

ACCEPTANCE AND COMMITMENT THERAPY ISLAMIC APPROACH IMPROVE THE PSYCHOLOGICAL FLEXIBILITY OF PATIENTS WITH MENTAL DISORDERS

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ABSTRACT

Patients with mental disorders experience disturbances in thoughts, feelings, and behavior, so they have several psychological problems such as inadequate emotional regulation and lack of flexibility to adapt to the conditions experienced. One of the psychotherapies that can be used is acceptance and commitment therapy with an Islamic approach. The principle of this therapy is to accept the current condition of having a mental disorder by surrendering to Allah SWT and committing to being more active in achieving healing by endeavoring. This study aims to determine the effect of applying ACT using an Islamic approach to the psychological flexibility of patients with mental disorders. **Methods:** This research was a quasi-experiment one-group pre-post-test design. This study involved 31 patients with mental disorders who were treated at the Dadi Hospital in South Sulawesi Province, were Muslim, and had good insight. ACT using the Islamic approach was given in four sessions. The data was collected with a demographic data questionnaire and the Acceptance and Action Questionnaire – II (AAQ-II) and then analyzed using the Paired T-Test with a significance level of < 0.05 . **Result:** The majority of respondents are male (87.1%), unmarried (71%), and working (68.1%). The analysis showed an increase in the psychological flexibility of patients with mental disorders after ACT with an Islamic approach (p -value = < 0.001). **Conclusion:** ACT with an Islamic approach can improve the psychological flexibility of patients with mental disorders, so nurses need to apply ACT as a therapy modality for patients with mental disorders.

ARTICLE INFO

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TERAPI PENERIMAAN DAN KOMITMEN PENDEKATAN ISLAM MENINGKATKAN FLEKSIBILITAS PSIKOLOGIS PASIEN GANGGUAN JIWA

ABSTRAK

Pasien gangguan jiwa mengalami gangguan pada pikiran, perasaan, dan perilakunya, sehingga dapat memiliki masalah psikologis seperti pengaturan emosi yang tidak memadai dan kurangnya fleksibilitas untuk beradaptasi dengan kondisi yang dialami. Salah satu psikoterapi yang dapat digunakan adalah terapi penerimaan dan komitmen dengan pendekatan Islami. Prinsip dari terapi ini adalah menerima kondisi gangguan jiwa saat ini dengan berserah diri kepada Allah SWT dan berkomitmen untuk lebih giat mencapai kesembuhan dengan berikhtiar. Penelitian ini bertujuan untuk mengetahui pengaruh penerapan ACT dengan pendekatan Islam terhadap

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fleksibilitas psikologis pasien gangguan jiwa. Metode: Penelitian ini merupakan penelitian *quasi-experiment one-group pre-post-test design*. Penelitian ini melibatkan 31 pasien gangguan jiwa yang dirawat di RSKD Dadi Provinsi Sulawesi Selatan, beragama Islam, dan memiliki insigh yang baik. ACT dengan pendekatan Islam dilakukan sebanyak empat sesi. Pengumpulan data menggunakan kuesioner data demografi dan *Acceptance and Action Questionnaire - II (AAQ-II)*. Data kemudian dianalisis menggunakan *Paired T-Test* dengan tingkat signifikansi 0,05. Hasil: Mayoritas responden berjenis kelamin laki-laki (87,1%), belum menikah (71%), dan bekerja (68,1%). Hasil analisis menunjukkan adanya peningkatan fleksibilitas psikologis pasien gangguan jiwa pasca ACT dengan pendekatan Islam ($p\text{-value} = < 0,001$). Kesimpulan: ACT dengan pendekatan Islam dapat meningkatkan fleksibilitas psikologis pasien gangguan jiwa, sehingga perawat perlu menerapkan ACT sebagai terapi modalitas pada pasien gangguan jiwa.

Kata kunci:

Terapi penerimaan dan komitmen; Pasien gangguan jiwa; Fleksibilitas psikologis; Islam

Introduction

A mental disorder is a disease that affects the deviation of thought processes, natural feelings, and behavior that causes a person to experience discomfort, restlessness, and even disruption of daily activities (WHO, 2019). Someone who experienced Mental disorders tends to require longer treatment and can relapse and are more vulnerable, and are more likely to experience stigma, discrimination, and human rights violations. Mental disorders have different recurrence rates, namely 52-92 % in schizophrenia, 50%-90% in substance abuse, and 65%-73% in bipolar disorder (Agenagnew & kassaw, 2020). The study found several factors that can affect the recurrence rate, including lack of involvement in religious activities, lack of social support, low medication adherence, community stigma, and self-stigma attached to people with a mental health condition. With these problems, patients with mental disorders will feel isolated, which can make their condition worse.

