



## The Effect Of Meditation Therapy On Reducing Public Stress Levels Due To The Covid-19 Pandemic At Mojosongo Surakarta

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### Article Info

#### Article History :

Received  
December 2021  
Accepted  
March 2022  
Published  
July 2022

#### Keywords:

mindfulness, meditation,  
stress, covid-19 pandemic

### Abstract

Almost all countries are experiencing an outbreak of the corona virus or covid-19. The emergence of a pandemic causes stress at various levels of society. Stress is a mental disorder faced by a person due to pressure. One of the effective therapies to reduce the level of stress experienced by the community is Mindfulness Meditation. Mindfulness meditation has been shown to significantly have an effect on reducing stress levels experienced by people due to the Covid-19 pandemic. This study aims to determine the effect of Mindfulness Meditation therapy on reducing stress levels. This study uses the Pre Experiment technique with One Group Pre and Post Design. The sample in this study was the people of Karanganyar RT 3 RW 11 Palur. The number of samples used was 50 patients. The sampling technique used was purposive sampling technique. After statistical testing using Wilcoxon, the results obtained a significance of 0.000 ( $p$  value  $< 0.05$ ). There is an effect of Mindfulness meditation therapy on reducing stress levels in the community due to the pandemic in Mojosongo Village, Surakarta.

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p-ISSN 2339-0344

e-ISSN 2503-2305

## INTRODUCTION

Since the beginning of the year until the end of 2020, almost all countries have experienced an outbreak of the corona virus or covid-19. On March 11, 2020, COVID-19 was declared a pandemic. Furthermore, WHO (2010) explains that a pandemic is an epidemic of a disease that spreads globally, meaning that it does not only occur in one country but in almost all countries in the world. Internationally Covid-19 has spread to 222 Infected countries with a confirmed number of 75,110,651 people positive for Covid-19 and 1,680,395 people died (WHO updated data, 20 December 2020, 23:34 GMT+7). In Indonesia, until now there has been a spike in cases of 664,930 confirmed Covid-19, 541,811 recovered, and 19,880 people died (data update, 20 December 2020). A large number for an epidemic or pandemic that infects the human body.

Such conditions due to the emergence of the covid-19 pandemic have an impact on almost all existing sectors, from the health, education, economic, and even social sectors. There are various changes due to covid-19, the community inevitably has to adapt to the existing situation. Paragraph 1 UU RI No. 18 of 2014) Mental health is very important to be improved in the community. Currently, people are physiologically vulnerable to contracting the symptoms of COVID-19. On the other hand, the community is faced with a psychological vulnerability that is closely related to a decline in mental health (Kemenkes RI, 2018). Stress, anxiety and even depression mean that it becomes a psychological condition that can happen to anyone affected by COVID-19. The emergence of a pandemic causes stress at various levels of society (WHO, 2020).

Stress is a mental disorder faced by a person due to pressure. This pressure arises from the failure of individuals to fulfill their needs or desires. Stress can be positive and negative. Researchers argue that challenge stress, or stress that accompanies challenges in the work environment, operates very differently from obstacle stress or stress that hinders achieving goals. Several factors that affect stress, namely: Environmental factors, organizational factors and personal factors. Especially with the Corona

Virus Disease or Covid-19 pandemic, all aspects of life have changed. Economic inflation has also decreased, several employees have been laid off and even laid off from work. The level of psychological distress is influenced by the availability of health facilities, the efficiency of the public health system, the prevention and control measures taken to deal with the epidemic situation. Psychological distress that occurs will affect a person's physical health condition.

The impact of stress can trigger physical and mental conditions. Research results state that stress can have an impact on a person's immune system. The immune system will decrease so that the body becomes difficult to fight disease. If you experience prolonged stress, a person's condition will experience diabetes, headaches, high blood pressure, disturbances in sleep patterns, stomach acid, premature aging and even Alzheimer's disease.

The way to deal with stress and achieve a healthy soul according to the Indonesian Ministry of Health (2018) is to talk about complaints with someone you can trust, doing activities that match your interests and abilities. A compromised immune system can cause disease. According to Mardian (2016) meditation is a way to reduce the stress response with relaxation techniques. Meditation is very beneficial for human life. Because by doing meditation, you can achieve health, peace, and inner and outer happiness, so the researchers tried to provide meditation therapy to reduce stress levels.

