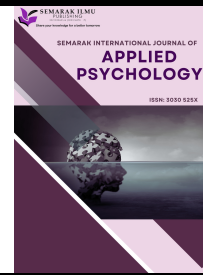




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The Influence of Spirituality Perspective on Stress Coping Mechanisms among Healthcare University Students in Malaysia

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ABSTRACT

This quantitative study examined the impact of spirituality on stress-reduction techniques among healthcare university students in Malaysia's Klang Valley. Finding psychological resources that could act as stress-reduction mechanisms is becoming more and more of a scholarly concern as students participating in health-related programs deal with an increasing number of academic, clinical, and personal obligations. It has been suggested that spirituality, which is frequently seen as a very personal and existential resource, influences how people view and react to stress and other difficulties in life. A total of 195 students, ages 18 to 30, took part in an online survey that included the Brief COPE assessment and the Spirituality Perspective Scale. Spearman's correlation coefficients were used to analyse the data to investigate the relationships between different coping mechanisms and spirituality. Students who have a greater propensity for spiritual beliefs and practices are more prone to utilize active coping mechanisms. According to the findings, which showed a substantial positive association between spirituality viewpoints and the use of problem-focused coping strategies. Conversely, there were no discernible associations between spirituality and avoidant or emotion-focused coping mechanisms. These results add to the increasing amount of research showing how spirituality can help people manage their stress, especially when it comes to healthcare education. The study emphasizes how crucial it is to include spiritual well-being in student support programs to promote more flexible coping mechanisms. There is also discussion of study limitations, practical consequences, and suggestions for further research.

1. Introduction

The current generation of students faces a multitude of challenges in their everyday lives due to ever-changing environments and demanding situations, including the pressures of assignments, exams, dealing with failures, competition, financial constraints, parental expectations, and many

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more [13]. Consequently, these challenges have given rise to a significant prevalence of mental health issues such as depression, anxiety, and stress among undergraduate students in Malaysia [14,20]. When examining the broader landscape of university life across Malaysia, it becomes evident that stress is a pervasive issue affecting students from various institutions [10]. However, it's noteworthy that healthcare students face greater levels of stress due to rigorous academic demands and responsibility associated with training future healthcare professionals [14,18]. Malaysia, similar to many other countries, is experiencing an increasing frequency of poor mental health among university students.

Mental health disorders in Malaysian students have gone up from 10% in 2011 to 20% in 2016 [14] and the prevalence of burnout and anxiety is found to be 22.2% and 44.2% respectively among medical students [45]. In the context of these challenges, it is essential to consider the role of spirituality as a coping mechanism. Spirituality encompasses many beliefs and practices that give individuals a sense of purpose, meaning, and connection to something greater than oneself. It often involves seeking a deeper understanding of life, personal growth, and a connection to others and the world or a higher being. Spirituality can be expressed through religious beliefs and meditation, mindfulness, or a sense of connection with nature. Despite the various stressors students face, recent studies have highlighted the profound impact of spirituality on individuals coping with stress [29].

People with high scores of spirituality have reported positive effects on their mental well-being, including reduced levels of depression, anxiety, and stress [11,29]. Additionally, spirituality has been associated with improved academic performance, suggesting that a strong spiritual foundation may contribute to a more resilient approach to challenges in both personal and academic spheres [21]. Hence, the role of spirituality as a coping mechanism should be considered. Spirituality and religion are used interchangeably; however, these two concepts are different. Some scholars take that spirituality involves a personal journey for meaning in life, while religion on the other hand involves a supernatural entity with rituals and practices focusing on a higher being, such as God. These two concepts are not mutually exclusive and can overlap or exist separately. The literature supports the widespread utilization of these two concepts as coping mechanisms for individuals facing significant medical and physical challenges.

Numerous studies done in the past have explored the correlation between spirituality, religious beliefs, and activities in managing physical illnesses among patients dealing with chronic health conditions such as heart diseases, mental disorders, diabetes, cancer, HIV/AIDS, and more. Spirituality comprises the way individuals explore and express meaning and purpose and their experience in connecting to the present moment, themselves, others, nature, and the significant or sacred aspects of existence [8,35]. This multifaceted aspect is crucial among undergraduate students between the age of 18-30, especially in a healthcare university setting as spirituality impacts their overall well-being, coping strategies, and academic trajectory [8].

The spiritual perspective among these students extends beyond their religious or non-religious affiliations. It involves a deep exploration of personal beliefs, moral values, and the quest for inner fulfillment. For many healthcare students, spirituality intertwines with their academic pursuits, shaping their approach towards patient care, ethical considerations, and their journey towards becoming healthcare professionals [6]. This perspective comprises a broad spectrum of individual beliefs and practices that extend beyond traditional religious affiliations. While some students may find spiritual expression through organized religion, others embrace spirituality as a personal journey for meaning, purpose, and inner peace. For example, atheists in the United States find meaning in life, namely finances, hobbies, and activities [30].

In healthcare university students, stress levels are high due to demanding academic requirements and responsibility of being future healthcare professionals [14]. Students aged 16 to 24 face

significant incidences of mental health issues primarily driven by academic stress [20,36]. Academic pressures, competitive peers, financial constraints, and other challenges lead to mental health problems; depression and anxiety among Malaysian undergraduate students [20]. It has been reported that the prevalence of stress in medical student ranges from 21% to 56%, particularly among preclinical medical students in Malaysia [53]. Studies done in both private and government medical universities have reported distress among medical students (29.1% to 46.2% and 46.2% respectively).

