Revenge Bedtime Procrastination: A Self-Love Phenomenon or Revenge Against Yourself?

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Abstract

Having a hectic daily routine often makes a person lose time to relax for himself, commonly called "me time". This turned out to be a factor in the emergence of the Revenge Bedtime Procrastination phenomenon, namely delaying sleep to take revenge for not having free time during the day. This study aimed to determine the effect of self-love therapy on reducing Revenge Bedtime Procrastination behavior. The subjects in this study were students of the Faculty of Nursing, S1 Islamic University, Sultan Agung Semarang, with a population of 236 students. In this study, purposive sampling obtained a sample of 14 students and then divided them into two groups, namely the experimental and control groups. Data were collected through the Bedtime Procrastination Scale, observation, and interviews. Data were analyzed using a quantitative approach. The results of the paired-sample t-test analysis obtained a p of 0.001 at the significance level (0.001 < 0.005). Then in the independent t-test, p was 0.001 at the significance level (0.001 < 0.05). It can be said that the experimental group and control group saw a significantly different score drop. These results indicate that after self-love therapy, the subject's level of revenge bedtime procrastination decreased significantly.

Keywords: hectic daily routine, me time, revenge, revenge bedtime procrastination, self-love therapy
Abstrak

Memiliki kesibukan harian yang padat seringkali membuat seseorang kehilangan waktu bersantai untuk diri sendiri atau biasa disebut “me time”. Hal itu ternyata menjadi faktor penyebab munculnya fenomena Revenge Bedtime Procrastination, yaitu menunda waktu tidur dengan tujuan untuk balas dendam karena tidak memiliki waktu luang di siang hari. Tujuan dari penelitian ini adalah mengetahui pengaruh self-love therapy untuk menurunkan perilaku Revenge Bedtime Procrastination. Subjek pada penelitian ini yaitu mahasiswa Fakultas Ilmu Kesehatan S1 Universitas Islam Sultan Agung Semarang dengan populasi sebanyak 236 mahasiswa. Pengambilan sampel penelitian ini menggunakan purposive sampling yang diperoleh sampel sebanyak 14 mahasiswa kemudian dibagi menjadi dua kelompok, yaitu kelompok eksperimen dan kontrol. Data dikumpulkan melalui skala Bedtime Procrastination Scale, observasi, dan wawancara. Data dianalisis menggunakan pendekatan kuantitatif. Hasil analisis paired-sample t-test diperoleh p sebesar 0.001 pada taraf signifikansi (0.001<0.005). Kemudian pada uji independent t-test diperoleh p sebesar 0.001 pada taraf signifikansi (0.001<0.05). Hal ini dapat dikatakan bahwa terdapat perbedaan yang signifikan antara kelompok eksperimen dan kelompok kontrol. Hasil tersebut menunjukkan bahwa setelah melakukan self-love therapy tingkat revenge bedtime procrastination subjek mengalami penurunan yang signifikan.

Kata kunci: balas dendam, kesibukan harian, me time, revenge bedtime procrastination, self-love therapy

INTRODUCTION

Having a daily busy life becomes a natural thing for someone to achieve certain goals, such as carrying out work, education, and household matters. However, various demands often make a person spend longer than usual, so they lose time to relax for themselves or what is commonly referred to as "me time". The desire to relax during busy activities turned out to be a factor in the emergence of the Revenge Bedtime Procrastination (RBP) phenomenon, namely delaying sleep to take revenge for not having free time during the day. Individuals who experience RBP will sacrifice sleep time to do fun things (Suni, 2021). RBP is different from insomnia or other types of sleep disorders. Insomnia is characterized by symptoms of difficulty initiating sleep and maintaining sleep (Shakespeare et al., 2021) while RBP is performed because of intentional delay or sacrifice of sleep time so that sleep time is reduced (Kroese et al., 2016).

Activities carried out on RBP's behavior are usually watching videos or movies,
accessing social media, listening to music, sending chats, and other things that are considered fun. As reported by the National Sleep Foundation, the use of electronic devices in bed is 57% on televisions, 90% on music players, 43% on computers, and 64% on telephones. Studies by Calamaro, Mason, and Ratcliffe report that teens chat, make phone calls, play computer games or go online after 9 p.m. Similarly, in a study by Van den Bulck, 62% of adolescents use cell phones in bed with the lights off which ultimately results in fatigue the next day (Magalhães et al., 2020).

