimination power test with the following formula:

$$r_{ix} = \frac{\sum ix - \frac{(\sum i)(\sum x)}{n}}{\sqrt{\left[\sum i^2 - \frac{(\sum i)^2}{n}\right] \left[\sum x^2 - \frac{(\sum x)^2}{n}\right]}}$$

### Information:

i = Item score

X = Shoes scale

n = Number of subjects

To test the reliability of the measuring instrument on this research scale, the alpha formula was used with the help of the computer program Statistical Product and Service Solution (SPSS) version 24 for Windows. In its application, reliability is expressed by the value of the reliability coefficient, whose value is in the range of 0 to 1. The higher the value of the reliability coefficient approaches the number 1, the better the reliability. Conversely, the lower the value of the reliability coefficient, approaching zero, the lower the reliability. Validity testing was also carried out by Focus Group Discussion with professional judgment regarding the material module, which contains theoretical concepts to explain the basics and understanding of each thing related to the research variables, namely stimulus control and attachment. The material module is structured as a product that aims to provide knowledge and understanding of research variables, namely sources and strategies of engineering stimulus control through group counseling, which can improve attachment parenting. The material module that is compiled consists of several parts, namely: Part 1: Material regarding the concept and understanding of Attachment Parenting. Part 2: Material on developing Trust in Attachment Figures of the Orphanage/Caregiver. Part 3: Material on developing emotional involvement. Part 4: Material on interpersonal skills. Part 5: Material on building hope and optimism. Part 6: Contains an explanation of the activities carried out during the training process, including the methods, tools and materials used, evaluation sheets and cases raised as the main theme in the training. Validation of the attachment training module was also carried out, which contains the stages of training implementation as a treatment given. The implementation of the training refers to the training module compiled by the researcher himself. The following is a brief procedure in the training module: 1. Explain the purpose of each session and the procedures that must be carried out by participants. 2. Implementation of the training with the methods explained in each session Participants are asked to do homework in the form of a daily activity sheet containing activities, time, and student responses. 4. Participants are asked to assess the training process by filling out the evaluation sheet.

### Product Trial with Experimental Design

The product testing in this study used an experimental method. In research using the experimental method, researchers administer treatments to subjects, groups of subjects or participants, or to certain conditions, tools, or materials to determine whether the treatment has an impact or influence on certain variables or factors. The test design uses a group pretest design. Product testing plan for the group counseling module. The stimulus control technique to increase attachment will be tested on two orphanages that meet the researcher's criteria. The data analysis technique uses the t-test analysis technique (mean difference test). Overall data analysis uses the SPSS for Windows program. This study uses a descriptive design. Pretest-posttest Control Group Design, namely, there are two sample groups selected randomly to equalize the experimental and control groups. In a pretest-posttest

control group design, treatment can be given before or after the measurement.

### Limited Test

**Population and Sample** The population for the implementation of limited testing with an experimental design is the adolescents of the Al-Istiqlal orphanage. In the limited testing at the Al Istiqlal Orphanage in Pekanbaru, the subjects who became the control group were 11 people and those who became the experimental group were 12 people, so that the total number of 23 people was obtained from the results of attachment screening on adolescents at the orphanage. **Data Collection Techniques** include: Providing Informed Consent related to the approval of each individual involved in this study, there are three Informed Consents, namely Informed Consent of the subject (experimentally), Informed Consent of the experimenter and observer. **Implementation of the Pretest** the pretest was carried out at the beginning of the study. The pretest was carried out with a measuring instrument, namely the attachment scale whose validity and reliability have been tested. The reliability value of the measuring instrument of 0.816 is considered sufficient to be tested on a wider scope. Treatment was given to the subjects who became the experimental group of each test conducted. The treatment was in the form of group counseling with stimulus control techniques to improve attachment care. Treatment was administered according to the agreed schedule in 2 meetings with a total time of 240 minutes or 4 hours. (iv) **Implementation of the Post-test** The post-test was conducted at the end of the study after the treatment was administered. The post-test was conducted three days after the training to avoid learning effects that threaten the internal validity of the experimental research.

### Data analysis

Each stage of the test was analyzed using statistical analysis. The statistical analysis was intended to test the effectiveness of the resulting product, namely a group counseling module using stimulus control techniques to increase attachment. The number of subjects was a key consideration in the statistical analysis. Therefore, for experimental research, non-parametric statistics were used, including the Wilcoxon test and the Mann U-Whitney test.

