

spiritual mindfulness

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Spiritual Mindfulness-Based Intervention for Nomophobia: A Randomized Controlled trial

Abstract

INTRODUCTION

The progress of information technology and the internet has brought about changes in every aspect of life and individual behavior (Aguilera-Manrique et al., 2018; Bragazzi et al., 2019; Durak, 2018; Anna Lucia S. King et al., 2010). Thanks to the remarkable advancements in information technology and internet speed, smartphones have become an inseparable part of individuals' daily lives (Jahrami, Rashed, Alrasheed, et al., 2021; Kara et al., 2019; Lee et al., 2018). The development of Android-based, iOS-based applications, and various other programs has made the capabilities of smartphones limitless (Ayırıcı, 2020; FİDANCI et al., 2021; Güner & Demir, 2021; Pivetta et al., 2019; Yildirim & Correia, 2015b). The various functions that support individual activities have turned the phone into an essential tool. The high demand for the functions offered by smartphones has led to excessive dependence on the devices themselves (Nawaz et al., 2017; Joseph et al., 2023; Brown & Medcalf-bell, 2022).

Several negative impacts of unhealthy phone usage have given rise to internet addiction (James et al., 2023), social media addiction (Boniel-nissim et al., 2022; Kim et al., 2009; Caelum & Theodora, 2022; Cataldo et al., 2022; Francisco et al., 2023; Kircaburun & Demetrovics, 2018; Schou et al., 2016), problematic phone usage (Wang et al., 2023; Muench & Muench, 2020; Study & Jahrami, 2023), phubbing (Tomczyk & Selmanagic, 2022; Wang et al., 2023; Wang & Qiao, 2022), FoMO (Brien et al., 2022; Mannion et al., 2021; Popovac & Hadlington, 2020; Sun, 2022; Świątek et al., 2021), and nomophobia (Ali et al., 2017; Argumosa-villar et al., 2017; Ercengiz et al., 2020; Gonçalves et al., 2020; Valenti et al., 2022a).

Nomophobia, short for 'no mobile phone phobia,' refers to the "fear of not being able to use a mobile phone or not being able to be contacted via phone" (Yildirim & Correia, 2015a, 2015b).

² Nomophobia refers to the "discomfort or anxiety experienced by individuals when they cannot use their phone or make use of the features provided by this device" (A. L.S. King et al., 2013)(King et al., 2013a). Nomophobia is a "new disorder" (Adawi et al., 2019; Bragazzi et al., 2019; Jahrami, Rashed, Alrasheed, et al., 2021; Jahrami, Rashed, Bragazzi, et al., 2021) or a disorder in the modern era (Argumosa-villar et al., 2017, 2017; Garc et al., 2023) caused by problematic phone usage (Valenti et al., 2022a, 2022b). Therefore, there have been suggestions to include nomophobia as a "specific phobia" in the "situation phobia" category in the Diagnostic and Statistical Manual of Mental Disorders by the American Psychiatric Association (APA) (Bragazzi & Puente, 2014).

Previous research has shown several harmful effects for individuals with high levels of nomophobia. The harmful impacts of nomophobia have been found to correlate with distress and depression (Santl & Brajkovic, 2022; Darvishi et al., 2019; Durak, 2018; Kuscu et al., 2020), loneliness (Thi et al., 2022; Valenti et al., 2022b), paranoid ideation (Bekaro, 2022), FoMO (Mannion et al., 2021), phubbing (Tomczyk & Selmanagic, 2022), phone use while driving, problematic social media use (Joseph et al., 2023), decreased happiness (Ozdemir et al., 2018; Dai et al., 2021), decreased academic performance (Joseph et al., 2023; Qutishat et al., 2020), decreased productivity (Arora & Chakraborty, 2020), smartphone addiction (Anshari et al., 2019), and insomnia (Schwaiger & Tahir, 2020; Jahrami, Rashed, Alrasheed, et al., 2021). Hence, appropriate interventions are needed to reduce nomophobia symptoms in individuals. One promising intervention that has shown effectiveness is mindfulness-based intervention (Pratikta, 2020; Prameswari & Yudiarso, 2021; Arpaci et al., 2017; Strauss et al., 2023).