The benefits of meditation can be directly or indirectly felt physically. One of these benefits is the healing we get, if we suffer from certain illnesses. Today science is showing the benefits of meditation objectively. Research on priests by the University of Wisconsin shows that the practice of meditation trains the brain to produce more Gamma waves, which are produced when people feel happy.

Based on a preliminary study on January 24, 2021, it was found that during the spread of the covid-19 virus until now many in the Mojosongo district were confirmed to have Covid-19, so the state issued strict regulations to maintain distance, eliminate gatherings that make people gather, restrict villages from residents outside the village, obeying regulations or

carrying out health protocols according to central government regulations. In accordance with this, it is necessary to further investigate whether meditation can reduce stress levels in the community in Mojosongo Village, Jebres District, Surakarta Regency due to the Covid-19 pandemic? And how is the effect of meditation with stress levels on the people of Mojosongo Village, Jebres both physically and psychologically.

Based on the description of the background above, in this case the researcher wants to apply meditation to the community to reduce the level of stress experienced by the community due to the Covid-19 pandemic, especially in Mojosongo Village, Jebres District, Surakarta Regency.

**Table 1.** Research Design

Pre Test	Treatment	Post Test
01	X	02

Information :

01: Identifying stress levels prior to meditation therapy

X: Giving therapy (mindfulness meditation ends with dhikr for 30 minutes)

02: Identifying stress levels after meditation therapy

This research was conducted for 2 weeks and performed 2 times of meditation therapy in Mojosongo Surakarta. The population in this study were 100 residents of Mojosongo Surakarta. The research sample was taken using the purposive sampling method, the number of samples taken was based on inclusion and exclusion criteria, safety, time effectiveness in monitoring respondents, namely the residents of Mojosongo Surakarta.

Samples were selected with sample criteria consisting of inclusion criteria and exclusion criteria as follows:

a. Inclusion Criteria

1. Residents of Mojosongo Surakarta
2. Age 20 - 65 years old
3. Experiencing mild to moderate stress
4. Willing to be a respondent

b. Exclusion Criteria

1. Not willing to be a respondent

## METHOD

The type and design of this study used a pre-experimental type of research with a one-group pre-post-test design. The characteristic of this type of research is to reveal a causal relationship by involving a group of subjects. Subject groups were observed before conducted intervention, then observed again after the intervention (Nursalam, 2015). So that this study uses a pretest by providing a questionnaire/questionnaire for the respondents to make it easier for researchers to get information on the level of stress experienced by the community then respondents are given meditation therapy as a Post-Test or final observation.

### 2. Severe stress

The research instrument is a measuring tool used in research. The choice of research instrument in the form of a questionnaire, namely DASS. The Depression Anxiety Stress Scale (DASS) was developed by Lovibond in 1995. This DASS consists of 42 items or questions that measure general psychological distress such as depression, anxiety, and stress. DASS 42 aims to identify the emotional status of 49 individuals who are usually described as stressed with 42 questionnaires, each with 14 questions about levels of depression, anxiety and stress. Furthermore, it is divided into several sub-scales consisting of 2 to 5 items that are estimated to measure the same thing.

Based on the international journal Austrian Center Posttraumatic Mental Health (2013), DASS has sections, namely Anxiety, Depression, and stress. Questions for depression include numbers 3, 5, 10, 13, 16, 17, 21, 24, 26, 31, 34, 37, 38, 42. Questions for anxiety include numbers 2, 4, 7, 9, 15, 19, 20, 23, 25, 28, 30, 36, 40, 41. Questions for stress include numbers 1, 6, 8, 11, 12, 14, 18, 22, 27, 29, 32, 33, 35, 39. However because researchers only use a stress scale in their research, so that 14 questions are used according to the list of questions to measure the stress scale

based on the explanation above and have been previously analyzed in the form of validity and reliability tests.

