

Effectiveness of Individual Counseling Using Cognitive Behavioral Therapy with Cognitive Restructuring Technique to Reduce Homesickness among Migrant Students: A Single Subject Design Study

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Keywords

Homesickness; Cognitive Behavioral Therapy (CBT); Individual counseling; migrant students.

Abstract

Migrant students often face various psychological challenges due to separation from their families and home environments, one of which is homesickness. This study aims to determine the effectiveness of individual counseling using a Cognitive Behavioral Therapy (CBT) approach with cognitive restructuring techniques in reducing homesickness among migrant students. The research method employed a Single Subject Design (SSD) experiment with an A-B design. The research subjects consisted of two migrant students, namely TL and AMP, who were selected using purposive sampling based on the criteria of migrant students experiencing high levels of homesickness. The data collection instrument used was a homesickness questionnaire based on the theory of Archer et al., which includes two indicators: attachment to home and difficulty in adaptation, and has been tested for validity and reliability with all items declared valid and a reliability coefficient of $\alpha = 0,729$. Data analysis was conducted using visual analysis techniques both within conditions and between conditions. The results showed that at the end of the intervention phase, subject TL obtained a homesickness score of 35 and subject AMP obtained a score of 31, both of which fall into the low category. This indicates a consistent decrease in homesickness scores between the pre-intervention and post-intervention conditions. Based on the results of the study above, it can be concluded that individual counseling with Cognitive Behavioral Therapy (CBT) indicates a decrease in homesickness scores after the intervention.

INTRODUCTION

The movement from one's place of origin to another region in order to obtain better education is commonly referred to as migrant students (Imamy, 2022). Migrating for education in Indonesia has become a common and familiar phenomenon, especially for individuals who choose to pursue higher education far from their hometowns. In the process of continuing their education, individuals experience a transitional period toward a higher level of education. The transition from senior high school (SMA) to university is one of the most significant phases, particularly for students who migrate (Rahmanda et al., 2023).

Many individuals from this generation choose to continue their studies outside their hometown, a situation that ultimately encourages them to continue their education elsewhere (Andari et al., 2025).

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Migrant students face challenges in adapting to environments and customs different from their hometowns, and rarely have the opportunity to return home and meet their families. Some individuals view the experience of living away from home as enjoyable and challenging because it can train independence and broaden horizons. However, many also consider living away from home to be less enjoyable, due to the emotional feelings that arise when away from home, known as homesickness (Tebe, 2025).

Homesickness, or feelings of homesickness, often occurs among young adults, especially during the early stages of college and towards the end of the semester. If individuals do not adapt well and are not yet accustomed to the new environment, this change often leads to homesickness (Putri et al., 2023). Therefore, researchers conducted a preliminary study using Google Forms to investigate homesickness among students pursuing higher education far from their hometowns. The preliminary study, conducted by researchers on 53 out-of-town students in Surabaya, East Java, showed that 6 students (11%) experienced high levels of homesickness, 46 students (87%) experienced moderate levels of homesickness, and only 1 student (2%) experienced low levels of homesickness. This indicates that many students still experience homesickness in our environment.

These results are in line with research conducted by Haya (2024) entitled "The Relationship Between Self-Adjustment and Social Support with Homesickness in Out-of-Home Students" which found that of the total of 100 out-of-home students who were respondents, as many as 32% experienced homesickness in the high category, 54% were in the moderate category, and 14% were in the low category. The phenomenon found in this study reflects that students who are out of home often face significant emotional stress when having to adapt to a new environment far from home. Homesickness appears as a form of psychological reaction to separation from a familiar environment, which is characterized by feelings of sadness, loss of enthusiasm, difficulty sleeping, eating disorders, and withdrawal from social interactions. Students who have not been able to adapt well, coupled with minimal social support from their surroundings, tend to be more vulnerable to experiencing homesickness in the high category.