Literature review

² Mindfulness is commonly described as "the awareness that arises through paying attention on purpose, in the present moment, non-judgmentally, to the unfolding of experience moment by moment" (Kabat-Zinn, 1994; Kabat-Zinn, 2003). Mindfulness is defined as "the engaged process of fully attending, in a discerning way, to the experiential phenomena that arise from one moment to the next, maintained from one moment to the next" (Shonin & Van Gordon 2015; Frostadottir & Dorjee, 2019). Mindfulness techniques used in mental health settings are based on Buddhist models (Shonin, Van Gordon & (Pratikta, 2020) Griffiths, 2015; Bishop et al., 2004).

⁴ Mindfulness is the practice of self-regulating attention while adopting an orientation of acceptance, curiosity, and openness to current experiences (Michalak et al., 2015; Williams & Penman, 2018). Meanwhile, Mindfulness-Based Interventions (MBI) focus on actively changing attention and awareness, with mindfulness also being conceptualized as a dispositional trait (Thich Nhat Hanh, 2023d, 2023b, 2023c, 2023a). Individuals with high dispositional mindfulness tend to be non-reactive and non-judgmental toward their internal experiences; they are observant of their thoughts and emotions and act with awareness and concentration in their daily activities (Kabat-Zinn, 2020; Khoury et al., 2013).

Mindfulness training aims to make individuals aware of the present moment, developing a holistic awareness that includes recognizing physical sensations, perceptions, emotional states, thoughts, and mental images. The ultimate goal of mindfulness training is to cultivate and develop nonjudgmental awareness, involving full focus without emotional interference. Previous research has provided evidence that mindfulness interventions can reduce psychological stress and medical symptoms (Albyani & Al-Abyadh, 2023; Carmody et al., 2008), decrease insomnia and depression symptoms (Reangsing et al, 2021; Carmody et al., 2008; Purwanto et al., 2023), alleviate anxiety (Burgstahler & Stenson, 2020), and mitigate fatigue (Green & Kinchen, 2021). Additionally, prior research has shown that mindfulness-based interventions can lower stress levels, enhance performance and quality of life (Márquez et al, 2021; Purwanto et al., 2023), and reduce mood disturbances (Chang et al, 2018). This study will integrate Islamic spirituality with mindfulness in an intervention to alleviate nomophobia.

Spirituality has become an important theme in health research (Ghorbani et al., 2013, 2018; Lintang, 2005), including incorporating spirituality into mental health interventions (Ghorbani et al., 2013; Miller et al., 2013; Sutton, 2010). Previous research findings indicate that spirituality significantly contributes to individual well-being (Koenig, 2010; Miller & Thoresen, 2003; Seybold & Hill, 2001) and has a positive impact on mental health in general (Ghorbani et al., 2016; Hadzic, 2011; Musa, 2015). Numerous studies have linked the effects of spirituality to positive physiological, emotional, and psychological growth in individuals (Hayman et al., 2007). This is because in many cultures, individuals view spirituality as an essential part of their existence, making the integration of spirituality into interventions and counseling are important (Bauer & Johnson, 2018; Brown et al., 2013; Keleshteri & Rohani, 2019).

Religion and spirituality have demonstrated their influence on how individuals experience life, respond to their environment, interact with their social surroundings, and make decisions that impact their overall mental health (Thurston, 1999; Pargament et al., 1988). The spiritual dimension has been significantly tested as an important social and psychological resource in an individual's ability to cope with stress and negative life events (Koenig, 2010; Pargament et al., 1988). Hayman et al. (2007) reported that spirituality serves as a buffer against the effects of stress on an individual's self-esteem; the higher an individual's level of spirituality, the stronger their ability to cope with stress and maintain adequate self-esteem. Additionally, positive contributions of the spiritual dimension have been found in individuals with depression, where individuals with meaningful spirituality can effectively overcome their depression (Di et al., 2023; Coelho-Júnior et al., 2022; Subandi et al., 2010) and manage anxiety well (Graham, Furr, Flowers, & Burke, 2001).

