

Effects of Islamic Spiritual Mindfulness on Stress among Nursing Students

Badrul Munif¹, Sri Poeranto¹, Yulian Wiji Utami¹

¹ *Department of Nursing, Brawijaya University, Indonesia*
Corresponding Author: Badrul Munif (munifbadrul2@gmail.com)

Received: 4 March 2019

Revised: 29 May 2019

Accepted: 13 June 2019

ABSTRACT

Background: Academic stress is a major problem that often occurs in nursing students. Islamic spiritual mindfulness (ISM) is an adaptive coping strategy which can be used to mitigate various negative psychological reactions to respond stressors experienced by the body to build self-awareness that it is Allah (God) who determines problems that any individuals experience today.

Purpose: This study aimed to determine the effects of Islamic spiritual mindfulness on reducing stress among nursing students.

Methods: The present study used a pre-post quasi-experimental design with a control group. The participants were 36 students of bachelor of nursing who are Muslim and experienced stress in working on their thesis. The participants were assigned to two groups: the experimental group receiving Islamic spiritual mindfulness and the control group. Data were collected using questionnaires of Depression Anxiety Stress Scale (DASS) and analysed using paired t-test and unpaired t-test.

Results: The results showed that the mean of stress level of students in the intervention group decreased from 20.6 ± 2.97 to 11.4 ± 5.81 after the intervention. Meanwhile, in the control group, the mean of student stress level slightly decreased from 19.7 ± 2.82 to 17.8 ± 5.01 . The t-test obtained a p-value of 0.001, indicating that there were significant differences in stress levels between the intervention group and the control group. The effect size obtained the value of 0.59, meaning the level of influence was in the medium category.

Conclusion: This study concluded that Islamic spiritual mindfulness was effective in reducing stress among nursing students working on the thesis. It is recommended for the nursing profession, especially mental health nurses, to apply Islamic spiritual mindfulness therapy as one of the psychotherapy interventions.

Keywords: Islamic spiritual mindfulness; nursing students; stress; thesis

BACKGROUND

Mental health is a healthy condition of emotional, psychological, and social aspects, which is evident from the condition of satisfying interpersonal relationships (Videbeck, 2011). WHO (2018) reported that approximately 300 million of people experience depression, 60 million experience bipolar disorder, 23 million are affected by schizophrenia, and 50 million are affected by dementia. The prevalence of mental disorder, such as mental-emotional disturbance in Indonesia is still high at 6.0% of the

total population of Indonesia, and in Jakarta, approximately 5.7% of the population over the age of 15 years had a mental disorder with symptoms of emotional stress, anxiety, and depression (Ministry of Health Republic of Indonesian [MOH RI], 2013). American Psychological Association [APA] explains that stress is a major contributor to mental illness emotionally and physically to everyone at all ages (APA, 2012). Mahmoud, Staten, Hall, and Lennie (2012) stated that conditions of uncontrollable stress would cause anxiety disorders and anxiety disorders which are not well managed can contribute to the onset of depression. Stress, anxiety, and depression are forms of mental-emotional disorders that often occur in students (Zakiyah, 2016).

Research of the latest epidemiological data conducted in baccalaureate nursing students in Hong Kong indicated that the prevalence of students who experience mild to severe stress was 41.1% from 661 students (Cheung et al., 2016). A study by Rizvi, Qureshi, Rajput, and Afzal (2015) on 60 medical students in Islamabad Pakistan also found the prevalence of stress of 50%. These findings are consistent with the research of Wardi (2016) that the academic demands are major stressors on students, one of which is the load of paper. A thesis is one of the requirements that must be met to obtain academic degrees at undergraduate level (Ministry of Research, Technology and Higher Education, 2017). Regarding the thesis, a study by Sudarya, Bagia, and Suwendra (2014) found that the most dominant factor affecting the stress among the students in the preparation of the thesis are internal factors such as physical condition, behavior, interests, emotional intelligence, intellectual, and spiritual intelligence, and also external factors such as extra duty, friends, faculty counselors, and family. These factors affect a series of psychological response which requires adaptation, causing the pressure inside the students that causes stress.