**Table 2.** Criteria for stress questionnaire DASS 42 Source: (Lovibond, SH; Lovibond, 1995)

<b>Condition</b>	<b>Depression</b>	<b>Anxiety</b>	<b>Stress</b>
<b>Normal</b>	<b>0 – 9</b>	<b>0 – 7</b>	<b>0 – 14</b>
<b>Light</b>	<b>10 – 13</b>	<b>8 – 9</b>	<b>15 – 18</b>
<b>Currently</b>	<b>14 – 20</b>	<b>10 – 14</b>	<b>19 – 25</b>
<b>Heavy</b>	<b>21 – 27</b>	<b>15 – 19</b>	<b>26 – 33</b>
<b>Very heavy</b>	<b>28 +</b>	<b>20 +</b>	<b>34 +</b>

Before taking the action, the researcher explained the action to RW 27 Mojosoongo Surakarta regarding the actions to be taken when the research was to be carried out. After being given permission, the researcher gave an informed consent sheet to the prospective respondent from house to house according to the health protocol with inclusion and exclusion criteria for the study to be taken as a prospective respondent and was willing to sign the informed consent as proof of readiness or consent of the respondent.

1) Pre-Test

Researchers gave a pre-test to respondents with the aim of knowing the level of stress due to the Covid-19 pandemic on respondents, before being given mindfulness meditation therapy actions using the DASS 42 questionnaire based on 14 numbers according to the stress question that the respondent would fill out based on the inclusion and exclusion criteria of the study.

2) Action or Intervention

After doing the pre-test, respondents will get directions before being given mindfulness meditation therapy. Mindfulness therapy actions were carried out for 2 meetings, each meeting session was carried out for approximately 30 minutes and dhikr for 5-10 minutes.

3) Post-Test

This will be done after 2 times of mindfulness meditation therapy, by filling out the DASS 42 questionnaire to find out the results of the research conducted on the respondents.

4) Evaluation Stage

At this stage, researchers evaluate the actions that have been taken regarding changes in stress levels due to the Covid-19 pandemic on respondents.

5) Data analysis

This study used the DASS 42 questionnaire and then the results of the answer sheets were analyzed by researchers using univariate and bivariate data analysis tests.

## RESEARCH RESULTS AND DISCUSSION

### Result

This research was conducted in RW 27, Mojosoongo hamlet, Surakarta. Data were collected through filling out the DASS 42 questionnaire by fifty respondents before and after mindfulness meditation therapy was performed. From the data obtained by the researchers, the results showed that Hamlet Karanganyar has 2 RWs and 7 RTs, namely in RW 10 there are 4 RTs and RW 11 with 3 RTs. According to data from the head of the local RT in RW 11, in the area of RT 1 there are 71 families, and  $\pm 270$  residents, in RT 2 there are 80 Families with a population of  $\pm 243$ , while in RT 3 there are 56 families with a population of  $\pm 173$  people. So the number of residents of RW 11 Hamlet Mojosoongo Surakarta is  $\pm 586$  people and 207 families. Precisely in RW 11 Mojosoongo Surakarta there are also several industrial places, namely the textile industry factory and the beauty industry.

The research was conducted on the community from 8 to 22 March 2021 in Mojosoongo, Surakarta. There were 50 respondents who became the object of research

and with the criteria of experiencing low stress levels and moderate stress, but because all of them received meditation therapy, all data were still included.

1. Univariate Analysis

- a. Characteristics of respondents who experience stress and before being given mindfulness meditation therapy interventions in the community in Mojosongo, Surakarta.

**Table 3.** Stress Scale Based on Characteristics of Respondents

<b>Characteristics</b>	<b>Frequency</b>	<b>%</b>
<b>Gender</b>		
Man	17	34%
Woman	33	66%
<b>Age</b>		
20 – 35 years	23	46%
36 – 45 years	10	20%
46 – 55 years old	12	24%
56 – 65 years old	5	10%
20 – 35 years	23	46%
<b>Educational background</b>		
Elementary School	6	12%
Junior High School	16	32%
Senior High School	22	44%
Bachelor Degree	6	12%
<b>Worker</b>		
IRT	14	28%
Student	10	20%
Laborer	11	22%
Self-employed	3	6%
Private employees	9	18%
Teacher	1	2%
Retired	2	4%

