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The Relationship Between Spirituality and Coping Mechanisms and Levels of Work-Related Stress Among Employees in the Health Insurance Coverage Department

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Abstract

Work-related stress is an important occupational concern among employees in health insurance coverage departments, where verification demands, accuracy requirements, workload, and claim-related responsibilities may create psychological pressure. This study examined the relationships between spirituality, coping mechanisms, and work-related stress among employees in the health insurance coverage department at PT Asuransi BRI Life. A quantitative cross-sectional design was conducted at the Semarang and Yogyakarta branches from May to June 2026, involving 90 employees selected through total sampling. Data were collected using the Perceived Stress Scale (PSS), Daily Spiritual Experience Scale (DSES), and Brief COPE Inventory (BCI), followed by univariate analysis and Spearman rank correlation testing. Most respondents were female (64.4%), aged 26–35 years (40.0%), nurses (84.4%), and had worked for ≥5 years (56.7%). Moderate spirituality was predominant (53.3%), followed by adaptive coping mechanisms (67.8%) and moderate work-related stress (44.4%). Spirituality demonstrated a significant moderate negative relationship with work-related stress ($p = 0.000$; $r = -0.551$), while coping mechanisms showed a significant strong negative relationship with work-related stress ($p = 0.000$; $r = -0.664$). These findings indicate that higher spirituality and more adaptive coping mechanisms were associated with lower work-related stress among employees. Attention to personal psychological resources may complement organizational efforts to manage occupational stress.

Keywords: Coping Mechanisms, Insurance Employees, Spirituality, Work-Related Stress, Workplace Stress.



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INTRODUCTION

The provision of social protection and access to medical services increasingly depends on the capacity of health insurance systems to manage financial risks associated with illness while maintaining efficient and accountable service delivery across increasingly complex healthcare environments. Health insurance represents a formal contractual mechanism through which insured individuals obtain financial protection against medical expenditure in exchange for periodic premium payments, positioning insurance administration as an important component of contemporary healthcare governance (Noor, 2025). The expansion of health coverage has simultaneously increased the operational demands placed on organizations responsible for eligibility verification, claims administration, benefit authorization, and coordination with healthcare providers, making administrative accuracy an important determinant of service continuity and institutional credibility. In Indonesia, the growing importance of health protection has been accompanied by increasing expectations for rapid, transparent, and reliable claims services, particularly as insurance providers interact with participants and healthcare facilities under time-sensitive conditions. The organizational environment surrounding health insurance is consequently characterized not only by financial and regulatory responsibilities but also by intensive human-resource demands, because employees must translate complex policy provisions into accurate operational decisions while maintaining service responsiveness. Research on insurance organizations has shown that workplace conditions and occupational stress are relevant to employee performance, indicating that the psychological dimensions of insurance administration cannot be separated from the effectiveness of organizational operations (Gudi & Sumbogo, 2022). Within this setting, occupational stress emerges as a consequential issue for employees whose routine responsibilities require sustained

concentration, rapid decision-making, interpersonal regulation, and compliance with demanding service standards.

Employees in health insurance coverage departments occupy a particularly demanding position because their work requires the verification of participant information, assessment of medical and administrative documentation, processing of inpatient and outpatient claims, and coordination with insurers, healthcare facilities, and other institutional actors. The accuracy of these activities has direct implications for the timeliness of financial disbursement, participant satisfaction, provider relationships, and organizational reputation, meaning that even relatively minor procedural errors may generate consequences beyond the immediate administrative task. Previous evidence from insurance-related workplaces indicates that workload and occupational stress can coexist with performance pressures, suggesting that employees operating within claims and authorization functions are exposed to psychosocial demands that require sustained adaptive capacity (Trilaksana, 2022). Similar evidence from broader occupational settings indicates that excessive workload is associated with elevated work-related stress, particularly when employees must complete substantial responsibilities within restricted periods and under continuous performance expectations (Sari & Febriyanto, 2022). The problem becomes more complex when employees are required to communicate unfavorable decisions, resolve incomplete documentation, respond to complaints, and negotiate discrepancies with healthcare providers while simultaneously meeting service-level targets. Work-life imbalance and occupational stress have also been associated with employee performance within the insurance industry, reinforcing the view that psychological strain constitutes an organizational issue rather than merely an individual difficulty (Nurasyifa & Rakhman, 2025). Such conditions create a need to examine not only the sources and magnitude of work-related stress but also the psychological resources that may enable employees to regulate and cope with these demands.

