

Research article

The Effectiveness of Religious Therapy on the Psychological Condition of COVID-19 Patients in Isolation Treatment at a Regional Public Hospital in Indonesia

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Abstract.

Religious therapy is a coping strategy that can be used to deal with stress. When patients are first diagnosed with COVID-19 they may feel anxious, shocked and sad, especially when it is stated that they need to undergo isolation treatment; it can feel as if all hope and happiness has been lost. Religious coping can be used to create spiritual happiness and psychological happiness, and may help minimize or even eliminate anxiety and depression that occurs in patients undergoing isolation treatment. This study aimed to evaluate the effectiveness of religious therapy on the psychological condition of COVID-19 patients undergoing isolation in hospital. This research used a quasi-experimental design involving a control group. The sample included 34 respondents (17 in each group). In the intervention group, religious therapy was given by reciting dhikr sentences and prayers for the sick. The dependent t test was used to analyze the data. The findings showed a significant difference in the anxiety and depression scores before vs. after the patients were given the religious therapy intervention (p -value < 0.05 for both). Therefore, this study found that religious therapy can be effective in reducing anxiety and depression. The findings of this study could be used to provide an alternative recommendation in managing coping strategies to deal with stress among hospitalized patients.

Keywords: anxiety, depression, religious therapy

1. Introduction

Corona Virus Disease 19 (COVID-19) is a new virus that is highly contagious, has spread rapidly to almost all countries in the world since end of 2019 and on March 11, 2020 WHO declared Corona Virus Disease 19 (COVID-19) as *Global Pandemic* [1] because it happened to 216 countries in the world. The high infectious rate requires all health workers involved in the treatment and care of patients infected with Covid-19 to use complete and layered personal protective equipment so that there is no opening for virus invasion into the body, because the corona virus spreads through droplet infection,

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Published: 3 June 2022

Publishing services provided by
Knowledge E

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Selection and Peer-review under the responsibility of the ISGH4 Conference Committee.

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and aerosols when performing procedures which manipulate the respiratory area [2]. In addition to the use of complete PPE (Personal Protective Equipment), health protocols must also be strictly adhered to avoid contracting the Covid-19 virus.

To date (July 15, 2021) the world's population has recorded nearly 189 million positive confirmed cases of Covid-19, with nearly 4.07 million deaths. United State America (USA) is the largest contributor to the number, namely 34 million positive confirmed cases with death toll of 608,000 people (WHO Corona Virus Disease (COVID-19) Dashboard, data uploaded July 16 January 2021).

Indonesia is the 15th country infected with Covid-19 in the world, with 2,780,8003 positive confirmed cases, 504,915 being treated in health care facilities, 2,204,491 recovered cases and 71,397 deaths (Online data from the Indonesian Ministry of Health, uploaded on 16 July 2021). The largest contributor to the number was Jakarta Capital Special Region with an additional figure (July 16, 2021) of 714,595 positive confirmed cases. West Java ranks 2nd after Jakarta, with the total of 488,689 confirmed cases (online data, Covid-19, corona.jakarta.go.id). So far, in Sukabumi itself, six villages from 33 sub-districts in Sukabumi City have red zone status.

At the beginning of the emergence of the Covid-19 case in Wuhan, China, The Corona Virus was transmitted from animals to humans, but in later cases the mechanism of transmission changed from human to human, and infected humans were the cause of the spread of this virus. Covid-19 infection has a higher transmission and mortality rate compared to Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS), which previously became a global problem [3] which are similar diseases with the same cause.

The patient's emotional experience when he was first diagnosed with Covid-19 was feeling anxious, shocked, anxious and sad, especially when it was stated that he had to undergo isolation treatment, it felt as if all hope and happiness had been lost. there is a family that accompanies it and what's worse is that death always haunts feelings, because news often spreads that the corona virus is so viciously eating away at the health of the infected, it never occurred to him that he would suffer from a disease like covid-19 and have to undergo isolation treatment so as not to infect other people. other. This has become a phenomenon for almost every patient undergoing Covid-19 isolation treatment at Regional Public Hospital R. Syamsudin, SH.

The results of interviews with nursing health professionals in the Covid-19 isolation room at Regional Public Hospital R. Syamsudin, SH said that many patients undergoing isolation treatment felt anxious and nervous about their illness and they had to undergo isolation, there were patients who tried to leave the Covid-19 isolation room individually

forced, and there were families who complained that their family members had to undergo isolation treatment. The family's concern was conveyed as a form of rejection of isolation treatment, because the family was not allowed to visit, let alone wait. This is enforced to minimize human-to-human transmission because visitors or the patient's family do not use complete PPE so they are vulnerable to transmission.