Self-stigma in patients with mental disorders can be reduced by increasing the psychological flexibility of the patient. Patients who experience increased psychological flexibility can be fully aware of the emotions, sensations, and thoughts they are experiencing, including unpleasant ones, accept thoughts and emotions, and act on selected values (Ramaci et al., 2019). One therapy that can increase psychological flexibility is Acceptance and Commitment Therapy which is carried out with an Islamic approach. The principle of this therapy is to accept the current condition that is experiencing mental disorders and commit to being more active in achieving healing. In the teachings of Islam, we are encouraged to surrender and strive for healing

Research Methods

This study is a quantitative study using a quasi-experimental research design pre- post-test without a control group to determine patients' psychological flexibility before and after receiving therapy. The population in this study were patients with mental disorders who were treated at the Dadi Hospital in South Sulawesi province. The sample was selected using a purposive sampling technique that met the criteria of being Muslim, insight/awareness, and understanding of the patient's mental disorder experienced in the excellent category, namely being aware of the disease experienced.

Data collection was then carried out using a demographic data questionnaire and an assessment of the patient's level of psychological flexibility prior to therapy. Assessment of

psychological flexibility using the Acceptance and Action Questionnaire – II (AAQ-II) (Bond et al., 2011). The instrument which has been translated. The Acceptance and Action Questionnaire – II (AAQ-II) consists of 7 statements with an answer range of 1 if the respondent answers that the statement is never true, is given a score of 2 if the respondent answers that the statement is very rarely true, given a score of 3 if the respondent answered the statement was rarely true, a score of 4 if the respondent answered that the statement was sometimes true, a score of 5 if the respondent answered that the statement was often true, a score of 6 if the respondent answered that the statement was almost always true and a score of 7 and asked to be a respondent. The implementation of ACT therapy with an Islamic approach is carried out by giving individual therapy to each patient who meets the criteria for therapy. ACT therapy is carried out in 4 sessions according to the therapy module/ workbook, which includes:

Session I: Discussing unpleasant events or experiences experienced by the patient

Session II: Discusses the patient's response to an unpleasant experience,

Session III: Identify together the impact of responses that arise from unpleasant experiences and practice acceptance using an Islamic approach by surrendering to Allah for the incident.

Session IV: Identify the values that exist in the patient and discuss ways to commit and strive for therapy and achieve healing and acceptance goals based on Islamic values.

The data was then analyzed, which consists of univariate analysis using a frequency distribution containing patient demographic data, while bivariate analysis using paired sample t-test analysis to determine differences in the level of psychological flexibility before and after therapy.

Ethical Clearance

This research has obtained ethical permission from the Health Research Ethics Committee of FKIK UIN Alauddin Makassar with number: C.75/KEPK/FKIK/II/2022 Health Research Ethics Committee (KEPK) UIN Alauddin Makassar.

Result

Respondents who participated as many as 31 people. Data were collected between March - June 2022; based on age, the average respondent was 37 years old, with the youngest age being 22 years old and the oldest being 49 years old. Respondents tend to have high school education when viewed from the last education. The majority of respondents are male, and most unemployed. Marital status tends to be single. On average, respondents have been admitted to mental hospitals four times with the lowest number of admissions being one time and the most being 19 times in and out of mental hospitals. Overall, the characteristics of the respondents are shown in Table 1.

The initial assessment of the patient's psychological flexibility was carried out by giving the Acceptance and Action Questionnaire – II (AAQ-II) questionnaire developed by Bond, et al (2011) (Bond et al., 2011). An overview of the patient's psychological flexibility before ACT therapy with an Islamic approach is shown in Table 2.

Table 1 The socio-demographic characteristic of participants (n: 31).

Characteristics		Frequency (f)	Percentage (%)
Age (years)	Mean ± SD (Min-Max)	36.87 ± 7.991	(22-49)
Gender	Male	27	87.1

Acceptance and Commitment Therapy Islamic Approach Improve The Psychological Flexibility of Patients with Mental Disorders

Education	Female	4	12.9
	No formal	5	16.1
	Primary School	4	12.9
	Junior High School	5	16.1
	Senior High School	12	38.7
Marital Status	Bachelor-level or above	5	16.1
	Married	3	9.7
	Unmarried	22	71.0
Occupational	Widow/widower	6	19.4
	Unemployed or not working	13	41.9
	Working	18	68.1
How much is the hospital treatment?	Mean±SD (Min-Max)	4.29±4.213	(1-19)

Source: Primary Data, 2022

Table 2 Psychological flexibility of patients with mental disorders before giving ACT therapy using an Islamic approach (n=31)

