THE GROUP SUPPORTIVE THERAPY MODEL AND DISASTER PREPAREDNESS TRAINING IN IMPROVING THE PREPAREDNESS OF SCHOOL COMMUNITY TOWARD DISASTER IN WEST SUMATERA

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ABSTRACT

West Sumatra gets the fifthranks in the top disaster-prone province in Indonesia. The level of disaster preparedness in the school environment is at the lowest position compared to the preparedness in the community.This study aimed to implement the Model Group Supportive Therapy and Disaster PreparednessTraining to improve the school community's preparedness for disasters in West Sumatra. The research design used "Quasi experimental pre-post test without control group". It was carried out in four public elementary schools in Pariaman and Padang with 166 respondents taken by purposive sampling. The results of the first stage of the study showed an increase in preparedness to face potential disasters in students before and after being given the Model Group Supportive Therapy Model and Disaster Preparedness Training. There was an increase in preparedness to face potential disasters by 23,614 students. The Group Supportive Therapy model and disaster preparedness training program are effective in increasing school preparedness against potential disasters by 62.71%. It is recommended to the Education Office in West Sumatra that elementary school communities receive Model Group Supportive Therapy training and Disaster Preparedness School Training. The completionof the Model Group Supportive Therapy module and disaster preparedness training program needs to be carried out as one of the interventions in an effort to increase school community preparedness against potential earthquake disasters and the tsunami in West Sumatra
Keywords: Group Supportive Therapy-Disaster Preparedness School Training-Student School Community.

Introduction

The National Disaster Management Agency reported that as of the end of August 2020, 1,724 natural disasters had occurred in Indonesia. West Sumatra ranks in the top five as a province with a disaster-prone area in Indonesia., (BNPB, 2020). This incident had a major impact on various sectors, including the education sector (Momeni, 2020). The results of the study (Aprilin, Haksama, & Makhludi, 2018) stated that the level of preparedness for disasters in the school environment was at the lowest position compared to preparedness in the community setting.

The high potential for the school community to be exposed to disaster threats and the possible impact of damage is necessary to increase understanding of disaster risk so that they can know how to respond in dealing with disaster situations (BNPB, 2018). One of the efforts to improve disaster preparedness is through capacity building of the school community consisting of students, teachers and other school components. Improving school community preparedness can be done through disaster safe school training which is strengthened by the development of the Group Supportive therapy model for the school community (Stafford, Schonfeld, Keselman, Ventevogel, & Stewart, 2019).

Group Supportive therapy carried out in the school community is a group technique and process in creating a therapeutic relationship between therapists and the school community consisting of students, teachers, school principals, and school committees in implementing five preparedness parameters, namely knowledge and attitudes, disaster warning systems, response plans. emergencies, policies and guidelines, and resource mobilization in schools (Herdiana, 2019).

Data from the Education Office of Padang Pariaman Regency in 2020 recorded 24 elementary schools located in Padang Pariman and in Padang City there were 348 elementary schools and 76 elementary schools located on the coast of Sumatra.There has been no form of effort to increase community resilience through the development and application of the Group Supportive therapy model and the Disaster Preparedness School training program carried out in the school community on the coast of West Sumatra. The research was conducted in line with the 2017-2045 National Research Master Plan on Disaster. At the same time as institutional strengthening in Poltekkes Kemenkes Padang to become the Center for Excellence in Science and Technology (PUI) for health-based disaster management and local wisdom. This is the background for the need for implementing Model Group Supportive therapy and training for Disaster Preparedness Schools based on local wisdom in increasing school community preparedness to face disasters in the Coastal area of West Sumatra.

Methods

The study used a quantitative research approach with "Quasi Experimental pre and post test with control group" in increasing school preparedness to face disasters for school-age children, in the coastal area of West Sumatra. This research was carried out in four public elementary schools in Pariaman and Padang whose schools are located in the coastal areas of Padang and Pariaman. Phase I research time (February-November 2021). The population in this study were all elementary school students in 4 (four)public elementary schools in Pariaman City, Padang Pariaman Regency and Padang City, totaling 671 people. The sampling technique was purposive sampling. (Lemeshow, Hosmer, Klar & Lwanga, 1997). The number of samples in the study 166 respondents consisting of students in Pariaman City and Padang Pariaman Regency 83 people and 83 students on the coast of Padang Beach. Data was collected by means of

interviews and questionnaires. The research instrument uses the Widyatun, et al (LIPI, 2008:10) instrument to measure the school community's preparedness for theparameters of knowledge and attitudes (KAP), action, emergency response plans (RTD), disaster warning systems (PB), and resource mobilization (MSD).

