Enhancing Resilience in Indonesian Muslim Families through Logotherapy Counseling

Hunainah*[1], Abdul Mujib[2], Nafan Tarihoran[1], Aspandi[1], Dody Riswanto[3], Hilda Syifa Rahma[4]

Universitas Islam Negeri Sultan Maulana Hasanuddin Banten, Indonesia[1]
Universitas Islam Negeri Syarif Hidayatullah Jakarta, Indonesia[2]
Universitas PGRI Indraprasta Jakarta, Indonesia[3]
Universitas Ahmad Dahlan, Indonesia[4]
hunainah@uinbanten.ac.id*

ABSTRACT: This study aims to evaluate the impact of logotherapy techniques on the resilience of Muslim families, with family status and the number of dependents serving as demographic variables. The study sample consisted of 30 Muslim families in Banten province, Indonesia involving a total of 89 individuals. The purposive sampling method consisted of 30 men (father or husband), 30 women (mother or wife), and 29 sons and/or daughters in terms of family status. The study employs a quantitative approach using inferential parametric statistics by using ANOVA. The results obtained indicate logotherapy counseling techniques, such as paradoxical intention, dereflection, and Socratic dialogue have increased significantly the resilience of Muslim families in Banten. The Paradoxical Intention technique is significant improve. Than, the legal basis dimension and the Dereflection technique have large improve for the Psychosocial Resilience dimension. Furthermore, the combined technique of Paradoxical Intention and Socratic Dialogue dramatic improve the other three dimensions of Physical Resilience, Economic Resilience, and Social Resilience Family. Especially, for the best achievements in enhancing physical and economic resilience is using the paradoxical intention-Socratic dialogue, socio-family resilience with Socratic dialogue-dereflection, legality resilience with paradoxical intention, and socio-psychological resilience with dereflection. In the context of enhancing family resilience, husbands are best served using paradoxical intention-Socratic dialogue. While, the wifes by dereflection-Socratic dialogue, and then the children by paradoxical intention-Socratic dialogue. For families with only child dependents, the most suitable technique is paradoxical intention-Socratic dialogue. Whereas, for those with dependents that include children, parents, and/or other close family members, dereflection proves more appropriate.

INTRODUCTION

Logotherapy counseling has been identified as a crucial predictor influencing various family issues. Logotherapy is a psychotherapeutic approach developed by Viktor Frankl based on the philosophy of freedom of will, the meaning of life, and the will to meaning. Logotherapy is

developed using three techniques: paradoxical intention, dereflection, and Socratic dialogue (Frankl, 1992). The technique of paradoxical intention is used to direct behavioral changes that reverse the principle of normative change (March, 1997). The dereflection technique is used to alter negative thoughts, psychological conflicts, neurotic symptoms, and meaningful actions. This technique is employed to ignore symptoms (Frankl, 2004). Meanwhile, the Socratic dialogue technique is used to find universal answers and precise statements (Costello, 2019).

Logotherapy centers on the tri-dimensional conceptualization of humans; physical, psychological, and spiritual (Schulenberg et al., 2008). Logotherapy deals with the biological, psychological, and spiritual dimensions of humans, and all these dimensions unite and are expressed through dimension functions (Guttmann, 2008). Logotherapy is used to reduce or alleviate existential crises through the discovery of life's meaning (Ducci & Goldman, 2012). As a psychotherapeutic approach, logotherapy attempts to heal by accessing meaning and purpose from a spiritual perspective (Southwick et al., 2016). Logotherapy is based on the premise that everyone seeks meaning, and individuals' responses to questions about meaning in life are the mechanism of change in psychotherapy (Fereydouni & Forstmeier, 2022).

Several empirical research findings are showing the effectiveness of logotherapy. The technique of paradoxical intention influences family therapy, assisting individuals experiencing anxiety, fear, phobia, and even depression by encouraging them to confront that fear itself (Ascher, 2002). The dereflection technique can enhance the psychological resilience of families (Ameli & Dattilio, 2013). The Socratic dialogue technique is relevant for therapy for various mental health difficulties (Schulenberg et al., 2008). Logotherapy has also been found to reduced significantly symptoms of depression and improve life's purpose (Cho et al., 2012). Logotherapy has been proven significantly to enhance psychological well-being and reduce the potential for addiction (Esalati et al., 2019). Logotherapy has caused significant increase in marital satisfaction (Farahini et al., 2019). Logotherapy is effective in improving individuals' abilities to cope with the logic and responsibility of life (Alimohammadi et al., 2020). Logotherapy be able to used as therapy for mothers experiencing depression, anxiety, and stress (Aryani & Ardani, 2021). Hence, in general, logotherapy can respond to various family resilience issues, which is one of the indicators of finding meaning in life.

The resilience of Muslim families in Banten, Indonesia, has experienced dynamic development physically, socially, and psychologically. This is supported by data showing that the percentage of Muslim families in Banten reaches over 94% and the indicator of the percentage of the population below the poverty line at level 6, reaching less than 10% (Budiawati & Natawidjaja, 2020). However, Banten is classified as a region with a relatively low Family Resilience Index Initiative (R-IKK) among other regions in Java, Indonesia (Oktavia, 2021). This is supported by data indicators of malnutrition in toddlers of less than or equal to 40%, an average school duration for children over 15 years at level 3 (6.5-7.5 years), and the proportion of food expenditure at level 3 (30 - < 40%) (Budiawati & Natawidjaja, 2020). The lowest Family Resilience Index value indicates vulnerabilities in physical, social, and psychological resilience.

Family resilience in Banten, Indonesia, faces several threats (Vulnerability). The Human Development Index (HDI) data for Banten show an average of 70.96, which means the Banten government must increase the HDI through various programs and policies (Handayani et al., 2018). The data on the prevalence of toddlers malnutrition in Banten Province at 12.6% (Usada et al., 2021). Divorce data in Serang City, Banten, based on the number of divorce certificates, has increased by 27.60% (BPS Kota Serang, 2020). Data on 3,200 divorce cases in Serang City, Banten, are dominated by economic problems (Masykur, 2020). The divorce places women in vulnerable mental situations (Van Gasse & Mortelmans, 2020). Data from 2020 show that 15,985 employees were laid off and lost their jobs (Rosyadi, 2020). The lowest HDI value and these threats indicate vulnerabilities in physical, social, and psychological resilience for family resilience in Banten.

