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Implementation of Diagnostic Strategies in Arabic Language Learning

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Abstract: This study discusses the application of diagnostic strategies in Arabic language learning. Diagnostic strategies are an essential learning approach in Arabic language teaching. This approach allows teachers to design teaching that is adaptive and based on student needs. Proper diagnosis will result in more meaningful learning and optimal learning outcomes. The advantages of this approach are that if the learning material is mastered by students or cannot be seen so that it is easier to identify it and the method used to overcome students who do not understand the concept well, while the disadvantage lies in the long preparation, requiring specific teacher skills, limited availability of tools and instruments and suboptimal further implementation. Diagnostic strategies can increase learning motivation because students feel helped according to their needs, encourage active and reflective learning, reduce the rate of errors in language use, both oral and written, and accelerate the achievement of basic language learning competencies.

Keywords: Diagnostic strategies, arabic language, arabic learning.

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INTRODUCTION

Learning Arabic, with its various characteristics and motivation to learn it among non-Arab people or in this case intended for Indonesians, still has many obstacles and problems faced because Arabic is not an easy language to master totally. The problems that usually arise in learning Arabic for non-Arabs are divided into two problems; linguistic and non-linguistic problems. Those that include linguistic problems are sound, vocabulary, sentence and writing. Meanwhile, the most important non-linguistic problem is the problem related to the sociocultural differences between Arab and non-Arab people.

Strategy is one of the things that must be done in carrying out every action. Because by carrying out a strategy, you will get results that are in accordance with what will be achieved. Strategies in learning can increase motivation and effectiveness in conducting learning so that in situations and conditions, learning strategies can make

students get improvements in both their cognitive and intellectual abilities. Strategy is one of the discourses that is often highlighted in language learning systems, especially Arabic. The success or failure of a language learning program is always judged by the learning strategy used, because it is the strategy that determines the achievement of the content and how to teach the language.

Learning Arabic is inseparable from an approach that is adaptive to the conditions and needs of students. One of the strategic approaches in this regard is the use of diagnostic strategies. This strategy plays an important role in helping teachers understand the extent of students' abilities and what difficulties they experience in learning Arabic, both in the aspects of listening (*istima'*), speaking (*kalam*), reading (*qira'ah*), and writing (*kitabah*). Without a diagnostic strategy, the learning process is at risk of being general and does not touch the actual needs of the students. Therefore, teachers need to implement diagnostic measures to design targeted and effective learning. In education, the goal is to understand whether students need additional help on a particular topic, while in the health field, this assessment can be helpful in diagnosing physical or mental conditions that require special treatment. Overall, diagnostic assessments aim to create a solid foundation for better decision-making and improve desired outcomes.

The general purpose of diagnostic assessment is to identify the competencies, strengths, weaknesses of learners as well as needs or problems faced by individuals at the beginning of a process, be it in the context of education, health, or work. In education, the goal is to understand whether students need additional help on a particular topic (Sufyadi et al., 2021). Diagnostic assessments are divided into non-cognitive diagnostic assessments and cognitive diagnostic assessments. The objectives of the non-cognitive diagnostic assessment are 1) to know the psychological and social emotional well-being of students, 2) to know activities while studying at home, 3) to know the condition of the student's family, 4) to know the student's social background, and 5) to know the student's learning style, character, and interests. Meanwhile, the objectives of cognitive diagnostic assessments include, 1) identifying student competency achievements, 2) adjusting learning in the classroom to the average competency of students, 3) providing remedial classes or additional lessons to students whose competencies are below average (Ministry of Education and Culture, 2022). With the right implementation, diagnostic assessments can help various parties in making better decisions and provide effective solutions according to individual needs.

METHODS

This article raises a qualitative approach through field research activities to investigate the application of diagnostic strategies in Arabic language teaching. This option was chosen so that researchers can capture a richer nuance of what is happening in the classroom, especially in terms of how teachers recognize and overcome learning obstacles faced by their students (Creswell, 2014). In the context of this study, diagnostic strategies are interpreted as a sequence of planned steps taken by teachers to capture learning needs, diagnose errors, and present appropriate learning responses (Black & Williams, 1998). Thus, the focus of research is directed at the dynamics of learning that take place naturally in the classroom, rather than testing the effects of a particular intervention.

This research was conducted in a private aliyah madrasah located in West Java and has adopted a diagnostic approach in the teaching of Arabic. This location was chosen based on certain considerations, namely: (1) the Arabic teacher concerned already has at least three years of teaching experience, (2) diagnostic methods are consistently applied in teaching and learning activities, and (3) documentation of diagnostic results is available that can be analyzed. In the context of this study, the main subjects consisted of Arabic teachers and grade XI students. Teachers are designated as key informants because they directly

master the implementation of the strategy in the classroom. On the other hand, students are involved so that researchers can hear directly their views on the impact of the strategy on the learning process they are going through. The selection of informants is carried out by easy purposive sampling to ensure that the data obtained is relevant and rich in information (Sugiyono, 2019).