Results And Discussion

Table 1. Characteristics of Respondents by (Gender and Class) at SDN West Sumatra in 2021

Characteristics	Intervention Group (GST+Training)N= 83		Intervention Group (Training)N =83		P*value*
Gender	f	%	f	%	
a. Male	46	55,4	29	34,9	0.13
b. Woman	37	44,6	54	65,1	
Class	f	%	f	%	
a. V	50	60,2	36	43,4	0,43
b. VI	33	39,8	47	56,6	

Based on table 1, more than half (55.4%) of the respondents were male in the group that received the intervention of the Group Supportive therapy model and the disaster preparedness training program and more than half (65.1%) of the female respondents in the group that received the disaster preparedness training program. More than half (60.2%) of the respondents were in class V in the group given the ModelGroup Supportive therapy and disaster preparedness training program. In the group that was given disaster preparedness training, 56.6% were in class VI.

Table 2. Characteristics of Respondents by Age at SDN West Sumatra in 2021

Characteristics	Group Type	f	Mean	SD	Min - Maks	*P Value*
Age	GST+P	83	11,24	0,674	10-12	
	Training	83	11.14	0,.751	10-13	0,149

Table 2 shows that the average age of respondents who received the Model Group Supportive therapy and disaster preparedness training program in school preparedness was 11.24 years with a standard deviation of 0.674 with the youngest age being 10 years and the oldest 12 years. Respondents who only received disaster preparedness training programs in school preparedness with an average age of 11.14 years with a standard deviation of 0.751 with the youngest age being 10 years and the oldest being 13 years old.

2. **Knowledge and attitudes, actions, disaster warning systems, policies, guidelines and disaster emergency response plans, and resource mobilization and school preparedness for disasters**

Table 3. Analysis of Respondents' Scores based on Knowledge and attitudes, actions, disaster warning systems, policies, guidelines and disaster emergency responseplans, and resource mobilization and school preparedness to face disasters Prior to Intervention at SDN West Sumatra in 2021

Ability	Group Type	Mean	SD	Min- max	f	*Pvalue*
Knowledge and Attitude	GST+P	4.76	1.007	2-7	83	0.202
	Training	4.87	0.908	2-5	83	
Action	GST+P	3.35	0.706	2-5	83	0.874
	Training	3.34	0,701	2-5	83	
Disaster Warning System	GST+P	2.02	0.765	1-4	83	0.885
	Training	2.16	0,961	1-4	83	
Guidance Policy And Disaster Response plan	GST+P	2.14	0.646	1-3	83	0.196
	Training	2.13	0.546	1-3	83	
Resource Mobilization	GST+P	1.76	0.554	1-3	83	0.196
	Training	1.75	0.622	1-4	83	
Disaster Preparedness	GSP+P	14.04	1.811	10-19	83	0,391
	Training	14.20	1.606	9-16	83	

Based on Table 3, it is known that the average score of respondents' knowledge and attitudes about disaster preparedness before intervention is 4.76 The lowest score 2, the highest score 7 in the group that received the Group Supportive therapy model and disaster preparedness training program. In the group that was only given disaster preparedness training, the average score of respondents' knowledge about disaster preparedness was 4.87, the lowest score was 2, the highest score was 5. The knowledge equality test between the two groups before the intervention was equivalent, namely > 0.05. The average respondent's actions in disaster preparedness were 3.35 with the lowest value, the lowest 2, the highest value, 5 in the group that received the Model Group Supportive therapy and disaster preparedness training program. And respondents who only received the disaster preparedness training program the average was 3.34 withthe lowest score of 2 and the highest score of 5. The average respondent's disaster warning system in disaster preparedness was 2.02 with the lowest score of 1, the highestscore of 4 in the group receiving the Model Group Supportive therapy and standby training program. And the average disaster warning of respondents who only received a

disaster preparedness training program was 2.16 with the lowest score of 1 and the highest score 4. The average of the Disaster Response Policy Guidelines and plans for respondents in disaster preparedness was 2.14 with the lowest score of 1 being the highest 3 in the group receiving the Model Group Supportive therapy and program disaster preparedness training. And the mobilization score of respondents who only received a disaster preparedness training program was 2.13 with the lowest score of 1 and the highest score of 3. The average mobilization of respondents in disaster preparedness was 1.76 with the lowest score of 1 being the highest 3 in the group receiving the Model Group Supportive therapy and disaster preparedness training program. And the mobilization score of respondents who only received a disasterpreparedness training program with the lowest score of 1 and the highest score of 3. Theaverage score of disaster preparedness was 14.04 with the lowest score of 10 and the highest score of 19 in the group receiving the Model Group Supportive therapy and disaster preparedness training program. And respondents who only received the disaster preparedness training program, the average score of disaster preparedness was 14.20 with the lowest score of 9 and the highest score of 16.