Feelings of longing for life in one's hometown are also common, especially when students begin to live their days in a new environment and attempt to build different social relationships in a new land (Utami, 2023). According to a report published by the Suara Mahasiswa editorial team (2022), "Homesickness: The Anxiety of Migrant Students and All Their Stories," it highlights the phenomenon of homesickness experienced by migrant students due to longing for their families, homes, and hometowns. A quote from the news article states that "homesickness is a universal symptom that is normal for everyone to feel," although each individual experiences it differently. This phenomenon affects students' psychological condition, characterized by feelings of anxiety, loneliness, and difficulty adapting to a new environment.

Homesickness is not just a simple feeling of homesickness; it can develop into a condition that affects students' emotional health, concentration, and ability to adapt to a new environment. This is consistent with research conducted at Malang State University by Mimah and Suciptaningsih (2024), which found that 58% of students from out-of-town experience homesickness. Of the 73 respondents who completed the questionnaire, 42 students reported experiencing homesickness in general, 20 students reported

experiencing homesickness frequently, and 11 students reported experiencing homesickness rarely (Mimah et al., 2024)

Furthermore, research at Padang State University by Geni Novella (2025) showed a difference in homesickness levels between first-year female and male students. With the same sample size of 100 female and 100 male, there was a quite striking difference between female and male respondents. 51% of female respondents were in the high homesickness category, while 49% were in the moderate category, and 0% were in the low category. Conversely, the majority of male respondents, 0%, were in the high category, followed by 58% who were in the moderate category, and 42% who were in the low category. These findings indicate that homesickness levels tend to be higher among women than men.

One factor that causes students living away from home to feel lonely while living in boarding houses is the lack of a place to share stories or express feelings. This loneliness is often exacerbated by limited direct social interaction, especially when facing personal problems or during important moments such as holidays, when students do not have close friends to talk to or share experiences with (Sembiring et al., 2024).

Furthermore, limited adaptability to new environments, such as differences in culture, language, and social interaction patterns, is also a significant factor contributing to feelings of homesickness in students who have moved away from home. When students are unable to effectively adjust to the social dynamics of their new place, they tend to withdraw and experience psychological stress, which exacerbates feelings of homesickness (Danendra et al., 2024)

Another factor that exacerbates homesickness is a lack of access to adequate social support, whether from peers, lecturers, or the surrounding community. Students who feel they lack a strong social network are more likely to experience feelings of isolation and loss, especially when facing stressful situations or high academic pressure (Rohmatun, 2024).

For students living away from home, individual counseling is considered an appropriate approach because they often face personal adaptation challenges, such as cultural differences, academic burdens, and minimal social support, requiring tailored treatment (Santrock, 2021). Previous studies have indicated that homesickness is a common psychological issue experienced by students living away from home, associated with challenges in adapting, feelings of loneliness, and a decline in mental well-being. However, most research focuses on its causes, its relationship with other psychological variables, and its impact on students' adjustment. Research analyzing the effectiveness of counseling interventions to reduce homesickness, particularly utilizing Cognitive Behavioral Therapy (CBT) approaches using cognitive restructuring techniques in students living away from home, is still limited. Furthermore, the application of Single Subject Designs (SSD) to measure behavioral changes individually is also rare.

Based on this, this study aims to assess the effectiveness of CBT counseling with cognitive restructuring techniques in reducing homesickness in students who live far from home, which emphasizes changes in daily thought patterns and behavior in order to build more positive emotional responses (Norcross et al., 2019). Cognitive Behavior Therapy (CBT) is a form of psychotherapy that aims to address maladaptive

behavior and reduce psychological distress by altering an individual's cognitive processes (Zainal et al., 2024).