Family resilience in the context of Indonesia is developed by the Ministry of Women's Empowerment and Child Protection. This concept of family resilience is formulated in Law Number 52 of 2009 concerning Population Development and Family Development, in Article 1 Paragraph 11. This concept aims for the development of individuals within the family and the family as a whole (Badan Pusat Statistik, 2016). This concept of family resilience also comes with dimensions, such as, variables and indicators. The measurement of family resilience levels in Indonesia includes five dimensions: First, Legality and Family Structure with 3 variables (7 indicators); Second, Physical Resilience with 3 variables (4 indicators); Third, Economic Resilience with 4 variables (7 indicators), Fourth, Social Psychological Resilience with 2 variables (3 indicators); and Fifth, Social Cultural Resilience with 3 variables (3 indicators) (Badan Pusat Statistik, 2016). This formulation is prepared as an effort to produce a foundation for the availability of a measure to family resilience level that can be used as a baseline for the development of family resilience levels in Indonesia.

The social condition of Banten, which has vulnerabilities in the Family Resilience Index, is intriguing to study. These vulnerabilities impact the physical, social, and psychological resilience of families. Furthermore, many researchers recognizing the importance of family resilience for family members to adapt and develop in adversity (Conger & Conger, 2002). High family resilience able to reduce the adverse effects of stress through the perception of pressure (Brivio et al., 2021). Family resilience assists members in understanding crises, living a positive life, and providing transcendent spiritual values and goals (Froma Walsh, 2020). Family resilience can have a significant impact on personal outcomes, such as adherence to treatment, rehabilitation, social and work reintegration (Faccio et al., 2018).

Several determinant factors show a role in family resilience, such as adaptability, family cohesion, communication, and healthy financial management (Chen & Bonanno, 2020). Another critical factor is flexibility in adapting to dynamic circumstances and adjusting one's strategy to cope with these situations (Chen & Bonanno, 2020). The other factors of Literature also indicate the contribution of resilience include social support, positive parenting, and effective coping mechanisms. the function of Family are associated with well-being during severe turmoil periods. (Masten & Motti-Stefanidi, 2020). Furthermore, developing anxiety and stress management skills can maintain the quality of family life (Nuriyyatiningrum et al., 2023).

There are various terminologies of family resilience. First, family resilience is defined as the ability and strength of the family as a whole to cope with stress and crisis (Shin et al., 2010). Second, family resilience is viewed as a dynamic process in which families continuously balance pressure, demands, and resources to survive and adapt to the environment (Froma Walsh, 2020). Third, family resilience is defined as a dynamic condition of the family that possesses perseverance, resilience, physical, material, and mental abilities for lived independently (Government Regulation of the Republic of Indonesia Number 21, 2020). Referring to terminology varieties, family resilience has three characteristics; 1) the family is treated as a whole; 2) there are definite difficulties involving the family; and 3) final adaptation to difficulties is achieved through the joint efforts of family members (Gayatri & Irawaty, 2022). The high families resilience can take control in stressful situations (Xu & Lin, 2015). Therefore, family resilience can have a significant impact on the physical, psychological, and social resilience of the family.

The process of family resilience can be seen in how parents and children can "marshal systems" under crisis (Froma Walsh, 2003) and adapt to new routines of maintain security and continuity in daily life (Koskela et al., 2020). Parental resilience will impact child resilience, which encompasses how children care for themselves and their families (Luthar et al., 2021). Parents have a very important role in family resilience with the peculiarities of parental roles and resilience. Parental resilience can encourage children to develop their emotional well-being. So, the role of parents as models in realizing family resilience can encourage children's emotional development to be prosperous.(Ivanova & Shapovalenko, 2023)

According to the family resilience system theory, the three most important parts of family functions are the family belief system, organizational patterns, and communication processes (F. Walsh, 2006). Moreover, protective factors in family resilience, such as family trust and family support, can assist families in moving forward in crisis and safeguarding the survival and well-being of the entire family (F. Walsh, 2006). Scheduled family member involvement able to influences better relationships among family members to foster independence (Mujahid et al., 2022). High family resilience can reduce the adverse effects of stress through the perception of pressure (Brivio et al., 2021). Family resilience can enhance adolescent mood and alleviate adolescent mental health issues (Zhuo et al., 2022). Through these arguments. It can be speculated, that family resilience can not directly influence family mental health only. Furthemore, enhance physical, psychological, and social family resilience. One of the therapies to enhance family resilience can be achieved through logotherapy counseling.

Family resilience as its systemic characteristic, depends on the balance between risk and protective factors, which take into consideration the quality of family resources. The family resources are indicator of family resilience. The resources of the main family, which contribute to the formation and maintenance of its resilience in a large temporal, social, and cultural context, united gradually individual resources (Makhnach & Laktionova, 2021).

Study Aim and Hypothesis

Previous research has shown that logotherapy effective significantly addresses various mental health issues, enhances family psychological resilience, improves marital satisfaction, and more. However, there is no research has evaluated experimentally its impact on the resilience of Muslim families. To achieve the aims, research questions need to be addressed; 1) to evaluate the influence of logotherapy on the resilience of Muslim families in Banten through the analysis of three techniques: paradoxical intention, dereflection, and Socratic dialogue, and 2) to evaluate the combined effect of logotherapy counseling of these three techniques and their relevance to the resilience of Muslim families in Banten, Indonesia with the demographic interaction of family status and the number of dependents.

The following hypotheses are developed in this study: 1) There is an influence of logotherapy techniques of paradoxical intention, dereflection, and Socratic dialogue on physical family resilience, psychological resilience, and social resilience, moderated by the interaction of status in the family and the number of dependents according to significant data. 2) There is a combined influence of logotherapy techniques of paradoxical intention, dereflection, and Socratic dialogue on physical family resilience, psychological resilience, and social resilience, moderated by the interaction of status in the family and the number of dependents according to significant data.

METHODS
Design

This research used a quantitative descriptive approach, which was a quantitative non-experiment "one-shot" model. Non-experiment means that this research does not provide treatment to respondents. During the covid 19 pandemic, there was a large-scale social restriction regulation that aimed to break the chain of the spread of COVID-19. This government regulation asks residents affected by COVID-19 to isolate themselves at home independently during the pandemic outbreak. This rule limited researchers from meeting for involving intensely with respondents. Due to these regulations and conditions, this study did not intervene with respondents and used a "one-shot" model, namely data collection was carried out once at "a time" (Arikunto, 2006).

Participants

This research was conducted in Banten Province involving 30 Muslim families with a total of 89 individuals. The sampling method employed was purposive sampling (Campbell et al., 2020), a technique where sampling is done based on specific objectives. Samples were selected from families affected by COVID-19 from one family member and or together (father, mother, and child). The condition of families affected by COVID-19 is deteriorating, starting with job loss, no income, food shortages starvation, and no hope of life, and 95.8%, of families shown a tendency to experience stress.

These include 30 men (father or husband), 30 women (mother or wife), and 29 sons and/or daughters in terms of family status.