RBP is often seen as a form of affection or appreciation for the self who has worked hard. However, several studies have shown that RBP is associated with stress and low well-being (Kroese et al, 2016) and is a response to unconscious stress and frustration due to long working hours. They even realized that they had to sleep immediately and wanted enough sleep, but failed to do so (Suni, 2021). Delaying sleep enables one to engage in enjoyable activities like watching movies, reading, or playing smartphone apps.

One of the requirements for self-love is thought to be being happy with oneself (Campbell et al., 2002). However, some people incorrectly use this. For instance, someone needs work time for themselves and decides to put off office duties so they can have more time for themselves. Such ideas can lead to misunderstandings and even self-harm, which results in someone experiencing revenge bedtime procrastination. According to (Sirois et al., 2019), good sleep, minimal stress, and a healthy lifestyle are all related to self-love.

Based on this explanation, it can be concluded that prolonged RBP is an inappropriate way of self-love. Delaying sleep that is done continuously until it becomes a habit can harm physical and psychological health. Performance is not optimal, to the emergence of various diseases, and decreased focus, accuracy, and memory (Shakespeare et al., 2021). Good sleep quality is also related to good performance (Pundhir, 2021).

This study offers the development of an innovative method to help overcome RBP behavior with Self-Love Therapy. Self-love is a condition in which we can appreciate ourselves when we can achieve something that supports physical, psychological, and spiritual development. This therapy will encourage a person to be in a state of being able to accept one's shortcomings and strengths, have compassion, focus on goals, and be grateful for the efforts made (Yasmin & Fardani, 2020). Individuals will also be invited to get to know themselves better and the right way to love themselves according to the conditions experienced so that they get the right solution to overcome the problem.
Self-Love Therapy which will be developed in this study includes efforts to better understand oneself and the right way to love oneself according to one's condition and includes straightening out inappropriate thoughts that cause harmful or self-destructive behavior to appear. The process of recognizing inappropriate thoughts is based on cognitive behavior Aaron Beck's According to Beck (2017), a change in thinking will be followed by a change in behavior.

Self-love therapy has the goal of helping people realize what actual self-love is and to stop abusing sleep as personal time. Because self-love is done with no malice against oneself. In contrast, in this situation, me-time is frequently utilized as retaliation for not having enough free time during the day. Someone who normally puts off going to bed will learn how to properly love themselves in this way. Learning to listen to and accept oneself, as well as acting on what one needs rather than what one wants, are all ways that one might practice self-love (Khoshaba, 2012). All negative habits that might harm mental health can be diminished by practicing self-love. In the past, self-love may have been utilized to boost optimism and lower stress, particularly when confronted with several exhausting life problems. In addition, having self-love can help people feel happy and succeed (Maulita, 2020). It is hoped that this therapeutic innovation can help individuals who experience RBP.

In this therapy there are several sessions of activities that must be carried out, educating, writing things that make him revenge bedtime procrastination, and relaxing. self-love therapy teaches how to truly "love yourself" and teaches how me time that doesn't harm yourself. That way, a person no longer makes excuses for self-love and me time to delay sleep. The purpose of this study was to determine the effect of self-love therapy to reduce the behavior of revenge bedtime procrastination.

METHOD

The sample of this study was 7th-semester undergraduate students of the Faculty of Nursing with a population of 236 students. Jahrami et al, (2021) say that the prevalence of sleep problems during the COVID-19 pandemic is high and affects around 40% of people in the general population and healthcare workers. Patients with active COVID-19 appear to have a higher prevalence rate of sleep problems. Based on research conducted by (Lemma et al, 2012), the results obtained were 0.8% (1,294) of students had symptoms of depression, 58% (1,369) of students had symptoms of anxiety, 34.1% (864) of students had symptoms of stress, and
55.8% (1,424) students had poor sleep quality. Students who think too hard will cause stress, so students will find it difficult to control their emotions which results in increased tension and difficulty starting bedtime. The student's feelings of tension can cause students to have difficulty sleeping or often wake up during sleep, it will interfere with students getting the quality of sleep they want (Ratnaningtyas & Fitriani, 2019). Therefore, the researcher chose the final sample of nursing students because they have the possibility of experiencing revenge bedtime procrastination.

