



Correlation between Spirituality Levels and Coping Mechanism among First-Year Students in Health Science Programs

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ABSTRACT

Introduction: Spirituality plays an important role in influencing an individual's ability to manage stress and challenges, including among students in health-related fields. The level of spirituality reflects the depth of a person's spiritual beliefs, practices, and experiences, which may be linked to coping mechanisms.

Objective: This study aims to determine the relationship between the level of spirituality and coping mechanisms among freshmen in the Health Study Program at Universitas Muhammadiyah Kalimantan Timur.

Methods: This research employed a quantitative method with a descriptive approach. The population consisted of freshmen enrolled in the Health Study Program. Data were collected using validated questionnaires and analyzed using the Spearman Rank correlation test.

Results: The majority of respondents were 18 years old (69.7%), female (81.2%), Muslim (98.9%), and from the Public Health undergraduate program (30.0%). Most respondents had a high level of spirituality (59.0%), while 41.0% had a moderate level. Regarding coping mechanisms, 57.9% used adaptive coping, while 42.1% employed maladaptive coping. The Spearman Rank test yielded a p-value of 0.000 (≤ 0.005), indicating a statistically significant relationship. The correlation coefficient was 0.238, demonstrating a weak but positive correlation between spirituality levels and coping mechanisms.

Conclusion: There is a significant positive relationship between the level of spirituality and coping mechanisms among freshmen in the Health Study Program, although the strength of the correlation is weak. These findings highlight the potential importance of spiritual development in enhancing students' coping strategies.

Keywords: coping mechanism, freshmen, spirituality

Introduction

In the field of psychology, humans are recognized as beings composed of cognitive, emotional, and social dimensions. Individual behavior results from the interaction of biological, psychological, and social factors (Bolton, 2023). Among the essential needs of human beings is spirituality, which enables individuals to seek meaning and purpose in life, and contributes to their capacity for adaptation (Calista Roy, 2018; Ellafiyah & Putri, 2022). Spirituality is understood as a state of harmony between the individual, their environment, and God (Fitria & Mulyana, 2021).

According to Dossey (in Muwarni, 2020), the connection between humans and the Creator is the central component of spirituality. It can serve as an effective mechanism to face life challenges and stressors. Numerous studies have demonstrated that spirituality not only provides emotional support but also enhances an individual's ability to respond to problems constructively (Gannika, Sembiring & Setiono, 2022). The strategies individuals use to confront stress, adapt to changes, and respond to threats are referred to as coping mechanisms (Fauziah & Prayitno, 2021).

Coping mechanisms involve responses to internal or external demands, and they are typically categorized as either adaptive or maladaptive (Naim, 2017; Constantin, Rawis & Setijadi, 2023). Adaptive coping mechanisms enable individuals to effectively manage difficult situations and reduce psychological stress. In contrast, maladaptive coping mechanisms may worsen the situation and lead to additional psychological or social issues (Tamiya et al., 2022; Malani, Putra & Rifani, 2020; Safitri et al., 2021; Fernando, 2022).

For students, particularly those in health-related programs, spirituality and coping mechanisms are critical in managing academic stress and transitional challenges (Lestarina & Purwantini, 2023). Universitas Muhammadiyah Kalimantan Timur (UMKT), one of the leading private universities in Samarinda, is well-known for its comprehensive Health Sciences programs. In 2024, UMKT established its Medical Study Program, becoming the first private university in Samarinda to do so. The spiritual well-being of students at UMKT is therefore considered crucial in shaping their ability to manage academic and personal challenges.

A preliminary study conducted through interviews with 10 early-semester Health Sciences students at UMKT on August 26, 2024, revealed that 6 students reported using coping strategies such as confiding in friends or parents, engaging with social media, and participating in leisure activities to manage stress. In terms of spirituality, 7 students reported that demanding academic schedules negatively impacted their worship routines. Some expressed feelings of restlessness, lack of time for prayer and reading the Qur'an, and a tendency to handle stress without involving spiritual reflection or turning to God.

These findings prompted the researcher to investigate the relationship between students' spirituality levels and their coping mechanisms. Spirituality levels refer to the depth of an individual's spiritual beliefs, practices, and experiences. This multifaceted construct encompasses the search for meaning in life and the connection with a higher power, and in some contexts, may also act as a momentary coping tool or psychological refuge (Naim, 2017; Fitriani, 2024). The interpretation of spirituality varies depending on individual experience and context. In educational settings, spirituality may support student development through value-based guidance (Rezapour & Aghabagheri, 2020).