Table 4. Changes in disaster preparedness Respondents Before and After Model Group Supportive therapy and disaster preparedness training programs at SDN West Sumatra 2021

Group	Disaster Preparedness	**f**	***Mean***	**SD**	**SE**	**P *Value***
SGT+P	Before	83	14.04	1.811	0.199	0,000
	After	83	37.65	1.152	0.126	
	Difference		**23.614**			
Training	Before	83	14.20	1.606	0.176	0,000
	After	83	15.60	1.489	0.163	
	Difference		**1.398**			
Group	Knowledge and attitude Facing Disaster	**f**	**Mean**	**SD**	**SE**	**P *Value***
SGT+P	Before	83	4.76	1.007	0.111	0,000
	After	83	15.08	0.736	0.081	
	Selisih		**10.325**			
Training	Before	83	4.87	0.908	0.100	0.129
	After	83	5.07	1.314	0.144	
	Difference		**0.205**			
Group	Actions for Disasters	**f**	**Mean**	**SD**	**SE**	**P *Value***

SGT+P	Before	83	3.35	0.706	0.077	0,000
	After	83	7.70	0,487	0.053	
	Difference		**4.349**			
Training	Before	83	3.34	0.720	0.079	
	After	83	3.96	0.740	0.081	0.000
	Difference		**0.627**			
Group	Disaster Warning System	**f**	**Mean**	**SD**	**SE**	**P *Value***
SGT+P	Before	83	2.02	0.765	0.084	0,000
	After	83	4.46	0.501	0.055	
	Selisih		**2.434**			
Training	Before	83	1,95	0.707	0.078	
	After	83	2.16	0.582	0.064	0.040
	Difference		**0.205**			
Group	Guidance Policy And Disaster Response plan	**f**	**Mean**	**SD**	**SE**	**P *Value***
SGT+P	Before	83	2.14	0.646	0.071	0,000
	After	83	4.73	0.444	0.049	
	Selisih		2.590			
Training	Before	83	2.14	0.646	0.071	0,014
	After	83	2.39	0.581	0.064	
	Difference		**0,241**			
Group	Resource Mobilization in preparedness	**f**	**Mean**	**SD**	**SE**	**P *Value***
SGT+P	Before	83	1.76	0.554	0.061	0,000
	After	83	5.67	0.497	0.055	
	Selisih		**3.916**			
Training	Before	83	1.75	0.622	0.068	0,051
	After	83	2.04	0.454	0.050	
	Difference		**0.289**			

Table 4. shows that the average disaster preparedness in the group given the Group Supportive therapy model and the disaster preparedness training program before the intervention was 14.02 with a standard deviation of 1.811 and after being given the intervention the average disaster preparedness was 37.65 with a standard deviation of 1.152. The results of statistical tests showed that there was a significant increase in respondents' preparedness to face disasters before and after being given Model Group Supportive therapy and disaster preparedness training programs with p value = 0.000 (P Value <0.05).

Table 5. Differences in disaster preparedness of respondents after the intervention of the Group Supportive therapy model and disaster preparedness training program at SDN West Sumatra in 2021

Variabel	Group	f	*Mean*	SD	SE	P*V*
Preparedness	SHG+P	83	37,65	1.152	0.126	0,000
(Post Test)	Training	83	15,60	1.489	0.163	
	Difference		22,65			

Table 5 explains that the preparedness of respondents who received the Group Supportive therapy model and the disaster preparedness training program after the intervention increased significantly more than respondents who only received the disaster preparedness training program (P V < 0.05). The average preparedness of respondents in the group that received the Model Group Supportive therapy and disasterpreparedness training program was 37.65 and the average preparedness of respondents in the group that was only given the disaster preparedness training program was 15.60.

Table 6. Differences in knowledge and attitudes in dealing with disaster respondents after the Intervention Model Group Supportive therapy and disaster preparedness training program at SDN West Sumatra in 2021

Variabel	Group	f	*Mean*	SD	SE	P*V*
Knowledge	SHG+P	83	15.08	0.736	0.081	
and attitude	Training	83	5.07	1.314	0.144	0.031
(Post Test)						

Table 6 explains that the preparedness of respondents who received the Group Supportive therapy model and the disaster preparedness training program after the intervention increased significantly more than respondents who only received the disaster preparedness training program (P V < 0.05). The average preparedness of respondents in the group that received the Model Group Supportive therapy and disasterpreparedness training program was 15.08 and the average preparedness of respondentsin the group that was only given the disaster preparedness training program was 5.07.

