

Subjective Well-Being, Spirituality And Immunity of Islamic Lecturing Members When Facing The Covid-19 Pandemy

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Abstract: The covid-19 pandemic, which affects almost all of the world's population, not only disrupts human physical health due to its rapid and massive transmission. This fact also makes the panic and anxiety of all elements of society, even very disturbing economic stability that has been neatly arranged. The COVID - 19 pandemic has impacted to reduce immunity. One way to improve it is to improve spiritually. Spirituality such as meditation habits, praying, reading scriptures and conducting religious ritual activities can reduce emotional reactions to stress and cause relaxation. This study aims to determine the relationship of spirituality with immunity, subjective well-being with immunity as well as the relationship between spirituality and subjective well-being with immunity in Islamic lecturing members when facing pandemic COVID - 19. The subject of this study was the study congregation in several regions in Indonesia, amounting to 135 people. The sampling technique used was accidental sampling. Analysis of the data used is linear regression analysis. The results showed that the significance number $p = 0.000 < 0.005$ and the correlation coefficient is 0.444. Thus it can be stated that there is a significant positive relationship between spirituality and subjective well-being with immunity.

1 INTRODUCTION

The covid-19 pandemic, which affects almost all of the world's population, not only disrupts human physical health due to its rapid and massive transmission. This fact also makes the panic and anxiety of all elements of society, even very disturbing economic stability that has been neatly arranged. Government and society are faced with an uncertain situation. The government must make policies quickly and responsibly in the face of a pandemic that is difficult to control. Various rules have been set to prevent the spread of covid-19 transmission which is increasingly widespread. The habit of proper hand washing, ethical coughing and sneezing, wearing masks when leaving the house, keeping a distance, avoiding crowds, always being at home are rare steps campaigned by the government to suppress the surge in the increase in patients with positive covid-19. This policy makes it comfortable for some people, but most people feel that this is a

stressor that makes them saturated, panicked and stressed.

Hardjana mentioned that stress is the inability of a person physically, emotionally, and spiritually in facing a pressure (Mahsun, 2004). This situation will gradually affect physical and mental health. Wayne Oates said that stress is caused by self-defense mechanisms from emotional stress, physical stress, extreme situations, or threatening danger (Mahsun, 2004). Stress is basically a normal reaction in every individual, stress is the body's natural reaction to tension, pressure and changes in life. Sarafino states that stress is a condition caused by interactions between individuals and the environment, whether in the form of biological, psychological, or social environments that can cause gaps between demands and abilities (Aditama, 2017a).

In the concept of psychoneuroimmunology, all types of stress, both physical, psychological and social stress will trigger an increase in the secretion of Corticotrophin Releasing Factor (CRF) in the

hypothalamus. Furthermore, CRF will stimulate the release of pituitary Adenocorticotrophin Hormone (ACTH), which in turn will stimulate the adrenal glands to release various hormones, including cortisol. This hormone circulates in the body and plays a role in the coping mechanism. When the stressor received by the hypothalamus gets stronger, the secretion of CRF will increase, causing stimulation received by the pituitary will increase, and cortisol secretion by the adrenal gland also increases. If the emotional condition has stabilized, coping mechanism becomes positive, then the signal in the brain will inhibit the release of CRF, ACTH secretion decreases and is followed by a decrease in cortisol levels (Akil & Morano, 1995; Burton dkk., 1996). According to Zaenullah stress can increase cortisol secretion up to 20 times normal. This increase in cortisol levels further suppresses the body's immune system (Lisdiana, 2012).

One of the factors that can lead a person to a good coping mechanism when dealing with stress is spirituality. Elkins, et al state that spirituality plays an important role for individuals in understanding the experiences gained in their lives (Lines, 2002). Greenberg also suggests that spiritual health is significantly correlated with the management of a person's stress (Greenberg, 2002). Spirituality such as meditation habits, praying, reading scriptures and conducting religious ritual activities can reduce emotional reactions to stress and cause relaxation. Greenberg also stressed that good health spirituality or spirituality is not only beneficial for physical and psychological health, but is an important aspect that plays a role in managing stress (Aditama, 2017a).

