

The Effect of Spiritual Mindfulness-Based Cognitive Therapy on Self-Concept and Risk of Depression in Adolescent at Islamic Boarding School

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ABSTRACT

The burden of the learning process and strict Islamic boarding school rules have an impact on self-concept and the risk of depression in adolescents. However, there is very limited research on how to solve academic pressure with the psychological impact of negative emotions and stress which significantly contribute to the development of mental health problems for adolescents in Islamic boarding schools. The purpose of this study was to determine the effect of spiritual mindfulness-based cognitive on self-concept and risk of adolescent depression.

The research design used descriptive research. The population used in this study is the early adolescent girls at Middle School (SMP) Darul Lughah Wal Karomah Islamic Boarding School and Badridduja Islamic Boarding School Kraksaan Probolinggo who have a risk of depression. The sample size used was 219 adolescent girls using total sampling.

The results showed that the results of a descriptive analysis on the risk of depression the majority were at moderate risk of depression in the emotional dimension was 32.4%, the self-concept variable in adolescents was at most self-concept while in the self-criticism dimension was 92.7%. The results of descriptive crosstab analysis on self-concept variables and the risk of depression in adolescents have the highest high self-concept with the risk of mild depression is 37.0% while the moderate self-concept in adolescents with the most risk of mild depression is 34.8%. The systematic review resulted in 25 articles that could be used to improve self-concept and reduce the risk of depression. Mindfulness-based cognitive therapy intervention was recommended to be applied by mental nurses as an intervention to improve self-concept and reduce the risk of depression in adolescents.

Keywords: Mindfulness, Mindfulness-Based Cognitive Therapy, Self-Concept, Risk of Depression, Adolescents

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INTRODUCTION

Adolescents who live within the scope of Islamic boarding school life have unique dynamics of growth and developmental tasks and are required to adapt to various conditions and experiences experienced (Pritaningrum & Hendriani, 2013). Life in an Islamic boarding school has different characteristics from other educational institutions (Putri, Yunitasari, & Rachmawati, 2019). As a result, female students in Islamic boarding schools are more depressed than female students who attend public schools (Arsita AS, 2016). Self-concept has a considerable influence on policies in individual behaviour, namely, when the individual will do something, the person will adjust it to his/her self-concept (Rakhmat, J., 2011).

Regulations in Islamic boarding schools require mental readiness so that teenagers can accept social life and survive with all the rules in Islamic boarding schools (Sani, & Nrh, 2015). Factors that influence the mental development of adolescents are influenced by the family environment, school environment, peer environment, and community environment (Arsita AS, 2016). It is important to identify factors that can be protective against the negative effects of stress on adolescent psychology (Calvete, Orue, & Sampedro, 2017).

The World Health Organization (WHO) has identified depression as the number one cause of mental health disability in the world and has been projected to rank second in the world as a cause of disability by 2020 (Stuart, 2016). WHO states that depression also occurs in children and adolescents under the age of 15, but at a lower age than in older age groups. Estimates of the number of people with depression increased by 18.4% between 2005 and 2015 (WHO, 2017a; Vos *et al.*, 2017). Early detection and preventive interventions need to be carried out before the onset of depression, especially in adolescents aged 10 and 14 years (United Nations Children's Fund (UNICEF), 2011).

Mindfulness reflects one approach that is effective in adolescent research studies for fostering various psychological adjustments and coping strategies, as well as directly treating adolescent psychopathology (Agarwal & Dixit, 2017; Shonin, Van Gordon, & Griffiths, 2012; Saphiang, Van Gordon, & Shonin, 2019). Research conducted by Fung *et al.*, (2019) revealed that mindfulness interventions are beneficial for adolescents in reducing perceived stress, internalizing problems, and reducing mental health symptoms through improved emotional regulation.