Components of psychological flexibility - before ACT therapy	mean	SD	Min-Max
My painful experiences and memories make it difficult for me to live a life that I would value	4.23	2,045	1-7
I'm afraid of my feelings	3.39	1995	1-7
I worry about not being able to control my worries and feelings.	4.55	2014	1-7
My painful memories prevent me from having a fulfilling life.	4.58	2,062	1-7
Emotions cause problems in my life.	4.45	2.111	1-7
It seems like most people are handling their lives better than I am.	5.03	1,779	1-7
Worries get in the way of my success.	4.39	2,060	1-7
Average psychological flexibility - before ACT therapy	4.32	1.326	1-6
Total psychological flexibility - before ACT therapy	30.61	7,732	11-43

Table 1 presents the psychological flexibility of patients with mental disorders before giving ACT therapy using an Islamic approach. There are 7 components of psychological flexibility that are assessed, sourced from the standard instrument *Acceptance and Action Questionnaire - II* (AAC-II) with 7 scores of answer choices, namely given a score of 1 if the respondent answers that the statement is never true, is given a score of 2 if the respondent answers that the statement is very rarely true, given a score of 3 if the respondent answered the statement was rarely true, a score of 4 if the respondent answered that the statement was sometimes true, a score of 5 if the respondent answered that the statement was often true, a score of 6 if the respondent answered that the statement was almost always true and a score of 7 if if respondents answered that the statement is always true. The total score ranges from 7 - 49,

which if the higher total score means less flexibility, while the lower total score means more flexibility regarding the psychological flexibility of the respondent prior to ACT therapy.

The average value of respondents' answers ranged from 3.39 to 5.03 which showed that the patient's response to the statement was in the range of rarely true to often true. Components that indicate the response is often correct are statements number 6, 3 and 4, namely the respondent often correctly feels that other people live a better life than himself, the respondent is worried that he cannot control his worries and feelings, the respondent often feels that painful memories prevent him from achieving life satisfaction. The component that shows the response is rarely correct is statement number 2, namely the respondent is rarely afraid of his feelings. When viewed from the average respondent's answer as a whole, it shows a score of 4.32 or can be rounded up to 4, which means that the average respondent sometimes answers correctly regarding the statement of psychological flexibility before being given ACT therapy using an Islamic approach. The total score shows an average value of 30.61, so it can be concluded that the psychological flexibility of mental patients before being given ACT therapy has a higher score meaning less flexibility.

Patients who have been assessed for psychological flexibility are given ACT therapy with an Islamic approach of four individual sessions. The duration of each therapy session ranges from 15 to 45 minutes. The time spent doing therapy for each session is influenced by the patient's ability to express problems/experiences, the ability to discuss problems and use an Islamic approach to find values and make commitments to achieve healing. Implementation of therapy to complete the entire session in each patient ranged from 4-8 days. After the implementation of therapy, the patient was again given the AAQ II questionnaire to assess Psychological flexibility after the implementation of therapy. Psychological flexibility after the implementation of therapy is shown in Table 3

Table 3 Psychological flexibility of patients with mental disorders after giving ACT therapy using an Islamic approach

Components of psychological flexibility - after ACT therapy	mean	SD	Min-Max
My painful experiences and memories make it difficult for me to live a life that I would value	2.29	1.465	1-6
I'm afraid of my feelings	2.06	1.315	1-6
I worry about not being able to control my worries and feelings.	2.48	1.546	1-6
My painful memories prevent me from having a fulfilling life.	2.58	1.409	1-6
Emotions cause problems in my life.	2.55	1.362	1-6
It seems like most people are handling their lives better than I am.	3.39	1.383	1-7
Worries get in the way of my success.	2.77	1,765	1-7
Average psychological flexibility - after ACT therapy	2.58	0.848	1-4
Total psychological flexibility - after ACT therapy	18.13	5.691	7-30

Table 3 presents the psychological flexibility of patients with mental disorders after giving ACT therapy using an Islamic approach. The scoring principle is similar to the previous table because it uses the same instrument. The average value of respondents' answers ranged from 2.06 to 3.39, which showed that the patient's response to the statement was in the range of very rarely true to rarely true. The components that show the responses are rarely correct are

statements number 1, 2, and 3, namely painful experiences and memories that very rarely make it difficult for respondents to live their lives in the future, respondents are very rarely afraid of their feelings, respondents are very rarely worried about not being able to control their worries and feelings. Components that indicate the response is rarely correct are statements number 4, 5 and 6, namely painful memories rarely prevent respondents from achieving life satisfaction, emotions are rarely a source of problems in the respondent's life, other people rarely live a better life than the respondent, worries rarely hinder the respondent's success.