Malaysian students facing psychological distress are more likely to turn to substance abuse, a behaviour linked to poor coping skills or low self-esteem [46]. Similarly, in the United States, students cope with stress using various unhealthy methods like drug use, smoking, and more [37]. Furthermore, alcohol consumption is one of the most common unhealthy coping behaviours among university students to relieve stress [19]. Engaging in extracurricular activities such as music and physical activity is correlated with reduced stress and burnout levels in preclinical medical students [15]. However, despite the prevalence of stress, few students seek help causing persisting stress, potentially affecting the quality of patient care.

Fostering a sense of purpose and spirituality is vital for students navigating their challenges in healthcare education as spirituality cultivates positive attitudes, motivating them to invest time and effort to improve their learning [21]. Spirituality offers students a framework to interpret experiences, stay motivated, and maintain resilience under academic pressure [21]. This sense of purpose helps buffer stress, keeping them focused and positive during challenges like clinical postings and demanding coursework. Therefore, spirituality can be a crucial element in maintaining mental and emotional balance throughout their studies.

Spirituality significantly influences mental health and resilience of undergraduate students, with a strong spiritual perspective correlating with reduced stress, improved coping strategies, and enhanced mental well-being [4]. Recognizing and understanding the diversity of spiritual perspectives among students is essential for universities to tailor support systems that would effectively help students manage stress and overcome academic and clinical challenges [22]. For example, yoga enhances physical well-being and positively impacts mental health; reducing stress, anxiety, and depression, and promoting better sleep patterns [51].

Spirituality offers broad benefits, including better health, longer lifespan, reduced depression and anxiety, improved relationships, and overall enhanced student well-being and increases emotional intelligence development [42]. Tolerance of uncertainty is a critical aspect of stress coping as uncertainty frequently arises in various situations [44]. According to Mishel's theory on illness-related uncertainty, uncertainty is the inability to comprehend the meaning of events due to ambiguity [32].

Students' academic lives are often filled with uncertainties such as exams, grades, future career prospects, and the pressures of clinical posting can all contribute to unpredictability and fear of the unknown, leading to an increase in stress. This stress and anxiety stem from a desire to control outcomes such as securing internship placement, achieving excellent grades, or planning out their future careers. Low tolerance of uncertainty towards high academic stress would increase the issue of dropouts among university students [44]. Therefore, spirituality helps individuals embrace life's inherent uncertainties by fostering trust in a high power or a personal sense of purpose [32]. This acceptance involves letting go of the need for control and finding peace in a greater order or meaning to events, even if it is not immediately apparent [32]. For students, this spiritual perspective can be valuable in managing stress and anxiety.

2. The Present Study

The current study aims to investigate how spirituality affects stress coping strategies in light of the growing mental health issues among college students, especially those pursuing degrees connected to healthcare because of their rigorous coursework, clinical rotations, and upcoming professional obligations, healthcare students frequently endure high levels of stress. According to earlier research, spirituality is a personal belief system and method of finding meaning in life as it may act as a protective barrier against psychological suffering. But little is known about its precise impact on different coping mechanisms, especially in Malaysia. The purpose of this study is to investigate the connection between students' chosen stress-reduction techniques and their religious perspectives.

Problem-focused coping, emotion-focused coping, and avoidant coping are the three basic categories into which coping techniques are usually divided. Avoidant coping includes actions meant to completely avoid the stressor, emotion-focused coping deals with controlling emotional reactions, and problem-focused coping entails actively addressing the source of stress. Knowing how spirituality and these coping mechanisms are related can help with mental health interventions and student support services in healthcare education settings. This study also intends to add to the expanding body of knowledge on culturally contextualized stress management strategies among young adults in tertiary education by concentrating on a sample of healthcare university students in the Klang Valley, a region known for its cultural and religious diversity. It is anticipated that the results will guide the creation of comprehensive support networks that incorporate spiritual well-being into all-encompassing stress management initiatives in higher education.

Given Malaysia's multicultural and multireligious setting, knowing how spirituality functions in coping mechanisms can assist create effective and culturally appropriate mental health support services. This study emphasizes how spirituality might improve psychological well-being and resilience among healthcare students, who face particular pressures. Additionally, the results help close a vacuum in the body of knowledge regarding spirituality and coping in Malaysian higher education and could influence future wellness initiatives and policies that support the holistic health of students. This study also intends to add to the expanding body of knowledge on culturally contextualized stress management strategies among young adults in tertiary education by concentrating on a sample of healthcare university students in the Klang Valley, a region known for its cultural and religious diversity. It is anticipated that the results will guide the creation of comprehensive support networks that incorporate spiritual well-being into all-encompassing stress management initiatives in higher education. The aim of the study is to examine whether there is a relationship between spirituality perspective and the use of problem-focused coping, emotion-focused coping, and avoidant coping among university students in the Klang Valley.

3. Methodology

3.1 Participants

The participants for this study were collected from healthcare university students in Klang Valley, namely IMU University, Sunway University, UCSI University, University Kebangsaan Malaysia (UKM), Universiti Malaya (UM), Universiti Putra Malaysia (UPM), Taylor's University, Management and Science University (MSU) and SEGi University. Participants are recruited through dual-mode data collection, using both face-to-face and online social platforms such as WhatsApp, Instagram, and others. The minimum sample size of 193 participants for this study was determined through a priori power analysis using G*Power 3.1 [16].

3.2 Measurements

Spirituality Perspective Scale (SPS). The Spirituality Perspective Scale (SPS) [23, 38-40] measures spiritual connection, including awareness of the inner self and a sense of connection to a higher power or a greater purpose. The measure has a total of 10 items in the form of 6-point Likert scale, ranging from 1 “not at all” to 6 “about once a day” for spiritual interaction questions (Items 1 to 5) and from 1 “strongly disagree” to 6 “strongly agree” for the spiritual values questions (Items 6 to 10). The SPS shows high reliability (0.91) and proven validity [9].