The main advantage of the Cognitive Behavioral Therapy (CBT) approach in treating homesickness is its ability to help students who are away from home stay focused on positive emotions. The Cognitive Behavioral Therapy (CBT) approach was chosen because homesickness is often maintained by cognitive distortions in the form of negative thoughts about the new environment, emotional dependence on family, and the belief that the individual is unable to adapt independently. Cognitive restructuring techniques in CBT enable clients to identify and change these negative thoughts into more rational and adaptive ones, thus hopefully reducing the level of homesickness and improving the adjustment abilities of students who are away from home.

This study uses a Cognitive Behavioral Therapy (CBT) counseling approach that aims to reconstruct students' mindsets through identifying and correcting erroneous assumptions and thoughts. By directing changes in daily thought patterns and behavior, this approach is expected to foster positive mindsets to improve students' adaptation skills in a migrant environment. Therefore, the researcher is interested in conducting an experimental study using the title " Effectiveness of Individual Counseling Using Cognitive Behavioral Therapy with Cognitive Restructuring Technique to Reduce Homesickness among Migrant Students: A Single Subject Design Study ".

METHOD

This study employed a quantitative research method. This quantitative research method employed purposive sampling, selecting subjects based on predetermined criteria. Data collection utilized a homesickness scale, structured according to Archer et al., (1998) dimensions of homesickness: attachment to home and difficulty adapting. This method is called quantitative because the research data are numerical and statistically analyzed (Sugiyono, 2013).

This study employed an experimental research design with a single-subject design, focusing on individual data as the research sample. Using an A-B design, this design is structured based on baseline logic, which involves repeating measurements of behavior or target behavior under at least two conditions: baseline (A) and intervention (B) (Sunanto et al., 2005). In baseline (A), the researchers sought to determine the level of homesickness experienced by students living away from home before receiving specific treatment. In intervention (B), the researchers began administering treatment by applying Cognitive Restructuring techniques in individual counseling using a Cognitive Behavior Therapy (CBT) approach.

The study subjects were recruited through a screening process of out-of-town students who met the following criteria: (1) active student status, (2) living far from their parents or hometown for study purposes, (3) exhibiting symptoms of homesickness based on initial measurements, and (4) willing to participate in the entire study. The screening results indicated two students with high homesickness scores, and therefore, they were designated as study subjects with the initials TL and AMP. The use of initials is intended to maintain the confidentiality of the subjects' identities.

Measurements in the baseline condition (A) were conducted three (3) times, while in the intervention condition (B) were conducted six (6) times. It should be noted that both conditions A and B were applied

to the same subjects without any comparison between subjects at the same time. Although this study used a single-subject design, the focus was not on a single subject, but rather on two subjects who were evaluated separately to observe changes in their behavior from before to after the intervention.

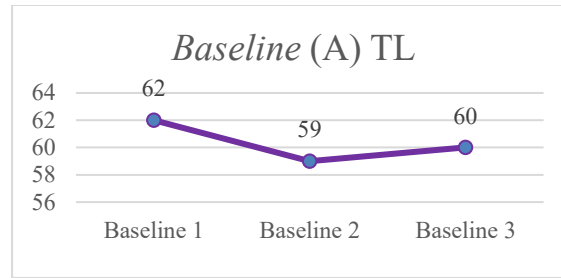
The intervention was implemented through individual counseling using a Cognitive Behavioral Therapy (CBT) approach that focuses on cognitive restructuring techniques. The counseling process follows the CBT stages proposed by Beck, (1995): 1) First stage: Assessment and diagnosis, 2) Second stage: Identifying the client's negative thoughts, 3) Third stage: Teaching the client the relationship between cognitive, emotional, and behavioral factors, 4) Fourth stage: Training to change negative thoughts to positive ones and providing cognitive restructuring homework, 5) Fifth stage: Assignment evaluation, 6) Sixth stage: Evaluation and termination. Cognitive restructuring techniques are used to help subjects identify negative thoughts related to homesickness, difficulty adapting, and irrational beliefs about the new environment, then replace them with more rational, realistic, and adaptive thoughts. The intervention is provided by the researcher as a counselor, with each session lasting approximately 45–60 minutes.