Based on table 3, it can be seen that based on the characteristics of the respondents it was found that the gender of the respondents was more female, namely 66% or a number of 33 respondents compared to the male respondents, which amounted to 17 respondents (34%). Then,

more in the age range of 20 to 35 years, with the educational background of the respondents, namely from SMA / SMK graduates, 22 respondents (44%) and most of the respondents, namely 14 respondents (28%) as housewives.

b. Respondent Stress Scale

**Table 4.** Stress Scale Before and After Giving Meditation Therapy Intervention

<b>Stress Scale</b>	<b>Pre-Test Meditation Therapy</b>		<b>Post-Test Meditation Therapy</b>	
	<b>Freq</b>	<b>%</b>	<b>Freq</b>	<b>%</b>
Normal	3	6%	29	58%
Low	33	66%	19	38%
Currently	14	28%	2	4%

Based on the results from table 4, it is known that the level of stress scale in respondents before meditation therapy was 33 respondents

experienced low stress levels but after mindfulness meditation intervention as many as 29 respondents had normal stress levels.

2. Bivariate Analysis

This bivariate analysis was carried out on two variables that were thought to be related, the two variables of this study were meditation with a decrease in stress levels due to the COVID-19 pandemic in the community.

a. Normality test

Normality test is used to see whether the data is normally distributed or not. In this test, the researcher uses the Kolmogorov-Smirnov normality test because there are 50 samples or a *df* of 50 samples.

**Table 5.** Kolmogorov-Smirnova Normality Test

Mindfulness Meditation	Statistics	df	Sig.
Meditation Therapy Pre-Test	0.377	50	,000
Meditation Therapy Post-Test	0.367	50	,000

Based on table 4.3, the significance value of mindfulness meditation is 0.00, which shows *p* value <0.05, which means that the Meditation Therapy Pre-Test data is not normally distributed. In addition, the significance value of the Meditation Therapy Post-Test which also shows *p* value <0.05, it can be concluded that the post-

intervention data is also not normally distributed. So, from the results of the Kolmogorov-Smirnova normality test, the results of the pre and post Meditation Therapy data were not normally distributed. Because the data are not normally distributed, the Wilcoxon test was performed.

3. Wilcoxon test

**Table 5.** Results of Wilcoxon Analysis of Differences Before and After Do Mindfulness Meditation

Z	-5.729b
asymp. Sig. (2-tailed)	0.000

Based on the Wilcoxon test results, significant results were obtained 0.00 which means *p* value <0.05 so it can be said that *H<sub>0</sub>* is rejected and *H<sub>a</sub>* is accepted or there is an influence of Mindfulness Meditation on reducing stress levels in the community in Mojosoongo, Surakarta.

**Discussion**

In this discussion, the researcher explains the results of the research above and compares them with existing theories. The results of the study are in accordance with what has been described above in the form of univariate analysis and bivariate analysis.

1. Characteristics of respondents

Stress can be triggered by many factors such as age, education, occupation, interests, experience, environment, culture, and information (Georgia, 2013).

a. Respondent Stress Scale by Gender

The results of the research conducted by researchers showed that most of the respondents were female, namely 33 respondents (66%) compared to the number of male respondents, namely 17 people or 34%. This statement is reinforced by the results of research (Qiu, J., Shen, B., Zhao, M., Wang, Z., Xie, B., & Xu, 2020) which states that psychological distress is more experienced by female respondents than male respondents. - men, where women are considered more susceptible to stress than men.

In addition, based on research (Rahmayani et al., 2019) entitled "Overview of Stress Levels Based on Stressors in First Year Medical Students of the Doctor Profession Study Program, Faculty of Medicine, Andalas University Class of 2017", Based on gender, stress levels were higher in the female group (30, 8%). The results of this study are in accordance with the theory put forward by an expert about the stress response in men and women. The difference in stress response in men and women is related to the activity of the HPA

axis and the sympathetic nervous system which will provide negative feedback when the body is under stress. The HPA axis works in regulating the production of the hormone cortisol, while the sympathetic nervous system works in regulating heart rate and blood pressure. HPA and autonomic responses are higher in men so that they affect a person's response to dealing with stressors. In addition, sex hormones in women will decrease HPA and sympathoadrenal responses which can cause a decrease in the negative feedback of the hormone cortisol to the brain so that women tend to be easily stressed (Wang J, Korczykowski M, Rao H, Fan Y & Gur RC, 2011). This research was also supported by the Head of the Psychiatric Medicine Specialist Education Study Program, FKMK UGM, dr. Ronny Tri Wirasto, Sp.KJ (2020, in Ika, 2020) explained that women become more emotionally vulnerable due to several factors. One of them is related to physical health. For example, if the pain is ignored and eventually builds up making it more vulnerable. In addition, women have a tendency to think more than men.

