

Spiritual Emotional Freedom Technique (SEFT) Therapy in Reducing Student Anxiety Levels

Indah Roziah Cholilah

UIN Kiai Haji Achmad Siddiq Jember
indah.rch260687@gmail.com

Abstract

Students are vulnerable to experiencing anxiety disorders, given the complexity of their developmental tasks as adult individuals. Personal desires and the demands of the social environment often lead to anxiety and even depression. If this condition persists throughout their lifetime, it can be harmful to students. Therefore, psychological intervention through SEFT (Spiritual Emotional Freedom Technique) therapy is necessary to help alleviate the anxiety experienced by students. This research aims to assess the effectiveness of SEFT (Spiritual Emotional Freedom Technique) in reducing anxiety in students of the Islamic Psychology Study Program, Faculty of Dakwah, UIN KH. Achmad Siddiq Jember. The research method employs a quasi-experimental design with a non-random one group pre and post-test. The sample for this study consists of 30 students from the Islamic Psychology Study Program, class of 2018 to 2020, both male and female, who experience anxiety. The sampling technique used is purposive sampling. Anxiety levels were measured using the Hamilton Anxiety Rating Scale (HARS) and statistical analysis was performed using the paired sample t-test. The data analysis revealed a coefficient value of $t = 9.625$ at $p = 0.000$ ($p < 0.05$), indicating a significant difference in anxiety levels before and after SEFT therapy. Therefore, it can be concluded that SEFT has been proven effective in reducing anxiety levels in students.

Keywords: Anxiety; SEFT Therapy; Students.

Abstract

Students are a group of individuals who are vulnerable to mental health problems, given their developmental tasks. As adult individuals, students are often faced with increasingly complex developmental tasks so that these conditions are prone to making students experience anxiety to depression. If this condition is experienced continuously in their life span, it can endanger students. Therefore, it is necessary to carry out psychological interventions in reducing the anxiety experienced by students. The therapy used is *Spiritual Emotional Freedom Technique (SEFT)*. This study aims to see the effectiveness of *Spiritual Emotional Freedom Technique (SEFT)* on anxiety in students of the Islamic Psychology Study Program, Faculty of Da'wah, State Islamic University Kiai Haji Achmad Siddiq Jember. The research method used *quasi* experiment with *non random one group pre and post test design*. The research sample was 30 students with *purposive sampling* technique, namely Islamic psychology students who experience anxiety, both male and female. Measurement of anxiety variables using the *Hamilton Anxiety Rating Scale (HARS)* and statistical test analysis using *paired sample t-test*. It can be seen from the data analysis with a coefficient value

of $t = 9.625$ at $p = 0.000$ ($p < 0.05$), these results lead to significant differences in anxiety before and after being given SEFT therapy. So it can be concluded that SEFT is proven effective in reducing anxiety in college students.

Kata Kunci: Anxiety; SEFT Therapy; College Students

Introduction

Basically, everyone has experienced anxiety and even depression when faced with problems in their lives, including students. Various problems are often faced by students, adjustments to academic tasks, finances, health, relationships with parents, friends and partners. These problems are a source of concern that can interfere with students' lives in the future. Santrock explains that adult individuals tend to have ambitions, dreams and desires in life. In this phase, a person also tries to explore more widely their potential. It's just that sometimes students find a mismatch between what is expected and the reality they get. It is not surprising that at this time students experience fatigue, especially when they have to face pressing demands in their social environment.

