



REDUCTION OF ANXIETY THROUGH ISLAMIC SPIRITUAL MINDFULNESS BASED ON BREATHING EXERCISE IN HYPERTENSIVE PATIENTS

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ABSTRACT

The prevalence of hypertension sufferers in the Serpong 2 Community Health Center working area is 96 people, 37,5 % experience anxiety. Research Objectives. To find out the influence of Islamic spiritual mindfulness based on breathing exercise on anxiety in hypertensive patients. Research Method. Quasi-experimental research design. The population was all hypertensive patients and a sample of hypertensive patients with anxiety in the working area of Serpong 2 Community Health Center, South Tangerang city. The sampling method is purposive sampling with sample 36 Respondent. The data collection tool is the HARS instrument. Research Results. Islamic Spiritual Mindfulness based on Breathing Exercise has an influence on anxiety in Hypertension patients with a significance p value = 0.000 Conclusion. Islamic Spiritual Mindfulness based on Breathing Exercise is effective in reducing anxiety. Conclusion Islamic Spiritual Mindfulness based on breathing exercise deserves to be a complementary therapy or non-pharmacological therapy to reduce anxiety in hypertensive patients.

Keywords: anxiety; hypertension; mindfulness; islamic spiritual; psychotherapy

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INTRODUCTION

The increase in hypertension rates is influenced by various factors, namely, Risk Factors that cannot be changed and Risk Factors that can be changed. Risk factors inherent in people with hypertension and cannot be changed, among others: age, sex and genetics. The risk factors that can be changed or risk factors caused by unhealthy behavior of people with hypertension include: Smoking, Low fiber diet, Dyslipidemia, Excessive salt consumption, Lack of physical activity, Stress, Weight overweight / obesity, alcohol consumption (Ministry of Health, 2020). This is according to research studies that non-modifiable factors (age, sex, ethnicity) and modified factors socioeconomic factors (lack of health insurance, lack of medical care), adherence to medical therapy, presence of comorbidities (diabetes, hyperlipidemia, coronary artery disease, history of stroke, chronic kidney disease, congestive heart failure and substance abuse (Benenson et al, 2021). The relationship between hypertension and anxiety is mutually reinforcing. Longitudinal data and theoretical literature indicate that anxiety is an etiology of hypertension (L. F. Lim, et.al .2021).

Anxiety is an independent factor of hypertension. Patients with hypertension are prone to anxiety (M. S. Hamam, et al, 2020). Factors influencing Anxiety in hypertension are age, sex, lifestyle and Environment (T.Qiu, et al, 2023). Efforts to overcome anxiety in hypertension consist of Pharmacology and Non-pharmacology. Non-pharmacological therapies to reduce anxiety include, exercise, yoga, deep breathing, meditation, eating healthy foods, getting enough rest and reducing alcohol (Alice, et al, 2021). Mindfulness therapy, this therapy falls into the category of systematic psychosocial. Research on mindfulness, rooted in Buddhist meditation practices dating back to 2500, has increased in the last decade. In 1979, Dr. Jon Kabat-Zinn of the University of Massachusetts Medical Center developed an MBSR therapy (that abolished religious meditation). This therapy has been shown to reduce anxiety in adult and elderly women with hypertension (Haifei, et al, 2023). Mindfulness interventions developed today are Christian spiritual (Cernetic, 2018), and most recently, spiritual awareness-based interventions based on Hindu values with the Gayatri mantra have been implemented and proven to have a significant effect on reducing anxiety and stress among Hindus (Candrawati et.al, 2018). However, the effect of mindfulness interventions based on Islamic spirituality due to these interventions has not been widely carried out. Evidence for the implementation of Islamic Spiritual mindfulness is still limited, one of which is research on Islamic Spiritual mindfulness in students can reduce anxiety and stress (Munif et al., 2019).