Zakiyah (2016) identified the characteristics of the stress level among students who were doing a thesis in Jakarta and found that the majority of students experienced moderate levels of stress (46%). Wardi (2016) conducted a study to describe the conditions of stressed students in completing their thesis in views of physiological reaction, psychological, cognitive, and behavioural aspects. The study found that 35.5% of students experienced moderate stress levels, 40% had moderate physiological stress reaction, 38% had moderate psychological stress reactions, 35.5% had moderate cognitive stress reactions, and 38.7% had moderate behavioural stress reactions. In a preliminary study conducted by the researchers in June 2018, involving ten nursing students working on the thesis at a school of health in Banyuwangi, it was found 30% of students experienced moderate stress levels and 20% experienced severe stress levels. Stress on students in doing thesis may result in delayed of graduation (Gamayanti, Mahardianisa, & Syafei, 2018).

Mindfulness is one of the interventions which can be used to deal with stress among students. Mindfulness is an exercise to be aware of the condition that an individual experienced at this time to make the objectives and focus on solving the problems faced (Dwidiyanti, Pamungkas, & Ningsih, 2018). One of the forms of mindfulness is Islamic spiritual mindfulness. High levels of mindfulness are associated with high Muslim spiritual welfare (Fourianalistyawati, 2017; Thomas, Furber, & Gray, 2018). Islamic spiritual mindfulness is a supportive educative action to build self-awareness that the

problem an individual is experiencing today is the scenario of Allah, and Allah is most capable one to cope with it. Islamic spiritual mindfulness is expected to bring a sense of always being watched by the God, introspection, reception, surrendered (resignation), invoke the aid of the Almighty God (prayer) and the spirit out of conscience to encourage perpetrators to good deeds. These are effective issues to cope with stress coping in Islamic spiritual mindfulness (Dwidiyanti, Fahmi, Ningsih, Wiguna, & Munif, 2019). Islamic spirituality is a *dawafi* spirit that is motivation and tendency soul that Allah has bestowed the human soul to always encourage any individuals to the good deeds which are beneficial to himself and others (Al-Jauziyyah, 2004). Islamic spiritual therapy including mindfulness has been proven to be effective on preventing depression and other psychological disorders (Razak, Mokhtar, & Solomon, 2013), and reducing stress (Kang, Choi, & Ryu, 2009; Song & Lindquist, 2015).

There is a need to investigate the effects of mindfulness intervention based on Islamic spirituality on decreasing stress as such intervention has not been extensively practiced. Mindfulness interventions that have been developed at this time are Christian spiritual mindfulness (Cernetic, 2018), and recently, spiritual mindfulness-based interventions based on Hinduism values with Gayatri mantra has been implemented and proved to have a significant effect on the reduction of anxiety and stress among Hindus (Candrawati, Dwidiyanti, & Widyastuti, 2018). The evidence of the implementation of Islamic spiritual mindfulness to decrease stress in students working on their theses is limited. Therefore, it is necessary to investigate how Islamic mindfulness affects the stress among the students working on the thesis.

PURPOSE

This study aimed to determine the effects of Islamic spiritual mindfulness therapy on reducing stress among nursing students working on the thesis.

METHODS

Research design and samples

This study used a pre-post quasi-experimental design with a control group. The samples were 36 nursing students who were working on the thesis. The samples were divided into two groups, namely the experimental group that received the intervention of Islamic spiritual mindfulness (n=18), and the control group that did not accept the intervention (n=18). A purposive sampling method was used to recruit the samples. The inclusion criteria were final year nursing students working on the thesis assignment and experienced stress. The exclusion criteria were final year nursing students experiencing stress in the completion of the thesis who had other stress management therapies and experienced further mental-emotional disorders such as anxiety and depression.