Meantime, the efforts made by health professionals are to restore the physical health condition of patients undergoing isolation treatment by eliminating pathological events due to the virus, and trying to get patients to be healthy again as before they were sick. Meanwhile, there are still very few professionals who pay attention to psychological conditions, religious and spiritual needs. In a situation like this, it is necessary to make efforts to minimize and even eliminate anxiety and anticipate the emergence of depression in patients undergoing isolation treatment at Regional Public Hospital R. Syamsudin, SH Sukabumi City.

Several studies have proven the important role of coping in helping individuals during a pandemic, including [4] overall there are benefits from coping strategies, namely being able to adapt to the difficulties that are present during this pandemic.

In their research involving 1,210 respondents from 194 cities in China. In total, 53.8% of respondents rated the psychological impact of the outbreak as moderate or severe; 16.5% reported moderate to severe depressive symptoms; 28.8% reported moderate to severe anxiety symptoms; and 8.1% reported moderate to severe stress levels [5]. The results of this study also state that women are more susceptible to stress, anxiety and depression. This is in line with research [6] on 17,865 active Weibo users using a machine learning model, which showed that there was an increase in negative emotions (anxiety, stress) and risk assessment, while positive emotions (happiness, life satisfaction) decreased.

From the research it is known that psychological factors play an important role in adherence to public health measures (such as vaccination) and how people cope with the threat of infection and the resulting harm. This is clearly an important issue to consider in the management of infectious diseases, including Covid-19. Psychological reactions to the pandemic include maladaptive behaviors, emotional distress, and defensive responses.

The research has not made efforts to manage stress through religious coping. One of the coping strategies that can be implemented in minimizing stress is religion. Religion can provide individuals with direction/guidance, support, and hope, as well as emotional support. quoted in research conducted by [7] that through prayer, rituals and religious beliefs can help a person in coping when experiencing life stress, because of the

hope and comfort. Coping is a form of individual behavior to protect themselves from psychological pressures caused by the problems of life experiences. The goals are: 1) eliminating or changing the situation that is causing the problem; 2) controlling the meaning of the situation experienced, so that the problem is reduced; 3) accept emotional consequences within manageable limits.

Religious therapy is a coping strategy in dealing with stress through religion called religious coping. The patient's emotional experience when he was first diagnosed with Covid-19 was feeling anxious, shocked, anxious and sad, especially when it was stated that he had to undergo isolation treatment, it felt as if all hope and happiness had been lost. Religious coping is one of the factors in creating spiritual happiness, psychological happiness and is predicted to minimize or even eliminate anxiety and depression that currently occur in patients undergoing isolation treatment

2. Methods

This study was quasi-experimental with pretest-posttest design and a control group. At first, a pretest was performed on both groups, and the experimental group was received treatment. Then, a posttest was performed on both groups after the intervention. This study has been approved by the Ethics Committee of Syamsudin Regional General Hospital, Indonesia.

The intervention and control groups were each given religious therapy. Reductions in anxiety and depression were measured before the intervention. The study population was all patients who underwent Covid-19 isolation treatment in the orchid room of R Syamsudin SH Hospital in West Java, Indonesia from February to June 2021. Inclusion criteria were; (1) Signing written consent if willing to become a respondent; (2) Covid-19 confirmed positive patients who are treated in isolation money; (3) hemodynamics in stable condition; (4) does not experience hearing and vision disorders; (5) having full control of the mind. While the exclusion criteria in this study were patients who experienced decreased consciousness

The research subjects were 15 people in each group. Sample correction of 10% was carried out to avoid sample drop out. So that the number of samples reached 17 in each group. consecutive sampling with intervention and control group was used in this study.

Data were analyzed using descriptive statistics to describe patient characteristics and decreased anxiety using the Beck Anxiety Inventory (BAI) and depression using the Beck Depression Inventory (BDI). In the normality test of anxiety and depression variables using the Monte Carlo test

The research was carried out in the Covid-19 isolation treatment room, the Orchid Room of Regional Public Hospital R. Syamsudin, SH Sukabumi City from February 2021 to June 2021 with questionnaire instruments on Socio demographic Characteristics and Questionnaires of Psychological Conditions.

3. Results

Table 1. shows the characteristics of the participants in both intervention and control groups. There were no differences between intervention and control groups in terms of Gender, Last Education, Occupation, Day of Care, Economic Status, Marital Status

TABLE 1: Characteristics of responden (n=34).