Table 1. Demographics profile of respondents

No	Characteristics	Family status respondents	Number of respondents
1	Men	Father or husband	30
2	Women	Mother or wife	30
3	Men and Women	Sons and/or daughters	29
Total respondents			89

Instruments

The data were collected using a questionnaire consisting of 24 indicators of family resilience, based on the measurement tool developed by the Ministry of Women's Empowerment and Child Protection in Indonesia (Badan Pusat Statistik, 2016). Questions were evaluated on a 5-point Likert scale (from 1 - strongly disagree to 5 - strongly agree) developed by Mcleod (Mcleod, 2023).

Table 2. Family Resilience Indicators

Dimensions	Variables	Indicators
Legal Basis	Legal Basis	Marriage Legality
		Birth Legality
	Family Cohesion	Presence of Spouses Living Together in One Household
	Gender Partnership	Cohesion within the Family
		The partnership between Husband and Wife
		Transparency in Financial Management
		Family Decision-Making Process
Physical Resilience	Adequacy of Food and Nutrition	Adequacy of Food
		Adequacy of Nutrition
	Family Health	Freedom from Chronic Diseases and Disabilities
	Availability of a Stable Sleeping Location	Availability of a Stable Sleeping Location
Economic Resilience	Family Living Arrangement	Home Ownership
	Family Income	Family Per Capita Income
		Adequacy of Family Income
	Education Financing for Children	Ability to Finance Children's Education
		Continuation of Children's Education
	Family Financial Security	Family Savings
		Family Health Coverage
Psychosocial Resilience	Family Harmony	Anti-Violence Attitude Towards Women
		Anti-Violence Behavior Towards Children
	Law Compliance	Respect for the Law
Family Social Resilience	Social Awareness	Respect for the Elderly
	Social Closeness	Participation in Social Activities in the Community
	Religious Adherence	Participation in Religious Activities in the Community

Data Analysis

Hypothesis analysis employed parametric statistics with one-way ANOVA as more than two variable groups were being tested, and Univariate analysis when examining the interactive influence between variables (van den Bergh et al., 2020). ANOVA was used to test the hypothesis of mean-variance differences across more than two samples group and to study the effects of both independent and control variables, both individually and in interaction (Rouder et al., 2023). Following the creation of the instrument, its calibration was performed by testing item validity and reliability. After conducting a validity test on 36 items of family resilience variables with corrected item-total correlation from 89 respondents, it was found that 35 items were valid and only 1 item was not valid. The valid items were then utilized as data for hypothesis analysis. The reliability test of the instrument, consisting of 36 items, revealed a Cronbach's Alpha of 89.9. However, after excluding the invalid item, the reliability increased to 0.90, indicating a very high-reliability category.

RESULTS AND DISCUSSION

Results

The impact of logotherapy techniques including paradoxical intention, dereflection, Socratic dialogue, Socratic dialogue-dereflection, paradoxical intention-Socratic dialogue, and dereflection-paradoxical intention on family resilience is outlined in the following table:

Table 3. The Impact of Logotherapy Techniques on Family Resilience

No.	Dimensions	Paradoxical Intention (PI)	Dereflection (D)	Socratic Dialogue (SD)	Significant
1	Legal Basis	√	-	-	Sig.
2	Physical Resilience	√	-	√	Sig.
3	Economic Resilience	√	-	√	Sig.
4	Psychosocial Resilience	-	√	-	Sig.
5	Family Social Resilience	√	-	√	Sig.

Table 3 indicates that logotherapy techniques, namely paradoxical intention, dereflection, Socratic dialogue, Socratic dialogue-dereflection, paradoxical intention-Socratic dialogue, and dereflection-paradoxical intention, have a significant effect on family resilience, as the sig value is $0.00 < 0.05$. The rank of influence from various logotherapy techniques on family resilience is as follows: (1) paradoxical intention-Socratic dialogue with a mean of 158.75; (2) dereflection with a mean of 157.08; (3) Socratic dialogue-dereflection with a mean of 154; (4) paradoxical intention with a mean of 145.25; (5) Socratic dialogue with a mean of 142.07; and (6) dereflection-paradoxical intention with a mean of 108.50. The impact of logotherapy techniques such as paradoxical intention, dereflection, Socratic dialogue, Socratic dialogue-dereflection, paradoxical intention-Socratic dialogue, and dereflection-paradoxical intention on various aspects of family resilience can be observed in the table 4.

Table 4 shows that the logotherapy techniques of paradoxical intention, dereflection, Socratic dialogue, Socratic dialogue-dereflection, paradoxical intention-Socratic dialogue, and dereflection-paradoxical intention have an effect on all aspects of family resilience; (1) The effect of logotherapy techniques on the legal foundation of family resilience, with a sig value of $0.039 < 0.05$. The highest mean value from all six logotherapy techniques is the paradoxical intention technique (mean 28.25), followed by Socratic dialogue-dereflection (mean 26.75), dereflection (mean 26.62), paradoxical intention-Socratic dialogue (mean 26.38), Socratic dialogue (mean 24.95) and dereflection-paradoxical intention (mean 20). This indicates that the appropriate intervention for enhancing the legal foundation of family resilience is the paradoxical intention technique. (2) The effect of logotherapy techniques on physical resilience within family resilience, with a sig value of $0.000 < 0.05$. The highest mean value from all six logotherapy techniques is the paradoxical intention-Socratic dialogue technique (mean 23.38), followed by dereflection (mean 23.08),

Socratic dialogue-dereflection (mean 21.50), Socratic dialogue (mean 21.31), paradoxical intention (mean 20.75), and dereflection-paradoxical intention (mean 14.50). This suggests that the appropriate intervention for enhancing physical resilience in family resilience is the combination technique of paradoxical intention with Socratic dialogue. (3) The effect of logotherapy techniques on economic resilience within family resilience, with a sig value of 0.017 < 0.05. The highest mean value from all six logotherapy techniques is the paradoxical intention-Socratic dialogue technique (mean 34.50), followed by dereflection (mean 33.46), Socratic dialogue-dereflection (mean 31), paradoxical intention (mean 30.50), Socratic dialogue (mean 29.28), and dereflection-paradoxical intention (mean 20). This indicates that the appropriate intervention for enhancing economic resilience in family resilience is the combination technique of paradoxical intention with Socratic dialogue. (4) The effect of logotherapy techniques on socio-psychological resilience within family resilience, with a sig value of 0.048 < 0.05. The highest mean value from all six logotherapy techniques is the dereflection technique (mean 34.38), followed by paradoxical intention-Socratic dialogue (mean 33.88), Socratic dialogue (mean 31.86), Socratic dialogue-dereflection (mean 31.75), paradoxical intention (mean 31.50), and dereflection-paradoxical intention (mean 27.50). This suggests that the appropriate intervention for enhancing socio-psychological resilience in family resilience is the dereflection technique. (5) The effect of logotherapy techniques on socio-family resilience within family resilience, with a sig value of 0.00 < 0.05. The highest mean value from all six logotherapy techniques is the Socratic dialogue-dereflection technique (mean 43), followed by paradoxical intention-Socratic dialogue (mean 40.63), dereflection (mean 39.54), Socratic dialogue (mean 34.67), paradoxical intention (mean 34.25), and dereflection-paradoxical intention (mean 26.5). This indicates that the appropriate intervention for enhancing socio-family resilience in family resilience is the combination technique of Socratic dialogue with dereflection.