Information collection in this study relies on three main methods: observation, in-depth interviews, and document analysis. First, the researcher conducts direct observation during the learning process. In this way, researchers can observe the strategies that teachers use to identify students' learning difficulties as well as see how students respond to the findings expressed by teachers. Furthermore, in-depth interviews were conducted with a number of teachers and students who were identified as facing problems in Arabic lessons. The goal is to gather their subjective views on the obstacles faced. As a complement, documents such as formative assessment results, evaluation sheets, and diagnostic instruments are also analyzed so that the data obtained is more comprehensive through triangulation techniques.

The analysis of all data was carried out with reference to the interactive model developed by Miles and Huberman (1994). The analysis process is divided into three major steps: data reduction, data presentation, and conclusion drawing while verifying. In the reduction stage, the researcher filters the information that is considered important, groups the data into specific categories, and then provides thematic codes to make them easier to remember and organize. After the stage is completed, the encoded data is presented in the form of a descriptive narrative. The presentation in narrative format aims to show the patterns that emerge during teaching and learning activities. Finally, conclusions are drawn based on the alignment and consistency found from the various data sources that have been analyzed.

To ensure the accuracy of the data collected, the researcher applied triangulation techniques from various sources as well as from various methods. Source triangulation is carried out by comparing information obtained from teachers, students, and various related learning documents. Meanwhile, the triangulation method was carried out by combining direct observation activities, in-depth interviews, and documentation review. Data validation is also strengthened by the member check technique, where researchers reconfirm initial findings to the main informant so that the information collected remains authentic and reliable (Moleong, 2018). This combination approach was chosen to answer a number of key questions regarding the application of diagnostic strategies by teachers, the challenges they face on a daily basis, and the impact of these strategies on students' Arabic language proficiency. The researcher hopes that the results of this study can later make a practical contribution to the development of Arabic teaching methods that are more responsive to the needs of students, as well as strengthen the existing literature on diagnostic assessments in the context of language education (Brown, 2004).

RESULTS

Data collected during the investigation revealed that Arabic teachers in the selected schools applied diagnostic techniques consistently and deliberately throughout the teaching cycle. These techniques are derived from simple initial assessments conducted in the opening session, allowing educators to gauge students' basic knowledge before introducing new content. Given those initial results, teachers classified students into tiers labeled "proficient," "moderately proficient," and "in need of intensive support." This graded classification then directs a choice of different teaching strategies. Throughout the actual lesson delivery, teachers rely on open-ended questions and analytical exercises to delve deeper into specific areas of students' difficulties. For example, in the unit on the number of ismiyyah and the number of fi'liyyah: students are asked to translate sentences into English and then break down the grammatical components of the original text in Arabic. The quality of their answers serves as a real-time indicator of their understanding of the underlying

sentence structure. Whenever a misunderstanding arises, the teacher refrains from giving immediate corrective feedback. Instead, students are encouraged to self-examine their responses, so they internalize the diagnostic process and engage in a form of self-directed learning.

The daily evaluation sheet serves as a low-risk indicator of student understanding, featuring not only standard multiple-choice items but also open-ended reflective questions. Students indicate which segments of the lesson were memorable for them and which ones made them doubtful. In return, this real-time feedback informs the design of targeted remedial workshops scheduled outside of conventional classroom hours. During this workshop, students are grouped based on the specific difficulties they face—whether it's morphological errors, misinterpretations of context, or vocabulary gaps. Further investigation emphasizes that the strength of these diagnostic measures depends on teacher preparation, especially related to lesson design and classroom management flexibility. Instructors who design their own diagnostic tools and often fall back on learning data tend to rotate their pedagogical strategies more effectively. In contrast, peers who rely entirely on routine quizzes often operate without clear knowledge of the student's cognitive pathway and consequently struggle to carry out interventions with appropriate timeliness.

Students generally report feeling more supported after teachers begin using diagnostic strategies, as the specific challenges they face are acknowledged and addressed. Those who previously thought classical Arabic texts were scary began to make real progress, especially in breaking sentence patterns and unraveling implicit meanings. Students mentioned that lessons now feel less like a race to memorize rules and more like a tailored experience where they can see grammar applied practically. However, the application of this diagnostic tool is not without obstacles. Short class periods often leave insufficient time for thorough assessment, and the sizable range of abilities within a group makes it difficult to find common problem points. Adding to the difficulty is the lack of commercially available diagnostic tests designed specifically for the Arabic language, which forces teachers to design their own checklists from scratch, relying heavily on their own assessment and classroom experience. In summary, the evidence suggests that a targeted diagnostic approach can significantly improve Arabic language teaching, especially in terms of grammar and reading skills. By illuminating the individual needs of students, this strategy allows teachers to improve their lessons and make them feel relevant. The end result is not only a stronger mastery of language structures but also increased student interest and motivation.