This study also considers research ethics. Prior to the study, subjects were given an explanation of the purpose, procedures, benefits, and risks of the study and were asked to provide informed consent. Researchers guarantee the confidentiality of subjects' identities and all personal data by using initials in the research report. Furthermore, counseling services are provided with the permission of the relevant parties and adhere to the principles of confidentiality, voluntariness, and the psychological well-being of subjects throughout the research process.

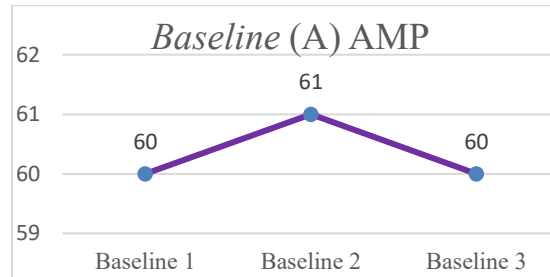
RESULTS AND DISCUSSIONS

This research was conducted at PGRI Adi Buana University Surabaya in the odd semester of the 2025/2026 academic year. The research subjects consisted of two students, TL and AMP, who had high levels of homesickness. The responses seen or shown by the subjects before the individual counseling activity of Cognitive Behavior Therapy (CBT) will be described in this study, including an initial description of baseline A, after being given intervention B.

Based on the results of the study, there is a difference in the condition of homesick counselees before being given intervention (Treatment) and after being given intervention (Treatment) through individual counseling services with a Cognitive Behavior Therapy (CBT) approach. Before the intervention, counselees showed a high level of homesickness with a score of 62 in TL counselees and 60 in AMP counselees, characterized by the emergence of irrational thoughts in the form of excessive longing for home and family, difficulty adapting to the migrant environment, and a tendency to compare current conditions with situations at home that trigger negative emotions such as sadness, anxiety, and feelings of discomfort. As an effort to clarify the baseline data, the following is a graph displaying homesickness.



Graph 1. Baseline for TL Counselees



Graph 2. Baseline in AMP Counselees

During six counseling sessions during the intervention phase, the TL client exhibited various negative behaviors reflecting homesickness. These behaviors included frequently locking herself in her room, daydreaming, crying when remembering her family, having difficulty sleeping, losing her appetite, and being highly dependent on her parents via phone and video calls almost daily. These conditions were triggered by negative thoughts that automatically arose, such as a strong desire to return home, feeling alone in her boarding house, the perception that she was not yet independent, and the belief that her presence was needed at every family moment. These thoughts were further reinforced by triggering situations such as seeing family photos, eating alone, waking up without a structured routine, and after intense communication with her family.

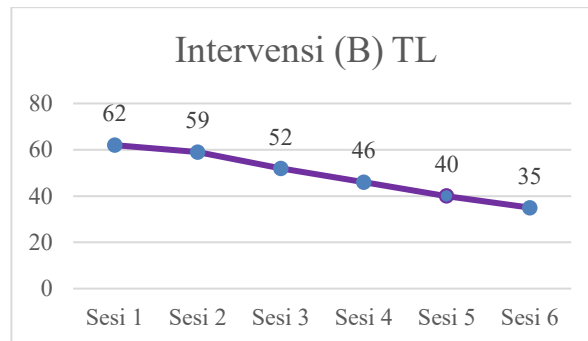
After receiving individual counseling intervention using the Cognitive Behavioral Therapy (CBT) approach, specifically through automatic thought identification techniques and thought record exercises, changes began to appear at the fourth meeting. At this stage, the client began to realize that the negative thoughts that had been emerging were not entirely in accordance with reality and tended to be self-blaming. These cognitive changes became increasingly apparent at the fifth and sixth meetings, marked by the emergence of more rational and adaptive thoughts, such as an awareness of independent learning, reduced dependence on parents, and confidence in themselves being able to cope with life away from home. These changes in thinking were reflected in the client's behavior, who began to dare to eat alone even without friends, reduced the frequency of calling family, was able to manage time independently, and showed more stable emotions when facing situations that previously triggered homesickness.