For Muslim, one of the practices recommended by the Islamic faith is "dzikir" or remembrance of Allah (Hamsyah & Subandi, 2017). Dzikir involves recalling and uttering the name of Allah for the purpose of strengthening faith, cultivating piety, and worshiping Him (Mitha, 2018). Dzikir is a practice that can be carried out more flexibly; for instance, we can engage in dzikir during journeys, before sleep, while walking, jogging, and even during meditation or self-contemplation (Sulistyawati & Setiyarini, 2019)(Kosasih, 2017)(Ghorbani et al., 2018).

Allah SWT states in the Quran that individuals who consistently engage in dzikir, both in times of joy and hardship, will find tranquillity and peace in their lives (Bonab et al., 2013). Many individuals experiencing depression, distress, frustration, and disappointment resort to escaping their problems through substance abuse, nightlife, and alcohol consumption. However, this coping mechanism does not resolve their issues; instead, it adds to the already heavy psychological burden and increases the risk of suicidal actions. Allah SWT says, "Those who have believed and whose hearts are assured by the remembrance of Allah. Unquestionably, by the remembrance of Allah hearts are assured." (Q.S. Ar-Ra'd: 28).

Dzikir originates from the Arabic language, derived from the root word "dzakara, yadzkuru, dzikran," which means to mention and remember (Banna, 2019; Yunus, 2015). Dzikir is also related to the root word "zhikr," which means to remember, mention, and teach (Basri, 2021; Arifin, 2020). In addition to the above definitions, there are several meanings of dzikir found in the Quran. First, dzikir is understood as lessons, as stated in Allah SWT's words, "And We

have certainly made the Quran easy to remember, so is there any who will remember?" (Q.S. Al Qamar: 17).

Second, dzikir is seen as the Quran itself, as in the verse, "That is what We recite to you, [O Muhammad], of [Our] verses and the precise [and wise] message [of the Qur'an]." (Q.S. Ali Imran: 58). Third, dzikir is associated with great honor, as Allah SWT says, "And indeed, it is a noble Qur'an. In a Register well-protected." (Q.S. Az-Zuhurf: 44). Fourth, dzikir serves as a reminder, as seen in the verse, "Then have you become oblivious that there has come to you a reminder from your Lord through a man from among you, that he may warn you?" (Q.S. Al-A'raf: 68). Fifth, dzikir is explained, as in the verse, "The mention of the mercy of your Lord to His servant Zechariah." (Q.S. Maryam: 2).

From these explanations, it can be concluded that according to the Quran and As-Sunnah, dzikir encompasses all forms of remembering Allah, uttering His name through various forms such as reciting "tahlil" (la ilaha illallah), "tasbih" (subhanallah), "tahmid" (alhamdulillah), "taqdis" (subbuhun quddusun rabbul malaa'ikati war-ruuh), "takbir" (Allahu akbar), "tasmiyah" (bismillah), "hasbalah" (hasbunallahu wa ni'mal wakeel), reciting the beautiful names of Allah (asmaul husna), and reading supplications passed down from the Prophet Muhammad SAW. This study combines elements of Islamic spirituality (dzikir) with mindfulness intervention for Muslim college students to examine whether it has a positive effect on reducing the levels of nomophobia.

Rationale of the study

Nomophobia has become an increasingly prevalent disorder among mobile phone users worldwide (Anshari et al., 2019; Bekaro, 2022; Bragazzi et al., 2019; Dongre et al., 2017). The rising incidence of nomophobia cannot be left unaddressed due to its cascading negative impacts on individuals' lives (Catone et al., 2020; Kaur et al., 2021; Lin et al., 2021; Jahrami et al., 2023). Therefore, the need for an intervention to address this issue is evident. Arpacı et al (2017, 2020) has identified the role of mindfulness in relation to nomophobia, where mindfulness shows a negative correlation with nomophobia. This suggests that individuals with higher levels of mindfulness tend to exhibit lower nomophobic behaviors. Meanwhile, for Muslim, the values and principles of Islamic teachings hold significant importance and influence every aspect of Muslims' experiences, behaviors, and lives (Achour, Roslan, et al., 2015) (Makin, 2016). Utilizing the strength of Islamic teachings in a psychological intervention