DISCUSSION

The steps or process of implementing diagnostic assessments are carried out in stages so that the results obtained can truly describe the condition of the individual being assessed. The first step is usually to identify the objectives of the assessment, which is to determine what the individual wants to know, for example whether there are difficulties in understanding the subject matter or obstacles in certain skills. After the goal is clear, the next step is to collect information, which can be done through various methods, namely: 1) Initial Diagnostic Test (Pre-Test): The teacher gives questions or assignments related to the competencies to be taught, to measure the readiness of students; 2) Observation and Anecdotal Notes: Observe the learning process of students to see signs of difficulties, both cognitive and affective; 3) Interviews and Questionnaires: Used to dig deeper into information from the student's side directly; 4) Error Analysis: Analyze linguistic errors that often occur in Students; 5) Learning Intervention Planning: Develop learning steps based on diagnostic findings such as remedial, tutoring, and enrichment.

Once the data is collected, the next stage is to analyze the results to look for patterns or problems that arise. At this stage, the results of the assessment are compared with the

standards or expectations that have been set beforehand. If a gap is found, it will be easier to determine the corrective steps that need to be taken. Based on this analysis, the next step is to develop a strategy or follow-up plan that suits individual needs. For example, teachers can design teaching methods that are more suitable for the learning styles of students who are experiencing difficulties. The final stage in this process is evaluation and monitoring, where the individual's development is continuously observed to ensure that the strategies implemented are truly effective. If necessary, adjustments can be made so that the end goal can be achieved properly.

These diagnostic test steps are not much different from the usual test preparation stage. The difference between diagnostic tests and non-diagnostic tests is mainly differentiated in the purpose of its implementation, because there are no systematic steps that teachers must follow in carrying out diagnostic tests, researchers consider it necessary to develop a diagnostic test system that is easy to use by teachers and students, this system is expected to be able to show the learning difficulties of each student in basic vocational competencies. By knowing the difficulty of learning each student in basic vocational competencies, teachers can conduct remedi learning to each student appropriately, so that all students can master basic vocational competencies as a whole.

In the field of education, diagnostic assessments are often used by teachers at the beginning of the school year or before starting a new material. For example, an Arabic teacher can give students an initial test to find out their understanding of basic concepts of learning Arabic before moving on to more complex material. That way, teachers can adjust teaching methods according to the needs of each student, whether they need reinforcement of basic concepts or higher challenges. Diagnostic strategies can be applied in a variety of language skills, such as: 1) *Istima'* (Listening). The teacher provides audio recordings and measures students' ability to understand content and vocabulary; 2) *Qira'ah* (Reading). Students are given Arabic texts and tested for comprehension through comprehension questions; 3) *Kalam* (Speaking): Done with simple dialogue to find out the ability of sentence structure and pronunciation; 4) *Kitabah* (Writing). Students write short essays, then analyze the structure, spelling, and vocabulary usage. Through this strategy, teachers can determine whether students need additional guidance in certain aspects or can move on to the next material.

Gagné, R. M. (1985) Explaining that effective learning starts from the analysis of the student's initial condition (diagnosis), diagnostic strategies help identify the location of students' learning difficulties specifically, both in cognitive, affective, and psychomotor aspects. With the results of this diagnosis, teachers can arrange learning that is more suitable for students' needs. Trianto. (2010) Arguing that remedial learning must be based on diagnosis results to be effective. By knowing exactly the weaknesses of students, teachers can design remedial programs that are right on target. This has an impact on increasing the understanding of concepts that were previously not understood.

Arikunto, S. (2009) also stated that the diagnosis of learning difficulties is the first step in improving student learning outcomes. Diagnostic strategies allow teachers to provide timely and methodical interventions, so that students who are experiencing difficulties can be helped immediately. As a result, there is a significant increase in grades or learning achievements. Slavin, R. E. (2006) also emphasized the importance of diagnostic assessments to make learning more adaptive and can prevent early learning failure.

The results of the study show that diagnostic strategies have a significant positive impact on student learning outcomes because it allows teachers to identify and address

learning difficulties early and on target can increase learning motivation because students feel helped according to their needs, encourage active and reflective learning, reduce the rate of errors in the use of language, both oral and written, and can accelerate the achievement of basic competencies language learning. Diagnostic tests are of two types, namely noncognitive diagnostic tests and cognitive diagnostic tests. (a) Tes diagnostik non kognitif. A non-cognitive diagnostic test is a test used to find out the psychological and emotional state of a student before starting learning. This test can also be used to find out students' learning activities while at home, students' family and social conditions, as well as students' learning styles, characters, and interests. In its implementation, non-cognitive diagnostic tests consist of three stages, namely preparation, implementation, and follow-up.