Thus, women are more susceptible to stress than men. Caused by several factors, one of which is a problem or burden that is often buried or only thought to affect physical health, women also think of something excessive so that it can affect their psyche.

#### b. Respondent Stress Scale by Age

The results of research conducted by researchers show that most of the respondents are in the age range of 20 to 35 years or early adulthood with a total of 23 respondents (46%). Supported by the research of Awalia et al., (2021) entitled "The Relationship of Age and Gender with Work Stress on Nurses in the Inpatient Room at Kwaingga Hospital, Keerom Regency" the results showed that the number of respondents aged 26-35 years experienced stress.

According to research (Lusia Nasrani, 2020) Age is related to a person's tolerance for stress. Then from the results of the study (Qiu, J., Shen, B., Zhao, M., Wang, Z., Xie, B., & Xu, 2020) stated that psychological distress was more experienced by respondents aged 18 to 30 years, where respondents at this age are actively seeking the latest information about the corona virus, which in turn causes stress.

In the range of early adulthood, which is a productive age, a person is required to seek as much experience as possible, and at this age a lot of pressure or workload is given. With so many demands, it is not uncommon for them to feel exhausted both physically and mentally.

#### c. Respondent Stress Scale Based on Educational Background

The results of the research conducted by the researchers showed that most of the respondents were educated at high school /vocational school. The results of this study are in accordance with Harlianty's (2020) research entitled "Study on Awareness of Covid-19, Anxiety and Compliance on Social Distancing in Indonesia During Coronavirus Disease 2019 (COVID-19) Pandemic" it was found that the level of education varied from high school graduates / equivalent (35.1%) or a total of 142 respondents from 404 respondents.

In this case the level of education affects the stress scale, this statement is supported by the results of research (Qiu, J., Shen, B., Zhao, M., Wang, Z., Xie, B., & Xu, 2020) which states that distress Psychological problems are more experienced by respondents with a high level of education, where these respondents are too self-conscious about their health conditions. The level of psychological distress is influenced by the availability of health facilities, the efficiency of the public health system, the prevention and control measures taken to deal with the epidemic situation.

However, in Irkhami's (2015) research entitled "Factors Associated with Work Stress on Divers at PT. X" shows that most of the respondents who graduated from high school had moderate work stress (71.4%) with the Spearman coefficient value showing a value of -0.220 which means that there is an inverse relationship, namely the higher the level of education, the lower the level of work stress.

So it can be concluded that educational background is not a benchmark or a major factor in psychological distress. Because in the research it is known not from the higher or lower level of education but there are other factors, one of which is a person's individual coping. Good individual coping will be able to manage stress. Coping is defined as behavioral and cognitive strategies

used by individuals to cope with stressful situations (Yobas, PK, Keawkerd, O., Pumpuang, W., Thunyade, C., Thanoi, W., & He, 2013).

#### d. Respondent Stress Scale Based on Work

The results of the research conducted by the researcher showed that the housewives group had a higher score than the other respondents because the main focus of the researcher was on the group of mothers in RT 03 RW 11 who mostly worked as housewives. In addition, it is supported by Fatimah's research (2014) entitled "The Difference in Stress in Working Housewives and Housewives Who Don't Work in Labuh Baru Barat Village" that getting the results of hypothesis testing, the t number is -1.589 at a significance level of 0.115 which is greater than 0.05 so that the hypothesis is rejected means that there is no difference in stress between housewives who work and housewives who do not work.