Assumption testing using a normality test was conducted to determine whether the data being analyzed was normally distributed. The normality test in this study was obtained from pretest and posttest data. Data normality can be seen from the significance value of the Kolmogorov-Smirnov test. Data can be said to be normally distributed if the Kolmogorov-Smirnov test is greater than 0.05 ( $p > 0.05$ ).

**Table 4 Results of Subject Normality Test**

Group Code	Kolmogorov-Smirnov <sup>a</sup>		
	Statistic	Df	Say.
Pretest Control Group	,127	12	,200*
Control Group Posttest	,155	14	,200*
Experimental Group Pretest	,121	11	,200*
Experimental Group Posttest	,122	11	,200*

**Table 5 Levene Statistic Homogeneity Test**

	Levene Statistic	Df1	Df2	Say.
Based on Mean	2,160	1	22	,157
Based on Median	1,573	1	22	,207
Based on the Median and with adjusted	1,661	1	17,3	,214
Based on trimmed mean	2,077	1	22	,164

Based on the table above the Mean is  $0.157 > 0.05$  so it can be concluded that the variance of the Posttest data of the experimental group and the Posttest data of the control group are the same or homogeneous.

**Table 6 Results of the Control Group (KK) Subject Difference Test Analysis**

	Group Type	N	Mean Rank	Sum of Ranks
Control Group	KK pretest and posttest	11	18,50	221,00
	TO pretest and posttest	12	6,50	84,00
	Total	23		

Based on the analysis of differences, it can be concluded that there are significant differences in attachment between the adolescent subjects in the control group at the Al Istiqlal orphanage. This means that each subject in the control group has a different. Based on the results of the research that has been conducted, group counseling techniques, stimulus control have contributed to the improvement attachment.

The development procedure at the analysis stage is that the researcher carries out needs analysis (needs analysis) by identifying problems of attachment caregivers and adolescents in orphanages. Through a literature review to explore the concepts and constructs of group counseling models using techniques stimulus control and empirical review. The next step is to review the research results related to the model and problem analysis attachment. The care of adolescents in orphanages was measured using a validated measuring instrument. An empirical study was conducted on caregivers and adolescents in orphanages in Pekanbaru City who were randomly selected (random) as research subject. This becomes the basis for further development.

At the design stage, a hypothetical group counseling model is designed using stimulus control techniques to increase attachment development of the model for foster care and adolescents in orphanages, stemming from the results of a previous needs analysis. This stage encompasses the vision, mission, objectives, content, format, philosophy, and acceptance of the model by the target users. After the model design was developed and reviewed (through judgment) by a number of experts, it was socialized and trained to the caregivers who would be implementing this research.

Developing a model or measuring instrument in a study requires discussion of the content with experts who have expertise in the model variables. Therefore, at this stage or development, is carried out Focus Group Discussion the Focus Group Discussion (FGD) was conducted with guidance and counseling experts, including lecturers, counselors, and experienced psychologists. This was followed by a consultation session on the development of the model's construct and content, resulting in a draft of the desired model and a feasibility test. This stage included identifying needs and problem analysis and designing group counseling using techniques stimulus control, FGD involving academics of guidance and counseling, counselors, developmental psychologists, and caregivers at the orphanage went through a revision process until the desired model was achieved. There was expert validation by three validators, consisting of two experts/specialists in the field of guidance and counseling and one expert in the field of developmental psychology. Input and revisions were used as references to further refine the desired model. The next stage was conducting limited group trials in accordance with the previous needs analysis, and concluded with testing derived from a clear and comprehensive description of the group counseling model using stimulus control to increase attachment adolescent care in orphanages through validity, practicality and effectiveness tests. At the implementation stage, the model was carried out on caregivers and adolescents at the orphanage in measuring attachment caregivers and adolescents, and meet the model's feasibility criteria obtained from guidance counselors and developmental psychologists. At this stage, the model's usability level was developed, namely the extent to which caregivers and adolescents in the orphanage understood how to use the model. An experimental design was used pretest-posttest control group design (there is an experimental group that receives treatment and a control group that does not receive treatment).

The evaluation phase is carried out to obtain a complete picture of the model. The evaluation results provide considerations as to whether the developed model still needs improvement/revision. This phase includes soliciting feedback from trials after receiving the model implementation, soliciting feedback from service providers, refining the model design, and compiling the final model in the form of a prototype that meet the requirements to be tested on a wide scale.

## CONCLUSION

Development of group counseling modules using techniques, stimulus control, effective in improving attachment care for adolescents in orphanages. Development of group counseling modules using group counseling techniques stimulus control Based on students' need for a fun, independent, and non-monotonous method. Through the development of this guide, teenagers can gain information about learning techniques. stimulus control in improving attachment at the same time, you can increase attachment with the caregiver in the orphanage through the training activities contained in the guide module.