Table 7. Differences in respondent's response to disasters after the intervention of the Group Supportive therapy model and the disaster preparedness training program at SDN West Sumatra in 2021

Variabel	Kelompok	f	*Mean*	SD	SE	P*V*
Action	GST+P	83	7.70	0.487	0.053	
(Post Test)	Training	83	3.96	0.740	0.081	0.015

Table 7 explains that the actions in preparedness of respondents who received the Group Supportive therapy model and the disaster preparedness training program after the intervention increased significantly more than respondents who only received the disaster preparedness training program (P V < 0.05). The average action in the respondent's readiness in the group that received the Model Group Supportive therapy

and disaster preparedness training program was 7.70 and the average respondent'saction in the group that was only given the disaster preparedness training program was 3.96

Table 8. Differences in the disaster warning system in dealing with respondent disasters after the intervention of the Group Supportive therapy model and the disaster preparedness training program at SDN West Sumatra in 2021

Variabel	**Group**	**f**	***Mean***	**SD**	**SE**	**P*V***
Disaster Warning System (Post Test)	GST+P	83	4.46	0.501	0.055	0.010
	Training	83	1.95	0.582	0.064	

Table 8 explains that the Disaster Warning System in dealing with disasters, respondents who received the Group Supportive therapy model and the disaster preparedness training program after the intervention increased significantly more than respondents who only received the disaster preparedness training program (P V < 0.05). The average disaster warning system for respondents in the group that received the Model Group Supportive therapy and disaster preparedness training program was 4.46 with a standard deviation of 0.501 and the average preparedness of respondents in the group that was only given the disaster preparedness training program was 1.95 with a standard deviation of 0.582.

Table 9. Differences in Disaster Response Policy Guidelines and plans for responding to respondent disasters after the intervention of the Group Supportive therapy model and disaster preparedness training program at SDN West Sumatra in 2021

Variabel	Group	f	*Mean*	SD	SE	P*V*
Policy Guidance And Disaster Response Plan (Post Test)	GST+P	83	4.73	0.444	0.049	0.000
	Training	83	2.39	0.581	0.064	

Table 9 explains that the Guidance Policy and Disaster Response plan of respondents who received the Group Supportive therapy model and the disaster preparedness training program after the intervention increased significantly more than respondents who only received the disaster preparedness training program (P V < 0.05). The averageof the Guide Policies and Disaster Response plans of respondents in the group that received the Model Group Supportive therapy and disaster preparedness training program was 4.73 and the average Disaster Response Plan and Guide Policies ofrespondents in the group that was only given the disaster preparedness training program was 2.39

Table 10. Differences in resource mobilization in dealing with respondent disasters after the intervention of the Group Supportive therapy model and disaster preparedness training program in West Sumatra in 2021

Variabel	Group	f	*Mean*	SD	SE	PV
Resource Mobilization in preparedness (Post Test)	GST+P	83	5.67	0.497	0.055	
	Training	83	2.04	0.454	0.050	0,000

Table 10 explains that the resource mobilization of respondents who received the Group Supportive therapy model and the disaster preparedness training program after the intervention increased significantly more than respondents who only received the disaster preparedness training program (P V < 0.05). The average resource mobilization of respondents in the group who received the Model Group Supportive therapy and disaster preparedness training program was 5.57 and the average resource mobilization of respondents in the group that was only given the disaster preparedness training program was 2.04

Table 11. Effectiveness of Group Supportive therapy and disaster preparedness training programs in school preparedness for disasters at SDNS Sumatra Barat in 2021

Group	Disaster Preparedness	N	*Mean*	Efektifitasnya Model
GST+P	Before	83	14,04	62,71%

The effectiveness of the Model Group Supportive therapy and disaster preparedness training program on school preparedness against the potential for the Padang and Pariaman City Earthquake and Tsunami before and after receiving the intervention was 62.71%

Discussion

The results of the analysis showed that the preparedness of elementary school students who followed the Model Group Supportive therapy and disaster preparedness training program increased significantly (P value <0.05). The preparedness of elementary

school students who only participated in the disaster preparedness training program also increased significantly (P value < 0.05).