AMP counselees also showed changes in homesick behavior observed through the counseling process during six sessions. These behaviors included frequent feelings of sadness for no apparent reason, crying easily when remembering family, feeling uncomfortable in the boarding environment, being less

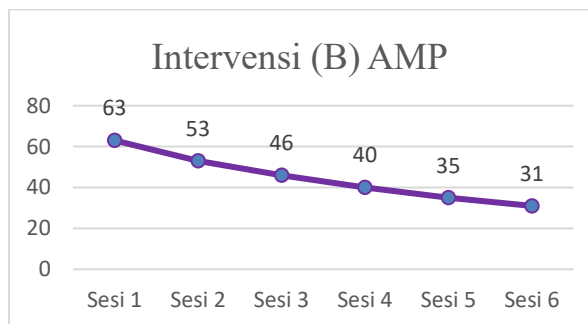
enthusiastic about participating in lecture activities, and the emergence of a strong desire to return home. This condition was influenced by negative thoughts that appeared repeatedly, such as the belief that living away from family makes them uncomfortable, the assumption that the home environment is safer and more pleasant than the current environment, and the perception that they have difficulty adjusting to life away from home. These negative thoughts were further strengthened by triggering situations such as being alone in the boarding house, after communicating with family, and when facing daily activities without adequate social support.

After receiving individual counseling treatment using Cognitive Behavioral Therapy (CBT), changes began to be seen at the fourth meeting. At this stage, the client began to recognize the connection between their situation, thoughts, and emotions and realized that their negative thoughts were not entirely in line with their actual situation.

Cognitive changes developed further in the fifth and sixth meetings, marked by the emergence of more positive and realistic thoughts, such as the belief that living away from home is a learning process towards independence and the awareness that feelings of homesickness can be managed without having to avoid situations that trigger homesickness. These changes in thinking were reflected in the behavior of the counselee who began to be more active in participating in daily activities, was able to control emotions when missing family, and showed a calmer and more adaptive attitude in living life as an away-from-home student. As an effort to clarify the Intervention data, the following graph displays homesickness.

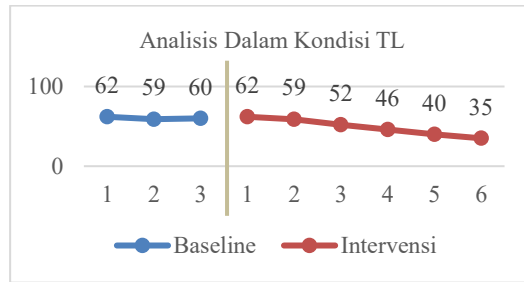


Graph 3. Interventions for TL Counselees

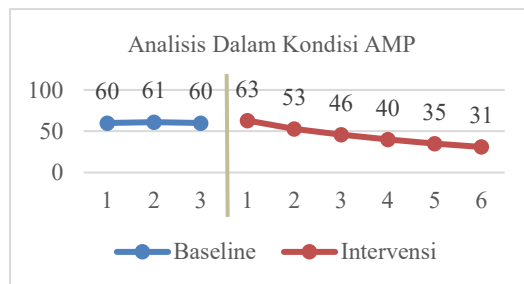


Graph 4. Interventions for AMP Counselees

Based on the research data above, the results of the analysis within conditions and analysis between conditions can be summarized in the following table and description:



Graph 5. Analysis of Conditions in TL Counselees



Graph 6. Analysis of Conditions in AMP Counselees

Based on the analysis above, it can be explained that the baseline condition (A) shows the initial measurement results through a questionnaire to determine the subject's condition before receiving treatment or individual counseling services. At the beginning of the meeting to fill out the questionnaire, the research subjects (counselees) were only given a brief understanding of homesickness.