The spiritual concept of Mindfulness-Based Cognitive Therapy focuses on the psychological aspects of adolescents with therapeutic activity procedures by focusing attention on being able to accept what is happening without judging, rejecting, or avoiding the conditions currently experienced by bringing feelings and thoughts to focus by developing a rational mindset. and changing negative thoughts that arise into positive thoughts that are more realistic, positive, and rational accompanied by the spiritual motivation of belief, gratitude, patience, and sincerity (White L., 2014; Yusuf, Ah., Fitrayasari PK, R., Nihayati, H.E., Tristiana, RR Dian., 2019). Various kinds of interventions have been carried out to improve self-concept and reduce the risk of depression, but spiritual mindfulness-based cognitive therapy interventions for adolescents in dealing with learning process activities that can trigger the risk of adolescent depression as an effort to increase students' awareness to see the situation more clearly, emerge from different perspectives. New perspectives in looking at problems and alternative problem solving have never been studied before.

METHODS

This study used descriptive research. Adolescents who were designated as respondents were given informed consent, the adolescent foster guardians were asked to sign the informed consent provided by the researcher. The population used in this study were young girls from the Darul Lughah Wal Karomah Islamic Boarding School (SMP) and the Badridduja Kraksaan Probolinggo Islamic Boarding School who had a risk of depression. The population in the study

there are two populations. The first population was young women from the Darul Lughah Wal Karomah Islamic Boarding School (SMP) with 164 respondents and the Badridduja Kraksaan Probolinggo Islamic Boarding School with 55 respondents. The sampling technique in this study used total sampling.

Research instrument independent variable spiritual mindfulness-based cognitive therapy in the form of a module made by considering the needs of data researchers. The dependent variable instrument used the Tennessee Self Concept Scale (TSCS) measurement scale. TSCS is a measuring tool to measure self-concept and depression risk based on the depression risk measurement tool adapted and translated from the Depression Risk Assessment. Before assessing the measuring instrument in the form of a questionnaire used in this study, it was tested first by distributing questionnaires to several respondents who were not research subjects and had almost the same characteristics as the research subjects. Test the validity of the questionnaire using the number of respondents as many as 30 respondents at the Al-Masduqiyah Islamic Boarding School Kraksaan Probolinggo.

RESULT

The descriptive statistical analysis of the respondent's characteristics has been shown in Table 1. This study involved 219 adolescent females. The descriptive statistical analysis of the self-concept among adolescents has been shown in Table 2. The descriptive statistical analysis of the risk of depression among adolescents has been shown in Table 3. Table 4 indicates the Crosstab distribution of self-concept with risk of depression in Islamic boarding schools.

Table 1. Characteristics of Respondents at Islamic Boarding School

Characteristics of Respondents	Parameter	Distribution	
		Σ	%
Age	11 years old	20	9,1
	12 years old	32	14,6
	13 years old	78	35,6
	14 years old	89	40,6
	Total	219	100
Class	VII	102	46,6
	VIII	117	53,6
	Total	219	100
Youth group activities	Never	172	78,5
	Once	47	21,5
	Total	219	100
Reasons for schooling in boarding schools on request	Alone	58	26,5
	Parent	161	73,5
	Total	219	100

Table 2. Descriptive Statistical Analysis of the Self-Concept Among Adolescent's Females in Islamic Boarding School

Variable	Dimensions	Parameter	Distribution	
			Σ	%
Self-Concept	Physical	High	166	75,8
		Moderate	53	24,2
		Low	0	0
		Total	219	100
	Ethical Morality	High	166	75,8
		Moderate	53	24,2
		Low	0	0
		Total	219	100
	Personal	High	149	68,3
		Moderate	70	32,0
		Low	0	0
		Total	219	100
	Family	High	164	74,5
		Moderate	55	25,1
		Low	0	0
		Total	219	100
	Social	High	31	14,2
		Moderate	188	85,8
		Low	0	0
		Total	219	100
	Self-critism	High	16	7,3
Moderate		203	92,7	
Low		0	0	
	Total	219	100	
Identity	High	178	81,3	
	Moderate	41	18,7	
	Low	0	0	
	Total	219	100	
Acceptance	High	115	52,5	
	Moderate	104	47,5	
	Low	0	0	
	Total	219	100	
Behaviour	High	123	56,2	
	Moderate	96	43,8	
	Low	0	0	
	Total	219	100	
Total Self-Concept		High	81	37
		Moderate	138	63
		Low	0	0
		Total	219	100