Not everyone is prepared for the complex demands and responsibilities of their social environment. Emotional maturity in adulthood, which is not yet stable, allows individuals to experience tension due to external factors. This tension, which is experienced continuously, can lead to severe anxiety disorders. In general, anxiety is described as an unpleasant situation. It is usually followed by feelings of panic and fear of something threatening. The *Diagnostic and Statistical Manual of Mental Disorder V* (DSM-V) describes *anxiety disorder* as a form of excessive fear that occurs in a person, resulting in disruption of daily activities. The causes are quite varied, DSM-V classifies anxiety disorders in several forms: 1) Panic disorder, 2) Generalized anxiety disorder, 3) Phobic disorder, 4) Obsessive-compulsive disorder, 5) Traumatic stress disorder. Nevid, et al stated that anxiety is a general condition of feeling uncomfortable and afraid of a threatening object, characterized by the appearance of physical, behavioral and cognitive symptoms. In physical symptoms, there is a sense of restlessness, trembling, tightness in the chest and abdomen, sweating a lot, especially on the palms of the hands, mouth and throat feel dry, and sometimes accompanied by nausea, feeling dizzy until the feeling of fainting appears. When viewed from the characteristics of their behavior, someone who experiences anxiety tends to behave avoidantly, dependent behavior, and restless behavior. Until usually this anxiety can also affect a person's cognition. Someone who experiences anxiety cognitive characteristics include feeling worried about the future, always feeling alert along with the appearance of sensations in the body, fear of losing self-control, showing confusing thoughts, inability to concentrate, and thinking that everything is uncontrollable.

This feeling of anxiety is considered normal as long as it does not interfere with

an individual's daily activities such as studying, schooling, caring for children, working and others. It will be beneficial if the anxiety encourages individuals to learn to respond to events positively, for example, individuals can interpret every event experienced, make peace with existing conditions, do not hurt physically because of the pressure faced. However, anxiety becomes abnormal, when the response given is excessive, or anxiety comes without an accompanying cause. The inability of individuals to adapt to anxiety will lead to maladaptive reactions that can develop and affect social, occupational and academic functioning.

People who experience anxiety due to mental stress are very likely to experience symptoms of pain in physical members, sometimes among them also physically hurt and even commit suicide. As in the case of a student who was neglected by his parents, thus encouraging thoughts of *suicide* by *suicided ideation*. Another case was faced by a patient who came to the Polyclinic of Lampung Regional Mental Hospital, who often complained since one year ago. The feeling of anxiety was followed by dizziness, sweaty palms, palpitations. The patient felt that the anxiety experienced greatly disturbed her concentration in doing daily activities. In addition to being a mother, she is also a village head official in her area. The above case was also found in FB, a student of Kiai Haji Achmad Siddiq Jember State Islamic University who came to the Counseling and Psychological Services Bureau to get psychological help. In counseling activities, FB worried about the problems faced, such as anxiety over the condition of the continuity of a family full of conflict, to the fear of parental divorce. This anxiety causes physiological responses, such as sleep disturbances, difficulty concentrating, an empty view of the future, always needing the presence of friends and even hurting some physical members. The same condition was also felt by RH, a student who was traumatized by the abuse she had experienced. This traumatic experience causes individuals to fear the future. According to him, the future is filled with danger. When facing anxiety, what can be done is that individuals need to realize that they are experiencing something uncomfortable, because of which feelings of annoyance, anger, difficulty concentrating, relationships become bad, and academic activities become disrupted.

College students are a group of individuals who are vulnerable to mental problems. Several research studies show that the psychological morbidity of college students around the world tends to be high, especially for students who experience anxiety and depression. Of course, this condition, if not immediately resolved, will affect the functioning of individuals as students who should focus on carrying out their academic responsibilities. Departing from this problem, researchers will conduct psychological intervention techniques, namely *Spiritual Emotional Freedom Technique* (SEFT) to help students reduce anxiety disorders caused by complex life problems. SEFT is a type of therapy using the *tapping* method, which is a light tapping using two fingertips on the meridian points. This research focuses on the

general description of anxiety experienced by students and how effective SEFT therapy intervention is in reducing anxiety in Islamic Psychology Study Program students, Faculty of Da'wah UIN Kiai Haji Achmad Siddiq Jember. SEFT intervention activities provided to students are expected to add experience to students in conducting *self therapy*.