Table 4. The Impact of Logotherapy on Various Aspects of Family Resilience

		Sum of Squares	df	Mean Square	F	Sig.
Legal Basis	Between Groups	136.613	5	27.323	2.467	.039
	Within Groups	919.297	83	11.076		
	Total	1055.910	88			
Physical Resilience	Between Groups	162.156	5	32.431	6.947	.000
	Within Groups	387.462	83	4.668		
	Total	549.618	88			
Economic Resilience	Between Groups	546.161	5	109.232	2.940	.017
	Within Groups	3083.817	83	37.154		
	Total	3629.978	88			
Psychosocial Resilience	Between Groups	137.306	5	27.461	2.342	.048
	Within Groups	973.098	83	11.724		
	Total	1110.404	88			
Family Social Resilience	Between Groups	824.149	5	164.830	5.604	.000
	Within Groups	2441.132	83	29.411		
	Total	3265.281	88			

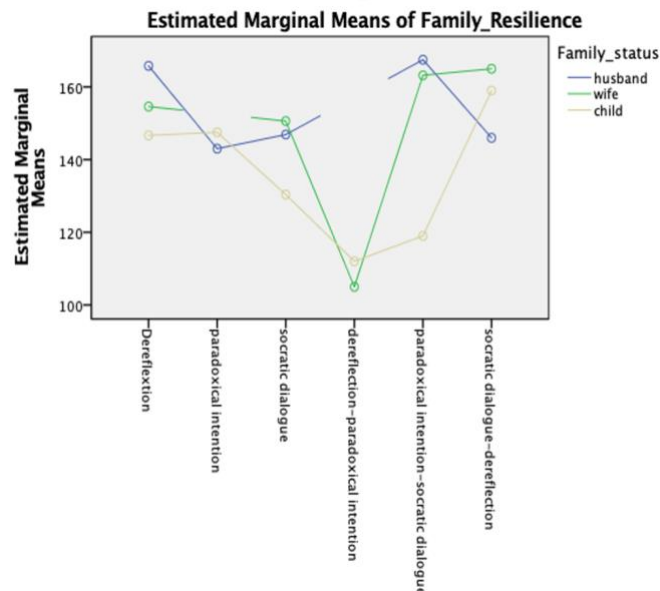## The Effect of Logotherapy on Family Resilience Through Family Status

The effect of the logotherapy techniques of paradoxical intention, dereflection, andSocratic dialogue on family resilience through family status (husband, wife, and child) can be seen in the table 5. Based on Table 5 and the interactive image above, it can be understood that there is an interactive effect of logotherapy techniques (paradoxical intention, dereflection, and Socratic dialogue, paradoxical intention-dereflection, paradoxical intention-Socratic dialogue, and dereflection-Socratic dialogue) on family resilience through family status (husband, wife, and child) with a significant value of 0.048 < 0.05. This shows that there is an interactive effect of logotherapy on family resilience through family status. Looking at the mean values indicates that (1) the suitable logotherapy technique for the husband to improve family resilience is a combination of paradoxical

intention with Socratic dialogue; (2) the suitable logotherapy technique for the wife to improve family resilience is a combination of dereflection with Socratic dialogue; (3) the suitable logotherapy technique for the child to improve family resilience is a combination of dereflection with Socratic dialogue; (4) the suitable logotherapy technique for all three family statuses (husband, wife, and child) to improve family resilience is a combination of paradoxical intention with Socratic dialogue.

Table 5. The Impact of Logotherapy Techniques on Family Resilience Through Family Status

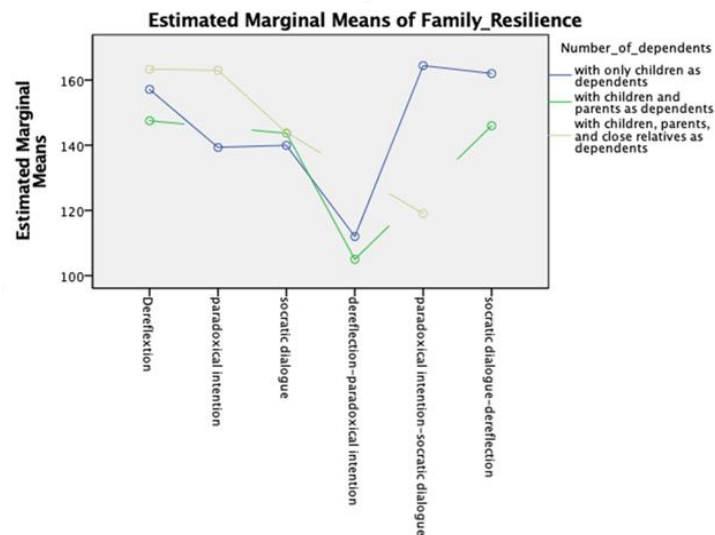| Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	14365.705[a]	15	957.714	6.196	.000
Intercept	613612.629	1	613612.629	3969.848	.000
Family Status	921.683	2	460.842	2.981	.057
Logotherapy Techniques	4636.653	5	927.331	5.999	.000
Family Status*Logotherapy Techniques	2577.192	8	322.149	2.084	.048
Error	11283.486	73	154.568		
Total	1914606.000	89			
Corrected Total	25649.191	88			

a. R Squared = .560 (Adjusted R Squared = .470)

The Impact of Logotherapy on Family Resilience Through Number of Dependents

The interactive effect of logotherapy techniques (paradoxical intention, dereflection, and Socratic dialogue, paradoxical intention-dereflection, paradoxical intention-Socratic dialogue, and dereflection-Socratic dialogue) on family resilience through the number of dependents in the family (child only, child and parents, child, and parents as well as close relatives) is as follows:

Table 6. The Impact of Logotherapy on Family Resilience Through Number of Dependents

Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	9870.619[a]	13	759.278	3.609	.000
Intercept	462031.401	1	462031.401	2196.166	.000
Logotherapy Techniques	4493.672	5	898.734	4.272	.002
Number of Dependents	370.546	2	185.273	.881	.419
Logotherapy Techniques*Number of Dependents	2972.715	6	495.452	2.355	.039
Error	15778.572	75	210.381		
Total	1914606.000	89			
Corrected Total	25649.191	88			

a. R Squared = .385 (Adjusted R Squared = .278)

Estimated Marginal Means of Family_Resilience

Number_of_dependents: with only children as dependents; with children and parents as dependents; with children, parents, and close relatives as dependents

Based on Table 6 and the interactive image above, it can be understood that there is an interactive effect of logotherapy techniques (paradoxical intention, dereflection, and Socratic dialogue, paradoxical intention-dereflection, paradoxical intention-Socratic dialogue, and dereflection-Socratic dialogue) on family resilience through the number of dependents in the family (child only, child and parents, child, and parents as well as close relatives) with a significant value of 0.039 < 0.05. This indicates there is an interactive effect of logotherapy on family resilience through the number of dependents in the family. As seen in the mean values shows that (1) the suitable logotherapy technique for families with only children as dependents to enhance family resilience is a combination of paradoxical intention with Socratic dialogue; (2) the suitable logotherapy technique for families with children and parents as dependents to enhance family resilience is the dereflection technique; (3) the suitable logotherapy technique for families with children, parents, and close relatives as dependents to enhance family resilience is the dereflection technique.

Discussion
The Impact of Logotherapy Selection on Muslim Family Resilience in Banten

The data analysis results in Tables 3 and 4 from six types of logotherapy techniques found that the order of use of logotherapy techniques affects family resilience, both in general and per aspect as in the following: First, there is an effect of the choice of logotherapy type on family resilience, with a significant value of 0.000 < 0.05. This means that the choice of logotherapy type affects family resilience. As seen in the mean values, the order of use of logotherapy types in addressing family resilience issues is paradoxical intention- Socratic dialogue, dereflection, Socratic dialogue-dereflection, paradoxical intention, Socratic dialogue, dereflection-paradoxical intention. Therefore, the most suitable type of logotherapy to address overall family resilience issues is a combination of paradoxical intention and Socratic dialogue. This combined type of logotherapy, paradoxical intention, and Socratic dialogue, it used when the counselor no longer focuses on the aspects present in family resilience. This can occur when clients do not specify the aspects of family resilience that need to be resolved in the family counseling process, so the counselor uses a general technique suitable for resolving family resilience issues.

Second, there is an effect of the choice of logotherapy type on the legal foundation of family resilience, with a significant value of 0.039 < 0.05. This means that the choice of logotherapy type affects the legal foundation of family resilience. as seen in the mean values, the order of used logotherapy types in addressing issues of legal foundation in family resilience is paradoxical intention, Socratic dialogue-dereflection, dereflection, paradoxical intention-Socratic dialogue, Socratic dialogue, and dereflection Paradoxical Intention. Hence, the most suitable type of

logotherapy to address issues of legal foundation in family resilience is paradoxical intention. These finding indicates that the choice of paradoxical intention technique is predicted to have a greater impact on family resilience in the legality aspect. It can be explained as aspects of legality such as marriage certificates, birth certificates, and family cards, the presence and togetherness of family members in one house are basic indicators of achieving family resilience. Therefore, the paradoxical intention technique, as the simplest type of technique, are applied and suitable for family members with even the lowest level of education.

Third, there is an influence of the choice of logotherapy techniques on the physical resilience of family resilience, with a significant value of 0.000 < 0.05. This indicates that logotherapy has an effect on the physical resilience of family resilience. As seen in the mean value, the order of choice for logotherapy techniques in addressing physical resilience issues in family resilience is as follows: the combination of paradoxical intention and Socratic dialogue, dereflection, Socratic dialogue-dereflection, Socratic dialogue, paradoxical intention, and dereflection-paradoxical intention. Therefore, the most suitable choice of logotherapy technique for tackling issues of physical resilience in family resilience is a combination of paradoxical intention and Socratic dialogue. This combined technique will be effective when used as a logotherapy counseling technique to increase family food and nutritional adequacy, maintain family health including freedom from chronic diseases and disabilities, as well as the availability and suitability of sleeping places for comfortable rest.

Fourth, there is an influence of the logotherapy techniques choice on the economic resilience of family resilience, with a significant value of 0.017 < 0.05. This means that the choice of logotherapy technique affects the economic resilience of family resilience. From the mean value, the order of logotherapy techniques to tackle economic resilience issues in family resilience is as follows: the combination of paradoxical intention and Socratic dialogue, dereflection, Socratic dialogue-dereflection, paradoxical intention, Socratic dialogue, and dereflection-paradoxical intention. Therefore, the most suitable choice of logotherapy technique for tackling issues of economic resilience in family resilience is a combination of paradoxical intention and Socratic dialogue. This combined technique will be effective when used as a logotherapy counseling technique to increase family housing such as home ownership, improve family income to meet daily needs, fulfill children's education financing until the completion of basic education, and family financial security which includes health insurance and retirement savings.

Fifth, there is an influence of the choice of logotherapy techniques on the socio-psychological resilience of family resilience, with a significant value of 0.048 < 0.05. It can be indicates that the choice of logotherapy technique affects the socio-psychological resilience of the family resilience. From the mean value, the order of logotherapy techniques to tackle socio-psychological resilience issues in family resilience is as follows: dereflection, the combination of paradoxical intention and Socratic dialogue, Socratic dialogue, Socratic dialogue-dereflection, paradoxical intention, and dereflection-paradoxical intention. Therefore, the most suitable choice of logotherapy technique for tackling socio-psychological resilience issues in family resilience is dereflection. The argument for choosing the dereflection technique is predicted to have more influence in improving the socio-psychological resilience aspect. In the perspective of psychology, this type of technique is referred to as sublimative counseling behavior. This technique will be effective when used as a logotherapy counseling technique to increase family harmony to avoid domestic violence and other violent behaviors as well as law and ethics compliance within the family, based on religion, tradition, and government regulations on the family.

Sixth, there is an influence of the choice of logotherapy techniques on the socio-family resilience of family resilience, with a significant value of 0.000 < 0.05. This means that the choice of logotherapy technique affects the socio-family resilience of family resilience. From the mean value, the order of logotherapy techniques to tackle socio-family resilience issues in family resilience is as

follows: Socratic dialogue-dereflection, the combination of paradoxical intention and Socratic dialogue, dereflection, Socratic dialogue, paradoxical intention, and dereflection-paradoxical intention. Therefore, the most suitable choice of logotherapy technique for tackling socio-family resilience issues in family resilience is a combination of Socratic dialogue and dereflection. This combined technique will be effective when used as a logotherapy counseling technique to improve care, closeness, and obedience to social values and religious teachings manifested in the form of respecting the elderly, participating in social life, and participating in religious events.