is believed to be crucial and determinant of the success of the intervention provided (Achour, Bensaid, et al., 2015; Ghorbani et al., 2013). This is because the intervention aligns with the beliefs and convictions of Muslims, thereby significantly impacting their spiritual growth (Kahn, 2016; Bonab et al., 2013; Salleh et al., 2015; Yusoff et al., 2015).

One significant ritual in Islamic teachings is "dzikir" or remembrance of Allah. Current research incorporates dzikir into the mindfulness intervention process (Nursi, 2010). Dzikir itself means remembering Allah. The Quran states that when Muslims engage in dzikir or "remember Allah," their hearts attain tranquility (Iskandar & Dirhamsyah, 2019; Utami et al., 2020). Dzikir becomes a central act of worship in Islamic teachings that strengthens the faith, piety, and spiritual meaningfulness for Muslims (Kusuma et al., 2020; Hamsyah, 2017; Musa, 2015; El-menouar, 2014). Previous studies indicate that incorporating dzikir into psychological interventions has positively contributed to the mental health of Muslim individuals (Iskandar & Dirhamsyah, 2019). Purwanto et al (2023) shows that dzikir mindfulness breathing significantly improves the quality of life for individuals with insomnia. Agustina et al (2020) finds that using the intervention of dzikir "asma ul husna ya Rahman ya Rahiim" reduces anxiety in the elderly. Kusuma et al (2020) discovers that dzikir therapy can lower anxiety levels in patients with chronic renal failure undergoing haemodialysis. Solaiman & Mohamed (2013) demonstrates that dzikir meditation and jaw relaxation reduce anxiety and pain in patients undergoing surgery. However, research that combines Islamic spirituality (dzikir) with mindfulness to reduce nomophobia is still quite limited. Therefore, this study aims to bridge this knowledge gap and provide new insights for the field, particularly regarding addressing nomophobia through a spiritual mindfulness approach.

Purpose or Hypotheses of the study

The purpose of this research is to examine whether spiritual mindfulness intervention is effective in reducing nomophobia symptoms among Muslim students. Therefore, the proposed hypothesis is that spiritual mindfulness based intervention is effective in reducing nomophobia symptoms among Muslim students.

METHODS

Trial design

Modul dikembangkan berdasarkan teori psikologi spiritualitas dan mindfulness based intervention oleh peneliti. Sebuah panel expert dibentuk untuk mengevaluasi modul yang telah dirancang. Panel expert terdiri dari 4 orang ahli dibidang psikologi, khususnya terkait dengan psikoterapi, mindfulness intervention, dan spiritualitas. Beberapa masukan dari ahli menjadi bahan untuk memperbaiki modul intervensi agar lebih sesuai dengan tujuan intervensi dan lebih efektif untuk mencapai tujuan intervensi. Masukan dari panel ahli meliputi antara lain jumlah waktu tiap sesi, konten materi yang diberikan ke peserta, bahan homework, power poin materi, dan beberapa teknik spesifik yang disempurnakan agar lebih berdaya guna.

Setelah melalui evaluasi panel expert dan memperbaiki modul intervensi. Prosedur selanjutnya adalah mengujicoba modul intervensi yang telah disempurnakan melalui panel expert ke 15 peserta. Intervensi diberikan selama 15 sesi. Ujicoba juga dilakukan pada penggunaan booklet spiritual mindfulness journal, sebuah buku catatan sehari-hari yang menerapkan prinsip self-monitoring. Buku journal ini sebagai tugas rumah yang harus diisi oleh peserta selama seminggu, yang kemudian dievaluasi kontennya. Secara umum peserta menyatakan bahwa modul intervensi yang diberikan sudah baik dan dapat dipahami. Masukan yang diberikan oleh peserta adalah penyesuaian waktu pemberian materi tiap sesinya, agar diberikan jeda untuk istirahat sejenak. Setelah merangkum masukan dari peserta ujicoba, maka modul intervensi diperbaiki dan dipersiapkan untuk diterapkan pada kelompok eksperimen penelitian.