Research Methods

This study uses quantitative techniques with the type of quasi-experiment. In this design, there is a single group that will be given treatment, but previously there was a pre and posttest to see any differences as a treatment effect in this case SEFT intervention.

Table 1. *The one-group pretest-posttest design*

Randomization	Pre test	Intervention	Post test
-	O1	√	O2

O = Measurement of the dependent variable

The research subjects were Islamic Psychology Study Program students from 2018 to 2020, male and female who experienced anxiety. In measuring anxiety, researchers used the *Hamilton Anxiety Rating Scale (HARS)* based on the appearance of 14 anxiety symptoms. Each item observed is given a score level between 0 (zero present) to 4 (server). Data analysis techniques using non-parametric statistical tests *wilcoxon signed rank test mann whitne u test* with SPSS 20.0 for windows to compare the difference between pretest and posttest scores, so that it can be known the effectiveness of SEFT Therapy on student anxiety.

Results and Discussion

Statistical Analysis Results

Before being given SEFT *Therapy*, what the researcher did was distribute the HARS scale to conduct a *pre-test* to 30 research subjects. After that, SEFT was carried out for 8 times of therapy and continued with giving the scale as a *post test*. The posttest was given to measure the effectiveness of SEFT Therapy on students. The anxiety level categories on the *Hamilton Rating Scale for Anxiety (HARS)* are as follows:

Table 1. Categorization of anxiety scores from HARS scale

Anxiety Score	Categorization
< 14	Not experiencing Anxiety
14 to 20	Mild Anxiety

21 to 27	Moderate Anxiety
28 to 41	Severe Anxiety
42 to 56	Panic

Source: Author's observation

The way to give an assessment on the anxiety scale is to choose a statement according to the category, which is 0 if there are no anxiety symptoms, 1 symptom that appears one, 2 Moderate half of the symptoms present, 3 Severe / more than half of the symptoms present, 4 Very severe, all symptoms are present. The following will describe the anxiety level category according to the score on each research subject:

Table 2. Pre and posttest anxiety level categories of research subjects

Subject No.	Pre Test Data		Post Test Data	
	Score	Category	Score	Category
1	27	Medium	14	Lightweight
2	20	Lightweight	13	Lightweight
3	20	Lightweight	14	Lightweight
4	41	Weight	13	Lightweight
5	41	Weight	21	Medium
6	41	Weight	21	Medium
7	27	Medium	26	Medium
8	42	Panic	39	Medium
9	41	Weight	23	Medium
10	27	Medium	20	Lightweight
11	41	Weight	21	Medium
12	41	Weight	14	Lightweight
13	28	Weight	28	Weight
14	40	Weight	21	Medium
15	41	Weight	25	Medium
16	27	Medium	20	Lightweight
17	41	Weight	17	Lightweight
18	41	Weight	20	Lightweight
19	27	Medium	15	Lightweight
20	30	Weight	27	Medium
21	21	Medium	14	Lightweight
22	25	Medium	13	Lightweight
23	41	Weight	27	Medium
24	27	Medium	14	Lightweight
25	41	Weight	21	Medium
26	42	Panic	27	Medium
27	26	Medium	15	Lightweight
28	27	Medium	14	Lightweight
29	21	Medium	14	Lightweight

30	27	Medium	16	Lightweight
----	----	--------	----	-------------

Source: Author's observation

After calculating the *pre-post test* scores, the researchers then conducted a *paired sample t-test* analysis to compare the average of two variables in a single sample group. The t-test was conducted to determine whether or not there was a difference in anxiety before and after the training.

Table 3. *Paired Sample t-test*

		Paired Differences					t	df	Sig. (2-tailed)
		Me	Std.	Std.	95% Confidence				
		an	Deviation	Error	Interval of the				
				Mean	Lower	Upper			
Pair 1	PRE - POST	13.167	7.493	1.368	10.369	15.965	9.625	29	.000

Source: SPSS data processing results

Descriptive statistical results show the coefficient value $t = 9.625$ at $p = 0.000$ ($p < 0.05$). It can be concluded that there is a significant difference in anxiety before and after *Spiritual Emotional Freedom Technique Therapy (SEFT Therapy)* training.