The combined technique of paradoxical intention and Socratic dialogue is predicted to be more influential in improving physical resilience, economic resilience, and family resilience aspects. It can be explained given that the combination of these two techniques essentially merges the Socratic dialogue, which seeks to uncover the counseling capacity to develop an awareness of responsibility, with the paradoxical intention technique which is the easiest and most effective technique applied to counseling with problems in physical and economic aspects.

Relevant Logotherapy Techniques to Enhance the Resilience of Muslim Families in Banten as seen from the Family Status.

Data analysis results in Table 5 from six types of used logotherapy techniques found the order that interactively affect family resilience as viewed on family status: First, for husbands, the combined technique of paradoxical intention and Socratic dialogue is more suitable as a logotherapy technique in improving family resilience. It causes men psychologically when deciding something use their courage. Hence, the paradoxical intention is more suitable for counselors to help resolving family problems for husbands. The practice of the paradoxical intention technique involves the counselor bravely confronting the irrational thoughts of the counselee (Maba, 2017). The Socratic dialogue technique is implemented by the counselor with a focus on carefully noting (listening) how the counselee communicates thoughts, feelings, and experiences that reveal the pattern of the counselee's speech. The counselor assists the counselee to discern the meaning and purpose of his life. This approach is believed to help the counselee realize the answers to his questions. The combination of these two techniques is more suitable as they both have similar characteristics to the psychological essence of husbands. In conclusion, from these findings if a husband facing issues of family resilience, then the most appropriate technique is the combination of paradoxical intention and Socratic dialogue.

Second, for wives, the combination of Socratic dialogue and dereflection is more suitable as a logotherapy technique for enhancing family resilience. The practice of dereflection technique helps the counselee ignore neurosis, anxiety, fear, self-interest and needs (Nelson-Jones, 2011). This technique aligns with the characteristics of women who pay more attention to others than themselves. When women feel they can not achieve something desire and they will tend to expand and ask questions about others' interests. While, simultaneously ignoring interests and sacrificing their own needs fulfillment. In conclusion, from the findings is when a wife facing issues of family resilience. Then, the most appropriate technique is the combination of Socratic dialogue and dereflection.

Third, for children, the combination of Socratic dialogue and dereflection is also more suitable as a logotherapy technique for enhancing family resilience. Children and mothers (wives) have the same type of technique, a combination of Socratic dialogue and dereflection. The reason for this compatibility, in addition to what has been explained in point 2 above, aligns with the theory of roles that wives and children are both family members who more often follow/obey the rules, even in certain situations having to ignore both their interests. In other words, the wife and children are subordinate to the husband/father. Concerning the use of logotherapy counseling techniques in efforts to improve family resilience, these findings are interesting to discuss. A counselor can provide counseling services for two family members (mother and child) within one group service. Differ to the father, in logotherapy counseling services, he cannot be combined with the wife or

child because they are not complementary, whereas the mother and child complement each others.

Relevant Logotherapy Techniques for Improving Muslim Family Resilience in Banten Seen from the Number of Family Dependents.

The data analysis results from Table 6, which examines six types of logotherapy techniques, reveal a sequence of technique utilization that interactively influences family resilience. This influence is contingent upon the number of dependents within the family. Firstly, for families with child dependents only, a combination of paradoxical intention and Socratic dialogue techniques is more proper as a logotherapy technique to enhance family resilience. Secondly, for families having both child and aging dependents, the dereflection technique is more suited as a logotherapy approach to improve family resilience. Thirdly, for families with a child, elderly, and extended family dependents, dereflection again is considered the preferred logotherapy technique to enhance family resilience.

It is intriguing to explore why the combined approach of paradoxical intention and Socratic dialogue is more effective for core families with only child dependents. This is following three of the five points to consider before implementing the paradoxical intention technique: 1) it can be applied to clients resistant to counseling, 2) it is considered after non-paradoxical techniques have been previously utilized but have not demonstrated positive outcomes, and 3) it does not contravene societal norms (Foreman, 1990).

Core families, composed of father, mother, and child, and which present equivalent resistance to counseling, it can be assisted to view themselves and their family members from another's perspective. This is achieved in a relaxed atmosphere interspersed with humor, ultimately leading to the counseling clients laughing at their irrational anxieties (Maba, 2017). The Socratic dialogue technique is particularly suitable for core families because it fosters non-judgmental, egalitarian dialogue. This technique acknowledges that individuals are capable of nurturing and mobilizing their resources and contemplating issues that trouble them. The aim of the Socratic dialogue method is not to provide answers to other people's questions, but rather to support clients in deeply exploring their psyche, reflecting on their thoughts and feelings, and discovering meaning. Thus, resolving their issues.

On the other hand, when the family consists of dependents including children, elders, and extended family members, the dereflection technique is more appropriate, considering the family members have more varied characteristics. The diversity of family members requires a technique that is relatively simple and easy to implement. In this technique, counselors instruct clients to divert their attention or neglect problems by focusing on more beneficial matters. By shifting attention away from oneself and directing it towards others, the issues at hand dissipate naturally. With this approach, clients are allowed to overlook their neurosis and concentrate on something external to themselves.

Other studies reinforce the effectiveness of logotherapy on the resilience of a group. The results of research on the effect of logotherapy on the resilience of drug addict groups show that the effectiveness of logotherapy can increase the resilience of male drug addict groups. The calculation of the endurance of subjects in the experimental group was significantly higher than that of the control group (P <0,0001).(Ghazali, S., Moradibaglooei, M., Sarichloo, M.E., Alipour, 2018)

CONCLUSION

The logotherapy counseling techniques of paradoxical intention, dereflection, and Socratic dialogue significantly influence the enhancement of the resilience of Muslim families in Banten, Indonesia. The techniques of logotherapy counseling aimed at overall family resilience

improvement cannot be implemented individually. Instead, they necessitate a combination of two techniques, namely paradoxical intention and Socratic dialogue. As has been discussed, it can be concluded that the Paradoxical Intention technique can significant improve the legal basis dimension and the dereflection technique can significant improve the Psychosocial Resilience dimension. The combined technique of Paradoxical Intention and Socratic Dialogue can significant improve the other three dimensions of Physical Resilience, Economic Resilience, and Family Social Resilience. Specifically, for enhancing physical and economic resilience, the suitable logotherapy techniques are a combination of paradoxical intention and Socratic dialogue. Socio-familial resilience is the best addressed using Socratic dialogue and dereflection. While, legal resilience is improved by paradoxical intention, and socio-psychological resilience is better served by the dereflection technique. In the context of enhancing family resilience, the technique of logotherapy counseling for husbands is more aptly applied through paradoxical intention-Socratic dialogue. While, for wives it is more appropriate to employ dereflection-Socratic dialogue. For children, the method used is Socratic dialogue-paradoxical intention. furthemore, to promote family resilience, logotherapy counseling techniques for families that have only children as dependents should optimally employ paradoxical intention-Socratic dialogue. For families with dependents that include children, parents, and/or other close relatives, using dereflection technique is deemed more suitable.