Based on the results of such studies, it is therefore necessary to develop interventions in Hypertensive patients. This prompted the author to conduct a similar study on Hypertensive patients at Puskesmas Serpong 2 South Tangerang. Objective The Influence of Islamic spiritual mindfulness based on breathing on anxiety with special purpose description of the characteristic of respondents based on age, gender, education and occupation hypertension patients who experienced anxiety, a difference in the mean anxiety of the intervention group was identified before and after the Islamic Spiritual Mindfulness based on breathing exercise (ISM) was carried out in the treatment group and the group not given treatment, analyzed the effect of ISM, a comparative analysis of the influence of ISM in the treatment group and the influence of not doing ISM on anxiety in the control group and identified factor that influence Age, Gender, Education and Occupation, ISM on anxiety of hypertensive patients

METHOD

Quasi-experimental research design. The population is all hypertensive patients and samples of hypertensive patients with anxiety in the working area of Puskesmas Serpong 2 South Tangerang city. Purposive sampling method, the sample size was 36 respondents. The data collection is the HARS instrument which has been tested for validity and reliability test were declared valid and reliable in the third with total questions without deleting question, Cronbach alpha value > 0,793.

RESULTS

Table 1, it shows that in the intervention group, most of the age of respondents > 45 years, namely (55.6%), female gender (66.7%), low education (55.6%) and respondents who are not working (77.8%). In the age group k respondents > 45 years, namely (55.6%), female gender (55.6%), low education (55.6%) and respondents who are not working (83.3%).

Table 1.
Characteristics of Respondents

Characteristics	category	Intervention group (%)	Control group (%)
Age	> 45 Years	10 (55,6)	10 (55,6)
	≤ 45 Years	8 (44,4)	8 (44,4)
Gender	Man	8 (33,3)	10 (55,6)
	Woman	12(66,7)	8(44,4)
Education	Lower Education	10 (55,6)	17 (94,4)
	Higher Education	8(44,4)	1 (5,6)
Work	Not Working	14 (77,8)	15 (83,3)
	Work	4 (22,2)	3 (16,7)

Table 2.
Differences in mean anxiety before and after in the intervention and control groups in 2023

Variable	Group	Measurement	Mean	SD	P-value
Anxiety	Intervention Group	Before	31,78	9,020	0,000
		After	21,94	6,725	
	Control Group	Before	32,28	5,475	0,169
		After	34,06	7,557	

Table 2 above shows that the average anxiety in both groups was the same. In the intervention group the average anxiety before treatment was 31.78 ± 9.020 and after treatment was 21.94 ± 6.725 , there was a significant difference in the average anxiety of respondents in the intervention group before and after the ISM treatment obtained a value of P-value = 0.000 which means there is an influence of ISM intervention The control group averaged anxiety before 32.28 ± 5.475 and after 34.06 ± 7.557 . There was no significant difference in the average anxiety of respondents in the control group before and after with a value of P-value = 0.169.

Table 3.
Comparison of intervention and control group anxiety mean in 2023

Variable	Group	Mean	SD	ONE	P Value
Anxiety	Intervention	21,94	6,725	1,585	0,000
	Control	34,06	7,557	1,781	

Table 3 shows the mean value of anxiety after the intervention group ISM treatment and without treatment the control group shows that there is a significant difference in the average anxiety of respondents after treatment with p value = 0.000. Table 3 above shows that the average anxiety in both groups was the same. In the intervention group the average anxiety before treatment was 31.78 ± 9.020 and after treatment was 21.94 ± 6.725 , there was a significant difference in the average anxiety of respondents in the intervention group before and after the ISM treatment obtained a value of P-value = 0.000 which means there is an influence of ISM intervention The control group averaged anxiety before 32.28 ± 5.475 and after 34.06 ± 7.557 . There was no significant difference in the average anxiety of respondents in the group

Table 4.
Wilks' Lambda multivariate analsis

Wilks' Lambda	Value	Observed Power	P – Value
	0,111	96.262	0,000

Table 4 of mulivariate test results using MANOVA (Multivariate Analysis of Variance) shows Wilks' Lambda Results (0.000) that there are significant differences between groups in linear combinations of measured response variables, Observed power values (96.262) show good analytical strength in detecting significant differences and p-values (0.000) indicates that it can be considered statistically significant.