The intervention (treatment) phase was implemented through individual counseling using a Cognitive Behavior Therapy (CBT) approach using cognitive restructuring techniques over six sessions. During the counseling process, researchers also collected questionnaire scores at the end of each intervention session, obtaining data that was used to strengthen the findings in the intervention condition (B).

Table 1. Visual Analysis Results in the TL Condition

condition	<i>Baseline</i>	<i>Intervention</i>
Length Condition	3	6
Directional Estimation	Tendency (+)	(-)
Data Stability Trends	Stable 100 %	Variable 33,33 %






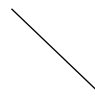
condition	Baseline	Intervention
Data Trace	(+) 	(-) 
Level and Range Stability	Stable 59-62	Variable 35-62
Level Changes	60-62 = -2 (Go on)	35-62 = -27 (Decrease)

Table 2. Visual Analysis Results in the AMP Condition

condition	Baseline	Intervention
Length Condition	3	6
Directional Tendency Estimation	(+) 	(-) 
Data Stability Trends	Stable 100 %	Variable 33,33 %
Data Trace	(+) 	(-) 
Level and Range Stability	Stable 60-61	Variable 31-63
Level Changes	60 – 60 = 0 (Go on)	31 – 63 = -32 (Decrease)

The table above explains the visual analysis of the research subjects (counselees). The estimated trend in the baseline phase (A) indicates a stable condition, while in the intervention phase (B) it decreased. The stability trend in the baseline of TL and AMP counselees is said to be variable because the percentage is at 100%, as is the case in the intervention condition which is also said to be variable because the figure shows 33.33%. This stability trend refers to the guideline that if the stability percentage is in the range of 85%-90% then it is categorized as stable, if it is below that range then it is included in the variable or unstable criteria (Sunanto et al., 2005). The data trace in the baseline is stable with a straight line while the intervention condition experiences a decline.

The stability level at baseline and intervention shows instability, based on the data that has been presented, it appears that there is a change in level in each condition, as well as from baseline to intervention conditions. The level change value is obtained from the results of the last observation score then subtracted from the initial baseline score for TL $60 - 62 = -2$ counselees, while AMP $60 - 60 = 0$ counselees have an increase value, the final intervention score is subtracted from the initial score that

takes place for TL $35 - 62 = -27$ counselees, while AMP $31 - 63 = -32$ counselees have a decreasing score value.

It was concluded that the baseline phase was 3 and the intervention phase was 6. Based on the analysis, it was clear that homesickness had changed among the subjects. The baseline trend was stable, while the intervention trend decreased.

Table 3. Results of Analysis Between TL Conditions

Condition Comparison	B/A
Number of variables changed	1
Changes in Directional Tendencies and Their Effects	
	<div style="display: flex; justify-content: space-around;"> (+) (-) </div>
Changes in Trends and Stability	Variable to Variable
Level Change	60-62=-2
Overlap Percentage	33,3%,

Table 4. Results of Analysis Between AMP Conditions

Condition Comparison	B/A
Number of variables changed	1
Changes in Directional Tendencies and Their Effects	
	<div style="display: flex; justify-content: space-around;"> (+) (-) </div>
Changes in Trends and Stability	Variable to Variable
Level Change	60-63=-3
Overlap Percentage	0%

The table above explains that the analysis between the conditions of the research subjects is as follows: (a) changes in the direction of the tendency in the level of homesickness towards a more positive change due to a decrease in direction, (b) changes in the stability tendency from baseline conditions to variable or unstable interventions, (c) changes in level. It can be concluded that in this study, based on the results of the analysis in the table, the change in direction between baseline and intervention shows a stable downward trend, which indicates that conditions are improving.