Table 3. Descriptive Statistical Analysis of the Risk of Depression Adolescent's Females in Islamic Boarding Schools

Variable	Dimensions	Parameter	Distribution	
			Σ	%
Risk of depression	Emotional	No risk of depression	26	11,9
		Mild risk of depression	56	25,6
		Moderate risk of depression	71	32,4
		Severe risk of depression	66	30,1
		Total	219	100
	Cognitive	No risk of depression	98	44,7
		Mild risk of depression	52	23,7
		Moderate risk of depression	31	14,2
		Severe risk of depression	38	17,4
		Total	219	100
	Motivational	No risk of depression	54	24,7
		Mild risk of depression	65	29,7
		Moderate risk of depression	53	24,2
		Severe risk of depression	47	21,5
		Total	219	100
	Vegetative dan Physical	No risk of depression	71	32,4
Mild risk of depression		77	35,2	
Moderate risk of depression		22	10,0	
Severe risk of depression		49	22,4	
	Total	219	100	
Total Risk of depression		No risk of depression	35	16,0
		Mild risk of depression	78	35,6
		Moderate risk of depression	61	27,9
		Severe risk of depression	45	20,5
		Total	219	100

Table 4. Distribution Table of Self-Concept Crosstab with Risk of Depression in Islamic Boarding School

Variable	Category	Risk of depression				Total
		No risk of depression	Risk of mild depression	Moderate risk of depression	Risk of major depression	
Self-Concept	High	16	30	18	17	81
		19,8%	37,0%	22,2%	21,0%	100,0%
		7,3%	13,7%	8,2%	7,8%	37,0%
	Moderate	19	48	43	28	138
		13,8%	34,8%	31,2%	20,3%	100,0%
		8,7%	21,9%	19,6%	12,8%	63,0%
Total		35	78	61	45	219
		16,0%	35,6%	27,9%	20,5%	100,0%
		16,0%	35,6%	27,9%	20,5%	100,0%

Table 1 shows that out of 219 respondents, it is known that based on the age of the majority, 89 respondents (40.6%) are 14 years old. Most of the class as many as 117 respondents (53.6) were in class VIII. Most respondents never participated in youth group activities as many as 172 respondents (78.5%) and most of the reasons for attending Islamic boarding schools were at the request of their parents as many as 161 respondents (73.5%).

Table 2 shows that the self-concept variables on the physical, moral, ethical, personal, family, identity, acceptance, and behaviour dimensions are high in the majority. Most high self-concept in physical and ethical dimensions as many as 166 respondents (75.8%). The self-concept variables on the social dimension and self-criticism were mostly moderate. Most self-concepts were on the self-criticism dimension of as many as 203 respondents (92.7%). The self-concept variable shows that from 219 respondents, as many as 138 people (63%) have a moderate self-concept.

Table 3 shows that the risk of depression variable in the emotional dimension is the majority at moderate risk of depression as many as 71 respondents (32.4%), the cognitive dimension is not at risk of depression as many as 98 respondents (44.7%), the motivational dimension of mild risk of depression is 65 respondents (29.7%), the vegetative and physical dimensions of the risk of mild depression were 77 respondents (35.2%). The variables risk of mild depression were 78 respondents (35.6%), moderate risk of depression were 61 respondents (27.9%), and severe risk of depression were 45 (20.5%).

Based on table 4 the crosstab results show that the results of descriptive crosstab analysis on self-concept and risk of depression variables in adolescents most have high self-concepts with a risk of mild depression of 37.0% while moderate self-concepts in adolescents have the mild risk of depression of 34.8%.