The research sampling technique used purposive sampling, namely determining the sample with certain considerations. Then a sample of 14 students was divided into two groups, namely the experimental group and the control group. Measurements were made twice, namely before and after treatment. This type of research is empirical research using an experimental approach and pretest-posttest with a control group design to determine the effect of self-love therapy by comparing the experimental group and the control group. Data is collected through observation, interviews to complete qualitative data, Bedtime Procrastination Scale by Kroese et al, (2014). The scale consists of 9 items which contain statements arranged based on the sleep delay dimension. This 9-item scale was developed to assess sleep delay. Items are answered on a 5-point scale ranging from 1 (never) to 5 (always). The reliability test of this questionnaire yielded a Cronbach's Alpha value of 0.92 > 0.60. So, it can be concluded that the questions for this questionnaire are reliable or consistent and can be used as a measuring instrument in this study. Data were analyzed using a quantitative approach with a t-test or two-mean difference test (t-test). In addition, a qualitative analysis using a narrative descriptive method was also carried out to obtain a more in-depth picture of the process and effect of the treatment on the subject's condition.

This study consists of two variables. The independent variable is Self-Love Therapy and the dependent variable is Revenge Bedtime Procrastination. The focus of this research is efforts to reduce Revenge Bedtime Procrastination behavior through Self-Love Therapy. This research lasted for 4 months at the Sultan Agung Islamic University in Semarang. The intervention was carried out for 2 weeks with 4 treatment sessions. The stages of this research consist of; Research preparation, subject selection, data collection before treatment, obtaining the results of measuring the level of procrastination sleep time of the subject's revenge before treatment, the treatment stage, data collection after treatment, and the research reporting stage. The stages of treatment are carried out offline with strict health protocols in the Unissula joint
lecture building, Semarang Indonesia. Self-Love Therapy is arranged systematically in therapy modules as a guide for the research team and subjects.

RESULTS AND DISCUSSION

The outcomes of the final exam (post-test) in both classes were determined using the findings from the research conducted in the experimental and the control group in this study. The conclusions were drawn from the data that the researchers collected, examined, and presented in the form of a table with a description. The final analysis of the data is to demonstrate if there is a meaningful difference between the experimental group and the control group following self-love treatment.

Table 1. Subjects in the experimental group's pre-test, post-test, and follow-up scores

<table>
<thead>
<tr>
<th>Number</th>
<th>Name</th>
<th>Pre-test</th>
<th>Category</th>
<th>Post-test</th>
<th>Category</th>
<th>Follow up</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>SNA</td>
<td>43</td>
<td>Very high</td>
<td>25</td>
<td>High</td>
<td>21</td>
<td>Medium</td>
</tr>
<tr>
<td>2</td>
<td>AIF</td>
<td>36</td>
<td>Very high</td>
<td>24</td>
<td>Medium</td>
<td>20</td>
<td>Low</td>
</tr>
<tr>
<td>3</td>
<td>DAP</td>
<td>32</td>
<td>Very high</td>
<td>19</td>
<td>Low</td>
<td>17</td>
<td>Low</td>
</tr>
<tr>
<td>4</td>
<td>IS</td>
<td>30</td>
<td>Very high</td>
<td>18</td>
<td>Low</td>
<td>17</td>
<td>Low</td>
</tr>
<tr>
<td>5</td>
<td>UH</td>
<td>29</td>
<td>High</td>
<td>20</td>
<td>Low</td>
<td>19</td>
<td>Low</td>
</tr>
<tr>
<td>6</td>
<td>AA</td>
<td>28</td>
<td>High</td>
<td>25</td>
<td>High</td>
<td>21</td>
<td>Medium</td>
</tr>
<tr>
<td>7</td>
<td>EHU</td>
<td>28</td>
<td>High</td>
<td>22</td>
<td>Medium</td>
<td>25</td>
<td>High</td>
</tr>
</tbody>
</table>

According to the aforementioned information, the score at the time of the post-test decreased. The patient was then tested once more using the follow-up scale after receiving self-love treatment for a week. The results revealed that 6 individuals saw a drop in their RBP score and 1 subject experienced an increase in their RBP score before the follow-up when the participants were free to naturally engage in their behaviors.

