ISLAMIC RELIGIOUS COPING STRATEGY FOR HEALTHCARE WORKER IN COVID-19 PANDEMIC: A LITERATURE REVIEW

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ABSTRACT

On March 11, 2020, WHO announced that COVID-19 was a pandemic. Healthcare workers were directly exposed to the impacts and dangers of the COVID-19 pandemic. It is important to know effective stress coping for healthcare workers to provide maximum health services. Religiosity was commonly used by healthcare workers for coping strategic COVID-19 Pandemic Religious beliefs and practices have become a powerful coping strategy among nurses. Religion could be an element of resilience for healthcare workers and served as a protective factor. Religiosity will reduce cortisol level as a biomarker of stress. For Muslim healthcare workers, stress reduction can be done by praying, salat, reading, and listening to the Holy Qur’an. Studies show that the tahajud prayer significantly reduce stress and listening to Surah Al-Rahman was significantly reduce cortisol level. Facing the COVID-19 pandemic, hospitals with Muslim healthcare workers can provide time and facilities to pray and play the Holy Qur’an in to reduce work stress.

Key Words: Islamic, Religious, Stress, Healthcare Worker
1. INTRODUCTION

On December 2019 the world was shocked by the emergence of Coronavirus Disease 2019 (COVID-19) which is a disease from a coronavirus that has never existed in humans before. On January 30, 2020, WHO declared COVID-19 a Public Health Emergency of International Concern (PHEIC). Then on March 11, 2020, WHO announced that COVID-19 was a pandemic. Healthcare workers directly exposed to the impacts and dangers of the COVID-19 pandemic. Increased cases, extreme workloads, use of personal protective equipment, risk of infection, stigma, and discrimination are sources of stress for healthcare workers. The results of a meta-analysis study with a total of 33,062 samples of healthcare workers were found 23.2% suffering from anxiety and 22.8% suffering from depression during the COVID-19 pandemic. Research on healthcare workers in Indonesia during the COVID-19 pandemic found 42.4% burnout, 49.6% anxiety, and 36.2% depression.

Healthcare workers are required to adapt to the existing situation because health services must continue. So that healthcare workers must cope with stress. One of the stress coping methods that used by healthcare workers during the COVID-19 pandemic is religiosity. It is important to know effective stress coping for healthcare workers to provide maximum health services. The purpose of this literature review is to determine the use of religiosity coping stress and its effectiveness in healthcare workers during the COVID-19 pandemic.

2. METHODS

This literature review was carried out following 1) identifying the research question, 2) identifying relevant studies, 3) study selection, 4) charting the data, and 5) collecting, summarizing, and reporting results. Databases and search strategy the scientific databases SCOPUS. The search strategy was ("healthcare worker" or doctor or nurse) AND (spiritual* OR religion*) AND stress). This literature review included both quantitative and qualitative studies published in peer-reviewed journals, using Indonesian and English language; and that have investigated that religiosity coping strategy use and its relationship with job stress on healthcare workers in COVID-19 pandemic. Restriction on publication date was not applied. Any opinion pieces, such as editorials, letters to the editors, and case reports were excluded from this review.
3. RESULTS

There is 35 article identified through database. After the initial review in the databases 20 articles were read in abstract, 15 article in full text and finally 10 articles included for analysis (Table 1).