Research conducted by Batuqayan et al states that spiritual training with meditation techniques on nurse managers and managers has been shown to be effective in reducing stress levels (Batuqayan & Mai, 2012). Another study conducted by Utami on the effect of remembrance on body responses, proves that the perception of stress affects the biological response, with marked levels of the hormone cortisol being in a physiological condition (Utami, 2017). Spirituality is an aspect in human beings that refers to the expression of the search for meaning and purpose in life in various life events (Ferrell dkk., 2013). Spirituality as an effort to search for meaning in life can be obtained through religious and cultural traditions (Peteet & Balboni, 2013). The results of research conducted by Ahmadi

stated that spirituality and religiosity play an important role in the palliative care of cancer patients. Both are holistic therapies that can affect the improvement of quality of life, well-being, and reduce distress in cancer patients (Ahmadi dkk., 2015).

Subjective well-being can describe a person's quality of life, because it can have a positive impact on life. In a study stated that high subjective well-being such as life satisfaction, the absence of negative emotions, optimism and positive emotions have a significant effect on better health and longevity (Diener & Chan, 2011). Schiffrin and Nelson (2010) states that subjective well-being also has a relationship with stress levels where individuals who have high stress levels have low levels of happiness while individuals who have low stress levels have high levels of happiness (Stevenson & Wolfers, 2013). Subjective well-being is a broad concept regarding the evaluation of one's life or emotional experience, which is a combination of high life satisfaction, high positive affect, and low negative affect. Someone who has a high level of subjective well-being, will be able to manage emotions, and deal with problems well. Conversely people who have a low level of subjective-well-being tend to feel unhappy, full of negative thoughts and feelings that cause anxiety, anger, and even risk of depression (Diener & Tay, 2015).

Based on the results of a survey conducted on Islamic lecturing members in several regions in Indonesia, when the pandemic covid-19, they generally responded positively. Most of them are of the view that the covid-19 pandemic is part of the life test given by God to His (Allah) servants. This reality could not have happened without the intention and intervention of God. God will not test His servants beyond his limits. They also believe that there must be a lot of wisdom hidden behind this pandemic. Even some of them think that this pandemic is a gift, because with this pandemic, there are many innovations and creativities that did not appear when they were in a normal condition. Many of them actually develop their creativity to help others. For example, creativity arises in the community to make masks, make hand sanitizers to share with others in need. They enjoy this reality of life by sharing and working together, amid economic difficulties due to the covid-19 pandemic. They are also eager to pray together online, so that the covid-19 pandemic soon passes.

Referring to the background above, this study in detail aims to determine the relationship of spirituality with immunity, subjective well-being with immunity as well as the relationship between spirituality and subjective well-being with immunity in Islamic lecturing members when facing pandemic covid-19.

2 METHOD

This research uses quantitative methods with correlational type of research. The subject of this study was the Islamic lecturing members in various regions in Indonesia, totaling 135 people. The sampling technique used is accidental sampling, given the population that cannot be known with certainty.

The spirituality scale used in this study, refers to the Daily Spiritual Experience Scale (DSES) consisting of sixteen items with positive statements. DSES is used to see spiritual experiences and how spirituality influences daily life, both in behavior, thoughts, and attitudes (Underwood & Teresi, 2002). The results of the validity test of 16 items, all declared valid. While the reliability test results using Chronbach's alpha obtained 0.871 results, which means reliable. DSES was chosen by researchers with rational consideration, that DSES was compiled by Underwood after conducting in-depth qualitative studies on Christian, Jewish, Islamic, agnostic, and atheist groups to find spiritual aspects that could be universally applicable (Underwood & Teresi, 2002). DSES has been used as a measuring tool in spirituality studies totaling more than 200 published studies, and has been translated into 40 languages (Underwood, 2011).