When viewed from the average respondent's answer as a whole, it shows a score of 2.58 or can be rounded up to 3, which means that the average respondent rarely answers correctly regarding the statement of psychological flexibility after being given ACT therapy using an Islamic approach. The total score shows an average value of 18.13, so it can be concluded that the psychological flexibility of mental patients after being given ACT therapy has a lower score meaning more flexibility.

The effect of ACT using an Islamic approach on the psychological flexibility of mentally ill patients

Table 4. The effect of ACT therapy using an Islamic approach on the psychological flexibility of patients with mental disorders (n=31)

Outcomes	Pre-test	Post-test	Mean difference	p-value*
	Mean±SD	Mean±SD		
Psychological flexibility of patients with mental disorders	30.61±7.723	18.13±5.691	12.48	<0.001

**paired sample t-test*

Table 3 presents the effect of ACT therapy using an Islamic approach on the psychological flexibility of patients with mental disorders. The results of statistical tests showed a positive and significant effect of ACT therapy on the psychological flexibility of patients with mental disorders ($p < 0.05$). This was supported by the average value of psychological flexibility, which decreased from pre-test to post-test with a difference of 12.48 points. It can be concluded that ACT therapy using an Islamic approach can reduce psychological flexibility scores so that there is more flexibility for patients with mental disorders by 18 points. If, for example, patients with mental disorders who previously had a psychological flexibility score of 30.61 after ACT therapy, the score decreased to 18.13, or those who previously had less flexibility will become more after ACT therapy using an Islamic approach.

Discussion

The results confirmed that this method had a positive effect on increasing psychological flexibility scores during the intervention. Overall, all respondents experience a decrease in total score AAQ II assessment, indicating enhancement flexibility in psychological patient disturbance soul after ACT therapy using the approach of Islam.

In a study, fusion cognitive is one _ related factor _ with flexibility psychological. So fusion cognitive is one _ of the mechanism most important for ACT effectiveness. Besides that, fusion occurs when thought individuals influence behavior and divert attention from the thought process (context) to product think (content). When this process dominates the experience individually, it will lead to flexibility psychological (Tyndall et al., 2018), so that method of psychotherapy this set theory this for enhancement flexibility patient disturbance soul with reducing fusion cognitive.

Patients who have flexibility are less psychological _ susceptible to stigma (Tyrrell et al., 2010). At the moment patient disturbance soul experience stigma in society, and the stigma that is

formed as thoughts and beliefs in thought them, the thing that produces fusion cognitive. The ACT approach Islam in the study this arrange fusion cognitively, so patients with disturbance souls more easily accept stigma and feel low self-related experienced disease. _ ACT and Islam have several things in common, one of which is the view of pain or unpleasant experiences. From the ACT perspective, pain, adversity, or unpleasant experiences are natural experiences of life that cannot be avoided. Patients who are faced with unpleasant experiences will experience psychological disorders if they do not balance the six core processes in the inflexibility model (Hayes et al., 2016), In Islamic teachings, pain or unpleasant experiences are normal and can be considered a test from Allah SWT. Therefore, Muslims are strongly encouraged to create space for these issues by practicing prayer in a mindful way, performing muraqaba, or meditating (Tanhan, 2019).

Research results other show that flexibility psychological have a significant relationship _ with efficacy self (Jeffords et al., 2020). In other words, increase results efficacy self in the sense of ability, emotion positive, increase trust self, improve flexibility psychological so that patient more accept himself, accept the painful experience and not _ again afraid with her feelings alone.

Another finding is that flexibility psychological grow hope (Abbasi et al., 2018). Flexibility psychological refers to the ability to take into account many options, and levels hope taller with many choices compared with little choice. Because of that, ACT can help patients' disturbing souls accept experience, consider a number of options based on value, and increase hope they for run life same good with other people's lives.

Finding this in line with a study by Khanjani, Show that ACT improves flexibility psychology in patients Spinal Cord injury (Khanjani et al., 2021), as well as research by Moghtadayi that shows that ACT improves flexibility psychological veteran couples with disabled (Nourian & Aghaei, 2015).

ACT and Islam position mental health providers as experts in their professions with warmth and humility. Both highly recommend that therapists serve patients by applying attitudes of respect, acceptance, and respect for the values held by patients as the Word of God, which means "Indeed, Allah commands you to convey a message to those who deserve it, and if you make laws between humans, you should judge it justly. Indeed, Allah is the best who teaches you. Indeed, Allah is All-Hearing, All-Seeing" (Surah An-Nisa verse 58).

Conclusion

Acceptance and commitment therapy (ACT) with an Islamic approach positively impacts psychological flexibility in patients with mental disorders, which can help them in psychological rehabilitation. Therefore, nurses must apply ACT as a therapy modality for patients with mental disorders.

Conflicting Interest

Authors declare no conflict of interest.

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