Table 1. Result of the literature review

| No | Authors, year/country | Study design | Sample size/Participant | Aims | Finding |
|----|------------------------|--------------|------------------------|------|---------|
| 1  | ¹/Saudi Arabia         | Cross Sectional Study | 375 clinical nurses in three academic medical centres in Saudi Arabia | To investigate the professional quality of life and caring behaviours among clinical nurses in Saudi Arabia during the COVID-19 pandemic | Respondent use religiosity as a coping strategy. Religion was identified as significant predictors of BO (Burn Out) and STS (Secondary Traumatic Stress) |
| 2  | ²/Phillipine           | Cross Sectional Study | 114 Filipino healthcare worker with COVID 19 infection | To assess the level of anxiety, stress, depression and coping strategies among healthcare workers infected with COVID-19 | Results showed religiosity as the top coping strategy of the heath care workers who tested positive |
| 3  | ⁹/Turkiye              | Qualitative, case study approach | 204 medical doctors registered across 15 provinces of Turkey | To identify the psychological effects of the COVID-19 pandemic on medical doctors who were working in education and research hospitals affiliated with the Ministry of Health in Turkey | The strategies that they employed to cope with the COVID-19 pandemic are social distancing, hygiene rules and religion. |
| No | Country  | Study Type | Sample Size | Study Objective | Findings |
|----|----------|------------|-------------|-----------------|----------|
| 4  | Malaysia | Cross Sectional Study | 859 nurses actively involved in caring for patients with suspected or confirmed COVID-19 | To assess the perceived stress, stress symptoms, and levels of depression experienced by nurses and their coping strategies | Religion was the most commonly used coping strategy by the participants |
| 5  | Sri Lanka | Qualitative Study | 14 nurses participated in in-depth telephone interviews. | To explore the experiences and challenges of nurses who worked with hospitalised patients with COVID-19. | Religious beliefs and practices and keeping trust in god have become a powerful coping strategy among nurses. These beliefs help manage their stresses effectively compared to those who do not have religious practices. |
| 6  | Germany | Cross sectional | 4324 healthcare workers within the German Network University Medicine | To investigate the association of sense of coherence (SOC), social support and religiosity with self-reported mental symptoms and increase of subjective burden during the COVID-19 pandemic in Healthcare Worker | Religiosity had weak links to depression and none to anxiety in HCW. Religiosity was measured with one item that also referred to spirituality. A single-item measurement is probably insufficient to capture multiple aspects of religiosity and its dependence on cultural influences. |
| 7  | Italy   | Cross sectional | 205, who were directly involved in caring for suspected or confirmed cases of COVID-19 | To identify the measures that would be most effective in preventing prolonged stress from impairing the health of workers. | A favourable attitude towards prayer had a weak correlation with occupational rewards. A positive attitude towards prayer was associated with greater reward. |
| 8  | Pakistan| Qualitative study, 15 emergency frontline | | To examine the psychological impact of COVID-19 | Considering the data from Muslim participants, |
| # | Country | Study Design | Sample | Aim | Findings |
|---|---------|--------------|--------|-----|----------|
| 9 | USA | Cross Sectional Study | 320 Registered nurses who graduated from a nursing school in Southern California, USA | To examine the impact of various factors affecting nurses' mental health during the COVID-19 pandemic. | Nurses with high spirituality had almost a threefold lower odds of moderate/high depression. Among the nurses studied, it appears that support from a religious association, inner strength from spiritual faith, and peace and contentment from faith helps protect against depression. |
| 10 | Pakistan | Qualitative study | 15 nurses taking care of COVID-19 positive patients | To explore the psychological impact of COVID-19 on nurses taking care of COVID-19 patients in Khyber Pakhtunkhwa, Peshawar, Pakistan. | Coping and self-care styles such as exercise, physical activity, facing the reality and religious beliefs are important for the nurses to maintain their mental health. |
4. DISCUSSION

According to Haber and Runyon (1984), coping is all forms of behavior and thoughts (negative or positive) that can reduce stress. Lazarus and Folkman (1984) said that the stressful state experienced by a person will cause unfavorable effects both physiologically and psychologically. The individual will not allow this negative effect to continue, he will take an action to overcome it. Actions taken by individuals are called coping strategies. Coping strategies aim to overcome situations and demands that are felt to be pressing, challenging, burdensome, and exceeding the resources they have. In general, coping strategies are divided into two types, problem-focused coping strategies and emotion-focused coping strategies. Individuals will tend to use problem-focused coping if they judge that the problems they face are still controllable and can be solved. On the other hand, individuals will tend to use emotion-centered coping if they feel unable to change a stressful situation and can only accept the situation because the resources they have are unable to cope with the situation.

Previous research has shown that many healthcare workers use religious coping when dealing with the COVID-19 pandemic. Coping religiosity is included in emotion-centered coping. During the COVID-19 pandemic, healthcare workers are required to adapt to work stressors, because after all, health services must still be provided. The results of research on healthcare workers during the COVID-19 pandemic showed a correlation between religiosity and stress and depression. This is in line with research before the COVID-19 pandemic which found a relationship between religiosity and work stress, burnout, and emotional exhaustion. Religiosity is a protective factor against burnout and depersonalization Meta-analysis also show that religiosity gives impact on physical health, this may be due to religiosity minimizing the effects of stress. Research shows that religiosity affects cortisol levels, which is a biomarker of stress. Religiosity reduce daily and night cortisol levels, it’s because a person's religiosity helps him understand and accept stressful situations.

Currently, there is no research related to religious intervention in healthcare workers during the COVID-19 pandemic. But, in research related to interventions to reduce stress, a Muslim can pray, salat, read the holy Qur’an, and listen to the holy Qur’an to reduce stress. Salat is a spiritual and physical activity. It’s induces serenity in the body and soul. The interaction between the central nervous system and autonomic nervous system during salat promotes relaxation and minimizes anxiety for individu who regularly practice salat. Systematic review show that reading and listening to the Qur’an are useful non pharmacological treatment for reducing anxiety. The study shows that the effect of job stress on well-being is significant for nurses and that prayer of nurses contributed to
alleviating job stress and enhancing well-being.\textsuperscript{28} Tahajud prayer significantly reduce stress and listening to Surah Al-Rahman was significantly reduce cortisol level.\textsuperscript{29,30}

5. CONCLUSION

Religious coping strategies are stress coping strategies that are widely used by healthcare workers during the COVID-19 pandemic. Religion is associated with job stress and a protective factor against burnout and depersonalization. For Muslim healthcare workers, stress reduction can be done by praying, salat, reading, and listening to the Holy Qur’an. For hospitals with Muslim healthcare workers, they can provide time and facilities to pray and play the Holy Qur’an to reduce work stress.

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