Then to measure subjective well-being, researchers adapt the Larasati questionnaire and refer to aspects raised by Diener (Diener dkk., 2009; Larasati, 2017). The results of the validity test of 28 items have 26 valid items and 2 fall items. While the reliability test results using Chronbach's alpha obtained 0.891 results, which means reliable. Meanwhile, to measure immunity, researchers compiled a questionnaire with reference to the theory of Prasetyo (Prasetyo, 2006). The results of the validity test of 6 items, all declared valid. While the reliability test results using Chronbach's alpha obtained 0.838 results, which means reliable.

The scale in this study uses a Likert scale which contains two statements, namely, a favorable statement (supporting variables) and unfavorable (not supporting variables), except for a scale of spirituality that only contains a favorable statement. The Likert scale in this study has 4 variant choices for answers: SS (Strongly agree), S (Agree), TS (Disagree), STS (Strongly disagree). Data that has been collected, analyzed using statistical tests in the form of linear regression analysis. This test is used to determine the correlation between spirituality and subjective well-being and immunity. Before testing the three variables, a prerequisite test is used, namely the normality test, linearity and multicollinearity tests.

3 RESULT

Before a linear regression analysis is performed, the normality, reliability and multicollinearity tests are first performed. The results of normality tests on the three variables, namely spirituality, subjective well-being and immunity can be seen in the following table 1:

Table 1: Normality Test Results

		One-Sample Kolmogorov-Smirnov Test		
		Spiritual	Subjective Well Being	Immunity
N		135	135	135
Normal Parameters ^{a,b}	Mean	57.2889	84.7333	19.1630
	Std. Deviation	4.70609	7.70075	2.50137
Most Extreme Differences	Absolute	.095	.094	.175
	Positive	.077	.094	.175
	Negative	-.095	-.072	-.158
Kolmogorov-Smirnov Z		1.110	1.091	2.037
Asymp. Sig. (2-tailed)		.170	.185	.000

a. Test distribution is Normal.
b. Calculated from data.

From the table 1, it is known that the normality test of spirituality variables using Kolmogorov-Smirnov obtained a significance number $p = 0.170 > 0.05$, which means that the spirituality variable data is normally distributed. For subjective well-being variables The significance value is $p = 0.185 > 0.005$, which means that subjective well-being variables are also normally distributed. Normality test on the immunity variable, obtained a significance number $p = 0.000 < 0.005$ which means that the data distribution is not normal. However, because of the large population in this study > 30 people, i.e. 135 people, all data variables can be stated normally distributed.

Next, a linearity test was performed on all three variables using ANOVA, and the results are as follows:

Table 2: Linearity test results

ANOVA Table				
			F	
Spiritual * Immunity	Between Groups	(Combined)	5.890	
		Linearity	30.603	.000
		Deviation from Linearity	3.643	.000
	Within Groups			
	Total			

From the table 2, it is known that the significance level of linearity between spirituality and immunity $p = 0.000 < 0.005$ which means linear. Likewise, subjective well-being with immunity produces a significance number $p = 0.000 < 0.005$ which also means linear.

Then to see the relationship between independent variables, namely spirituality and subjective well-being, a multicollinearity test was performed. Multicollinearity test results is known that the tolerance coefficient values are $0.564 > 0.3$

Table 4: Simultaneously Hypothesis Test Results

Model Summary							
Model	R	R Square	Adjusted Square	R	Std. Error of the Estimate	Change Statistics	
						Sig. Change	F
1	.444^a	.197	.185		2.25870	.000	

a. Predictors: (Constant), Subjective Well Being, Spiritual

and $VIF 1.773 > 0.9$, which shows that there is no multicollinearity between fellow independent variables, namely the variables of spirituality and subjective well-being.