Table 4. Description of Mean Anxiety Score

Paired Samples Statistics					
		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	PRE TEST	32.73	30	8.250	1.506
	POST TEST	19.57	30	6.202	1.132

Source: SPSS data processing results

The results of the t-test statistical processing with SPSS obtained that the mean *pre-test* score of anxiety in the research subjects was 32.73 while the mean *post-test* score was 19.57, this shows a mean difference of 13.16, meaning that there was a decrease in the lower *post-test* score. The mean difference is statistically significant with the t-test score. Based on the above conclusions, H_0 is rejected and H_a is accepted. It can be concluded that *Spiritual Emotional Freedom Technique (SEFT) Therapy* training is quite effective in reducing anxiety in psychology students.

The anxiety categories experienced by the research subjects were in various levels of condition. The panic level was experienced by 2 people (6.7%), severe level by 13 people (43.3%), moderate level by 13 people (43.3%) and mild level by 2 people (6.7%). Of the 30 research subjects, there was one person who did not show a decrease in anxiety levels, namely subject number 13. When confirmed, according to the subject concerned, he was unable to focus on doing therapy alone. So he still needs a therapist to do SEFT. In addition, the situation at home is not conducive to affecting the subject's concentration. So that he is not optimal when doing SEFT. In order to support the results of the above analysis, the researcher also described the results of observations and brief interviews after the therapy was carried out. The descriptive description can be seen in the discussion section.

Discussion

Students are individuals who experience the transition from adolescence to adulthood, from high school to university. Of course they are faced with a variety of complex tasks and responsibilities in their roles. They will spend their thinking time on academic tasks, as well as exploring life and new values that are built as adults. Therefore, this condition requires students to be adaptive to the existing demands, because otherwise students will be vulnerable to stress disorders and even depression. Some research results state that students are a group of people who are prone to mental disorders. Other research also shows that there is a high level of psychological morbidity in university students around the world, especially depression and anxiety problems. This is reinforced by the findings of cases in Islamic Psychology Study Program students who get access to psychological assistance through the Counseling Bureau and Psychological Services of the Faculty of Da'wah, Kiai Haji Achmad Siddiq Jember State Islamic University. The problems often faced by students are anxiety followed by academic problems and social relationships, both with parents, friends, and partners. Students of the Islamic Psychology Study Program who do counseling are reported to have high stressors so that they experience more anxiety caused by pressure and demands in life. The problem that many face is the inability to complete academic tasks due to anxiety experienced. It appears in the form of less adaptive behavior with the increasingly pressing demands of college assignments, abandoned theses and coursework, unable to focus their concentration when studying in class. In addition, life circumstances such as finances, psychological well-being, feeling neglected by their environment, wounds due to childhood trauma and disturbed relationships with others contribute to the anxiety experienced by the research subjects. It is not uncommon for students who come for counseling at the Counseling and Psychological Services Bureau to be students who experience a lot of depression due to anxiety that lasts for a long time. Apriliani explained that if the anxiety experienced by individuals lasts almost every day, and more than six months