Variable	Intervention group (n=17) n (%)	Control group (n=17) n (%)
Gender: Man Woman	64,7 35,3	58,8 41,2
Last Education: Elementary School Junior High School Senior High School University	29,4 - 41,2 29,4	35,3 17,6 35,3 11,8
Occupation: Worker Lecturer Housewife Retired Civil Servants Entrepreneur	11,8 5,9 23,5 23,5 5,9 29,5	5,9 5,9 41,2 17,7 29,5
Treatment days: 2 Days 3 Days 4 Days 5 Days	11,8 41,2 23,5 23,5	29,4 17,6 29,4 23,5
Economic Status: Income < 2,5 million/month Income > 2,5 million/month	52,9 47,1	64,7 35,3
Marital status: Married Widowed	94,1 5,9	94,1 5,9

TABLE 2: Post intervention and control for anxiety and depression.

Variable	Intervention group		Mean	SD	Control group		Mean	SD
	Min	Max			Min	Max		
Anxiety	2	28	15,23	7,74	0	15	5,23	5,13
Depression	0	30	13,65	8,22	0	11	5,95	3,83

TABLE 3: Effectiveness of therapy religi.

Variabel	Intervention Group			Control group		
	Mean	SD	PValue	Mean	SD	PValue
Cemas	15,24	7,42	0,941	5,3	5,23	0,384
Depresi	13,65	8,22	0,677	5,94	3,83	0,681

TABLE 4: Average Psychological Conditions (Anxiety and Depression) in the Intervention Group and Control Group.

Variable	Mean	SD	Levene's Test	P value	N
Anxiety in the Intervention Group Anxiety in the Control Group	15,24 5,3	7,74 5,13	0,046	-	17 17
Depression in the Intervention Group Depression in the Control Group	14,65 19,18	8,22 6,72	0,185	0,001	17 17

4. Discussion

The present study acknowledges that religious therapy is used as a therapy to reduce anxiety, in the intervention group there was a decrease in the level of anxiety from moderate anxiety before being given religious therapy intervention to a mild anxiety level after being given religious therapy. this is in line with research that has long been carried out by [8], which states that there is a positive relationship between spirituality, religion and health and is proven in research [9], that religious Dzikir therapy can reduce anxiety, this research is also supported by [10] who said that currently Islamic religious psychotherapy is starting to become an alternative in the treatment of both physical pain and mental illness, in terms of psychotherapy Islamic religious psychotherapy can reduce anxiety.

This study is in line with research [11] which says Dzikir therapy can reduce anxiety in pregnant women who are waiting for their birth. Relevant to research conducted by [12], that Dzikir therapy can reduce anxiety in patients who will undergo major surgery.

Dzikir is able to express feelings of life and better mental health. The spiritual approach plays a role in expressing feelings and providing comfort for clients in accepting illness as a trial [13].

Dzikir affects a person's psychological dynamics, Dzikir is believed to make the heart calm, peace of mind results in a clean mind and healthy body. Dzikir will bring one's thoughts and mental conditions to be directed and balanced [14]. When a Muslim gets used to Dzikir, he believes that he is close to the Creator, and feels protected and gets His protection which can lead to self-confidence, strength, feelings of security, peace and happiness. Dzikir is valuable as worship, is one way to get a servant closer to Allah, the calmness when doing Dzikir is able to reduce the anxiety experienced by individuals [11].

Physiologically it can be explained that when sentences of Dzikir and prayer are recited, sound waves are captured by the brain, body cells become active so that there is an increase in the absorption of enterochromaffin cells which can increase the

hormone serotonin in the dorsal parapeduncular gray matter. This increase causes a state of relaxation so that it can inhibit fear. In addition, through the activation of body cells, sound waves received by the primary visual cortex are transmitted to the left angular gyrus, which translates the visual form of words into auditory codes and transmits them to Wernicke's area, then triggers the appropriate response in the arcuate and Broca's area respectively and motor cortex [15].

In a condition of depression due to the effect of adaptive coping isolation, what is done is to do Dzikr to remember Allah. The results of this study are in line with research [16] which says that Dzikr therapy can reduce depression levels in HIV/AIDS patients. This study is also in line with research [12], which says that Dzikr therapy has an effect on reducing depression levels in the elderly.

This research is supported by research [14], in the form of a literature review, which says that Islamic psychotherapy based on worship (Dzikr and prayer) is proven effective in curing mental illness, depression because Islamic psychotherapy can find peace of mind.

[17] in their research say that spiritual well-being has a significant relationship with depression in coronary heart patients. The higher a person's spiritual well-being, the lower the level of depression he experiences. This means that the religious approach is very influential on psychological conditions. The same thing was conveyed by [18] that the best therapy for mental anxiety is faith in God. Stress can cause several physical diseases, because people who are stressed (depressed) will experience changes in the body's defenses, and the body's defenses become weak, therefore disease will easily attack them.