Because all the prerequisites for conducting a hypothesis test using linear regression analysis have been fulfilled, then proceed with the hypothesis test whose results are presented in the following table 3:

Table 3: Partial Hypothesis Test Results

		Correlations		
		Immunity	Spiritual	Subjective Well Being
Pearson Correlation	Immunity	1.000	.399	.409
	Spiritual	.399	1.000	.660
	Subjective Well Being	.409	.660	1.000
Sig. (1-tailed)	Immunity	.000	.000	.000
	Spiritual	.000	.000	.000
	Subjective Well Being	.000	.000	.000
N	Immunity	135	135	135
	Spiritual	135	135	135
	Subjective Well Being	135	135	135

From the table 3 it is known that the relationship between spirituality and immunity, as well as subjective well-being and immunity produces a significance number $p = 0.000 < 0.005$ which means that there is a significant relationship between spirituality and immunity, as well as a significant relationship between subjective well-being and immunity. Correlation coefficient results obtained 0.399 for the variable spirituality and 0.409 for the variable subjective well-being. This means that there is a strong positive relationship between spirituality with immunity and subjective well-being with immunity.

Furthermore, to see the simultaneous relationship between the three variables between spirituality and subjective well-being and immunity, it can be seen in the following table 4.

From the table 4 it is known that the significance number of the three variables is $p = 0.000 < 0.005$ which means that there is a significant relationship between spirituality and subjective well-being with immunity. In addition, the correlation coefficient r of 0.444 shows the third variable relationship quite strong and the coefficient of determination (R Square) of 0.197 or 19.7% which means that both of these variables predict the Immunity variable, while 80.3% is predicted by other variables not included in this study.

To find out the effective contribution of the spirituality variable to immunity and subjective well-being to immunity, it can be seen in the following table 5:

Table 5: Effective contributions

	Measures of Association			
	R	R Squared	Eta	Eta Squared
Spiritual * Immunity	.399	.159	.606	.367
Subjective Well Being * Immunity	.409	.168	.610	.372

From the table 5, it is known that the R squared for spirituality variable is 0.159 which means that spirituality contributes effectively to 15.9% of immunity. For subjective well-being variable, the result of R squared is 0.168, which means that subjective well-being contributes effectively to 16.8% of immunity.

4 DISCUSSION

The partial hypothesis test results are known that the relationship between spirituality and immunity is indicated by a significance number $p = 0.000 < 0.005$ and a correlation coefficient of 0.399 which means that there is a significant positive relationship between spirituality and immunity. The results of this study are in line with the results of the Ahmadi study (2015) which states that spirituality and religiosity are two important components in palliative care of cancer patients as a holistic therapy that can affect the improvement of quality of life, well-being, and reduce distress in cancer patients (Ahmadi dkk., 2015). Another study conducted found significant results in the handling of HIV / AIDS patients who were depressed by giving therapy of spiritual emotional freedom technique (Astuti dkk., 2015). T Spiritual treatment done indirectly can increase the meaning of a patient's spirituality about his illness. Other studies show that the decline in immunity can be caused by psychological disorders that can be viewed from the

aspect of religiosity (Julianto & Subandi, 2015). According to Nelson in Videbeck found that religious orientation is useful as a coping mechanism and a source of social support for depressed elderly (Schiffirin & Nelson, 2010). Gallup's research in Tangdilintin also found that someone who was spiritually committed was twice as happy as someone who was less committed (Tangdilintin, 2008). A person with high spirituality also has a lower risk of depression and is more satisfied with his existence.

Other partial hypothesis test results, it is known that the significance number for subjective well-being with immunity is $p = 0.000 < 0.005$ and the correlation coefficient is 0.409 which means that there is a significant positive relationship between subjective well-being and immunity. Research Graham et.al., assesses the inverse relationship between subjective well-being and income and health by examining the effects of happiness on income, health, and other factors (Muzakkiyah & Suharnan, 2016). The results show that people who have higher subjective well-being are in good financial economic conditions, and tend to be in better health Bukhari and Khanam state that happiness is part of subjective well-being which is a subjective view of the whole of life that an individual has (Bukhari & Khanam, 2015). Besides being important to be researched and studied because it illustrates a person's quality of life, subjective well-being can also have a positive impact on one's life. Many benefits are obtained if a person has a high level of subjective well-being, including health benefits, one of which is longevity and productivity (Diener & Tay, 2015). Other studies also explain that high subjective well-being such as life satisfaction, the absence of negative emotions, optimism and positive emotions affect the level of health and better longevity (Diener & Chan, 2011).