Measurement

Before the study, the researchers conducted an initial screening using the DASS 42 (Depression Anxiety Stress Scales) to determine the level of stress among students subjectively, with the criteria for stress levels, i.e., a normal stress (0-14), mild level (15-18), moderate level (19-25), severe level (26-33) and very severe level (>34). The DASS questionnaire was given to 95 final-level of nursing students who were working on the thesis, and 36 participants who met the inclusion criteria were recruited.

Intervention

The intervention in this study was the Islamic spiritual mindfulness which was given in five sessions for five days with a duration of 20 minutes each. In each session, the participants did the following activities: (1) raising the desire to develop spiritual energy and spirit of worship, (2) analyzing the problem for introspection, (3) developing full awareness of mistakes, (4) feeling the heart' response, (5) dzikr, (6) acceptance, and (7) relaxation.

Data analysis

The Saphiro-wilk test was used to find out the distribution of data in each group. The collected data were further analysed using the t-test and unpaired t-test.

Ethical consideration

This research has received an ethical approval from the research ethics committee of Universitas Brawijaya Malang-Indonesia with number 351/EC/KEPK-S2/12/2018.

RESULTS

General characteristics of participants

The general characteristics of respondents were based on gender, age, and stress level. In this study, it was found that the characteristics of participants in the experimental group and the control group by sex were mostly female 29 (81%), the mean age was 21.56 years old (0.65) and mean of stress were 21.17 (2.89) (Table 1).

Differences in the mean score of stress before and after intervention in the experimental group and control group

Based on Table 2, there was a difference in the mean score of stress in the intervention group between before and after the intervention with a difference of 9.2, and the results of further analysis obtained a p-value of 0.000 ($p < 0.05$). Furthermore, there was also a difference in the mean score of stress between before and after the treatment in the control group with a difference of 1.9, and the results of further analysis obtained a p-value of 0.148 ($p > 0.05$)

Table 1. *General characteristics of respondents (n=36)*

Variable	<i>f</i>	%
Gender		
Male	7	19
Female	29	81
Age (21.56±0.65)		17
23 years old	6	50
22 years old	18	33
21 years old	12	
Stress (21.17±2.89)		0
Normal (0-14)	0	28
Mild (15-18)	10	67
Medium (19-25)	24	5
Severe (26-33)	2	0
Very Severe (>33)	0	0

Table 2. The mean score of stress before and after the intervention

Group	Time	Mean	SD	Difference	95% confidence		t	p
					Lower	Upper		
Experimental	Pre test	20.6	2.97	9.2	6.89	11.55	8.37	0.000
	Post test	11.4	5.81					
Control	Pre test	19.7	2.82	1.9	-0,76	4.65	1.52	0.148
	Post test	17.8	5.01					

Differences in the mean score of stress after intervention in the experimental group and control group

Based on Table 3, it can be explained that there were significant differences in the mean score of stress between the two groups. The experimental group has a mean score of 11.4, and has a difference of 9.2, which is higher than the control group. A further analysis obtained $p=0.000$ ($p<0.05$). The effect size score was 0.59, indicating that the effect of Islamic spiritual mindfulness on the decrease of stress among nursing students working on the thesis was in the moderate category.

Table 3. The difference in the mean score of stress after the intervention

Group	Mean	SD	Difference	95% Confidence		t	p	ES
				Lower	Upper			
Experimental	11.4	5.81	9.2	-10.06	-2.71	-3.53	0.001	0.59
Control	17.8	5.01	1.9					

DISCUSSION

Working on a thesis for university students may result in stress. The level of stress can be in the moderate category (Gamayanti Mahardianisa, & Syafei, 2018; Zakiyah, 2016). In this study, it was found female students tend to have more opportunities to get stressed. Videbeck (2011) stated that the stress disorder is more often experienced by women. In her study, Zakiyah (2016) reported that characteristics of nursing students experiencing stress were aged 21-23 years, female gender (78%), and the level of stress was moderate (52%). These findings are in accordance with the results of the present study, in which the majority of respondents' gender was female as many as 28 (78%), the mean of age was 22 years old (50%) and the majority experienced stress in moderate category as many as 24 (67%). Calvarese (2015) reported that there were significant differences between male and female students to stress reactions. Women experience more stress reactions at a higher level of depression, frustration, and anxiety than men. This is because women tend to put forward feelings rather than rational so that it makes women more difficult to forget it when experiencing academic failure (Matud, 2004; Rivera-torres, Araque-padilla, & Montero-simó, 2013).