Participants

Penelitian randomized control study ini dilakukan pada 60 partisipan yang dibagi secara random ke dalam kelompok eksperimen dan kontrol. Partisipan mengikuti dua hari pelatihan dengan total delapan sesi *spiritual-mindfulness intervention*. Tiga fasilitator memberikan pelatihan melalui modul intervensi yang telah divalidasi oleh empat orang panel ahli. Desain penelitian ini adalah *randomized pre-post test control group*, dimana melibatkan kelompok kontrol. Data dianalisis melalui uji independent t-test melalui *gain score*.

Interventions

		N	Mean	Std. Deviation	Levene test F	Sig.	t	df	Sig. (2-tailed)
Gain score	Kelompok eksperimen	25	-	1.15181	7.539	.008	-	48	.000
	Kelompok kontrol	25	3.0800	1.95192			9.707	38.907	.000

Berdasarkan hasil analisis gain score melalui uji independent t-test menunjukkan ada perbedaan gain score antara kelompok eksperimen dengan kelompok kontrol ($t=9,707$, $df=38$, $p=0,000$). Dimana kelompok eksperimen menunjukkan penurunan skor mean nomophobia sebesar -3 dibandingkan dengan kelompok kontrol skor mean $=1.3$. Berdasarkan analisis di atas menunjukkan intervensi spiritual mindfulness based dapat menurunkan tingkat nomophobia pada kelompok eksperimen, sedangkan pada kelompok kontrol tidak terdapat penurunan skor nomophobianya.

Discussion

Hasil penelitian ini menunjukkan spiritual mindfulness based intervention dapat menurunkan nomophobia, dimana kelompok eksperimen memiliki gain skor yang lebih rendah dibandingkan dengan kelompok kontrol. Penelitian ini mengkonfirmasi penelitian sebelumnya yang menunjukkan bahwa mindfulness terkait dengan penurunan kecenderungan perilaku adiktif. Mindfulness yang tinggi juga menunjukkan efek protektif terhadap perilaku adiktif, termasuk stres yang dirasakan (15), kecemasan (16), dan ketagihan (17). Para ahli juga berpendapat bahwa mindfulness mungkin bekerja dengan cara yang serupa untuk penggunaan smartphone yang bermasalah (misalnya, dengan mengurangi efek faktor risikonya). Sebagai contoh, Liu dan rekan-rekannya (18) menemukan hubungan positif antara persepsi stres dan penggunaan yang bermasalah dimediasi oleh pengendalian diri, dan dimoderasi oleh mindfulness. Dengan kata lain, stres dapat menyebabkan kekurangan pengendalian diri, mendorong penggunaan yang bermasalah ketika mindfulness rendah. Li dan Hao (19) menemukan dampak negatif alexithymia pada ketergantungan pada smartphone melemah pada individu yang memiliki mindfulness tinggi, hal ini menunjukkan bahwa mindfulness melindungi dari penggunaan yang berbahaya pada mereka yang kurang reflektif terhadap keadaan emosional mereka. Penelitian Arpaci (20) menemukan hubungan negative yang signifikan antara mindfulness dengan nomophobia. Semakin tinggi mindfulness pada diri individu, maka semakin rendah tingkat nomophobianya.

Implications

Limitations and Suggestions for Further Research

CONCLUSIONS

Penelitian *randomized pre-post-test design spiritual-mindfulness intervention* ini menunjukkan hasil yang signifikan dalam menurunkan tingkat nomophobia partisipan. Kelompok eksperimen yang mendapatkan intervensi spiritual-mindfulness based selama delapan sesi menunjukkan adanya penurunan nomophobia, dibandingkan dengan kelompok kontrol.

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AUTHOR CONTRIBUTION STATEMENT

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