Table 5.
Multivariate analysis influences age, sex, education and employment history

Variable	Value	Observed Power	P – Value
Age	0,422	2,240	0,007
Gender	0,695	3,683	0,006
education	1,222	6,479	0,005
work	0,033	0,175	0,009

Based on table 5, the P-Value is 0.004. This interprets that the results of multivariate tests using MANOVA (Multivariate Analysis of Variance) found that all variables affect anxiety and the variable that most affects anxiety is the ISM intervention.

DISCUSSION

The results of research on the characteristics of hypertensive patients who experience anxiety provide an interpretation that most hypertensive patients are over 45 years old. The findings of the study are supported by the theory that the pathophysiological mechanism underlying the relationship between hypertension and anxiety is caused by microvascular lesions in the prefrontal and subcortical regions that can cause anxiety. In addition, recent evidence suggests that hypertension and anxiety share genes that can cause oxidative stress, low-grade inflammation and dysregulation of the hypothalamic-pituitary-adrenal axis (Wang, 2023). The results of this study are supported by research by Wang, et.al (2023) that the age of more than 45 years of hypertensive patients experience anxiety as much as 21.6%

The researcher's analysis that the results of research and theory support each other

The results of research on sex characteristics as much as that most people with hypertension are women, in addition to the number of population is also women. The findings are supported by research by Yupan, et.al in 2021, The findings are in accordance with the results of Wang et's research. al. (2023) as many as 15.3 % or Women with hypertension have anxiety OR= 1.48.95%, 8., 95 % CI 1.28 to 1.71) The next characteristic of education, The results showed that the majority of respondents' education was low. These results are in accordance with the theory that the level of education related to knowledge plays a role in determining the quality of a person, especially in digesting the information provided (NotoAtmojo, 2012). Based on the results of Riskesdas (2018) that people with hypertension who have low education as much as 51.6%. These results are supported by the results of Rizqiani's 2018 research showing that low education in hypertensive patients with anxiety as much as 89%.

The next characteristic is work. The results showed that respondents were generally not working or housewives. The results of the study are in accordance with Riskesdas 2018 data Islamic Spiritual Mindfulness based on breathing exercise (ISM) on anxiety in hypertensive patients. The results showed that the average anxiety in the intervention group before and after ISM treatment changed. obtained value P-value = 0.000 The results of the study are in accordance with the theory The mechanism between anxiety and hypertension is very complex . Generally anxiety increases blood pressure, systemic vascular resistance, sympathetic activity, plasma renin activity, homeostasis and blood lipid models. First, anxiety increases blood pressure in the short term and the white coat effect derived from anxiety, a typical example (Spruill, et al, , ogedegbe, et.al, in Yupin et, al, 2015). A study looking at blood pressure, reported that anxiety disorders were associated with nocturnal and early morning hypertension in hypertensive patients. (kayano, et al, in Yupin, et al, 2015). Second, anxiety has a close relationship with the renin angiotensin system and increases angiotensin II levels. (Saavedra JM, et.al, 2005, Kulakowski A, et al, in Yupin et al 2015) Long-term anxiety can decrease vascular variability, so persistent vascular resistance leads to hypertension. Third, some experiments show that patients

with anxiety usually have signs of physiological activation in sympathetic, anxiety can greatly stimulate sympathetic nerve flow and vasovagal reflexes. According to Rozanski et al. in Yupin et al., 2021 argues that anxiety can activate the sympathetic nervous system increase cardiac output, In addition, prolonged anxiety states will increase the sympathetic response and more easily activate the sympathetic nervous system Activation of the sympathetic nervous system not only reduces renal blood flow, increases renal water and sodium retention, also increases blood pressure Such conditions damage endothelial cells, causes endothelial dysfunction and increases the risk of atherosclerosis. Activation of sympathetic nerves can cause abnormal hemodynamic changes and abnormal lipid metabolism, such as a decrease in high lipoprotein cholesterol density and an increase in low lipoprotein cholesterol density, thus affecting endothelial function In addition, endothelial cells with high sympathetic nerve activity cause structural changes and greater immune reactivity Fourth, the hypothalamo-pituitary-adrenal axis is a physiological stress response system There is a main in the body.