When simultaneous hypothesis testing is carried out, the significance value $p = 0.000 < 0.005$ and the correlation coefficient r of 0.444 indicate that there is a significant positive relationship between spirituality and subjective well-being and immunity. The results of the coefficient of determination (R Square) of 0.197 or 19.7% indicate that spirituality and subjective well-being predict the Immune variable, while the other 80.3% are predicted by other variables. The involvement of spirituality and subjective well-being in predicting immunity can be explained by the concept of psychoneuroimmunology. In psychoneuroimmunology studies there is always an

interaction between psychological factors, the nervous system and the immune system through modulation of the endocrine system (Ader dkk., 1995). Psychological stressors that are received in the brain through the limbic system are then forwarded to the hypothalamus which is treated as stress perception, and then the endocrine system is accepted as stress responses. This stress response serves to maintain body balance known as homeostasis (Wardhana, 2011). This stress is a dynamic condition of the body in dealing with various stressors, such as psychological, physical, biological, environmental, or social stressors which can affect the nervous system and the neuroendocrine system to generate an immune system response (Wardhana, 2011).

During the stress response, the sympathetic nervous system is generated, causing the hypothalamus to secrete more corticotrophin releasing factor (CRF). CRF will stimulate the pituitary to secrete adrenocorticotropin hormone (ACTH), ACTH will activate the adrenal cortex to secrete glucocorticoids especially cortisol, so the amount of cortisol increases. In acute stress states and increase in catecholamines and cortisol, the higher the severity of stress the higher the levels of both hormones (Chance dkk., 1994). Increased cortisol levels in psychological stress are considered as a result of increased limbic system activity, especially in the amygdala and hippocampal regions (Lisdiana, 2012). Furthermore cortisol mobilizes the activity of almost all homeostatic systems such as cardiovascular, respiration, digestion, metabolism, immune system, skin and mucosa, in preparation for a flight or fight. This increase in cortisol will suppress the immune function called paradox cortisol. This situation has a vital effect because all the processes of homeostasis are mobilized in preparation for a fight or flight or fight (Elenkov dkk., 2005).

According to Selye, there are three stages of the body's physiological reaction to stress known as General Adaptation Syndrome (GAS) (Chance dkk., 1994). The first alarm stage (the alarm stage), at this stage the nervous system is raised and the body's defenses are mobilized. Second the stage of resistance or adaptation, which is when mobilization determines to "flight or fight", at this stage the body is able to overcome the stressor transaction dosage. Third, the stage of exhaustion, when stress is sustained, causes damage to the mechanism of adaptation and homeostasis. The non-specific physiologic response identified by Selye consists of

the interaction of the sympathetic branch of the autonomic nervous system and the two glands, the pituitary and adrenal. The warning phase in GAS begins when a stressor triggers the hypothalamus and sympathetic nervous system. The resistance or adaptation phase begins with the action of the adrenal hormones (cortisol), norepineprin and epineprin. The fatigue phase occurs if stress continues or adaptation does not work (Chance dkk., 1994).

According to Elkins, et al spirituality is the way individuals understand the existence and experience that occurs in him (Lines, 2002). Greenberg suggested that spiritual health significantly has a good relationship for managing one's stress (Greenberg, 2002). According to Greenberg spirituality such as meditation, prayer, rituals, and reading the scriptures can reduce emotional reactions to stress. Greenberg also added that good health spirituality or spirituality is not only good for someone physically and psychologically, but spirituality is also an important component that is effective for managing stress (Aditama, 2017b).

Hurlock and Papalia and Old's explain that religious interest has the function of maintaining psychological stability as part of the process of decreasing social activity and achievement, and religion is seen as one of the emotional coping that is effective in reducing stress and unhappiness (Muzakkiyah & Suharnan, 2016). Happiness can be achieved if someone has self-esteem, sense of perceived control, personality, optimism, understanding of meaning and life goals, low neuroticism, and the influence of society and culture, and cognitive processes. Emphasized that understanding of the meaning and purpose of life and neuroticism are related to one's religious life (Muzakkiyah & Suharnan, 2016).