Pursuing higher education to college is a priority of young adults. Stuart (2007) stated that age could affect the individuals in the face of stressors, as age is one factor that can affect an individual's coping. College students are individuals at adulthood (18-24

years). At this age, the students tend to use maladaptive coping mechanisms when faced with the stressor; therefore, it is very easy for the students to experience stress (Krisdianto & Mulyanti, 2015). Maladaptive coping is performed by ignoring stress, avoiding others, blaming others, consuming alcohol, quitting the study, and suicide (McCarthy et al., 2018).

This study showed that Islamic mindfulness could reduce the stress among the students. This result is in accordance with the opinion of Lazaridou and Pentaris (2016) who said that the mindfulness therapy performed by enhancing spiritual values is very effective, as mindfulness is closely related to spirituality, and both have strong relationships, since this mindfulness-based intervention originates from the eastern spiritual traditions, especially Buddhism (Thomas, Raynor, & Bakker, 2016). This statement is also supported by a study of Sadipun, Dwidiyanti, and Andriany (2018) which reported that spiritual-based mindfulness intervention had a significant effect on improving emotional control of adult patients with pulmonary TB, in addition to its effective stress reduction. Another study also found that controlling anger and calm the heart of schizophrenic clients through spiritual mindfulness could decrease with the risk of violent behavior (Sari & Dwidiyanti, 2014).

Mindfulness-based interventions, in addition to effectively lowering stress spiritual, have also proven effective in controlling anger and reassurance to clients schizophrenia with the risk of violent behaviour (Sari & Dwidiyanti, 2014). Islamic spiritual is proven effective to give influence on the prevention of depression and other psychological disorders. Spiritual therapy aims to build a sense of self-acceptance so that the client does not feel depressed anymore. Even otherwise, the client will be able to express his feelings to life and better mental health. The spiritual approach plays an important role in expressing feelings and provide comfort for the client. Acceptance of ill will encourage the individual client to be closer to God and accept the illness as a trial from God. In the Islamic spiritual therapies, the heart and the mind as a therapeutic target in dealing with various psychological diseases (Mardiyono et al., 2011; Razak et al., 2013).

This study has the limitation that it was implemented in a small sample size. Furthermore, the researchers could not able to control several confounding factors which might influence the results of the study. Further research may be conducted in a larger sample and control the factors influencing the intervention.

CONCLUSION

There were differences in the mean score of stress levels between the groups receiving Islamic spiritual mindfulness, and the group which did not receive such treatment. The experimental group receiving Islamic spiritual mindfulness showed a higher decrease of stress levels than the control group. Based on the results, it is recommended that nurses apply Islamic spiritual mindfulness therapy as one of the psychotherapy interventions to provide the first treatment to clients who experience stress. Nurses can work with educational institutions to open opportunities to provide psychotherapy interventions to deal with students who experience stress due to academic burdens.

ACKNOWLEDGMENT

The authors would like to thank students for their participation in this study.

CONFLICT OF INTEREST

The authors declare no conflict of interest.