Table 2. Subjects in the control group's pre-test, post-test, and follow-up scores

<table>
<thead>
<tr>
<th>Number</th>
<th>Name</th>
<th>Pre-test</th>
<th>Category</th>
<th>Post-test</th>
<th>Category</th>
<th>Follow up</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>AL</td>
<td>40</td>
<td>Very High</td>
<td>44</td>
<td>Very High</td>
<td>28</td>
<td>High</td>
</tr>
<tr>
<td>2</td>
<td>BF</td>
<td>34</td>
<td>Very High</td>
<td>39</td>
<td>Very High</td>
<td>32</td>
<td>Very High</td>
</tr>
<tr>
<td>3</td>
<td>WAM</td>
<td>29</td>
<td>High</td>
<td>33</td>
<td>Very High</td>
<td>39</td>
<td>Very High</td>
</tr>
<tr>
<td>4</td>
<td>SE</td>
<td>29</td>
<td>High</td>
<td>31</td>
<td>Very High</td>
<td>33</td>
<td>Very High</td>
</tr>
<tr>
<td>5</td>
<td>TT</td>
<td>33</td>
<td>Very High</td>
<td>29</td>
<td>High</td>
<td>36</td>
<td>Very High</td>
</tr>
<tr>
<td>6</td>
<td>NN</td>
<td>28</td>
<td>High</td>
<td>29</td>
<td>High</td>
<td>28</td>
<td>High</td>
</tr>
<tr>
<td>7</td>
<td>AVR</td>
<td>32</td>
<td>Very High</td>
<td>29</td>
<td>High</td>
<td>28</td>
<td>High</td>
</tr>
</tbody>
</table>
The RBP score increased in 4 participants and decreased in 3 subjects, according to the aforementioned statistics. The results revealed that 3 participants saw an increase in their RBP score and 4 subjects experienced a decrease in their RBP score after one week of completing the post-test scale and the follow-up scale, respectively.

The Paired T-Test was used to analyze the data to see if there was a difference between the decrease in RBP scores from before treatment (pre-test) to after treatment (post-test). The results showed a significant difference between the pre-test and post-test values, with a significance value (2-tailed) of \( p = 0.001 < 0.005 \). (see Table 3).

Table 3. Paired T-Test

<table>
<thead>
<tr>
<th>Test</th>
<th>n</th>
<th>Mean (Std. D)</th>
<th>Paired T-test</th>
<th>Sig. (2-tailed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-test</td>
<td>7</td>
<td>32.2857 (5.49892)</td>
<td>5.599</td>
<td>6</td>
</tr>
<tr>
<td>Post-test</td>
<td>7</td>
<td>21.8571 (2.91139)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

\* \( p < 0.005 \) : significance value

As a result, it may be said that the effects of self-love therapy are very different.

The Independent T-Test test was used to assess data on the decline in RBP scores from both groups, the experimental group and the control group to test the hypothesis. But first, a normality test and a homogeneity test that serves as a precursor analytical test must be completed. The Shapiro-Wilk Test was performed in this data's normality test, and the findings revealed that the data were normally distributed (see Table 4). Levene's Test was also used to conduct a homogeneity test, and the findings revealed that the data distribution was homogenous (see Table 4).