The readiness of elementary school students who took part in the Model Group Supportive therapy and disaster preparedness training program was seen to be higher thanthat of elementary school students who only participated in the disaster preparedness training program. There was an increase in the preparedness of elementary school students by 62.71% after being given Model Group Supportive therapy and disaster preparedness training which was carried out at SDN Pariaman City and Padang Pariaman District. Preparedness of school structures for disasters is a series of preparations, actions and activities carried out in individual, group and community settings in dealing with and anticipating every disaster threat that threatens survival through planned, effective and efficient organizational efforts. (Sugaya, Shirasaka, Takahashi , & Kanda, 2019)

Preparedness to face a disaster is an important factor that is of concern considering that preparedness is a determining factor for disaster risk reduction that can be carried out and pursued from an early age (LIPI-UNESCO, 2006). (Gogot Suharwoto, Nurwin, 2015). The results of the study (Momeni, 2020) the importance of implementing disaster mitigation education in schools need to be carried out early, in order to provide deepening of knowledge and readiness for actions that need to be taken before/when an unexpected natural disaster occurs to minimize any impacts that will occur. Thus, it can lead to the ability to think and act effectively in the event of a disaster. (Wisnu Widjaja Medi Herlianto, 2017).

In addition, social cohesion, supportive groups, mutual assistance, and mutual trust are the adhesive values of social capital that greatly help individuals, families, groups and communities to strengthen each other in preparing, responding, and rising from adversity due to disasters. .(Alhadi & Sasmita, 2014). Addition to disaster education and training, this preparedness can be strengthened through: Group Supportive therapy is a group or peer where each member shares both physical and emotional problems or certain issues (Stuard and Larai, 2018). (Akbar, Hapsari, & Tola, 2017). (Johan, Mayub, & Wardana, 2021) (Adiyoso, 2013).

Disaster education and training activities in schools are an effective, dynamic, and sustainable strategy in an effort to disseminate disaster education with the method of providing mutual reinforcement in groups other than through disaster education and training (Ernawati, Dirdjo, & Wahyuni, 2021). This preparedness can be strengthened through Group Supportive therapy. Group Supportive therapy is a group or peer where each member shares

both physical and emotional problems or certain issues (Stuard and Larai, 2018). In this study, the Group Supportive therapy model and disaster preparedness training carried out for elementary school students is a therapy with group techniques and processes whose basic implementation can create a therapeutic relationship between the therapist and students so that it is useful for increasing strength, coping skills.

According to Stuard (2010) the implementation of the Model Group Supportive therapy and disaster preparedness training must pay attention to the principle that students in this case students play an active role with two-way communication. Each student plays an active role in sharing knowledge and hopes for solving problems and finding solutions through groups. Each member of the group must express his thoughts and feelings. The results of the research that has been carried out above and supported by the results of previous studies prove the hypothesis that there is a significant difference in increasing teacher preparedness in dealing with potential earthquakes and tsunamis through the implementation of the Model Group Supportive therapy and disaster preparedness training carried out regularly. guided. Increased preparedness of students in schools against potential earthquake and tsunami disasters through Model Group Supportive therapy and disaster preparedness training because the information provided is well communicated, clear contracts and provides positive reinforcement. Furthermore, students are trained to practice new ways that are taught and trained to do it every day (M. Twenge, H. Spitzberg, & Keith, 2019). Through the development of the Model Group Supportive therapy model and disaster preparedness training that is trained to students as an effort to increase preparedness for the potential for earthquake and tsunami disasters in the school community, it is necessary to evaluate and monitor its implementation.

Conclusions And Suggestions

There is a significant difference in the average increase in preparedness to face the potential for earthquake and tsunami disasters in elementary school students before and after being given the Group Supportive therapy model and disaster preparedness training withgroups receiving only disaster preparedness training. In the group of elementary school students who were given the Group Supportive therapy model and disaster preparedness training, there was an increase in preparedness to face the potential for earthquake and tsunami disasters of 23,614. In the group that only received disaster training, there was an increase in preparedness of 1,398. Elementary school students who received the Model Group Supportive

therapy and disaster preparedness training program after the intervention increased their preparedness for the potential for earthquake and tsunami disasters significantly compared to elementary school students who only received the disaster preparedness training program. . The Group Supportive therapy model and the disaster preparedness training program are effective in increasing school preparedness against the potential for the Padang and Pariaman City Earthquake and Tsunami before and after receiving the intervention, which is 62.71%.

Based on the results of the study, it is suggested that the Model Group Supportive therapy and disaster preparedness training program given to elementary school students can improve school preparedness against the potential for earthquake and tsunami disasters, so that this therapy can be applied in various school settings. Group Supportive therapy model and disaster preparedness training program, in order to be able to apply it to groups of school-age children, teachers and families guided by the Group Supportive therapy model and existing disaster preparedness training programs. Through the Principals in Pariaman City, Padang Pariaman Regency and Padang City provide tools to support the implementation of the Group Supportive therapy model and disaster preparedness training program and the room where it is carried out.

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