REFERENCES

- Al-Jauziyyah, I. Q. (2004). *Kunci kebahagiaan [The key to happiness]*. (A. H. Al-Katani, H. K. S.S., M. K. R. SHi, & S. Habibullah Rasidin, Lc, Eds.). Jakarta: Akbar Media Eka Sarana.
- American Psychological Association [APA]. (2012). Guidelines for lesbian, psychological practice with gay, and bisexual clients. *American Psychologist*, 67(1), 10–42. doi: 10.1037/a0024659
- Candrawati, A. K., Dwidiyanti, M., & Widyastuti, R. H. (2018). Effects of mindfulness with Gayatri mantra on decreasing anxiety in the elderly. *Holistic Nursing and Health Science*, 1(1), 35-45.
- Calvarese, M. (2015). The effect of gender on stress factors: An exploratory study among university students. *Social Science*, 4(4), 1177-1184. doi: 10.3390/socsci4041177
- Cernetic, M. (2018). Mindfulness in Christian spiritual practices and connections with psychotherapy. *Journal of Spirituality in Mental Health*, 13, 99-123.
- Cheung, T., Wong, S. Y., Wong, K. Y., Law, L. Y., Ng, K., Tong, M. T., ... Yip, P. S. F. (2016). Depression, anxiety, and symptoms of stress among baccalaureate nursing students in Hong Kong: A cross-sectional study. *International Journal Of Environmental Research and Public Health*, 13(8), 1-25. doi: 10.3390/ijerph13080779
- Dwidiyanti, M., Fahmi, A. Y., Ningsih, H. E. W., Wiguna, R. I., & Munif, B. (2019). *Seni mindfulness spiritual Islam [The arts of Islamic spiritual mindfulness]* (1st ed.). Semarang: UNDIP Press.
- Dwidiyanti, M., Pamungkas, A. Y. F., & Ningsih, H. E. W. (2018). *Mindfulness caring pada stress [Mindfulness caring on stress]* (1st ed.). Semarang: UNDIP Press.
- Fourianalistyawati, E. (2017). Kesejahteraan spiritual dan mindfulness pada majelis sahabat shalawat [Spiritual welfare and mindfulness at the assembly of friends companions]. *Journal Psychologist Islam*, 3(2), 79-85.
- Gamayanti, W., Mahardianisa, M., & Syafei, I. (2018). Self-disclosure dan tingkat stres pada mahasiswa yang sedang mengerjakan skripsi [Self-disclosure and stress levels for students who are working on a thesis]. *Jurnal Ilmiah Psikologi*, 5(1), 115. doi: 10.15575/psy.v5i1.2282
- Kang, Y. S., Choi, S. Y., & Ryu, E. (2009). The effectiveness of a stress coping program based on mindfulness meditation on the stress, anxiety, and depression experienced by nursing students in Korea. *Nurse Education Today*, 29(5), 538–543. doi: 10.1016/j.nedt.2008.12.003
- Krisdianto, A., & Mulyanti, M. (2015). Mekanisme koping dengan tingkat depresi pada mahasiswa tingkat akhir [Coping mechanism with depression level on last level students]. *Jurnal Keperawatan dan Kebidanan Indonesia*, 3(2), 71-76. doi: 10.21927/jnki.2015