Furthermore, spirituality has been shown to significantly influence psychological well-being. Individuals with high levels of spirituality tend to experience better mental health,

highlighting its importance in supporting students' emotional and psychological resilience (Kurniati et al., 2021; Hidayati & Kusumaningtyas, 2022).

Based on the background and preliminary findings above, this study aims to explore the correlation between spirituality levels and coping mechanisms among first-year students in the Health Sciences Program at Universitas Muhammadiyah Kalimantan Timur.

Objective

This study aims to determine the relationship between the level of spirituality and coping mechanisms among freshmen in the Health Study Program at Universitas Muhammadiyah Kalimantan Timur.

Method

This study seeks to examine whether there is a significant relationship between the variables under investigation; however, it does not aim to establish a causal relationship (Susanto et al., 2023). The research employs a quantitative method with a descriptive approach, which is designed to describe phenomena or variables as they naturally occur, without any manipulation or intervention (Suhartawan et al., 2024). This descriptive approach is implemented using a cross-sectional study design, which allows researchers to analyze the relationship between variables by observing them at a single point in time (Suhartawan et al., 2024).

Population

Population is a generalization area consisting of objects/subjects that have certain qualities and characteristics determined by researchers to be studied and then conclusions drawn (Natanael et al., 2023). According to Theodoratou & Argyrides (2024) population is a general domain that includes objects or subjects with certain characteristics determined by researchers in research to be studied and conclusions drawn. The respondents to be studied in this study were freshmen of the Health study program at the Universitas Muhammadiyah Kalimantan Timur, totaling 836 freshmen of the Health study program at the Universitas Muhammadiyah Kalimantan Timur, consisting of 149 Nursing S1, 121 Nursing D3, 114 Environmental Health S1, 270 Public Health S1, and 50 Medicine S1.

Sample

According to Theodoratou and Argyrides (2024), a sample is a subset of a population that possesses the characteristics of the entire population. In other words, a sample refers to a method of selecting a portion of the population to be studied in order to draw conclusions about the whole. In this study, the researcher determined the sample size using the Slovin formula, which is commonly employed to calculate sample size based on a desired level of significance. The selected significance level may vary depending on the population size: 0.01 (1%) for a minimum population of 10,000 people; 0.02 (2%) for at least 2,500 people; 0.03 (3%) for a minimum of 1,200 people; 0.04 (4%) for at least 625 people; and 0.05 (5%) for a minimum population of 400 people (Indra Jaya & Media, 2019). The distribution of samples across each stratum is presented as follows:

Table 1. Number of Sample

Study Program	Population	Calculation	Number of Samples
Bachelor of Nursing (S1)	181	$149/836 \times 271$	48
Diploma in Nursing (D3)	124	$121/836 \times 271$	40
Bachelor of Environmental Health (S1)	114	$84/836 \times 271$	27
Bachelor of Public Health (S1)	270	$270/836 \times 271$	87
Bachelor of Pharmacy (S1)	162	$162/836 \times 271$	53
Medical Doctor Program	50	$50/836 \times 271$	16

Research Instruments

Instruments are essential to support the accuracy and reliability of a study, as they play a vital role in obtaining valid and trustworthy information (Suhartawan, 2024). The instrument used in this research was a questionnaire, which is a common data collection method involving the administration of written questions to research respondents. In this study, the researcher utilized standardized questionnaires but did not perform validity and reliability tests. The questionnaire was distributed using a Google Form and was divided into three parts. Part A consisted of demographic data, including questions on name, age, gender, and study program. Part B assessed the level of spirituality using the Daily Spiritual Experience Scale (DSES). Part C measured coping mechanisms using the Brief COPE questionnaire.

Validity and Reliability Test

The DSES questionnaire is a measuring instrument containing 16 questions about spiritual experiences that a person usually does in their daily lives. This questionnaire was adopted from a journal owned by (Pahleviannur et al., 2022). The questionnaire is said to be valid if $r_{\text{count}} > r_{\text{table}}$. The r_{count} value in this questionnaire is 0.47- 0.88, therefore $r_{\text{count}} > r_{\text{table}} = 0.47-0.88 > 0.444$ so it can be concluded that this questionnaire is valid. In another study, the DSES questionnaire has been tested for validity by (Fitriyaningrum et al., 2023) with the r_{count} value in this questionnaire being 0.47- 0.88, therefore $r_{\text{count}} > r_{\text{table}} = 0.47-0.88 > 0.444$ and it can be concluded that this questionnaire is valid.