When this axis is not functioning, steroid hormone secretion increases causing water and sodium retention, causing high blood pressure Furthermore, an indirect link between anxiety and an increased risk of hypertension may also occur from subjective traits in anxiety, usually having an unhealthy lifestyle in general. In other words, they usually have some adverse behaviors, such as overeating, smoking, drinking alcoholic beverages, lack of exercise, easy stress and anxiety, this has an impact on health. Thus, anxiety and hypertension may interact to affect human health. What's more, anxiety is one of the obstacles in the treatment of hypertension Commitment with previous studies, Psychological intervention to reduce stress is one of those mindfulness that has the potential for the treatment of clinical disorders and facilitates the development of a healthy mind and the improvement of well-being The practice of mindfulness improves emotional regulation and improves stress. Studies have shown that mindfulness alters the physical structure of the brain Investigations have shown that, the fronto-limbic networks involved in this process show different patterns of engagement with mindfulness These changes have been evaluated separately in previous studies. Nonetheless, given the importance of hypertension and its impact on quality of life and stress, we aimed to assess the effects of Mindfulness meditation on blood pressure, mental health, and quality of life in patients with hypertension. The results of this meta-analysis show an association between anxiety and the risk of increased hypertension Babak et al, 2022.

Mindfulness-based therapies are usually viewed as integration therapies of Buddhist psychology and western psychology, such as mindfulness-based stress reduction (MBSR), mindfulness cognitive behavioral therapy (MBCT), dialectical behavior therapy (DBT), and acceptance and commitment therapy (ACT), and mindfulness-based relapse prevention (MBRP). But long before Islam had already practiced it. In a review of the Islamic tradition called Muroqabah which specifically adopts Islamic theological and psychological sources, revealing that many aspects of mindfulness-based therapy models also exist in the Islamic tradition and are an integral part of Sufi psychology (Nazila, 2019). Various clinical research studies have shown that various physical and mental health problems are aided by mindfulness-based therapies, Interest in Muslim and non-Muslim meditation practices is growing in Islamic psychotherapy (Simkin and Black 2014). In this case, muraqabah is an Islamic contemplative practice that is widely used as therapy (Haque et al. 2016). Although muraqaba-based mindfulness-based therapies can be used also by non-Muslim therapists with proper training, Muslim psychotherapists can especially benefit by practicing them in their efforts to deal with mental, emotional, and spiritual health issues expressed by Muslim clients. Muraqaba can be used as a meditation-based therapy in Islamic psychotherapy not only based on Islamic tradition but can be combined with other Mindfulness-based therapies such as Mindfulness-based Stress Reduction (MBSR),

Mindfulness-based Cognitive Therapy (MBCT), Dialectical behavior Therapy (DBT), Acceptance and commitment therapy Acceptance and Commitment therapy (ACT), and Mindfulness-based Relapse Preventive (MBRP).

Muraqaba also contains the same idea with variations in meditation styles, this section explains the classic techniques in muraqaba, and how they can be used for therapeutic purposes such as spiritual, mental and emotional well-being. Muraqaba techniques comprise Mushada (observation) Tasawwur (imagination), Tafakkur (contemplation of creation) Tadabbur (contemplation of the names/attributes of God and Muhasaba (self-evaluation) with its therapeutic implications the presence of presence, focused attention on monitoring, creativity, connecting with the self, nature and higher powers and tranquility The above concept is supported by the findings of the research results of Resti Pratiwi and Maryatun (2023) with statistical test results on respondents showing p values of $0.000 < 0.05$. Another study that is in line is the RCT Study conducted by Babak (2022) in Iran on a population of adult women who have hypertension (age = 30–59 years)

Amjadian, et.al, 2020 conducted RCT research by providing Islamic Spiritual intervention and physiological respiratory techniques against anxiety, depression and psycho-physiological in patients after coronary artery surgery showed significant results with P P values < 0.05 . Based on previous research, the experimental results of Islamic Spiritual mindfulness affect anxiety in hypertensive patients with a value of $P = 0.00$. Future research is expected to be conducted in different communities with larger samples Islamic Spiritual Mindfulness based on Breathing Exercise had the lowest significance score with p value < 0.004 compared to age, sex, education and occupation, on anxiety. The results of the study are in accordance with the theory of the age of hypertensive patients over 45 years experiencing a lot of anxiety