Cognitive theories of well-being explain that the way individuals perceive, perceive and think about various things about the world determines the level of subjective well-being (SWB) of a person. Many things are offered to guide the mood and emotional regulation of individuals. For example philosophical and religious traditions, advice for constructive thinking, and so on (Joshi, 2010). In the area of subjective well-being, individuals can dismiss or strengthen their emotions through what they think. This leads to the experience of feeling emotional intensity that is stronger or vice versa (Muzakkiyah & Suharnan, 2016). Subjective well-being is someone's subjective evaluation of life including concepts such as life satisfaction, pleasant

emotions, fulfillment, and satisfaction with areas such as marriage and work, low levels of unpleasant emotions (Diener, E. dkk., 2003).

Diener stated that there are 2 general components in subjective well-being, namely the cognitive dimension and the affective dimension (Diener, 1994). The cognitive dimension is a person's life satisfaction about the life they lead. This is a feeling of sufficient, peaceful and satisfied, from the gap between wants and needs with achievement and fulfillment. Campbell, Converse, and Rodgers (Diener, 1994) said that this cognitive component is a perceived gap between desire and achievement whether fulfilled or not. The cognitive dimension of subjective well-being also covers the area of satisfaction (domain satisfaction) of individuals in various fields of life such as those related to oneself, family, peer groups, health, finance, work, and leisure, meaning that this dimension has a picture that is multifacet. Meanwhile, the affective dimension is the basis of subjective well-being which includes pleasant and unpleasant moods and emotions. People react with pleasant emotions when they think something good happened to them, and react with unpleasant emotions when they think something bad happened to them, so mood and emotions are not only pleasant and unpleasant but also indicate whether the event is expected or not (Diener, E. dkk., 2003). The dimensions of this affect include positive affect, which is a positive emotion and negative affect, an unpleasant emotion and mood, both of which affect independently and each has a frequency and intensity. Diener and Lucas said that this affective dimension is central to subjective well-being (Diener, 2000). The affect dimension has a role in evaluating well-being because the affect dimension contributes to pleasant and unpleasant feelings on the basis of continuous personal experience. Both effects relate to someone's evaluation because emotions arise from evaluations made by that person. Furthermore, Diener also revealed that the balance of the level of affect refers to the number of positive feelings experienced compared to negative feelings (Diener, 2000). Life satisfaction and the many positive and negative affect can be interrelated, this is caused by a person's assessment of the activities carried out, problems, and events in his life. Even though these two things are related, they are different. Life satisfaction is an assessment of one's life as a whole, while positive and negative effects consist of sustained reactions to events experienced (Hamdana & Alhamdu, 2015).

In connection with research on Islamic lecturing members in various regions in Indonesia who are being confronted with stressors in the form of pandemic covid-19, spirituality and subjective well-being contribute to the condition of their immunity. Through spirituality and subjective well-being, a positive coping mechanism occurs. The form of their attitude towards pandemic covid-19 by considering it as part of a test given by God to His servants, and followed up by showing innovation and creativity to share with others, making them able to reduce stress and be able to think positively. This condition played a role in maintaining their immunity, although the contribution was not too large, namely only 19.7%. That is because immunity is not only influenced by spirituality and subjective well-being, but is also influenced by other factors, such as nutrition, age, hormonal, history of each individual's disease, family history and others who are not involved in this study. However, spirituality and subjective well-being should not be ignored, especially when faced with psychosocial stressors, this kind of covid-19 pandemic.

5 CONCLUSIONS AND SUGGESTIONS

Conclusion

The conclusion from the results of this study is that there is a significant positive relationship between spirituality and subjective well-being with immunity in Islamic lecturing members in facing covid-19 pandemic.

Suggestion

For the community, they should try to improve spirituality and subjective well-being, so that they can manage emotions with good feelings, so they can maintain their body's immunity.

For further researchers, it should examine other variables that can affect immunity with a psychoneuroimmunology approach.

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