Brief COPE. The Brief COPE [7] is a self-report questionnaire that evaluates a wide range of coping responses with 28 items on a 4-point Likert scale from 1 “I haven’t been doing this at all” to 4 “I have been doing this a lot”. It has demonstrated reliability and validity across nine countries with reliability scores ranging from 0.70 to 0.89 [31]. The Malay version, used in Malaysia shows a reliability of 0.83 [52]. **Problem-Focused Coping (PFC)** which includes active coping, planning, positive reframing, and use of instrumental, support with Cronbach’s Alpha values of 0.68, 0.73, 0.64, and 0.64 respectively [7]. **Emotion-Focused Coping (EFC)** which includes emotional support, venting, humor, acceptance, religion, and self-blame shows Alpha values of 0.71, 0.50, 0.73, 0.57, 0.82, and 0.69 respectively [7]. **Avoidant Coping (AC)**, consisting of self-distraction, denial, substance use, and behavioral disengagement has Alpha values of 0.71, 0.54, 0.90, and 0.65 respectively [7].

3.3 Data Analysis

In this study, descriptive statistics, test of normality, and Spearman’s correlation analysis were selected. Descriptive statistics were used to examine the participants' means, standard deviation, percentages, and frequency for demographic purposes such as gender, age, ethnicity, and religion. Besides that, descriptive analysis was used to determine the spirituality perspective among religions. Next, inferential statistics including the normality test was used to analyse the normality distributions of the variables (Spirituality Perspective, PFC, EFC, and AC). Finally, Spearman’s correlation was used to test the hypotheses and examine the relationship between variables based on calculating the correlation coefficients. An independent statistician examined and validated all statistical analyses to ensure that the methods employed were accurate and suitable.

4. Results

4.1 Descriptive Statistics

This study recruited a total of 195 participants. The demographics of the sample are shown in Table 1 below. Table 1 shows the sociodemographic characteristics of the respondents. The mean age of healthcare university students was 21.64 ± 0.11 years old. There’s gender imbalance among the respondents, with having females more than male as 106 were females and 89 were male. In terms of ethnicity, Chinese is found to be most of the population of the study (70.8%, $n = 138$), Malay (15.4%, $n = 30$), Indian (11.3%, $n = 22$) and others (2.6%, $n = 5$). Regarding religion, Christianity shows to be the largest proportion of the study (37.9%, $n = 74$) followed by Buddhist (34.4%, $n = 67$), Islam (16.9%, $n = 33$), Hindu (6.2%, $n = 12$) and others (4.6%, $n = 9$).

Table 2 presents the descriptive statistics for spirituality perspective and stress coping mechanisms (problem-focused, emotion-focused, and avoidant coping) among students from different religious groups, namely Buddhist, Christian, Hindu, Islam, and others. The mean and standard deviation for each group is reported. For instance, the mean spirituality perspective is highest among Christian students ($M = 39.76$, $SD = 9.85$) and Islamic students ($M = 39.24$, $SD = 9.11$),

while Buddhist students have the lowest mean spirituality perspective ($M = 30.92$, $SD = 6.48$). Problem-focused coping shows similar means across religions, with the lowest standard deviation in the 'Others' category ($M = 27.56$, $SD = 2.83$). Emotion-focused coping is highest among students in the 'Others' category ($M = 33$, $SD = 4.09$). Lastly, avoidant coping has relatively low mean scores across all groups, indicating a lower reliance on this coping strategy.

Table 1
Demographics of participants

Variables	f (%)	M (SD)
Age	-	21.64 (0.11)
Gender		
Female	106 (54.4)	
Male	89 (45.6)	
Ethnicities		
Chinese	138 (70.8)	
Malay	30 (15.4)	
Indian	22 (11.3)	
Others	5 (2.6)	
Religion		
Christian	74 (37.9)	
Buddhist	67 (34.4)	
Islam	33 (16.9)	
Hindu	12 (6.2)	
Others	9 (4.6)	

Table 2
Descriptive analysis

Measure	Religion	N	Mean	Std. Deviation
Spirituality Perspective	Buddhist	67	30.92	6.48
	Christian	74	39.76	9.85
	Hindu	12	34.50	8.06
	Islam	33	39.24	9.11
	Others	9	31.67	6.13
Problem-Focused Coping	Buddhist	67	25.45	4.40
	Christian	74	25.93	4.13
	Hindu	12	26.41	5.38
	Islam	33	27.18	3.85
	Others	9	27.26	2.83
Emotion-Focused Coping	Buddhist	67	30.29	5.35
	Christian	74	30.32	5.22
	Hindu	12	31.42	6.37
	Islam	33	32.21	5.44
	Others	9	33.00	6.00

Table 2 (Continued)

Measure	Religion	N	Mean	Std. Deviation
Avoidant Coping	Buddhist	67	15.65	3.19
	Christian	74	16.19	4.33
	Hindu	12	16.58	4.33
	Islam	33	15.91	4.13
	Others	9	16.22	3.07

4.2 Inferential Statistics

Table 3 demonstrates the test of normality for spirituality perspective and stress coping mechanisms (problem-focused, emotion-focused, and avoidant coping). A Kolmogorov-Smirnov test was conducted to assess the normality of the distribution since this sample size is above 50 (Gupta et al., 2019). The results indicated that the distributions of Spirituality Perspective [D (195) = 0.0085, $p = 0.002$], Problem-Focused Coping [D (195) = 0.117, $p < 0.001$], and Avoidant Coping [D (195) = 0.105, $p < 0.0001$] significantly deviated from normality. However, the distribution for Emotion-Focused Coping did not significantly deviate from normality [D (195) = 0.055, $p = 0.200$], indicating a normal distribution. Refer Appendix F for the SPSS output of data's normality between the variables.