The DSES questionnaire can be measured using the Cronbach's Alpha method. If $\text{Cronbach} > 0.6$ then the questionnaire is reliable, The results of the DSES spirituality questionnaire reliability test by Pahleviannur et al (2022) with a Cronbach's alpha with a value of 0.916, it is concluded that the instrument is reliable and can be used as a data collection tool to assess daily spiritual health. In another study, the reliability test conducted by (Fitriyaningrum et al., 2023) had a Cronbach Alpha value of 0.95. The reliability of this questionnaire can be concluded with an average Cronbach Alpha value of 0.90 - 0.97 so that this DSES instrument is reliable.

Data Analysis

Data Analysis Technique is a way to process data so that it can be concluded or interpreted into information. Before conducting data analysis, the data must be processed first. In statistics, the information that has been obtained and obtained can be used for the decision-making process, generally for hypothesis testing, but more importantly, data analysis to conclude so that the data can be informed or interpreted.

After processing the data, the next stage is the univariate and bivariate data analysis stage according to the research objectives. The data analysis design in this study uses univariate and bivariate analysis. Univariate analysis is an analysis used on variables from research results, namely independent variables (spirituality level) and dependent variables (coping mechanisms). This analysis is carried out with the aim of describing each variable studied separately by creating a frequency distribution table of each variable. Bivariate analysis is a statistical method used to evaluate the relationship between two variables. In the context of research, this analysis is often applied to determine whether there is a significant association between the independent and dependent variables.

Result

Table 2. Sociodemographic of Respondents

Characteristics	Frequency	Percentage (%)
Age		
17 Years	18	6.6
18 Years	188	69.4
19 Years	56	20.7
20 Years	7	2.6
21 Years	2	0.7
Gender		
Male	50	18.1
Female	227	81.9
Religion		
Islam	268	98.9
Protestant Christianity	3	1.1
Study Program		
S1 Nursing	48	17.7
D3 Nursing	40	14.8
S1 Environmental Health	27	10.0
S1 Public Health	87	32.1
S1 Pharmacy	53	19.6
Medical Doctor Program	16	5.9
Spiritual Level		
Low	0	0
Medium	111	41.0
High	160	59.0
Closeness to God		
Not at all	0	0
Quite close	16	5.9
Close	135	49.8
Very close	120	44.3
Coping Mechanism		
Maladaptive	114	42.1
Adaptive	157	57.9

The Universitas Muhammadiyah Kalimantan Timur (UMKT), located at Jalan Ir. H. Juanda No. 15, Samarinda, serves as the research site for this study. UMKT was formed through the merger of two institutions: the Muhammadiyah Samarinda College of Health Sciences (STIKES), established in 2009 with Institutional Accreditation B, and STIE Muhammadiyah Samarinda, founded on September 15, 1981. As one of the leading private universities in the region, UMKT offers several prominent study programs in the health sector, including Bachelor's programs in Nursing, Environmental Health, Public Health, and Pharmacy, as well as a Diploma in Nursing and a Medical program. The selection of UMKT as the research location is based on the strong relevance between its health-focused academic environment and the study's theme, which seeks to explore the role of spirituality in shaping coping mechanisms among students in health education.

Table 2 presents the sociodemographic characteristics, spirituality levels, closeness to God, and coping mechanisms of freshmen in health-related study programs. The majority of respondents are 18 years old (69.4%), female (81.9%), and Muslim (98.9%). Most students are enrolled in the S1 Public Health program (32.1%), followed by S1 Pharmacy (19.6%). Regarding spirituality, 59.0% report a high level, and 41.0% have a medium level. In terms of perceived closeness to God, nearly half (49.8%) feel close, and 44.3% feel very close, with none indicating a lack of closeness. Additionally, more than half of the respondents (57.9%) use adaptive coping mechanisms, while 42.1% use maladaptive strategies.

Table 3. Analysis of the Relationship between Spirituality Level and Coping Mechanisms

			Level of Spirituality	Coping Mechanisms
Spearman's rho	Level of Spirituality	Corelation Coeficient	1.000	.238**
		Sig. (2-tailed)		.000
		N	271	271
	Coping Mechanisms	Corelation Coeficient	.238**	1.000
		Sig. (2-tailed)	.000	
		N	271	271

The results of statistical tests using the Spearman Rank test obtained a P Value of 0.000 (≤ 0.05) so it can be stated that the correlation between the level of spirituality and coping mechanisms is significant. The Spearman rank correlation value of 0.238 indicates a positive correlation with a weak correlation strength. A positive correlation with a weak relationship strength means that there is a relationship between two variables X (Level of Spirituality) with Variable Y (Coping Mechanism) but the relationship is not too strong or weak. A positive correlation indicates that when one variable increases, the other variable also tends to increase.