DISCUSSION

The results of this study indicate that self-concept consists of physical, moral-ethical, personal, family, social dimensions, self-criticism, identity, acceptance, and behaviour. The results showed that the variables of self-concept of adolescent's females in Islamic boarding schools in the physical, moral, ethical, personal, family, identity, acceptance, and behaviour dimensions were high in the majority. Self-concept is an important part of personality development. These developments occur gradually from birth as they begin to recognize and differentiate themselves from others. In essence, self-concept is very dependent on how we compare ourselves with others (Laili M. Nur, 2012). Self-concept is also closely related to the ability to feel empathy for others (Silke *et al.*, 2018). The formation of self-concept is one of

the important things in adolescent self-development (Desmita, 2014). The self-concept that is owned in adolescence is different from that in childhood. The self-concept is composed of stages. During late childhood, the self-concept that is formed is somewhat stable. But with the onset of puberty, there is a drastic change in self-concept (Agustiani & Hendriati, 2009).

The results of a previous study by Nurliana (2015) said that women had a significantly better self-concept than men. Adolescents with positive self-concepts tend to be more open to others and more able to share thoughts and feelings (Chen *et al.*, 2020). This supports the research results that several dimensions of self-concept are positive self-concepts. A positive self-concept plays a major role in adolescent behaviour to support the development and provide positive assessments so that a good self-concept is formed in adolescents.

The results showed that most self-concepts on social dimensions and self-criticism were moderate or good enough. The social dimension of self-concept is an individual's assessment of himself in his interactions with others in the wider environment. The most prominent developments in early adolescence are physical and sexual development, so social development has not been given much attention. Early adolescents (11-14 years) with developmental tasks, namely teenagers want to be free, changes occur in their bodies, and pay more attention to their body conditions (Wong, *et al.*, 2008). Jahja (2015) said that changes in adolescent characteristics both physically and psychologically make adolescents feel unsure of themselves and their abilities. This is due to the focus of attention of adolescents on changing physical and sexual conditions. New teens can focus on other developments in middle adolescence, which will also support their self-concept.

The self-criticism dimension of adolescent self-concept describes the openness of attitude and personal self. Adolescents think more about self-criticism and self-evaluation, are more aware of differences among others and are more sensitive to social pressures (Wong, 2009). Internal criticism is one of the factors that influence the development of one's self-concept in addition to failure, parental education, and depression (Razali & Razali, 2013). Self-criticism is needed to make someone aware of the actions that have been done. Self-criticism often functions as a regulator in acting and behaving so that the existence of teenagers is accepted by the community and can adapt well (Agustiani & Hendriati, 2009). The results of this study indicate that self-concept has a considerable influence on adolescent behaviour because if some perceptions or feelings are not balanced or contrary to the self-concept of adolescents, it will cause an unpleasant psychological situation.

Based on the results of the research above, it is concluded that the self-concept of early adolescent girls is formed through experiences gained from interactions with the environment at the Kraksaan Islamic boarding school Probolinggo. If adolescents have a positive self-concept, they will have a sense of worth, develop self-confidence, and the ability to assess themselves realistically. However, if adolescents have a self-concept that tends to be negative, they will feel inferior and incapable, resulting in a lack of self-confidence. Every decision taken or chosen by the teenager will reflect the adolescent's self-concept.

The results of this study found that the risk of adolescent depression in the majority of Islamic boarding schools was mild and moderate. This shows that the young women in the Kraksaan Islamic boarding school Probolinggo are quite good at adapting to the pesantren environment which has strict rules. However, teenagers still show symptoms of depression. Early adolescents are by their developmental tasks, namely wanting to feel free, but life in Islamic boarding schools is different from other educational institutions. Teenagers are required to adapt to the environment and strict rules and the high burden of the learning process, causing the risk of adolescent depression in female students. Adolescent girls more often express depression by internalizing feeling anxious or worried (Gerdard, D., 2011). Adolescents are vulnerable to depression because during their teenage years many problems arise (Muhammad Dwi Panji & Alifiati, 2010).

The results of previous research by Wahab *et al.*, (2013) said that adolescents who attended boarding schools stated that stressors related to the learning process showed symptoms of depression by 39.7%. Feeling homesick is one of the factors that cause student stress for students living in boarding schools (Thurber & Walton, 2014). According to the National Institute of Mental Health (2016), risk factors that can lead to depression are a personal or family history of depression; life changes, trauma, stress; and certain chronic diseases and treatments. Researchers collaboratively assess risk factors for depression due to stress, sadness, loneliness, and ability deficits (Thummathai, Sethabouppha, Chanpravit, & Lasuka, 2018).