- Lazaridou, A., & Pentaris, P. (2016). Mindfulness and spirituality: Therapeutic perspectives. *Journal Person-Centered & Experiential Psychotherapies*, 44(0), 1-21.
- Mahmoud, J. S. R., Staten, R. T., Hall, L. A., & Lennie, T. A. (2012). The relationship among young adult college students' depression, anxiety, stress, demographics, life satisfaction, and coping styles. *Issues in Mental Health Nursing*, 33(3), 149-156. doi: 10.3109/01612840.2011.632708.
- Mardiyono, Songwathana, P., & Wongchan. (2011). Spirituality Intervention and Outcomes : Corner stone of Holistic Nursing Practice. *Nurse Media Journal of Nursing*, 1(January), 117-127.
- Matud, M. P. (2004). Gender differences in stress and coping styles. *Personality and Individual Differences*, 37(7), 1401-1415. doi: 10.1016/j.paid.2004.01.010
- McCarthy, B., Trace, A., O'Donovan, M., Brady-Nevin, C., Murphy, M., O'Shea, M., & O'Regan, P. (2018). Nursing and midwifery students' stress and coping during their undergraduate education programmes: An integrative review. *Nurse Education Today*, 61, 197-209. doi: 10.1016/j.nedt.2017.11.029
- Ministry of Health Republic of Indonesian (MOH RI). (2013). *Riset Kesehatan Dasar [Basic health research]*. Retrieved from <http://www.depkes.go.id/resources/download/general/HasilRiskasdas2013.pdf>
- Ministry of Research, Technology and Higher Education. (2017). *Statistik pendidikan tinggi [Higher education statistics]*. Jakarta: Pusdatin Iptek Dikti, Setjen, Kemenristekdikti.
- Razak, A., Mokhtar, M.K., & Solomon, W. S. W. (2013). Islamic spiritual therapy a model for depression disorder prevention. *Da'wah Tabligh Journal*, 14(1), 141-151.
- Rivera-torres, P., Araque-padilla, R. A., & Montero-simó, M. J. (2013). Job stress across gender : The importance of emotional and intellectual demands and social support in women. *International Journal of Environmental Research and Public Health*, 10(1), 375-389. doi: 10.3390/ijerph10010375
- Rizvi, F., Qureshi, A., Rajput, A., & Afzal, M. (2015). Prevalence of depression, anxiety and stress (by DASS scoring system) among medical students in Islamabad, Pakistan. *British Journal of Medicine and Medical Research*, 8(1), 69-75. doi: 10.9734/BJMMR/2015/17193
- Sari, S. P., & Dwidiyanti, M. (2014). Mindfulness dengan pendekatan spiritual pada pasien skizoprenia dengan resiko perilaku kekerasan [Mindfulness with a spiritual approach in schizophrenic patients at risk of violent behavior]. *Prosiding Konferensi Nasional XI Keperawatan Kesehatan Jiwa*, 290-294.
- Sadipun, D. K., Dwidiyanti, M., & Andriany, M. (2018). Effect of spiritual mindfulness intervention on emotional control in adult patients with pulmonary tuberculosis. *Belitung Nursing Journal*, 4(2), 226-231.
- Selye, H. (2013). *Stress in health and disease* (3rd ed.). London: Butterworth Group.
- Song, Y., & Lindquist, R. (2015). Effects of mindfulness-based stress reduction on depression, anxiety, stress, and mindfulness in Korean nursing students. *Nurse Education Today*, 35(1), 86-90. doi: 10.1016/j.nedt.2014.06.010
- Sudarya, I. W., Bagia, I. W., & Suwendra, I. W. (2014). Analisis faktor-faktor yang mempengaruhi stres dalam penyusunan skripsi jurusan manajemen Undiksha angkatan 2009 [Analysis of factors affecting stress on student in preparation

- thesis on department of management of Undiksha]* (Thesis). Universitas Pendidikan Ganesha.
- Thomas, J., Furber, S. W., & Grey, I. (2018). The rise of mindfulness and its resonance with the Islamic tradition. *Mental Health, Religion & Culture*, 20(2), 1-13. doi: 10.1080/13674676.2017.1412410
- Thomas, J., Raynor, M., & Bakker, M. (2016). Mindfulness-based stress reduction among Emirati muslim women. *Mental Health, Religion & Culture*, 10(3), 295-304. doi: 10.1080/13674676.2016.1168389
- Videbeck, S. L. (2011). *Psychiatric-mental health nursing*. Philadelphia: William & Wilkins.
- Wardi, R. (2016). Stress conditions in students completing thesis. *Jurnal Ilmu Pendidikan, Psikologi, Bimbingan dan Konseling*, C(2), 190-194. doi: 10.24127/gdn.v6i2.512
- WHO. (2018). *Mental disorders*. Retrieved from <https://www.who.int/news-room/fact-sheets/detail/mental-disorders>
- Zakiah. (2016). Gambaran karakteristik, tingkat stres, ansietas, dan depresi pada mahasiswa keperawatan yang sedang mengerjakan skripsi [Characteristics, stress levels, anxiety, and depression in nursing students working on a thesis]. *Jurnal Impuls*, 2(September), 140-145.