Spearman's rank-order correlation was run to examine the relationships between the variables as the Kolmogorov-Smirnov test results indicated that the distributions of most of the variables (Spirituality Perspective, PFC, and AC) significantly deviated from normality except EFC. There were positive and significant correlations between Spirituality Perspective and PFC, $rs = 0.27$, $N = 195$, $p < 0.001$, Spirituality Perspective and EFC, $rs = 0.12$, $N = 195$, $p = 0.111$, and Spirituality Perspective and AC, $rs = -0.13$, $p = 0.076$.

Table 4 presents Spearman's rank-order correlation between the variables (Spirituality Perspective, PFC, EFC and AC). The results of Spearman's rank-order correlation indicate that Spirituality Perspective has a weak positive monotonic relationship with PFC ($rs = 0.27$). Hence, suggesting when spirituality perspective increases, problem-focused coping also increases. This relationship is statistically significant at the $p < 0.001$ level which means hypothesis (H1) is accepted. Moreover, there is a weak positive monotonic relationship between Spirituality Perspective and EFC ($rs = 0.12$), but this relationship is not statistically significant ($p > 0.05$), indicating that Spirituality Perspective has little to no relationship with EFC which means hypothesis (H2) is rejected. Spirituality Perspective also shows a weak negative monotonic relationship with AC ($rs = -0.13$), suggesting no meaningful relationship which means hypothesis (H3) is also rejected.

Table 3
Normality test

Variable	Statistic	df	Sig.
Spirituality Perspective	0.085	195	0.002
Problem-Focused Coping	0.117	195	<0.001
Emotion-Focused Coping	0.055	195	0.200*
Avoidant Coping	0.105	195	<0.001

Table 4
Correlation analysis

Variable	n	M	SD	1	2	3	4
Spirituality Perspective	195	35.94	9.28	-			
Problem-Focused Coping	195	26.09	4.18	0.27**	-		
Emotion-Focused Coping	195	30.83	5.31	0.12	0.48**	-	
Avoidant Coping	195	15.98	3.89	-0.13	-0.074	0.409**	-

5. Discussion

5.1 Spirituality Perspective and Problem-Focused Coping

The study revealed a significant relationship between spirituality perspective and problem-focused coping, suggesting that individuals with a greater spiritual perspective are more likely to directly confront and manage the challenging situations they face. The significant results are consistent with the findings of Yun *et al.*, [54] and Taheri-Kharameh [47] who also reported a statistically significant relationship between spirituality and problem-focused coping (PFC). A study in Iran supports this finding, demonstrating that spirituality can predict PFC [41]. Students who found meaning in their studies or tasks were more likely to engage in PFC, as spirituality can help direct on actively address the problem [41]. The positive correlation of the study may be due to the sense of purpose, resilience, and social support often linked with spirituality [4,5]. For instance, a study conducted among Polish students found that spirituality can enhance self-awareness, reduce stress and related concerns, and improve overall well-being [4]. This stress reduction may be attributed to regular spiritual practices, such as self-reflection and meditation, which motivate the person to eliminate negative emotions associated with academic stress and allow for a more thorough analysis of stressful situations [43].

The result showed a weak positive relationship suggesting that spirituality alone explains only a small part of the variation in PFC as 7.3% of the variance is explained by the spirituality perspective. This finding is consistent with a study in the United States that reported a low positive correlation between self-rated spirituality and adaptive coping which encompasses the characteristics of problem-focused coping such as active coping, instrumental support, planning, and positive reframing, event with a sample size of over 200 medical students [48]. This is because spirituality does not directly equip individuals with the practical skills required to confront and manage challenges effectively [48]. While spirituality primarily fosters emotional and psychological resilience by offering comfort and a sense of purpose, PFC demands concrete skills such as decision-making, environmental adjustment, task-oriented actions, and more [48]. These abilities are often shaped by factors such as personality traits, mental health status, learned behaviours, and social support systems, rather than spirituality itself. Spirituality may contribute to the overall coping process, but it works alongside these factors, which collectively shape how an individual responds to stress.

According to the Transactional Model of Stress and Coping by Lazarus and Folkman [17] as cited in Biggs *et al.*, [3], PFC is employed when individuals perceive a stressful situation as controllable and believe they can change or manage it effectively. The significant relationship between the spirituality perspective and PFC found in this study suits the theoretical framework. Spirituality can enhance the appraisal of stress as manageable, providing individuals with a sense of purpose and internal strength to actively confront challenges. Spiritual beliefs often include elements of perseverance and hope which can empower individuals to take constructive actions in the face of adversity [3,24].

5.2 Spirituality Perspective and Emotion-Focused Coping

The findings indicate that the relationship between spirituality perspective and emotion-focused coping (EFC) is not significant. This finding aligns with studies that reported no significant relationship between spirituality and EFC [5,41,47]. This is because spirituality encourages individuals to confront and actively manage the stressors they face, whereas EFC aims to mitigate emotional responses to stressors rather than directly addressing or changing them. However, a study by Yun *et al.*, [54] among social work students found a significant relationship between spirituality and EFC. The difference in findings is attributed to the distinct characteristics of participants; Yun *et al.*'s [54] study involved students enrolled in faith-based programs where spirituality is an integral part of their education and daily life. In contrast, healthcare students typically participate more in secularized programs, where spirituality is not explicitly incorporated or emphasized into their training.