is accompanied by changes in behavior and abnormal complaints, then this condition has led to a disorder. Anxiety disorders make individuals become restless and experience tension because individuals feel unable to overcome the problems they face. This condition is experienced by research subjects with severe anxiety to panic conditions. According to Freud, individuals tend to use *self-defense* mechanisms to protect individuals from anxiety disorders. Generally, individuals tend to use one or even several forms of self-defense mechanisms alternately according to the form of threat faced. In this case, the defense mechanism used by the subject is fixation. Fixation is a form of self-defense carried out by individuals because they are faced with a situation that makes them depressed and frustrated so that they feel they can no longer face it and make their normal development stop for a while or forever. Therefore, the research subject has feelings of insecurity and his emotions become disturbed, shown by his angry attitude, fear of continuing his responsibilities so that he chooses not to do anything. Meanwhile, in the physical aspect, it appears in the form of behavior that often wakes up at night, feels tight in the chest when he hears the wall clock chiming, sweats while sleeping at night, and limits himself from meeting and building relationships with others. Rahman in his book *Mental Health* states that anxiety is a subjective feeling. Individuals who are anxious, feel always restless and tense over something that happens to them. This condition is a reaction to the subject's inability to overcome life's problems, and they become insecure in facing their world, such as not wanting to continue their studies for fear that they will be faced with more complex demands when they become a graduate, some feel that ending their life is a way out of the problems they face, so some of them choose to injure some of their limbs with sharp objects.

Furthermore, interviews conducted with the subject to identify complex problems owned because the trauma due to the harassment experienced makes the subject difficult to display academic performance and poor relationship skills, because of this condition it is not uncommon for them to injure some of their limbs. Therefore, this condition makes the subject need help through psychological services, namely psychological therapy. Subjects who experience anxiety at a severe level also show academic disturbances. They find it difficult to concentrate on their duties and roles as students, it is not uncommon for them to skip classes and not participate in learning activities on campus. Sometimes among them feel that the people they meet are talking about them so that the subjects keep their distance from interacting with others. There are 13 research subjects who are feeling anxiety at a severe level. At the level of severe anxiety, individuals tend to be *defensive*. This behavior is shown by the individual's habit of blaming others for the problems they face, such as blaming their parents for the difficulties that are happening, blaming their friends for their hard attitude in viewing their world, and so on. Individuals who experience severe anxiety tend to have difficulty thinking and making judgments, disruption of psychological

functions, tension in the muscles in the body, heart palpitations and occasionally walking here and there because they feel something is threatening. Some of the research subjects who experienced severe anxiety felt the adrenaline hormone increase, indicated by dizziness, headaches and back tension. From the results of pre-tests that have been conducted on thirteen research subjects who experience severe anxiety show physiological reactions such as always feeling tired, unable to rest calmly, crying easily, trembling, feeling restless, often waking up in the middle of the night. From the results of interviews conducted with subject number 20, he has experienced sleep disturbances in the last few months, such as difficulty sleeping soundly, waking up in the middle of the night, sometimes he experiences approximately four awakenings at night, when he wakes up he feels less energetic and individuals choose not to do any activity. The subject, who is currently in semester 7, must do his duty to compile a thesis and meet with lecturers for guidance. However, due to the anxiety conditions experienced, some of his duties and responsibilities cannot be carried out optimally. Until finally the subject felt tired of his abnormal condition. This condition is explained by Stuart & Sundent that the level of anxiety that lasts continuously for a long time tends to cause individuals to experience fatigue and even death.

Research subjects who experience severe anxiety, some of them come to the doctor to check their physical condition. This was experienced by subject no. 12 complaining of pain in the limbs such as chest pain, abdominal pain and a loud heartbeat. However, the medical results did not find any problems with the physical parts that hurt. From the results of the examination, the subject felt that he was experiencing psychological disorders. Departing from the problem of complaints experienced, the subject conducted counseling to psychology at the Counseling and Psychological Services Bureau of Kiai Haji Achmad Siddiq State Islamic University from the results of the counseling carried out, an anxiety disorder was identified. Based on the results of identification related to the psychological problems of psychology study program students, the researchers used the *Spiritual Emotional Freedom Technique* (SEFT) technique in helping to overcome anxiety disorders experienced by students. *Spiritual Emotional Freedom Technique* (SEFT) is a new branch of science called *energy psychology*, which is a set of principles and techniques that utilize the energy system in the body to improve the condition of thoughts, emotions and behavior. *Spiritual Emotional Freedom Technique* (SEFT) can be used as a form of therapy for people with anxiety disorders. As the results of other studies that prove the success of *Spiritual Emotional Freedom Technique* (SEFT) therapy against anxiety disorders conducted by a number of researchers. The therapy activities are carried out with the help of two therapists.