ACKNOWLEDGMENTS

AUTHOR CONTRIBUTIONS STATEMENT

H, AM, NT, A, DR, and HSR agree to the final version of this article.

REFERENCES

Alimohammadi, M., Sharifi-Daramadi, P., & Noohi, S. (2020). Effectiveness of group logo-therapy program on existential anxiety among patients with metabolic syndrome. *Journal of Medicinal and Chemical Sciences, 3*(3), 286–299. https://doi.org/10.26655/JMCHEMSCI.2020.3.8

Ameli, M., & Dattilio, F. M. (2013). Enhancing cognitive behavior therapy with logotherapy: Techniques for clinical practice. *Psychotherapy, 50*(3), 387–391. https://doi.org/10.1037/a0033394

Arikunto, S. (2006). *Research procedure: A practice approach*. PT Rineka Cipta.

Aryani, L. N. A., & Ardani, G. A. I. (2021). Logotherapy approach to reduce emotional disorders. *International Journal of Health Sciences, 5*(3), 513–519. https://doi.org/10.53730/ijhs.v5n3.1834

Ascher, L. M. (2002). Paradoxical intention. In M. Hersen & W. Sledge (Eds.), *Encyclopedia of psychotherapy* (Vol. 2, pp. 331–338). Academic Press.

Badan Pusat Statistik. (2016). *Pembangunan ketahanan keluarga*. Kementerian Pemberdayaan Perempuan dan Perlindungan Anak.

BPS Kota Serang. (2020). *Jumlah akta perceraian*.

Brivio, E., Guiddi, P., Scotto, L., Giudice, A. V., Pettini, G., Busacchio, D., Didier, F., Mazzocco, K., & Pravettoni, G. (2021). Patients living with breast cancer during the coronavirus pandemic: The role of family resilience, coping flexibility, and locus of control on affective responses. *Frontiers in Psychology, 11*. https://doi.org/10.3389/fpsyg.2020.567230

Budiawati, Y., & Natawidjaja, R. S. (2020). Situasi dan gambaran ketahanan pangan di Provinsi Banten berdasarkan peta Fsva dan indikator ketahanan pangan. *Jurnal Agribisnis Terpadu, 13*(2), 187. https://doi.org/10.33512/jat.v13i2.9866

Campbell, S., Greenwood, M., Prior, S., Shearer, T., Walkem, K., Young, S., Bywaters, D., & Walker, K. (2020). Purposive sampling: Complex or simple? Research case examples. *Journal of Research in Nursing, 25*(8), 652–661. https://doi.org/10.1177/1744987120927206

Chen, S., & Bonanno, G. A. (2020). Psychological adjustment during the global outbreak of COVID-19: A resilience perspective. *Psychological Trauma: Theory, Research, Practice, and Policy, 12*(S1), S51–S54. https://doi.org/10.1037/tra0000685

Cho, S., Bernstein, K. S., Cho, S., & Roh, S. (2012). Logo-autobiography and its effectiveness on depressed Korean immigrant women: A replication study. *Journal of Nursing Education and Practice, 3*(6). https://doi.org/10.5430/jnep.v3n6p51

Conger, R. D., & Conger, K. J. (2002). Resilience in Midwestern families: Selected findings from the first decade of a prospective, longitudinal study. *Journal of Marriage and Family, 64*(2), 361–373. https://doi.org/10.1111/j.1741-3737.2002.00361.x

Costello, S. J. (2019). *Applied logotherapy: Viktor Frankl's philosophical psychology*. Cambridge Scholars Publishing.

Ducci, F., & Goldman, D. (2012). The genetic basis of addictive disorders. *Psychiatric Clinics of North America, 35*(2), 495–519. https://doi.org/10.1016/j.psc.2012.03.010

Esalati, P., Arab, A., & Mehdinezhad, V. (2019). Effectiveness of Frankl's logotherapy on health (decreasing addiction potential and increasing psychological well-being) of students with depression. *Nian Journal of Health Education and Health Promotion, 7*(1), 84–92. https://doi.org/10.30699/ijhehp.7.1.84

Faccio, F., Renzi, C., Giudice, A. V., & Pravettoni, G. (2018). Family resilience in the oncology setting: Development of an integrative framework. *Frontiers in Psychology, 9.* https://doi.org/10.3389/fpsyg.2018.00666

Farahini, N., Afrooz, G. A., Ghobari Bonab, B., & Arjmand Nia, A. A. (2019). The effectiveness of logotherapy program based on Islamic-Iranian values on marital satisfaction among parents of exceptional children. *Family Psychology, 6*(1), 15–26. https://doi.org/10.29252/ijfp.6.1.15

Fereydouni, S., & Forstmeier, S. (2022). An Islamic form of logotherapy in the treatment of depression, anxiety and stress symptoms in university students in Iran. *Journal of Religion and Health, 61*, 139–157. https://doi.org/10.1007/s10943-021-01495-0

Foreman, D. M. (1990). The ethical use of paradoxical interventions in psychotherapy. *Journal of Medical Ethics, 16*(4), 200–205. https://doi.org/10.1136/jme.16.4.200

Frankl, V. E. (1992). *Man's search for meaning: An introduction to logotherapy*. Beacon Press.

Frankl, V. E. (2004). *On the theory and therapy of mental disorders: An introduction to logotherapy and existential analysis* (J. M. Dubois, Trans.). Brunner-Routledge.

Gayatri, M., & Irawaty, D. K. (2022). Family resilience during COVID-19 pandemic: A literature review. *The Family Journal, 30*(2), 132–138. https://doi.org/10.1177/10664807211023875

Ghazali, S., Moradibaglooei, M., Sarichloo, M. E., & Alipour, M. (2018). The effect of logo therapy group on the resilience of spouses of male substance abusers. *Iranian Journal of Psychiatric Nursing, 6*(3). https://doi.org/10.21859/ijpn-06038

Guttmann, D. (2008). *Finding meaning in life, at midlife and beyond: Wisdom and spirit from logotherapy*. Greenwood Publishing Group, Inc.