In terms of the weak positive correlation, the finding is consistent with previous research by Bozorgi and Bozorgi [5] and Taheri-Kharamneh [47]. This may be attributed to students' lower use of EFC strategies, as evidence suggests that healthcare students are inclined to use more problem-focused coping strategies [41]. Additionally, the nature of the stressors was not controlled in this study, which is crucial as EFC has been shown to effectively reduce negative emotions in distressing or unchangeable situations by promoting acceptance of the inevitable or seeking emotional support from peers and family [22,48]. Furthermore, the diverse coping strategies, namely religious and secular approaches explain that spirituality doesn't necessarily result in a predominant variable although spirituality may have some influence [49]. On the other hand, reliance on emotion-focused coping strategies can increase the risk of developing mental disorders [5,12,22,34].

In terms of the theoretical framework, EFC is often utilized when stressors are perceived as less controllable or when changing the situation is not instantaneously possible [3]. The Transactional Model suggests in such circumstances, individuals may resort to coping strategies aimed at alleviating emotional distress [54]. Although the current study found no significant relationship between spirituality and emotion-focused coping among healthcare students, spirituality still can offer emotional support through practices such as prayer, meditation, or communal worship. However, healthcare students who aren't taught in faith-based programs may not fully integrate these practices into their coping repertoire. Moreover, EFC is typically more effective when dealing with unchangeable stressors, suggesting that healthcare students' environment, which emphasizes problem-solving and action, may limit the reliance on spirituality for managing emotions. This contrasts with findings in faith-based programs where spirituality is deeply woven into daily life, allowing for a stronger link between spirituality and EFC [54].

5.3 Spirituality Perspective and Avoidant Coping

The study found no significant relationship between spirituality perspective and AC. This finding aligns with several studies such as Amjad and Bokharey [1] Krägeloh *et al.*, [24], and Wachholtz and Rogoff [48]. This is because spirituality generally discourages reliance on avoidance strategies, as it often encourages individuals to face and address challenges rather than engage in unhelpful or counterproductive avoidance behaviours, namely self-distraction, denial, substance use, and disengagement. Although several studies have recognized the positive impact of spirituality, Nunes and Abrahão [33], as cited in Leal, de Melo, and Gomes [27], observed that within a minority sample of pregnant women with malformed fetuses, religiosity and spirituality were sometimes used as escape or avoidance response, reflecting the desires and actions to withdraw from or deny the problem. However, the stressors faced by this group are distinct from those experienced by

healthcare students and thus may engage with spirituality and coping strategies differently due to the different nature and intensity of their stressors. For instance, a study done among pregnant women facing fetal malformations often copes by grieving and distancing themselves from the diagnosis, accompanied by a desire for a miracle, highlighting the distinct nature and severity of their stressor [27].

The finding of this study then challenges the common misconception that religious and spiritual devotion encourages passivity, withdrawal, and a fatalistic attitude [25]. Moreover, studies have shown that reliance on this coping strategy would increase the experience of burnout and negatively impact the student's motivational level which would be a contradiction to spirituality perspective [34]. Furthermore, medical students in Malaysia are generally reported to adopt PFC strategies (active coping, positive reframing, planning, and informational support) more than AC strategies (denial, self-blame, and alcohol or substance use) which further clarifies the coping strategy used by healthcare students in this research finding [48].

The theoretical framework does not explicitly highlight AC as a core component of the model, but they fall under the broader category of EFC when individuals attempt to manage their emotional response by avoiding the problem rather than confronting it [54]. This is because the complexity of emotions and coping processes is often simplified [17,28]. While emotions are commonly seen as merely single-dimensional drive or arousal, they rely on cognitive evaluations of how the person-environment relationship affects individual well-being and the availability of coping options [3,28]. Regardless, the model recognizes that individuals use a range of coping mechanisms based on their appraisal of the stressor, including the characteristics of AC such as denial, self-distraction, substance use, and disengagement which is considered less adaptive and is often used when individuals perceive a lack of control over the stressor or when they feel overwhelmed and unable to deal with the stressor directly.

6. Implications

The findings of this study contribute to the Transactional Model of Stress and Coping by Lazarus and Folkman [17] as cited in Biggs *et al.*, [3], particularly regarding spirituality's role in stress appraisal and coping among healthcare students. The significant relationship between spirituality perspective and PFC supports the theoretical premise that individuals who perceive stress as manageable are more likely to participate in active coping strategies [3]. Spirituality may enhance cognitive appraisal which motivates individuals to perceive stressors as manageable challenges, aligning with the model's emphasis on PFC in controllable situations [24]. Additionally, the lack of significant relationships between spirituality perspective and both EFC and AC suggests that spirituality alone does not strongly influence coping strategies centered on emotional regulation or avoidance [48]. This highlights the nuanced role of spirituality, which promotes resilience and purpose but is more aligned with active engagement rather than emotional or avoidant responses [5]. Thus, spirituality's role in stress management is complex and is shaped by context, personal characteristics, and training environments [54].

This study's findings offer practical insights for educators, mental health professionals, and program developers working with healthcare students aged 18-30 who are emerging adults. Given the significant relationship between spirituality perspective and problem-focused coping, integrating spiritual practices into educational programs can enhance students' problem-solving skills and stress management. For instance, incorporating spiritual journaling, where students reflect on their daily experiences, personal values, and challenges [54], can promote purpose-driven internal motivation and resilience [41]. Such practices not only help students connect with their spiritual values but also

promote active coping strategies by encouraging thoughtful self-reflection and a proactive approach to stress.