The implementation of *Spiritual Emotional Freedom Technique* (SEFT) therapy on the subject was carried out in eight sessions. The implementation of

therapy is described as follows:

1. Establish *rapport* with the research subject. The goal is to build a relationship of trust (closeness) between the subject and the therapist. In this rapport activity, the subject is asked to fill out an *informed consent* as a form of the subject's willingness to take part in a series of therapy activities.
2. Providing an understanding to the subject about the *Spiritual Emotional Freedom Technique* (SEFT) method. This activity is carried out through a discussion process between the therapist and the subject. The target is that the subject understands the function, purpose and process of doing therapy with the *Spiritual Emotional Freedom Technique* (SEFT) technique.
3. Fill out the pretest sheet, to measure anxiety levels. The target is that the subject knows the level of anxiety experienced. The pre-test uses the HARS measuring instrument.
4. Began to explain the theoretical concept of anxiety. The research subjects were given an explanation of anxiety, factors that cause anxiety, things that make individuals become anxious, what kind of psychological and physiological reactions occur when experiencing anxiety. The target is that research subjects can be more informed and more sensitive in understanding their psychological conditions and seeking help if they experience anxiety. After the research subjects know and understand that they experience anxiety conditions that interfere with their social functioning, the next step is that the subjects are taught to be able to do *self-therapy*. The target is to hone their skills in overcoming psychological disorders through therapy.
5. The therapy used is *Spiritual Emotional Freedom Technique Therapy* (SEFT), using: a) *The Set-Up*; words spoken by involving feelings so as to neutralize *Psychological Reversal* (negative beliefs and thoughts). *The target of The Set-Up* is the flow of body energy directed appropriately. b) *The Tune-In*; the subject is brought to feel the pain experienced, and directs the mind to the place of pain, or thinks of certain specific things / events that can evoke negative emotions that want to be eliminated, followed by sentences spoken from the mouth and heart: "*Ya Allah I am sincere, I surrender*" or "*Ya Allah I am sincere in accepting my pain, I surrender to You my healing*", For emotional problems, *tune-in* is done by thinking about something or a specific event that can cause negative emotional reactions. When a negative reaction occurs (anger, sadness, fear, trauma, anxiety, and so on) the subject's mind and mouth say "*Ya Allah ... I sincerely ... I surrender*". *The target of The Tune-In* is to neutralize negative emotions or physical pain. c) *The Tapping* is tapping lightly with two fingertips on certain points on the body. These points become the key points of "*The Major Energy Meridians*", which if tapped several times will have an impact on neutralizing the emotional disturbance or pain felt. *The target of the tapping* is to help the subject

neutralize the emotional disturbance felt, so that the body's energy flow runs normally and is balanced again. Overall SEFT therapy has a function in reducing frustration and tension caused by anxiety experienced. After being given SEFT in accordance with its stages, the subject felt relieved, calm from the tension experienced. So it can be concluded that SEFT therapy can relieve emotional problems (anxiety) experienced by research subjects. The results of the intervention carried out on the research subject, in accordance with the statement from Zainuddin that *Spiritual Emotional Freedom Technique (SEFT) Therapy* is one of the interventions in overcoming life problems, releasing inner conflicts and developing optimal self-potential to achieve well-being and happiness in life.