Table 4. Independent T-Test

<table>
<thead>
<tr>
<th>Group</th>
<th>n</th>
<th>Mean</th>
<th>Std. D</th>
<th>Shapiro-Wilk Test for Normality</th>
<th>Levene's Test for Equality of Variances</th>
<th>Equal variances assumed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experiment</td>
<td>7</td>
<td>21.86</td>
<td>2.911</td>
<td>.298</td>
<td>.114</td>
<td>4.664</td>
</tr>
<tr>
<td>Control</td>
<td>7</td>
<td>33.43</td>
<td>5.884</td>
<td>.047</td>
<td>.001*</td>
<td></td>
</tr>
</tbody>
</table>

\* \( p < 0.005 \) : significance value

With a significance value (2-tailed) \( p = 0.001 < 0.05 \), the Independent T-Test results revealed a significant difference between the experimental group and the control group (see Table 4). In light of this, it can be said that the experimental group and control group saw a significantly different score drop. Tables 1 and 2 on the post-test results show this. The scores
between the experimental group and the control group differ significantly. At the time of the post-test, the experimental group, or the group that received the treatment, saw a decline in the score. However, because they did not get self-love therapy, the RBP score increased in the control group.

The data were analyzed using repeated measures ANOVA to detect the score decline with time. But first, a preliminary analytical test called the Mauchly's Test needs to be performed. The sig value is then acquired. 0.06 > 0.05, it may be deduced that the study's data satisfy the sphericity variance similarity assumption. The sig value was then acquired in the Sphericity Assumed Test. The sig value was then determined in the Sphericity Assumed Test. is 0.00 < 0.05, indicating that the average decline in RBP scores over time differs significantly from the baseline.

**Table 5. Repeated Measure Anova**

<table>
<thead>
<tr>
<th>Period</th>
<th>Average score drop</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-test – post-test</td>
<td>10.42</td>
<td>0.004</td>
</tr>
<tr>
<td>Pre-test – follow up</td>
<td>12.28</td>
<td>0.006</td>
</tr>
<tr>
<td>Post-test – follow up</td>
<td>1.857</td>
<td>0.305</td>
</tr>
</tbody>
</table>

The information in the table above indicates that:

- The average reduction in RBP score from the start of therapy to the end was 10.42, and the reduction in score was significant due to the sig. 0.004 < 0.05.
- There was an average 12.28 point drop in RBP scores from before therapy to one week after treatment, although this drop in score was not statistically significant due to the sig. 0.006 > 0.05.
- There was a 1.85 average reduction in RBP scores from the end of therapy to one week following treatment, however this reduction in scores was not statistically significant due to the sig. 0.3 > 0.05.

The condition of the subject who was administering the thesis proposal seminar test, which prompted him to put off sleeping, was the source of the minor drop in scores at the time of follow-up. A person's degree of Revenge Bedtime Procrastination can be reduced by self-love treatment, according to the data shown above.

The results of the interviews and observations stated that before doing self-love therapy they did not have a definite sleep schedule, often delayed bedtime, and had irregular sleep patterns. they are also easily distracted by other things when they are sleepy, such as wanting to play smartphones and doing other activities in bed, such as watching movies, making phone
calls, and surfing social media. After doing self-love therapy they experience changes, namely having a regular sleep schedule and sleep patterns. However, they are still easily distracted by other things when they are sleepy. They also said that if they were still doing other activities in bed but reduced and they rarely delayed bedtime.

CONCLUSION

According to the study's findings, self-love therapy can reduce revenge bedtime procrastination. There is evidence that the patient did not have a regular sleep routine before the start of the treatment, frequently delayed going to bed, struggled to stop doing things when it was time for bed, and engaged in numerous other activities outside of sleeping in bed, such as playing smartphones. After finishing the self-love therapy, the subject has a normal bedtime, which is between 9 and 11 p.m. and 4.30 and 5 a.m. They seldom even postpone bedtime from the scheduled time, can quickly cease performing activities if it is time for bed, and only engage in sleeping in bed. Thus, it may be inferred that self-love therapy has the ability to lessen the degree of revenge bedtime procrastination. This is by research done by Maulita (2020), which found that all negative behaviors that might harm mental health can be minimized by practicing self-love. However, because the subject delayed going back to sleep after the post-test to complete the proposal seminar exam, there was a negligible drop in the score when follow-up data was collected.

This research has had an impact on psychology in the form of developing therapeutic methods for revenge bedtime procrastination behavior, namely in the form of self-love therapy which can be used as a reference for future researchers or psychological scientists.

REFERENCES


