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The effectiveness of self-healing psychoeducation for fresh graduates experiencing a quarter-life crisis

Annisa Dian Karina*, Djudiyah

Universitas Muhammadiyah Malang

Corresponding author: *Email: annissakarinna@gmail.com

Abstract

Background: Quarter-life crisis is often experienced by fresh graduates and is characterized by uncertainty, decreased self-confidence, and emotional distress.

Purpose: To evaluate the effectiveness of self-healing psychoeducation in improving participants' knowledge and preparedness to face the challenges of this transition period.

Method: Using a one-group pretest–posttest design, participants completed a 20-item questionnaire before and after sessions that included material delivery, group discussions, case study analysis, and positive self-talk exercises.

Results: The t-test results found a $t = -7.464$ with a significant change ($p < .001$), followed by an increase in the average score from pretest ($M = 10.11$) to posttest ($M = 15.00$), with a mean difference of 4.88 ($SD = 1.96$).

Conclusion: Qualitative findings demonstrated active participation and direct application of self-healing techniques. This program was deemed effective in improving understanding and basic knowledge of facing quarter-life crisis.

Keywords: Fresh Graduates; Psychoeducation; Quarter-Life Crisis; Self-Healing.

INTRODUCTION

Fresh graduates are a vulnerable group facing a Quarter-Life Crisis (QLC). QLC typically occurs when individuals face difficulties transitioning from emerging adulthood to a more settled stage of life, with more defined roles, responsibilities, and commitments (Robinson, 2019). Specifically among fresh graduates. The majority of participants experienced a high level of quarter-life crisis (67.2%), a moderate category (28%), and a low category (4.8%). Many young adults describe this transition period as a time of confusion, stress, and uncertainty (Yeler, Berber, Özdoğan, & Çök, 2021). Fresh graduates face a demanding and uncertain transition phase, experiencing significant changes as they transition from college to the world of work (Rianti, Suhairi, & Aslami, 2025). In Indonesia, data from the

Central Statistics Agency (CSA) shows that unemployment rates for those aged 15-19 reached 22.34%, while those aged 20-24 in 2024 reached 15.34%, and those aged 25-29 reached 7.14% (Central Bureau of Statistics, 2024). This situation exacerbates feelings of insecurity and confusion about life direction among young adults, especially those who have recently completed higher education. Negative information about the world of work causes final-year students about to enter the workforce to feel anxious about their future careers. A survey of fresh graduates found that they experienced confusion in making decisions after graduation, including determining career choices, starting new steps, or considering continuing their studies. In addition, they also reported anxiety about the future, pressure from parents, social comparison, concerns

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regarding interpersonal relationships and their impact on career development, which made them feel stressed (Kurniawati, Ningrum, Maulida, Putri, Rahmadhani, & Aulia, 2024).

Several factors can contribute to a quarter-life crisis. Social comparison, or the tendency to compare oneself with others, and intolerance of uncertainty, or the inability to accept uncertainty, are positively related to or can further increase QLC. Meanwhile, religiosity, clearer career maturity, positive expectations for the future, and resilience, or the ability to bounce back from stress, can be protective factors against QLC (Rochim, 2025; Fitriani & Rahayu, 2025; Khairunnisa & Wulandari, 2023). A quarter-life crisis can have negative consequences. These impacts can include sleep disturbances, poor eating habits, and decreased energy (Idami, Muna, & Junita, 2024). A severe quarter-life crisis can diminish important aspects of an individual's personality, such as personal growth initiative and psychological well-being (Linarto, Marchella, & Putu, Andika, & Hioe, 2024). Therefore, efforts are needed to help individuals recognize, understand, and manage the psychological dynamics that arise during this phase (Ogunsemi, 2025). Various interventions have been developed to help individuals experiencing quarter-life crisis. Solution-Focused Therapy (SFT) has been shown to be effective in reducing QLC levels by helping individuals focus on short-term solutions and positive potential (Mutohharoh, 2022). A support group approach can also reduce QLC through self-reflection and social support among members (Basuki & Djudiyah, 2024). Expressive writing therapy combined with self-efficacy reinforcement helps reduce QLC symptoms by channeling emotions and strengthening self-confidence (Adhriani & Somantri, 2025). Psychoeducation in the form of quarter-life crisis webinars aimed at helping individuals face the crisis more adaptively has shown positive results, showing that most participants were able to apply the knowledge gained, increase understanding, and motivate themselves to face challenges (Hanum, Cindepuspita, Munifah, Yantu, Afifa, & Novita, 2025). Various approaches can help reduce QLC symptoms, so preventive interventions are needed that can be applied more widely before the crisis escalates, namely psychoeducation (Aulia,

Mentari, & Arisara, 2024).