6. Give the subject the task of doing SEFT therapy independently. This activity aims to train the subject to independently apply SEFT training at home. The target of this activity is that the subject can recognize the anxiety disorder experienced and perform SEFT when anxiety arises. In its implementation, the subject needs to apply only once, then submit the results to the researcher. It's just that some subjects did not do it, because they did not master the SEFT technique if they did it themselves.
7. Researchers monitored the research subjects using interview techniques. Of the thirty research subjects, one has not felt any changes from SEFT. This is because the person concerned cannot concentrate when applying SEFT at home. The subject needs the help of a counselor to do SEFT.
8. Post-Test and evaluation using observation, interview and HARS scale. This activity is carried out to get an overview of the effectiveness of SEFT on anxiety experienced by the subject, both SEFT that has been done alone and SEFT done with a counselor.

Conclusions and Suggestions

Based on the research conducted, it was found that the intervention of *Spiritual Emotional Freedom Technique (SEFT) Therapy* proved effective in reducing the anxiety experienced by students of the Islamic psychology study program. The anxiety experienced by students is caused by life problems faced, such as academic problems, social relationships between parents, friends and partners, as well as past trauma that causes students to be anxious about living their role in the present and future. The results of this study can be a reference for conducting further research with a larger sample size and a relatively longer time with continuity. *SEFT therapy* can also be an alternative in Islamic psychotherapy activities to reduce anxiety in clinical and community settings.

Bibliography

- American Psychiatric Association. *Diagnostik and Statistical Manual of Mental Disorder* Edition (DSM-V). Washington: American Psychiatric Publishing, 2013.
- Apriliani, R. A. *Pengaruh Yoga Prenatal terhadap kecemasan sesaat dalam menghadapi persalinan pada primigravida trimester III Digalena Mom and Baby Center Kota Bandung* (Doctoral dissertation, Fakultas Psikologi (UNISBA)), 2015. <https://doi.org/10.1176/appi.books.9780890425596>
- Arikunto. *Prosedur Penelitian Suatu Pendekatan Praktek*. Jakarta: PT. Rineka Cipta, 2006.
- Bustaman, Hanna Djumhana. *Integrasi Psikologi dengan Islam*, Yogyakarta: Pustaka Belajar, 2005.
- Cervon dan Pervin. *Kepribadian: Teori dan Penelitian, Jilid 2*, Jakarta: Salemba Humanika, 2012
- Diferiansyah, O, dkk. *Gangguan Cemas Menyeluruh*. Jurnal Medula. Vol. 5. No. 2 Agustus. Fakultas Kedokteran. Universitas Lampung, 2016.
- Fadli, Afdhil. *Shalat Khusyu' Menurut Tuntunan Syariah*. Jurnal Ilmiah Al-Furqon, Vol. 1(1), Juni 2014.
- Hamid, M & Koentjoro. "Pelatihan Kebersyukuran untuk Menurunkan Kecemasan Menghadapi Ujian Nasional pada Siswa SMA" (Jurnal Psikologi, Volume 1, No. 3, Desember 2015. ISSN: 2407-7801), 2015.
- Indiyani, N. E., & Listiara, A. "Efektivitas metode pembelajaran gotong royong (cooperative learning) untuk menurunkan kecemasan siswa dalam menghadapi pelajaran matematika (suatu studi eksperimental pada siswa di SMP 26 Semarang)", Jurnal Psikologi Universitas Diponegoro, 2006.
- Kholil, Lur Rochman *Kesehatan Mental*. Purwokerto: Fajar Media Press, 2010.
- Kolb, David A. *Experiential Learning: Experiences as the Source of Learning and Development*. Englewood Cliffs: Prentice-Hall Inc, 1984.
- Latipun. *Psikologi Eksperimen*. Malang: UMM Pres, 2009.
- Lama, M. A. Q. *The relation of depression and anxiety in academic achievement among group of university students. International journal of psychology and counselling*, 3(5), 2011.
- Loo, L & Abidin. Z. *Persepsi Diabaikan Orang tua Memicu Mahasiswa Bunuh Diri. Jurnal Ilmu Sosial dan Pendidikan*. Vol. 5. No. 2, 2021
- Maisaroh, E. N., & Falah, F. (2011). "Hubungan antara Religiusitas dengan Kecemasan Menghadapi Ujian Nasional (UN)", Jurnal Proyeksi, Semarang: Universitas Islam Sultan Agung, 2011.
- Muhid, Abdul. *Analisis Statistik*, Sidoarjo: Zifatama Publishing, 2012