The results of individual counseling using the Cognitive Behavioral Therapy (CBT) approach showed positive changes marked by a decrease in homesickness levels in TL and AMP counselees after the intervention. Through the counseling process, counselees were able to recognize and change negative and irrational thought patterns that previously reinforced feelings of homesickness, dependence on family, and obstacles in adjusting to a foreign environment. These cognitive changes impacted the counselee's emotional state and behavior, so that counselees became better able to manage their feelings, develop an independent attitude, and use more effective and adaptive emotional management efforts in living their daily lives.

The decrease in homesickness in both subjects can be explained through the working mechanism of Cognitive Behavioral Therapy (CBT), specifically cognitive restructuring techniques. According to Beck, (1995), an individual's emotions and behavior are influenced by how they interpret a situation. In students experiencing homesickness, various negative automatic thoughts emerge, such as the belief that home is the only place they feel comfortable, a feeling of inability to adapt to their new environment, and the belief that life away from home is more difficult than at home. These thoughts give rise to negative emotions such as sadness, anxiety, loneliness, and a persistent desire to return home.

Through cognitive restructuring techniques, subjects are encouraged to identify the automatic thoughts that arise when they experience homesickness and difficulty adapting. They are then trained to evaluate evidence that supports and contradicts these thoughts and replace them with more rational and adaptive thoughts. This change in thinking helps subjects develop a more positive perception of their away environment, gradually decreasing the intensity of homesickness.

After undergoing individual counseling with a Cognitive Behavioral Therapy (CBT) approach for a certain period of time, TL counselees showed negative thoughts in the form of emotional dependence on family and beliefs that they were not yet able to live independently, which was seen through withdrawn behavior and unstable emotions, but after being given intervention, TL counselees showed changes to become more independent, able to manage emotions, and experienced a decrease in homesickness. Meanwhile, AMP counselees initially perceived the migrant environment as uncomfortable and difficult to live in, which had an impact on feelings of sadness and low motivation, but after being given intervention, AMP counselees were able to develop more positive and realistic thoughts, behave more adaptively, and show a decrease in homesickness levels. Through this intervention, counselees have the opportunity to build a more rational mindset so they can achieve better emotional well-being (Putri et al., 2023)

The findings of this study also indicate changes in two dimensions of homesickness according to Archer et al., (1998): attachment to home and difficulty adapting. Prior to the intervention, both subjects demonstrated a strong attachment to home, characterized by persistent thoughts of family, the home environment, and a desire to return to their hometown. Furthermore, the subjects experienced difficulty adapting to their new environment, as evidenced by feelings of discomfort, social withdrawal, and negative perceptions of life away from home. After undergoing CBT counseling, both subjects began to demonstrate an improved ability to realistically view their situation away from home. They no longer viewed home as the sole source of comfort but instead began to find support and positive experiences in their new environment. These changes indicate that cognitive restructuring contributed to a decrease in both dimensions of homesickness.

These results align with research by Rahmanda et al., (2023), which explains that homesickness is related to psychological stress and difficulty adapting. Furthermore, these findings support Beck, (1995) view that cognitive changes will influence changes in an individual's emotions and behavior. When negative thoughts about life away from home are successfully modified to become more rational, feelings of sadness, anxiety, and excessive longing for home also decrease. However, this study not only shows a decrease in homesickness scores but also shows a change in the subjects' perspectives on themselves and their environment away from home. This indicates that CBT not only helps reduce symptoms of homesickness but also improves the psychological adaptability of students away from home.

CONCLUSIONS

Based on the results of research conducted by researchers during 9 meetings, there is an effectiveness of Cognitive Behavior Therapy (CBT) counseling to reduce homesickness in out-of-town students. The results of the analysis in conditions and analysis between conditions show a decrease in results, reinforced by the results of the questionnaire scores at the end of the intervention in TL counselees with a score of 35 and in AMP counselees getting a score of 31 which is categorized as low after being given the intervention, there is a difference between before and after the intervention. The results of the study above can be concluded that, Cognitive Behavior Therapy (CBT) counseling in individual counseling can be used by campus counselors as an initial intervention for homesickness.

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