7. Limitations and future recommendations

This study has several limitations that should be considered when interpreting the findings. Firstly, this study's focus on healthcare students in the Klang Valley limits the generalizability of the results to other student populations, such as law [50] and engineering students [2], who may face different stressors and coping needs. The cross-sectional design of this study restricts the ability to establish causality between spirituality perspective and coping strategies; longitudinal studies are recommended to observe changes over time among students which would provide valuable insights into how these factors evolve in response to varying academic and personal stressors. For example, the transition from pre-clinical to clinical years. Thirdly, the reliance on self-report measures may introduce biases, namely inaccuracies in self-perception. Future research could benefit from incorporating qualitative methods like semi-structured interviews to gain deeper insights into students' spiritual perspectives and coping behaviours. While this study acknowledges the influence of ethnicity and religion, it does not extensively examine how cultural variations within Malaysia might shape the relationship between spirituality and coping, highlighting the need for more culturally nuanced research. Lastly, this study did not account for the diverse types of stressors faced by healthcare students, which can influence coping strategy choices. Future research should consider specific academic, clinical, and personal stressors unique to healthcare students to provide a more comprehensive view of how spirituality impacts coping in various stressful contexts.

8. Conclusion

In conclusion, this study highlights the significant role of spirituality in shaping coping mechanisms among healthcare students, particularly in predicting problem-focused strategies. The findings confirm that spirituality enhances individuals' ability to confront and manage challenges mindfully, aligning with the Transactional Model of Stress and Coping by Lazarus and Folkman [17] as cited in Biggs *et al.*, [3]. However, the study also reveals that spirituality alone does not fully account for the variance in coping styles particularly concerning emotion-focused and avoidant coping. This study accentuates the need for a holistic understanding of coping mechanisms, considering the multifaceted nature of stress management among healthcare students.

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References

- [1] Amjad, Faiza, and Iram Zehra Bokharey. "Comparison of spiritual well-being and coping strategies of patients with generalized anxiety disorder and with minor general medical conditions." *Journal of religion and health* 54 (2015): 524-539. <https://doi.org/10.1007/s10943-014-9834-2>
- [2] Balaji, Nihal K., P. S. Murthy, D. Naveen Kumar, and Suprakash Chaudhury. "Perceived stress, anxiety, and coping states in medical and engineering students during examinations." *Industrial psychiatry journal* 28, no. 1 (2019): 86-97. https://doi.org/10.4103/ipj.ipj_70_18
- [3] Biggs, A., Brough, P., & Drummond, S. (2017). *Lazarus and Folkman's Psychological Stress and Coping Theory*. In C. L. Cooper & J. C. Quick (Eds.), *The Handbook of Stress and Health: A Guide to Research and Practice* (pp. 352-354). John Wiley & Sons, Ltd. <https://doi.org/10.1002/9781118993811.ch21>
- [4] Bożek, Agnieszka, Paweł F. Nowak, and Mateusz Blukacz. "The relationship between spirituality, health-related behavior, and psychological well-being." *Frontiers in psychology* 11 (2020): 1997.

- [5] <https://doi.org/10.3389/fpsyg.2020.01997>
Bozorgi, Mahdi Dasht, and Zahra Dasht Bozorgi. "Relationship between Spiritual Intelligence, Coping Strategies, and Mental Health among Students." *International Journal of Humanities and Cultural Studies*, 636-646 Retrieved from (2016).
- [6] Caldeira, Sílvia, Amélia Simões Figueiredo, Ana Paula Da Conceição, Célia Ermel, João Mendes, Erika Chaves, Emília Campos de Carvalho, and Margarida Vieira. "Spirituality in the undergraduate curricula of nursing schools in Portugal and São Paulo-Brazil." *Religions* 7, no. 11 (2016): 134. <https://doi.org/10.3390/rel7110134>
- [7] Carver, Charles S. "You want to measure coping but your protocol's too long: Consider the brief cope." *International journal of behavioral medicine* 4, no. 1 (1997): 92-100. https://doi.org/10.1207/s15327558ijbm0401_6
- [8] Köktürk Dalcalı, Berna, and Seçil Erden Melikoğlu. "The relationship between nursing students' perceptions of spirituality and spiritual care and their personal values." *Journal of religion and health* 61, no. 3 (2022): 1907-1921. <https://doi.org/10.1007/s10943-021-01355-x>
- [9] Dailey, Dawn E., and Anita L. Stewart. "Psychometric characteristics of the spiritual perspective scale in pregnant African-American women." *Research in Nursing & Health* 30, no. 1 (2007): 61-71. <https://doi.org/10.1002/nur.20173>
- [10] Deng, Yuwei, Jacob Cherian, Noor Un Nisa Khan, Kalpina Kumari, Muhammad Safdar Sial, Ubaldo Comite, Beata Gavurova, and József Popp. "Family and academic stress and their impact on students' depression level and academic performance." *Frontiers in psychiatry* 13 (2022): 869337. <https://doi.org/10.3389/fpsyg.2022.869337>
- [11] De Diego-Cordero, Rocío, Marta Iglesias-Romo, Bárbara Badanta, Giancarlo Lucchetti, and Juan Vega-Escañó. "Burnout and spirituality among nurses: A scoping review." *Explore* 18, no. 5 (2022): 612-620. <https://doi.org/10.1016/j.explore.2021.08.001>
- [12] Ding, Yi, Xinchun Fu, Rude Liu, Jacqueline Hwang, Wei Hong, and Jia Wang. "The impact of different coping styles on psychological distress during the COVID-19: the mediating role of perceived stress." *International journal of environmental research and public health* 18, no. 20 (2021): 10947. <https://doi.org/10.3390/ijerph182010947>
- [13] Osman, Afaf, and Iman Osman Mukhtar Ahmed. "Religious orientation, academic stress and religious coping among first year undergraduate students." *IJUM Journal of Educational Studies* 9, no. 2 (2021): 123-140. <https://doi.org/10.31436/ijes.v9i2.244>
- [14] Fauzi, Muhammad Faris, Tengku Shahrul Anuar, Lay Kek Teh, Wai Feng Lim, Richard Johari James, Rohana Ahmad, Mawarni Mohamed, Sahol Hamid Abu Bakar, Farida Zuraina Mohd Yusof, and Mohd Zaki Salleh. "Stress, anxiety and depression among a cohort of health sciences undergraduate students: the prevalence and risk factors." *International journal of environmental research and public health* 18, no. 6 (2021): 3269. <https://doi.org/10.3390/ijerph18063269>
- [15] Fares, Jawad, Hayat Al Tabosh, Zein Saadeddin, Christopher El Mouhayyar, and Hussam Aridi. "Stress, burnout and coping strategies in preclinical medical students." *North American journal of medical sciences* 8, no. 2 (2016): 75. <https://doi.org/10.4103/1947-2714.177299>
- [16] Faul, Franz, Edgar Erdfelder, Albert-Georg Lang, and Axel Buchner. "G* Power 3: A flexible statistical power analysis program for the social, behavioral, and biomedical sciences." *Behavior research methods* 39, no. 2 (2007): 175-191. <https://doi.org/10.3758/BF03193146>
- [17] Folkman, Susan, and Richard S. Lazarus. "Coping as a mediator of emotion." *Journal of personality and social psychology* 54, no. 3 (1988): 466. <https://doi.org/10.1037//0022-3514.54.3.466>
- [18] Gan, Gin-Gin, and H. Yuen Ling. "Anxiety, depression and quality of life of medical students in Malaysia." *Med J Malaysia* 74, no. 1 (2019): 57-61.
- [19] Gavurova, Beata, Viera Ivankova, and Martin Rigelsky. "Relationships between perceived stress, depression and alcohol use disorders in university students during the COVID-19 pandemic: a socio-economic dimension." *International journal of environmental research and public health* 17, no. 23 (2020): 8853. <https://doi.org/10.3390/ijerph17238853>
- [20] Amir Hamzah, Nurul Syafika, Nik Daliana Nik Farid, Abqariyah Yahya, Caroline Chin, Tin Tin Su, Sanjay Rampal Lekhraj Rampal, and Maznah Dahlui. "The prevalence and associated factors of depression, anxiety and stress of first year undergraduate students in a public higher learning institution in Malaysia." *Journal of Child and Family Studies* 28 (2019): 3545-3557. <https://doi.org/10.1007/s10826-019-01537-y>
- [21] Imron, Imron, Imam Mawardi, and Ayşenur Şen. "The influence of spirituality on academic engagement through achievement motivation and resilience." *International Journal of Islamic Educational Psychology* 4, no. 2 (2023): 314-326.
- [22] Ismail, Munirah, Kun Yun Lee, Afandy Sutrisno Tanjung, Ida Anum Ahmad Jelani, Rabiah Abdul Latiff, Hashimah Abdul Razak, and Nor Izzah Ahmad Shaui. "The prevalence of psychological distress and its association with coping strategies among medical interns in Malaysia: A national-level cross-sectional study." *Asia-Pacific Psychiatry* 13, no. 2 (2021): e12417. doi: 10.1111/appy.12417.