- Nevid, J.S & Greene, B. *Psikologi Abnormal, Jilid 1*. Jakarta: Penerbit Erlangga, 2005.
- Sari, K.D.A & Subandi. *Pelatihan Teknik Relaksasi untuk Menurunkan Kecemasan pada Primary Caregiver Penderita Kanker Payudara*” (*Jurnal Psikologi*, volume 1, No. 3: ISSN: 2407-7801), 2015.
- Stuart dan Sundeen. *Buku Saku Keperawatan Jiwa Edisi 3 alih bahasa Achir Yani*. Jakarta: EGC, 1998.
- Triastutik, A. dkk. “*Efektivitas Pelatihan Seft (Spiritual Emotional Freedom Technique) Terhadap Penurunan Kecemasan Wanita Yang Berada Pada Masa Klimakterium Berdasarkan Pengetahuan Tentang Premenopause*” *Jurnal Ilmu Psikologi Personifikasi*, Volm8, No. 2. Universitas Trunojoyo Madura, 2017.
- Thompson, E. Hamilton rating scale for anxiety (HAM-A). *Occupational Medicine*, 65(7), 2015.
- Qalami, A. F. *Ringkasan Ihya’ Ulumiddin*. Surabaya: Gitamedia Press, 2003.
- Ramaiah. S. *Kecemasan Bagaimana Mengatasi Penyebabnya*, Jakarta: Pustaka Populer Obor, 2003.
- Reza, M. & Dinda “*Psikiater Ingatkan Bahaya Stress dan Depresi Karena Tekanan Hidup*”,HEALTH, diakses pada tanggal 05 Oktober 2021, <https://www.suara.com/health/2018/09/05/181500/psikiater-ingatkan-bahaya-stres- dan-depresi-karena-tekanan-hidup>
- Richards, P.S & Allen E. B. *A Spiritual Strategy For Counselling and Psychotherapy*, Washington DC: American Psychological Association, 2006.
- Rochman, L.K. *Kesehatan Mental*. Purwokerto: Fajar Media Press, 2010.
- Rumini, S. & Sundari, S. *Perkembangan Anak dan Remaja*, Jakarta: PT. Asdi Mahasatya, 2004.
- Safitri R.P, Sadif R.S. *Spiritual emotional freedom technique (SEFT) to reduce depression for chronic renal failure patients are in Cilacap hospital to undergo hemodialysis*. *Int J Soc Sci Humanity*. 2013. Vol. 3(3), 2013.
- Singarimbun & Efendi. *Metode dan Penelitian Survey*. Jakarta: Pustaka LP3ES 2006.
- Sumadi, Suryabrata. *Psikologi Pendidikan*. Jakarta: PT. Raja Grafindo Persada, 1993.
- Suroso & Muhid, A. “*Efektifitas Terapi SEFT (Spiritual Emotional Freedom Technique) untuk Mengurangi Perilaku Merokok Remaja Madya*”, *Jurnal Psikologi Tabularasa* volume 9, no.1, April 2014
- Zainuddin. “*Spiritual Emotional Freedom Technique (Seft) Sebagai Terapi Dalam Konseling*” *Jurnal Jurnal Madaniyah*, Volume 2 Edisi XI, 2016.
- Zainuddin, A.F. (2009). *Spiritual Emotional Freedom Technique (SEFT)*. Jakarta : PT. Arga Publishing, 2009.
- Zainuddin, F.A. *Spiritual Emotional Freedom Technique (SEFT) Cara Tercepat*

danTermudah Mengatasi Berbagai Masalah Fisik dan Emosi. Jakarta: PT. Arga Publishing, 2006.