This research is also in line with research (Sudhana, 2013) because the task as a housewife can be a monotonous activity and most of it is done at home. This situation can lead to stress because in addition to demanding full responsibility in carrying out almost the same work every day in the same location, it is also isolated from the outside world because most of it is done inside the house. Carrying out monotonous activities that are carried out at home everyday for a prolonged period of time can increase the risk of stress and can affect a good function as a housewife.

Thus, housewives are vulnerable to stress due to the many problems or pressures they get, such as working at home, caring for children, managing finances during a pandemic and even regarding the health of family members.

#### 2. The Effect of Mindfulness Meditation Therapy on Reducing Stress Levels

The results showed that before being given the intervention of mindfulness meditation therapy, many respondents experienced low levels of stress, namely 33 respondents. Another statement was also said by respondents that they also sometimes feel afraid of something, have difficulty concentrating, and get angry easily. Then after doing mindfulness therapy,

respondents experienced a decrease in stress levels with the results of most respondents on a normal stress scale.

Mindfulness increases awareness of a here and now orientation, increases awareness and acceptance of current feelings and bodily conditions related to stress and increases compassion (Felton, Coates, Christopher, 2015).

Based on the results of the Wilcoxon test, the results of the significance of 0.00 are obtained, which means p value <0.05, so it can be said that the analyst hypothesis is accepted. So the research results say that there is an effect of meditation therapy on reducing stress levels due to the Covid-19 pandemic in Hamlet Karanganyar RT 3 RW 11, Palur. This research is supported by Novianty's research (2017) with the title "The Effectiveness of A Brief Mindfulness Meditation in Reducing Academic Stress in UNM Psychology Faculty Students Facing Experimental Psychology Courses". Pre-Test to Post-Test 1 shows the value (F=1.35, p=0.010), and at the time of Pre-Test to Post-Test 2 shows the value (F=1.35, p=0.000).

In the research of Syafira & Paramastri (2018), the results of stress levels before and after mindfulness therapy were obtained were obtained with the results of P = 0.001. After being given treatment, P < 0.05, which means that there is a significant effect on post mindfulness therapy treatment on stress levels in stressed adolescents at the Al-Hasan Watugaluh Orphanage, Diwek Jombang.

Meditation technique is the main method used to reduce stress. Meditation is a relaxed state to concentrate on the happening reality, or a state in which the mind is free from all kinds of thoughts, or a state free from all tiring and focused on God or a high concentration. Meditation is one of the complementary therapies that can be accepted and used to improve health, provide a sense of comfort in life and reduce signs of stress, both in healthy people and sick people (Renidayati, 2016). Meditation is very beneficial for human life. Because by doing meditation, we will be able to achieve health, peace, and happiness both physically and mentally. That individuals who do mindfulness meditation have higher self-compassion than those who do not meditate. Mindfulness meditation can improve



individual resilience and well-being (Muhyiddin, 2020).

The results of this study are also supported by Maharani's research (2016), there is a decrease in the average work stress score for PAUD teachers. Participants who practiced at least two mindfulness techniques taught in their daily life showed a more consistent reduction in stress.

In addition, the subject can control his emotions such as his anger and feel his inner calm. In addition, positive change through mindfulness has an impact on self-control and psychological functions (Bowlin & Baer, 2012)

Thus mindfulness meditation can be used to reduce stress levels in society due to the COVID-19 pandemic, because mindfulness meditation increases awareness of the present or what is being experienced and increases acceptance of current feelings. Not regrets that have been passed, besides that meditation can provide peace for those who do it and can improve one's mental health and can establish good relationships with those around them.

## CONCLUSION

Based on the results of research and discussion on The Effect of Meditation Therapy on Reducing Public Stress Levels Due to the Covid-19 Pandemic at Mojosongo Surakarta, the following conclusions are obtained:

1. Most of the respondents who experience low stress, are female, in the age range of 20-35 years, with a secondary or high school educational background, and are housewives;
2. The results showed that prior to meditation therapy, respondents experienced low and moderate stress levels;
3. After doing mindfulness meditation therapy, it was found that there was a decrease in stress levels in the low and normal stress scale;
4. Based on the results of this study, the effect after being given mindfulness meditation therapy was marked by a significant decrease in stress levels in the community due to the Covid-19 pandemic in Mojosongo, Surakarta.

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