CONCLUSION

The conclusion of this study is supported by a study conducted by Wang, et.al, (2023) that hypertension is significantly correlated with a higher likelihood of anxiety disorders in women aged 40-70 years 56 (49-64) p value < 0.001

REFERENCES

- Wang, X., Gao, D., Wang, X., Zhang, X., & Song, B. (2023). Hypertension, socioeconomic status and depressive and anxiety disorders: a cross-sectional study of middle-aged and older Chinese women. *BMJ open*, 13(12), e077598. <https://doi.org/10.1136/bmjopen-2023-077598>
- Benenson, I., Waldron, F. A., Jadotte, Y. T., Dreker, M. P., & Holly, C. (2021). Risk factors for hypertensive crisis in adult patients: a systematic review. *JB1 evidence synthesis*, 19(6), 1292–1327. <https://doi.org/10.11124/JBIES-20-00243>
- Shen, H., Zhang, R., Zhang, X., Zhang, Y., Liu, Y., Song, W., Cheng, Y., Yang, M., Jiang, Y., & Lu, Y. (2023). Moderating effect of mindfulness on the relationship between anxiety and somatization symptoms in middle-aged and elderly female patients with hypertension. *Journal of clinical hypertension (Greenwich, Conn.)*, 25(7), 647–654. <https://doi.org/10.1111/jch.14670>
- Munif, B., Poeranto, S., & Utami, Y. W. (2019). Effects of Islamic Spiritual Mindfulness on Stress among Nursing Students. *Nurse Media Journal of Nursing*, 9(1), 69-77. <https://doi.org/10.14710/nmjn.v9i1.22253>

- Inka Papenfuss a., Miriam J.J. Lommen a , Christian Grillon b , Nicholas L. Balderston b,c , Brian D. Ostafin (2021) Responding to uncertain threat: A
- Levit-Binnun, N., Arbel, K., & Dorjee, D. (2021). The Mindfulness Map: A Practical Classification Framework of Mindfulness Practices, Associated Intentions, and Experiential Understandings. *Frontiers in psychology*, 12, 727857. <https://doi.org/10.3389/fpsyg.2021.727857>
- Liu, H., Cai, K., Wang, J., & Zhang, H. (2023). The effects of mindfulness-based interventions on anxiety, depression, stress, and mindfulness in menopausal women: A systematic review and meta-analysis. *Frontiers in public health*, 10, 1045642. <https://doi.org/10.3389/fpubh.2022.1045642>
- Ketut Candrawati, S. A., Dwidianti, 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. <https://doi.org/10.14710/hnhs.1.1.2018.35-45>.
- Babak, A., Motamedi, N., Mousavi, S. Z., & Ghasemi Darestani, N. (2022). Effects of Mindfulness-Based Stress Reduction on Blood Pressure, Mental Health, and Quality of Life in Hypertensive Adult Women: A Randomized Clinical Trial Study. *The journal of Tehran Heart Center*, 17(3), 127–133. <https://doi.org/10.18502/jthc.v17i3.10845>
- Pan Y, Cai W, Cheng Q, Dong W, An T, Wang J. Association between anxiety and hypertension: a systematic review and meta-analysis of epidemiological studies. *Neuropsychiatr Dis Treat*. 2015;11:1121-1130 <https://doi.org/10.2147/NDT.S77710>
- Shamsi, A., Nayeri, N. D., & Esmaeili, M. (2017). Living with hypertension: A qualitative research. *International Journal of Community Based Nursing and Midwifery*, 5(3), 219-230.
- Aungsuroch, Y., Gunawan, J., Polsook, R., Anurung, S., Phongphibool, S., & Nazliansyah, N. (2021). Barriers and Challenges in Managing Hypertension in Belitung, Indonesia: A Qualitative Study. *Nurse Media Journal of Nursing*, 11(3), 305-317. <https://doi.org/10.14710/nmjn.v11i3.42135>
- Lee, E. K. P., Yeung, N. C. Y., Xu, Z., Zhang, D., Yu, C. P., & Wong, S. Y. S. (2020). Effect and Acceptability of Mindfulness-Based Stress Reduction Program on Patients With Elevated Blood Pressure or Hypertension: A Meta-Analysis of Randomized Controlled Trials. *Hypertension (Dallas, Tex. : 1979)*, 76(6), 1992–2001. <https://doi.org/10.1161/HYPERTENSIONAHA.120.16160>
- Kai Song , Yating Wang, MMeda , Li Shen , Jinwei Wang , Rong Zhang, Complementary and alternative therapies for generalized anxiety disorder A protocol for systematic review and network meta-analysis PROSPERO registration number: CRD42022377065
- Nazila Isgandarova (2019). Muraqaba as a Mindfulness-Based Therapy in Islamic Psychotherapy ,*Journal of Religion and Health*(2019) 58:1146–1160 <https://doi.org/10.1007/s10943-018-0695-y>
- H. W. Suh et al., "The mindfulness-based stress reduction program for improving sleep quality in cancer survivors: A systematic review and meta-analysis," *Complement. Ther. Med.*, vol. 57, p. 102667, 2021, doi: 10.1016/j.ctim.2021.102667.
- J. Martín et al., "Variables related to health-related quality of life among breast cancer