Islam believes that to overcome the level of anxiety and stress, humans must return to the Creator. When humans lose their direction from everything that underlies their rational life both physically and psychologically, then in essence humans must return to Allah, the Most Compassionate, Most Merciful, All-Removing Anxiety, All-Giving all solutions to any existing problems [14].

The limitation of this study is the small sample size of public hospitals in Sukabumi, West Java which cannot be generalized to other hospitalized with Covid-19. In addition, this study also did not consider other factors or variables.

5. Conclusions

In conclusion, this study indicated that religious therapy can reduce psychological conditions in patients undergoing Covid-19 isolation treatment. Taking operational procedures

in a hospital is important for using religious therapy in reducing anxiety and depression. In addition, nurses are expected to be able to provide religious dhikr and prayer therapy services for patients undergoing Covid-19 isolation treatment to reduce anxiety. The results of this study can be used as a basis for further research on religious therapy using a more accurate method with follow-up, large and homogeneous sample size.

References

- [1] Cucinotta D, Vanelli M. WHO declares COVID-19 a pandemic. *Acta Biomedica*. 2020;91(1):157–160. <https://doi.org/10.23750/abm.v91i1.9397>
- [2] Alang S. Islamic therapy management and service procedures. *Journal of Islamic Counseling Guidance*. 2020;7:77–86.
- [3] Mahase E. Coronavirus Covid-19 has killed more people than SARS and MERS combined, despite lower case fatality rate. *BMJ (Clinical Research Ed)*. 2020;368(Feb):641:1-1. <https://doi.org/10.1136/bmj.m641>
- [4] Jarnawi J. Managing anxiety amid the corona pandemic. *At-Taujih: Islamic Guidance and Counseling*. 2020;3(1):60-73. <https://doi.org/10.22373/taujih.v3i1.7216>
- [5] Cullen W, Gulati G, Kelly BD. Mental health in the COVID-19 pandemic. *QJM: Monthly Journal of the Association of Physicians*. 2020;113(5):311–312.
- [6] Li S, Wang Y, Xue J, Zhao N, Zhu T. The impact of Covid-19 epidemic declaration on psychological consequences: A study on active weibo users. *International Journal of Environmental Research and Public Health*. 2020;17(6):1-9. <https://doi.org/10.3390/ijerph17062032>
- [7] Notoatmojo S. *Health research methodology*. Rineka Cipta. Jakarta; 2012.
- [8] Larson DB, Sherrill KA, Lyons JS et al. Associations between dimensions of religious commitment and mental health. *American Journal of Psychiatry*. 1992;149(4):557–559. <https://doi.org/10.1176/ajp.149.4.557>
- [9] Fitriani A, Supradewi R. Systematic desensitization with relaxation of dzikr to reduce anxiety symptoms in cases of phobia disorders. *PHILANTHROPY: Journal of Psychology*. 2019;3(2):75-88. <https://doi.org/10.26623/philanthropy.v3i2.1689>
- [10] Nugraha AD. Understanding anxiety: An Islamic psychology perspective. *Indonesian Journal of Islamic Psychology* 2020;2(1):1–22.
- [11] Rahman A. Dhikr therapy in Islam against anxiety levels in pregnant women. *Journal of Islamic Religious Education*. 2020;5(1):76-91.

- [12] Harahap MA, Ritonga N. The effect of dhikr on reducing anxiety levels in pre-operational major surgery patients in the surgical room. *Indonesian Health Scientific Journal*. 2021;1(2):45–52.
- [13] Razak A, Mokhtar MK, Sharazad W, Sulaiman W. Islamic spiritual therapy. *Tabligh Da'wah Journal*. 2013;14:141–151
- [14] Sarvasti D. The influence of gender and cardiovascular manifestations on Covid-19. *Indonesian Journal Of Cardiology*. Indonesia. 2020. <https://doi.org/10.30701/ijc.1004>
- [15] Sumarni S. The process of healing mental symptoms based on Islamic intervention of psychology. *Journal of Islamic Civilization and Thought*. 2020;3(2):134–147. <https://doi.org/10.23971/njppi.v3i2.1677>
- [16] Zakaria D, Hira RH. Covid-19 pandemic: Flattening the curve, policies and regulations. *Vox Populi*. 2020;3(1):1-21. <https://doi.org/10.24252/vp.v3i1.14077>
- [17] Mirwanti R, Nuraeni A. Relationship between spiritual well-being and depression in patients with coronary heart disease (CHD). *Scientific Journal of Health Sciences*. 2016;14(1):46–52.
- [18] Mansoor M. Concept of psychotherapy in Islamic perspective. *Library.Walisongo.Ac.Id*; 2005 Jun 21. Available from: http://library.walisongo.ac.id/digilib/files/disk1/21/jtptiain-gdl-jou-2005-mansur-1034-6_Psikot-m.pdf