- [23] Kim, Suk-Sun. *Interdependence of spirituality and well-being among Korean elders and family caregivers*. The University of Arizona, 2008.
- [24] Krägeloh, Christian U., Penny Pei Minn Chai, Daniel Shepherd, and Rex Billington. "How religious coping is used relative to other coping strategies depends on the individual's level of religiosity and spirituality." *Journal of religion and health* 51 (2012): 1137-1151.
- [25] Kuo, Ben CH, Robert Arnold, and Beatriz Rodriguez-Rubio. "Mediating effects of coping in the link between spirituality and psychological distress in a culturally diverse undergraduate sample." *Mental Health, Religion & Culture* 17, no. 2 (2014): 173-184.
- [26] Ab Latif, Rusnani, and Mohd Zarawi Mat Nor. "Stressors and coping strategies during clinical practice among diploma nursing students." *The Malaysian journal of medical sciences: MJMS* 26, no. 2 (2019): 88. <https://doi.org/10.21315/mjms2019.26.2.10>
- [27] Leal, M. M., G. F. de Melo, and E. Gomes. "Relationship between perceived stress and religious/spiritual coping in pregnant women with malformed foetus." *J Psychol Clin Psychiatry* 14, no. 4 (2023): 95-100.
- [28] Lindquist, Kristen A., and Lisa Feldman Barrett. "Emotional complexity." *Handbook of emotions* 4 (2008): 513-530.
- [29] Mendoza, L. B. "Impact of spirituality on academic performance of students." *EPRA International Journal of Multidisciplinary Research (IJMR)* 8, no. 11 (2022): 211-217. <https://eprajournals.com/IJMR/article/9737/abstract>
- [30] Mitchell, T. (2020, August 6). *Where Americans Find meaning in life* | Pew Research Center. Pew Research Center's Religion & Public Life Project. <https://www.pewresearch.org/religion/2018/11/20/where-americans-find-meaning-in-life/>
- [31] Marakshina, Julia, Georgy Vasin, Victoria Ismatullina, Artem Malykh, Timofey Adamovich, Marina Lobaskova, and Sergey Malykh. "The brief COPE-A inventory in Russian for adolescents: Validation and evaluation of psychometric properties." *Heliyon* 9, no. 2 (2023). <https://doi.org/10.1016/j.heliyon.2023.e13242>
- [32] Mrazek, Michael D., Bailey R. Dow, Justine Richelle, Alexander M. Pasch, Nathan Godderis, Talia A. Pamensky, Bryce A. Rutila, and Alissa J. Mrazek. "Aspects of acceptance: building a shared conceptual understanding." *Frontiers in Psychology* 15 (2024): 1423976. <https://doi.org/10.3389/fpsyg.2024.1423976>
- [33] Nunes, Tatiane Santos, and Anelise Riedel Abrahão. "Repercussões maternas do diagnóstico pré-natal de anomalia fetal." *Acta Paulista de Enfermagem* 29 (2016): 565-572.
- [34] Ogoma, Shadrack O. "Problem-focused coping controls burnout in medical students: The case of a selected medical school in Kenya." *Journal of Psychology* 8, no. 1 (2020): 69-79.
- [35] Puchalski, Christina M., Robert Vitillo, Sharon K. Hull, and Nancy Reller. "Improving the spiritual dimension of whole person care: reaching national and international consensus." *Journal of palliative medicine* 17, no. 6 (2014): 642-656. <https://doi.org/10.1089/jpm.2014.9427>
- [36] Che Rahimi, Aisyah, Raishan Shafini Bakar, and Mohd Azhar Mohd Yasin. "Psychological well-being of Malaysian university students during COVID-19 pandemic: Do religiosity and religious coping matter?." In *Healthcare*, vol. 9, no. 11, p. 1535. MDPI, 2021. <https://doi.org/10.3390/healthcare9111535>
- [37] Reuter, Peter R., and Bridget L. Forster. "Student health behavior and academic performance." *PeerJ* 9 (2021): e11107. <https://doi.org/10.7717/peerj.11107>
- [38] Reed, Pamela G. "Developmental resources and depression in the elderly." *Nursing Research* 35, no. 6 (1986): 368-374.
- [39] Reed, Pamela G. "Religiousness among terminally ill and healthy adults." *Research in Nursing & Health* 9, no. 1 (1986): 35-41.
- [40] Reed, Pamela G. "Spirituality and well-being in terminally ill hospitalized adults." *Research in nursing & health* 10, no. 5 (1987): 335-344.
- [41] Rezapour-Mirsaleh, Yasser, and Mahdi Aghabagheri. "The relationship between personality dimensions, spirituality, coping strategies and clinical clerkship satisfaction among intern nursing students: a cross-sectional study." *BMC nursing* 19, no. 1 (2020): 76.
- [42] Sodhi¹, Renu. "Emotional intelligence and spirituality: A review." *The International Journal of Indian Psychology, Volume 3, Issue 4, No. 82* (2016): 71.
- [43] Shek, Daniel TL, Kim Hung Leung, Xiang Li, Diya Dou, and Xiaoqin Zhu. "How does family functioning contribute to academic-related outcomes of Chinese adolescents: the mediating role of spirituality." *Frontiers in psychology* 15 (2024): 1357473. <https://doi.org/10.3389/fpsyg.2024.1357473>
- [44] Tan, Dexter Chi Eng. "Academic hardiness among Malaysians university students: academic hardiness, academic locus of control, tolerance of ambiguity, students' engagement and automatic negative thoughts." PhD diss., UTAR, 2021.
- [45] Tee, Ke Ran, Abdul Samat Ismail, Yong Heng Ang, Hidayah Husna Hishamuddin, Vinneeshah Jacob Paul, Azimatun Noor Aizuddin, and Ida Zarina Zaini. "Prevalence of anxiety and burnout, and coping mechanisms among clinical year medical undergraduate students in Universiti Kebangsaan Malaysia amidst the COVID-19