Discussion

The frequency distribution results show that among the 271 respondents, the majority, 188 individuals (69.4%), were 18 years old. This aligns with findings by Rahmayani et al. (2019), who also reported that most student respondents were aged 18 (71.3%). According to the World Health Organization (WHO, 2015), adolescence ranges from 10 to 19 years, while the

Population and Family Planning Agency (BKKBN) defines adolescents as those aged 10–24 years and unmarried. In terms of gender, the majority of respondents were female (81.2%), while male respondents accounted for only 18.8%. This is consistent with a study by Septyari et al. (2022), which found 83.3% of participants were female. Previous research by Bunga and Komara (2021) also indicated that male respondents were more likely to use maladaptive coping strategies (28.7%), whereas female respondents were more likely to use adaptive strategies (27.3%).

The majority of respondents identified as Muslim (98.9%), with a small minority being Protestant (1.1%). Regarding study programs, most respondents came from the Public Health undergraduate program (30.0%), while the fewest were from the Medical program (5.4%). In terms of spirituality, 160 respondents (59.0%) had a high level of spirituality, while only two respondents (0.7%) had a low level. These results are consistent with studies by Mahutri et al. (2022) and Lavari et al. (2019), both of which found a predominance of high spiritual levels among student respondents. However, Bestari et al. (2022) reported different findings, with a majority of students displaying moderate (39.3%) and low (32.1%) spirituality levels, likely due to the study being conducted during the COVID-19 pandemic.

Regarding coping mechanisms, 157 respondents (57.9%) exhibited adaptive coping strategies, while 114 (42.1%) displayed maladaptive strategies. These results align with studies by Sari and Marsisno (2023), who found 51.39% of respondents used adaptive coping, and Rahmawati et al. (2022), who reported similar proportions (51.8% adaptive, 48.2% maladaptive). Other studies, such as Septyari et al. (2022) and Siaputra et al. (2023), reported even higher rates of adaptive coping (94.1% and 99%, respectively). Nonetheless, these results contrast with Natanael et al. (2023), who found a majority of students used maladaptive strategies (67.9%).

Statistical analysis using the Spearman Rank test yielded a p-value of 0.000 (≤ 0.005), indicating a statistically significant relationship between spirituality levels and coping mechanisms. The correlation coefficient of 0.238 reflects a weak but positive correlation. Among the 271 respondents, 111 had moderate spirituality and 160 had high spirituality; 114 respondents had maladaptive coping mechanisms, and 157 had adaptive coping strategies. These findings are supported by Rustam and Chaidir (2023), who found a significant and stronger correlation ($r = 0.528$, $p = 0.000$) between spirituality and coping in a different population—families of ICU patients. Hardianti et al. (2023) also confirmed a significant relationship using the same spirituality instrument and a chi-square test ($p < 0.05$), despite differing respondent characteristics. However, Syahrial (2016) reported no significant relationship ($p = 0.828$) between spirituality and coping among students undergoing mentoring, suggesting that contextual factors, such as study phase or setting, may influence outcomes.

Conclusion

This study highlights the existence of a meaningful connection between spirituality and coping mechanisms among first-year students in the Health Study Program at Universitas Muhammadiyah Kalimantan Timur. The findings emphasize the potential role of spiritual development in shaping students' approaches to managing stress and adapting to academic and personal challenges. These insights may serve as a valuable foundation for enhancing student support services by integrating spiritual well-being into health education and psychological resilience programs.

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Authors' contribution

Each author contributed equally in all the parts of the research. All authors have critically reviewed and approved the final draft and are responsible for the content and similarity index of the manuscript.

Conflict of interest

The researchers stated that there is no conflict of interest related to the implementation and publication of the results of this research. The entire research process, from planning, data collection, analysis, to report preparation, was carried out independently without any influence or pressure from any third party. A commitment to research ethics is upheld throughout the research process, ensuring transparency, accuracy and honesty in reporting results. Respondents' participation was voluntary with informed consent, and their confidentiality and privacy were maintained in accordance with applicable research ethics standards. With this statement, researchers hope that the research results can be trusted and used as a valid reference for the development of science and health practices related to ethnomedicine and reproductive health.

Ethical consideration

Not applicable.

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