Psychoeducation helps prevent further psychological problems and strengthens individuals' self-confidence in facing transitions (Bahjatunnufuz & Nurhamida, 2024). Self-healing seminars, including lectures, discussions, and self-healing practices for managing stress and emotions, have been shown to be effective in preparing students for QLC and developing their self-confidence (Pratama, Pratama, Anita, Afredo, & Wibowo, 2024). Self-healing is a relevant component of psychoeducation in the context of transitional crises. Conceptually, self-healing relates to elements of self-help (Chang, Sambasivam, Seow, Tan, Lu, Assudani, & Vaingankar, 2021) and self-regulation (Baumeister, Schmeichel, & Vohs, 2017). Along with self-healing techniques such as mindfulness, positive self-talk, expressive writing, forgiveness, and gratitude (Crane & Ward, 2016; Tzeng, 2020; Latifi, Soltani, & Mousavi, 2020; Rahmasari, 2020). All of these techniques increase self-awareness, emotional control, and cognitive restructuring, three domains that are at the root of the problem in QLC.

RESEARCH METHOD

A quasi-experimental design with a one-group pretest-posttest model. Quantitative data were collected using a questionnaire developed by the researcher based on psychoeducational materials related to quarter-life crisis and self-healing, consisting of 20 multiple-choice questions. Additionally, qualitative data were obtained through observations during the activity. Participants in this study were recent graduates or those who had completed higher education, were unemployed or were still in the process of determining their career path, and were aged 21–29. Participants were recruited using a convenience sampling technique, as they were recruited based on their willingness and suitability to meet the criteria of individuals potentially experiencing or currently experiencing a quarter-life crisis. Quantitative data were analyzed using descriptive statistics to see the picture of the level of understanding before and after the activity, and using a paired sample t-test to determine changes in pretest–posttest scores using SPSS 27. Psychoeducation was carried out in one meeting for approximately two hours which was designed to

Annisa Dian Karina*, Djudiyah

Universitas Muhammadiyah Malang

Corresponding author: *Email: annissakarinna@gmail.com

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increase participants' understanding of quarter-life crisis and self-healing management skills. The activity began with a pre-test containing 20 questions on psychoeducational material related to quarter-life crisis and self-healing. The psychoeducational material included a brief explanation of the quarter-life crisis phenomenon, then deepened with self-healing material as an adaptive strategy in dealing with stress in the post-graduation period.

The self-healing material presented includes definitions, differences between popular healing terms and psychological meanings, the relationship between self-healing and self-help and self-regulation, the important point that self-healing is not a substitute for medical treatment, and an explanation of various self-healing methods such as forgiveness meditation, gratitude journaling, self-compassion therapy, mindfulness, positive self-talk,

expressive writing, relaxation, self-management, and guided imagery (relaxation through imagination). After the material, a case study session was conducted. Participants worked on a case study sheet and discussed in small groups to analyze the quarter-life crisis and determine appropriate self-healing strategies for the characters in the case. The next session was a positive self-talk practice session. Each participant worked on a worksheet containing instructions for transforming negative thoughts into more realistic and adaptive positive statements. Participants identified negative/illogical thoughts that frequently arise within themselves, then challenged these negative thoughts by exploring more rational ideas and goals, and then strengthened their positive thoughts with positive affirmations. Next, participants completed the same post-test sheet as in the pre-test.

RESEARCH RESULTS

Table 1. Results of normality test (n= 9)

Variable	Sig.
Pre-test	.291
Post-test	.207

In the pretest stage, the highest score of the participants was 15 and the lowest score was 7 out of a total of 20. After the intervention, the post-test score increased, the highest score was 17 and the lowest was 11. The Shapiro–Wilk normality test was conducted due to the small sample size ($N = 9$). In Table 1, the results show that the pretest ($p = 0.291$) and posttest ($p = 0.207$) data were normally distributed. Thus, the analysis was continued using a paired samples t-test.