Based on the results of the research above, it is concluded that early adolescent girls in Islamic boarding schools feel inferior and sad, and stressed when it is difficult to memorize the Koran like their other friends. Islamic boarding schools have strict regulations and there are so many activities from morning to night, from school activities to activities at the cottage. This causes young women to often experience mood swings. Adolescents who have low self-esteem will feel helpless and are at risk for depression.

Based on the results of the study showed that self-concept has a relationship with the risk of depression. A positive self-concept can reduce the risk of depression and a negative self-concept will lead to the risk of adolescent depression. The results of this study indicate that the majority of adolescents in Islamic boarding schools have never carried out youth group activities of 78.5%. Youth group activities are rarely carried out in Islamic boarding schools because the full-day learning system starts at 03.00-22.00 WIB. Only exercise in the morning every day. Daily activities are only filled with school activities and recitation of Islamic boarding schools program books, as well as limited facilities for extracurricular activities which are not required for teenagers. Youth activities such as volleyball are extracurricular, but most teenagers do not participate because of the limitations between school lessons and activities in Islamic boarding schools. The results of this study are in line with research conducted by (Anjastya, 2020), which states that depressed adolescents who live in Islamic boarding schools have a disorder in their self-concept which includes body image, self-identity, self-ideal, self-role, and self-esteem in depressed adolescents. negative self-concept component. Unpleasant psychological situations, self-judgment, and feelings or perceptions that are not balanced or contradictory require a self-concept that has a role in maintaining inner harmony. To eliminate this misalignment, adolescents will change their behaviour until they feel a sense of balance again and the situation becomes pleasant (Anas, M., 2013). When children enter adolescence, their self-concept undergoes a very complex development and involves several aspects within them. Adolescents who have a positive self-concept will like and accept their situation so that they will develop self-confidence, and self-esteem, and be able to see themselves realistically (Hurlock, Elizabet B., 1999).

Teenagers who attend Islamic boarding schools, especially at the request of their parents, often have difficulty adjusting so they are often alone, lack attention to others, and find it difficult to control themselves. Adolescents at risk of depression in Islamic boarding schools have a negative self-concept, due to the many activities that make their minds unfocused, the desire to meet their parents, the large number of memorizations that must be completed in a short time, the regulations of the Islamic boarding school which tend to be strict and the difficulty of adapting to the environment. the cottage environment causes teenagers to be insecure. The most prominent developments in early adolescence are physical and sexual development, so social development has not been given much attention. This is due to the focus of attention of adolescents on changing physical and sexual conditions. New teens can focus on other developments in middle adolescence, which will also support their self-concept.

Adolescents with a realistic self-concept will be better able to determine goals that are by their abilities so that it will be easier to achieve these goals. Adolescents who have a negative

self-concept will develop feelings of inadequacy and low self-esteem, so they always feel doubtful and lack self-confidence. Symptoms of depression increased among adolescents, especially among adolescent girls, consistently with increases in depression and suicide. Symptoms of psychiatric disorders highlight the importance of environmental determinants of the risk of psychiatric disorders and provide evidence of emerging risk factors that are forming new trends related to adolescent mental health (Keyes *et al.*, 2019).

CONCLUSION

The self-concept of adolescents who are at risk of depression is partly moderate or good enough self-concept. Adolescents have been able to adapt to the boarding school environment. However, teenagers still show symptoms of depression. Adolescents who are at risk of depression on average have a moderate and severe risk of depression. Adolescents experience psychological disorders such as anxiety and sadness. Interventions from the application of the spiritual mindfulness-based cognitive therapy module to self-concept and the risk of depression in Islamic boarding schools have not been carried out, this is due to the Corona Virus Disease 2019 (COVID-19) pandemic, making it impossible to intervene in the field. Suggestions for further research are to intervene from the modules that have been produced. The application of the spiritual mindfulness-based cognitive therapy module on self-concept and the risk of depression in Islamic boarding schools provides an opportunity for nurses to apply it regularly and regularly.

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