There are differences in attachment among adolescents in Pekanbaru orphanages before and after group counseling using stimulus control techniques. Adolescents generally show behavioral changes that increase attachment among adolescents in orphanages.

## REFERENCE

1. Adam, K. S., Keller, A. E. S., & West, M. (2013). Attachment organization and vulnerability to loss, separation, and abuse in disturbed adolescents. In *Attachment theory* (pp. 309–341). Routledge.
2. Berg, R. C., Landreth, G. L., & Fall, K. A. (2024). *Group counseling: Concepts and procedures*. Routledge.
3. Bootzin, R. R., & Epstein, D. R. (2011). Understanding and treating insomnia. *Annual Review of Clinical Psychology*, 7(1), 435–458.
4. Borelli, J. L., Somers, J. A., West, J. L., Coffey, J. K., & Shmueli-Goetz, Y. (2016). Shedding light on the specificity of school-aged children's attachment narratives. *Attachment & Human Development*, 18(2), 188–211.
5. Brenning, K., Soenens, B., Braet, C., & Beyers, W. (2013). Longitudinal dynamics of depressogenic personality and attachment dimensions in adolescence: An examination of associations with changes in depressive symptoms. *Journal of Youth and Adolescence*, 42(8), 1128–1144.
6. Collins, N. L., & Feeney, B. C. (2004). An attachment theory perspective on closeness and intimacy. In *Handbook of closeness and intimacy* (pp. 173–198). Psychology Press.



7. Doll, T. J., & Thomas, D. R. (1967). Effects of discrimination training on stimulus generalization for human subjects. *Journal of Experimental Psychology*, 75(4), 508.
8. Guarnieri, S., Ponti, L., & Tani, F. (2010). The Inventory of Parent and Peer Attachment (IPPA): A study on the validity of styles of adolescent attachment to parents and peers in an Italian sample. *TPM-Testing, Psychometrics, Methodology in Applied Psychology*, 17(3), 103–130.
9. Kivlighan, D. M., Coco, G. Lo, Gullo, S., Pazzagli, C., & Mazzeschi, C. (2019). Attachment anxiety and attachment avoidance: Members' attachment fit with their group and group relationships. In *Attachment in Group Psychotherapy* (pp. 67–83). Routledge.
10. Markham, M. R., Dougher, M. J., & Augustson, E. M. (2002). Transfer of operant discrimination and respondent elicitation via emergent relations of compound stimuli. *The Psychological Record*, 52(3), 325–350.
11. Mikulincer, M. (1998). Adult attachment style and affect regulation: strategic variations in self-appraisals. *Journal of Personality and Social Psychology*, 75(2), 420.
12. Sanghera, B., Ablezova, M., & Botoeva, A. (2012). Attachment, emotions and kinship caregiving: an investigation into separation distress and family relatedness in post-Soviet Kyrgyzstani households. *Families, Relationships and Societies*, 1(3), 379–396.
13. Statistik, B. P. (2019). *Data dan Informasi kemiskinan kabupaten/kota tahun 2018*. Jakarta: Badan Pusat Statistik.
14. Steinberg, L., & Morris, A. S. (2001). Adolescent development. *Annual Review of Psychology*, 52(1), 83–110.
15. Sugiyono. (2013). *Statistika Untuk Penelitian*. Alfabeta.
16. Surcinelli, P., Rossi, N., Montebanocci, O., & Baldaro, B. (2010a). Adult attachment styles and psychological disease: Examining the mediating role of personality traits. *The Journal of Psychology*, 144(6), 523–534.
17. Surcinelli, P., Rossi, N., Montebanocci, O., & Baldaro, B. (2010b). Adult attachment styles and psychological disease: Examining the mediating role of personality traits. *The Journal of Psychology*, 144(6), 523–534.
18. Thakkar, A., Mepukori, D., Henschel, K., & Tran, T. (2015). Understanding attachment patterns among orphans in residential care homes in New Delhi, India. *Institutionalised Children Explorations and Beyond*, 2(2), 165–173.
19. Van Petegem, S., Vansteenkiste, M., & Beyers, W. (2013). The jingle–jangle fallacy in adolescent autonomy in the family: In search of an underlying structure. *Journal of Youth and Adolescence*, 42(7), 994–1014.
20. Vansteenkiste, M., & Ryan, R. M. (2013). On psychological growth and vulnerability: basic psychological need satisfaction and need frustration as a unifying principle. *Journal of Psychotherapy Integration*, 23(3), 263.