- Pandemic." *International Journal of Environmental Research and Public Health* 19, no. 20 (2022): 13010. <https://doi.org/10.3390/ijerph192013010>
- [46] Ting, Chuong Hock, and Cecilia Essau. "Addictive behaviours among university students in Malaysia during COVID-19 pandemic." *Addictive Behaviors Reports* 14 (2021): 100375. <https://doi.org/10.1016/j.abrep.2021.100375>
- [47] Taheri-Kharameh, Zahra. "The relationship between spiritual well-being and stress coping strategies in hemodialysis patients." *Health, Spirituality and Medical Ethics* 3, no. 4 (2016): 24-28.
- [48] Wachholtz, Amy, and Mailan Rogoff. "The relationship between spirituality and burnout among medical students." *Journal of contemporary medical education* 1, no. 2 (2013): 83. <https://doi.org/10.5455/jcme.20130104060612>
- [49] Wilt, Joshua A., Julie J. Exline, and Kenneth I. Pargament. "Coping with religious and spiritual struggles: Religious and secular techniques." *Spirituality in Clinical Practice* 11, no. 2 (2024): 143. <https://doi.org/10.1037/scp0000289>
- [50] Wilczek-Rużyczka, Ewa. "Empathy as a determinant of perceived stress and styles of coping with stress in medical, law and psychology students." *Acta Neuropsychologica* 22, no. 2 (2024). <https://doi.org/10.5604/01.3001.0054.4569>.
- [51] Yadav, Radha, and Ashu Khanna. "Impact of spirituality on stress: With the special reference of engineering students of Indian Institute of Technology." *Research on Humanities and Social Sciences* 4, no. 25 (2014): 29-35.
- [52] Yusoff, Muhamad Saiful Bahri. "The validity of the Malay Brief COPE in identifying coping strategies among adolescents in secondary school." *Int Med J* 18, no. 1 (2011): 29-33.
- [53] Yusoff, Muhamad Saiful Bahri, Liew Yen Yee, Ling Heng Wei, Tan Chin Siong, Loke Hon Meng, Lim Xue Bin, and Ahmad Fuad Abdul Rahim. "A study on stress, stressors and coping strategies among Malaysian medical students." *International Journal of Students' Research* 1, no. 2 (2011). <https://doi.org/10.5549/ijsr.1.2.45-50>
- [54] Yun, Kwi, Suk-hee Kim, and Carol R. Awasu. "Stress and impact of spirituality as a mediator of coping methods among social work college students." *Journal of Human Behavior in the Social Environment* 29, no. 1 (2019): 125-136. <https://doi.org/10.1080/10911359.2018.1491918>