Table 2. Results of the paired sample t-test

		t	Sig. (2 tailed)	Mean
Pair 1	Pre-test – Post-test	-7.464	<.001	-4.88889

The results of the paired samples t-test in table show a difference in improvement between the pre-test and post-test scores with a t-value of -7.464, the negative sign on the t-value indicates that the average post-test score is higher than the pre-test score. The significance test also strengthens this finding, where the p-value <.001, so the difference in scores before and after the activity can be declared significant. The average (mean) score increased from 10.11 in the pre-test to 15 in the post-test, with a mean difference of 4.88 indicating an increase in scores after the activity was carried out. The standard deviation value of the difference of 1.96 indicates that the improvement between participants was relatively stable and not too different from each other.

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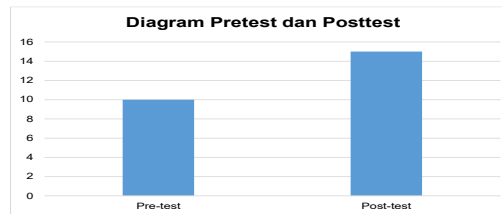


Figure 1. Diagram of changes in average pre-test and post-test scores

Figure 1 shows a clear increase in scores from the pretest to the posttest. In the pretest, participants' average score was 10, reflecting their initial level of understanding before the activity began. After participating in the activity, the average score increased to 15, indicating a significant increase in knowledge or understanding.

DISCUSSION

The results of this study indicate that psychoeducation with simple self-healing practices contributed to an increase in participants' understanding of the dynamics of quarter-life crisis (QLC) and adaptive ways to respond to it. This improvement was evident in the differences in pretest-posttest scores and also in participants' engagement during discussion sessions, case studies, and positive self-talk exercises (Prasanda, 2022). The ages of 18–30 are a period of uncertainty, requiring support to understand themselves, recognize emerging pressures, and develop more mature emotional management strategies. Therefore, the increased understanding and basic self-healing skills seen in the participants can be understood as a form of positive adaptation to the developmental demands they are currently facing (Arnett, 2023).

Model of emotional regulation, which states that the ability to manage emotions through cognitive reappraisal and self-awareness-based strategies can reduce psychological burden when individuals face life stress (Gross, 2025). Techniques such as mindfulness, relaxation, and positive self-talk introduced in this activity are cognitive- and attention-based emotional regulation strategies that theoretically can help individuals reduce the intensity of distress and increase clarity of thought (Razak & Hamid, 2022). The QLC phases described by particularly the locked-in and separation phases, where individuals often experience confusion, feelings of inadequacy, or feeling stuck. Knowledge and practice regarding self-healing provide participants with space to reassess their emotions

and thoughts, thus making the transition to the exploration and rebuilding phases more focused (Robinson, 2019).

The findings of this study are also supported by empirical literature showing that psychoeducation effectively improves individuals' emotional and cognitive readiness in facing transitional crises. Psychoeducation increased early adults' knowledge of QLC (Ansar, Ma'rifat, & Wulandari, 2023). Emphasized its role in strengthening self-belief and preventing further psychological problems (Fettiani, Siregar, Anisa, & Rahma, 2024). Self-healing interventions, both offline and digital, can help reduce QLC symptoms by strengthening emotional regulation and independent coping (Zarean & Latifi, 2022). Therefore, the psychoeducational intervention provided in this study aligns with previous research (Xin, Li, Jia, & Yuan, 2023). Participants not only understood the concept of self-healing but were also able to apply it to recognize negative thoughts, reduce distress, and develop more adaptive responses when facing the uncertainties of life in early adulthood (Purnamasari, Handayani, & Azizah, 2025).

CONCLUSION

The psychoeducation provided in this study was proven to improve fresh graduates' understanding of quarter-life crisis and basic self-healing strategies for managing emotional distress during the transition to early adulthood. Improved pretest–posttest scores and participant engagement during the activity indicate that a brief intervention based on conceptual explanations, reflective discussions, and simple

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cognitive exercises can help participants recognize negative thought patterns, increase self-awareness, and develop more adaptive responses to the uncertainties of life after graduation. These findings confirm that psychoeducational support plays a crucial role in strengthening individuals' psychological readiness when facing the dynamics of QLC and can be a feasible approach for early adulthood groups across various service contexts.

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