- survivors after participation in an interdisciplinary treatment combining mindfulness and physiotherapy," *Cancer Med.*, Vol. 12, No. 12, p. 13834–13845, 2023, doi: 10.1002/cam4.6035.
- Saged, A. A. G., Sa'ari, C. Z., Abdullah, M. B., Al-Rahmi, W. M., Ismail, W. M., Zain, M. I. A., & alShehri, N. B. A. B. M. (2022). The Effect of an Islamic-Based Intervention on Depression and Anxiety in Malaysia. *Journal of religion and health*, 61(1), 79–92. <https://doi.org/10.1007/s10943-021-01484-3>
- Amjadian, M., Bahrami Ehsan, H., Saboni, K., Vahedi, S., Rostami, R., & Roshani, D. (2020). A pilot randomized controlled trial to assess the effect of Islamic spiritual intervention and of breathing technique with heart rate variability feedback on anxiety, depression and psycho-physiologic coherence in patients after coronary artery bypass surgery. *Annals of*
- Goldberg, S. B., Riordan, K. M., Sun, S., & Davidson, R. J. (2022). The Empirical Status of Mindfulness-Based Interventions: A Systematic Review of 44 Meta-Analyses of Randomized Controlled Trials. *Perspectives on psychological science : a journal of the Association for Psychological Science*, 17(1), 108–130. <https://doi.org/10.1177/1745691620968771>
- Bagereka, P., Ameli, R., Sinaii, N., Vocci, M. C., & Berger, A. (2023). Psychosocial-spiritual well-being is related to resilience and mindfulness in patients with severe and/or life-limiting medical illness. *BMC palliative care*, 22(1), 133. <https://doi.org/10.1186/s12904-023-01258-6>.
- Resti Pratiwi, & Maryatun. (2023). Pengaruh Terapi Mindfulness Spiritual Islam Terhadap Tingkat Kecemasan Pada Lansia di Posyandu Cempaka Grogol. *Jurnal Keperawatan Mandira Cendikia*, 2(1), 75–84. Retrieved from <https://journal-mandiracendikia.com/index.php/ojs3/article/view/450>
- Kusnul EH, Maryatun Alfina Hidayah. (2022) Intervensi Mindfulness Spiritual Islam Upaya penurunan kecemasan pada Lansia Hipertensi Era Normal Covid 19 di desa Bangun rejo Ngawi *Jurnal Formil (Forum Ilmiah) KesMas Respati* vol 8 No 1 , januari 2022, pp 23-33
- Xiang Zhoua, Jieyu Guoa, Guangli Lub, , Chaoran Chena, Zhenxing Xiec, Jiangmin Liud, Chuning Zhanga (2023) Effects of mindfulness-based stress reduction on anxiety symptoms in young people: A systematic review and meta-analysis *Psychiatry Research* journal homepage: www.elsevier.com/locate/psychres