Handayani, R., Utari, E., & Santoso, M. I. (2018). Ketahanan keluarga di Kecamatan Pontang Kabupaten Serang Provinsi Banten. *Journal of Indonesian Public Administration and Governance Studies, 2*(2), 412–424.

Ivanova, E. V., & Shapovalenko, I. V. (2023). The problem of psychological and emotional well-being of children and resilience of parents in modern foreign studies. *Journal of Modern Foreign Psychology, 12*(3), 52–63. https://doi.org/10.17759/jmfp.2023120305

Koskela, T., Pihlainen, K., Piispa-Hakala, S., Vornanen, R., & Hämäläinen, J. (2020). Parents' views on family resiliency in sustainable remote schooling during the COVID-19 outbreak in Finland. *Sustainability, 12*(21), 8844. https://doi.org/10.3390/su12218844

Luthar, S. S., Ebbert, A. M., & Kumar, N. L. (2021). Risk and resilience during COVID-19: A new study in the Zigler paradigm of developmental science. *Development and Psychopathology, 33*(2), 565–580. https://doi.org/10.1017/S0954579420001388

Maba, A. P. (2017). Paradoxical intervention dalam bimbingan dan konseling untuk mengatasi kecemasan. *Counsellia: Jurnal Bimbingan Dan Konseling, 7*(2), 99. https://doi.org/10.25273/counsellia.v7i2.1852

Makhnach, A. V., & Laktionova, A. I. (2021). Family resilience from the perspective of A.A. Bogdanov' organizational theory. *Social Psychology and Society, 12*(2), 41–55. https://doi.org/10.17759/SPS.2021120203

March, M. C. (1997). *Treatment acceptability of paradoxical interventions: The role of dissonance*. [Publisher not provided].

Masten, A. S., & Motti-Stefanidi, F. (2020). Multisystem resilience for children and youth in disaster: Reflections in the context of COVID-19. *Adversity and Resilience Science, 1*(2), 95–106. https://doi.org/10.1007/s42844-020-00010-w

Masykur. (2020). Selama pandemi, ada 3.200 kasus perceraian di Serang, didominasi masalah ekonomi. *KabarBanten.com*.

McLeod, S. (2023). Likert scale questionnaire: Examples & analysis. *SimplyPsychology*. [URL not provided].

Mujahid, I., Abdullah, I., Minsih, M., & Muhamad, S. N. (2022). The role of family counseling in handling autistic children during at-home learning periods. *Psikohumaniora: Jurnal Penelitian Psikologi, 7*(1), 103–116. https://doi.org/10.21580/pjpp.v7i1.10960

Nelson-Jones, R. (2011). *Teori dan praktik konseling dan terapi* (Edisi keempat, diterjemahkan oleh Helly Prajitno Soetjipto & Sri Mulyantini Soetjipto). Pustaka Pelajar.

Nuriyyatiningrum, N. A. H., Zikrinawati, K., Lestari, P., & Madita, R. (2023). Quality of life of college students: The effects of state anxiety and academic stress with self-control as a mediator. *Psikohumaniora: Jurnal Penelitian Psikologi, 8*(1), 87–102. https://doi.org/10.21580/pjpp.v8i1.14733

Oktavia, R. M. (2021). Pembangunan ketahanan keluarga berdasarkan peraturan daerah Kota Tangerang nomor 1 tahun 2019; studi analisis kebijakan. *Epistemik: Indonesian Journal of Social and Political Science, 1*(2).

Rosyadi, M. (2020). 15.985 karyawan di Serang di-PHK selama pandemi Covid-19. *News.Okezone.com*.

Rouder, J. N., Schnuerch, M., Haaf, J. M., & Morey, R. D. (2023). Principles of model specification in ANOVA designs. *Computational Brain & Behavior, 6*(1), 50–63. https://doi.org/10.1007/s42113-022-00132-7

Schulenberg, S. E., Hutzell, R. R., Nassif, C., & Rogina, J. M. (2008). Logotherapy for clinical practice. *Psychotherapy: Theory, Research, Practice, Training, 45*(4), 447–463. https://doi.org/10.1037/a0014331

Shin, S. H., Choi, H., Kim, M. J., & Kim, Y. H. (2010). Comparing adolescents' adjustment and family resilience in divorced families depending on the types of primary caregiver. *Journal of Clinical Nursing, 19*(11–12), 1695–1706. https://doi.org/10.1111/j.1365-2702.2009.03081.x

Southwick, S. M., Lowthert, B. T., & Graber, A. V. (2016). Relevance and application of logotherapy to enhance resilience to stress and trauma (pp. 131–149). In [Book title not provided]. https://doi.org/10.1007/978-3-319-29424-7_13

Usada, N. K., Wanodya, K. S., & Trisna, N. (2021). Analisis spasial gizi kurang balita di Kota Tangerang tahun 2019. *Jurnal Biostatistik, Kependudukan, dan Informatika Kesehatan, 2*(1), 1. https://doi.org/10.51181/bikfokes.v2i1.4740

van den Bergh, D., van Doorn, J., Marsman, M., Draws, T., van Kesteren, E.-J., Derks, K., Dablander, F., Gronau, Q. F., Kucharský, Š., Gupta, A. R. K. N., Sarafoglou, A., Voelkel, J. G., Stefan, A., Ly, A., Hinne, M., Matzke, D., & Wagenmakers, E.-J. (2020). A tutorial on conducting and interpreting a Bayesian ANOVA in JASP. *L'Année Psychologique, 120*(1), 73–96. https://doi.org/10.3917/anpsy1.201.0073

Van Gasse, D., & Mortelmans, D. (2020). Reorganizing the single-parent family system: Exploring the process perspective on divorce. *Family Relations, 69*(5), 1100–1112. https://doi.org/10.1111/fare.12432

Walsh, F. (2006). *Strengthening family resilience* (2nd ed., p. 384). Guilford Press.

Walsh, F. (2003). Family resilience: A framework for clinical practice. *Family Process, 42*(1), 1–18. https://doi.org/10.1111/j.1545-5300.2003.00001.x

Walsh, F. (2020). Loss and resilience in the time of COVID-19: Meaning making, hope, and transcendence. *Family Process, 59*(3), 898–911. https://doi.org/10.1111/famp.12588

Xu, Y., & Lin, D. (2015). Family stress and adolescents' depression, loneliness and happiness: The compensatory and moderating roles of family resilience. *Development and Education*.

Zhuo, R., Yu, Y., & Shi, X. (2022). Family resilience and adolescent mental health during COVID-19: A moderated mediation model. *International Journal of Environmental Research and Public Health, 19*(8), 4801. https://doi.org/10.3390/ijerph19084801