In addition, the implementation of non-cognitive diagnostic tests also requires teachers' skills in asking and making questions. This is because not all students can provide detailed information, especially related to their personal lives, such as family conditions and their relationships with parents and friends. (b) Cognitive diagnostic tests. Cognitive diagnostic tests are diagnostic tests that are performed to diagnose a student's basic abilities in a subject's topic. This test can be done regularly, when the teacher introduces a new learning topic or after it. Cognitive diagnostic tests can also be done in the middle or end of the semester in the form of an exam known as a summative assessment. Keep in mind, that teachers conduct this test not to pursue the curriculum target, but to adjust the learning level to the student's ability. In its implementation, this cognitive diagnostic test consists of four stages, namely preparation, implementation, diagnosis, and follow-up.

Advantages of Diagnostic Tests. Diagnostic tests can be used to identify students' problems or difficulties and can be used to plan follow-up efforts in the form of efforts to solve the problems or difficulties that have been identified. By using diagnostic tests, the learning materials that students have mastered or cannot be seen so that it is easier to identify them and the methods used to deal with students who have not yet and do not understand the concepts are more precise. Diagnostic tests to identify misconceptions can be carried out by interviews, open-ended tests, multiple-choice tests, multiple-tier tests, namely two tiers, three tiers and four tiers, and others. These tests have the advantages of each of the results of their identification. Identifying misconceptions using three-tier diagnostic tests has more advantages than two-tier tests, as it is able to distinguish students who lack knowledge based on students' beliefs when answering questions in one tier and two tiers. Because this level of belief also affects the calculation of misconceptions and concepts that students master. A diagnostic test is a test used to find out a student's weaknesses and strengths when learning something. One of the diagnostic tests that can be used to identify student misconceptions is the Four Tier Diagnostic Test. According to Fratiwi, a more accurate diagnostic test in diagnosing student miscopense is a diagnostic test in the format of a font test.

Disadvantages of diagnostic tests. It takes quite a lot of time. A thorough diagnosis process takes time, from compiling diagnostic tests, making observations, to analyzing results and designing follow-ups. In the midst of limited Arabic lesson hours, teachers often find it difficult to implement this strategy to the fullest. Requires specific teacher skills. Not all teachers have the skills to make an accurate diagnosis of learning difficulties. It requires an in-depth understanding of assessment methods, error analysis, and differentiated learning planning.

Availability Tools and instruments are limited. In Arabic learning, valid and reliable diagnostic tools such as standardized questions, skills assessment rubrics, or interview instruments are sometimes not available, especially in schools with limited resources, At risk of stigma against students. If the diagnosis is not communicated in an appropriate manner, students who are identified as having learning difficulties may feel inferior or stigmatized by peers. Therefore, teachers must be careful in conveying the results of the diagnosis, further implementation is not optimal. Good diagnostic results are not always followed by appropriate learning actions, such as remedial learning that is not carried out consistently. This can happen due to the administrative burden of teachers or lack of support from educational institutions. Limitations in capturing non-academic factors. Diagnostic strategies tend to focus on the cognitive aspects of students. In fact, obstacles to learning Arabic can also come from affective factors (motivation, attitude), social, and psychological factors that are not easily diagnosed with common instruments.

CONCLUSION

Diagnostic strategies in learning are approaches that teachers take to identify students' initial abilities, difficulties, and potentials before and during the learning process. Diagnostic strategies are systematic efforts to find the source of students' learning difficulties so that appropriate solutions can be provided. Diagnostics is a type of test designed to make it easier for teachers to identify weaknesses and strengths that students have in learning. Diagnostic Analysis is very necessary as an alternative in an effort to solve a problem experienced by a group or individual, starting with carefully recognizing the object, identifying the problem and then deciding on the best possible solution that suits the problem. Problems in learning are often called learning difficulties. Quality learning is highly dependent on student motivation and teacher creativity. Learners who have high motivation supported by teachers who are able to facilitate this motivation will lead to the success of achieving learning targets. The advantages of this approach include tests used to find out students' weaknesses and strengths when learning something. One of the diagnostic tests that can be used to identify student misconceptions is the Four Tier Diagnostic Test. According to Fratiwi, a more accurate diagnostic test in diagnosing student miscopense is a diagnostic test in the format of a font test. Diagnostic strategies can increase learning motivation because students feel helped according to their needs, encourage active and reflective learning, reduce the rate of errors in language use, both oral and written, and accelerate the achievement of basic language learning competencies.

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