Occupational stress has increasingly been understood as a multidimensional phenomenon involving the interaction between work demands, individual psychological resources, emotional regulation, and organizational conditions rather than as a simple consequence of workload alone. Evidence from healthcare settings demonstrates that excessive workload is significantly associated with higher levels of occupational stress, illustrating how quantitative and qualitative job demands can influence psychological well-being when available coping resources are insufficient (Awalia et al., 2021). The persistence of occupational stress is particularly concerning because prolonged psychological strain may contribute to emotional exhaustion, reduced concentration, impaired decision-making, and deterioration in overall mental well-being, all of which can undermine the reliability of work requiring high procedural precision. Research among healthcare workers has similarly documented substantial psychological distress, demonstrating that occupational environments characterized by intense responsibility and emotional demands can expose workers to persistent psychological vulnerability (Nguyen et al., 2023). Employees in health insurance coverage departments may experience comparable pressures even though their occupational roles are primarily administrative, because claims authorization involves financial accountability, medical-document interpretation, service deadlines, and potentially conflictual interactions with participants or providers. Age and length of employment may also shape how workers experience occupational stress, indicating that individual characteristics can intersect with organizational demands in determining psychological responses to work (Antul et al., 2025). The resulting complexity indicates that understanding stress among insurance employees requires attention to internal psychological resources that may influence how individuals interpret, regulate, and respond to demanding workplace situations.

One potentially important psychological resource is spirituality, which encompasses the search for meaning, connectedness, inner orientation, and values that can influence how individuals interpret stressful experiences and regulate their responses to adversity. Spiritual well-being has been conceptualized as an important component of whole-person care because spiritual dimensions may contribute to psychological resilience, meaning-making, and the integration of emotional experiences into an individual's broader sense of purpose (Puchalski et al., 2014). Empirical research has reported an inverse relationship between spirituality and stress, suggesting that stronger spiritual resources may help individuals manage psychological pressures more effectively and maintain emotional stability when confronting demanding circumstances (Fahmi et al., 2022). Evidence involving employees in healthcare institutions likewise indicates a significant association between spirituality and occupational stress, supporting the possibility that spiritual resources may operate as protective factors within

demanding professional environments (Safitri et al., 2025). However, spirituality should not be treated as a simplistic or universally sufficient solution to occupational stress, because its potential influence may depend on how individuals translate spiritual values into concrete coping responses when facing actual workplace demands. Research on religious coping among nurses has emphasized that spiritual and religious strategies can constitute meaningful resources for managing work-related stress, although the forms and effectiveness of these strategies may vary according to occupational and individual circumstances (Nopa et al., 2023). This perspective positions spirituality as a potentially relevant psychological resource while also indicating that its relationship with work-related stress should be examined alongside the coping mechanisms through which employees respond to occupational demands.

Coping mechanisms provide a complementary conceptual pathway because individuals exposed to similar workplace stressors may experience different psychological outcomes depending on whether they employ adaptive or maladaptive strategies to manage those stressors. Previous research has demonstrated a significant relationship between coping mechanisms and work-related stress among employees, with constructive coping associated with more manageable psychological responses and maladaptive patterns potentially intensifying perceived strain (Murti et al., 2024). Comparable findings among nurses indicate that occupational stress is related to coping strategies, reinforcing the proposition that the way individuals cognitively and behaviorally respond to demanding situations may shape the intensity of stress they ultimately experience (Dewi et al., 2021). Research on emergency healthcare personnel has further demonstrated the relevance of spiritual coping in occupational stress, suggesting that coping processes may represent an important mechanism through which individuals mobilize internal resources when confronted with high-pressure professional situations (Mirzaei et al., 2022). Nevertheless, much of the existing evidence has concentrated on nurses, students, teachers, or other healthcare-related populations, while employees responsible for health insurance coverage and claims authorization remain comparatively underexamined despite their exposure to distinctive combinations of administrative, financial, medical, and interpersonal demands. Existing studies also tend to examine spirituality or coping mechanisms separately, leaving insufficient empirical clarification regarding how these psychological resources relate to work-related stress among employees who operate in health insurance administration. This limitation becomes particularly relevant in organizational contexts where employees are expected to maintain high accuracy and rapid service delivery while simultaneously regulating emotional responses to complaints, claim disputes, workload pressures, and strict service-level requirements.

The present study is positioned within this unresolved intersection between occupational stress, spirituality, and coping mechanisms by focusing specifically on employees in the health insurance coverage department, a population whose psychological working conditions have received substantially less empirical attention than those of clinical healthcare professionals. The research context is the BRILife claims authorization division, which consists of 63 employees responsible for operational processes ranging from entering financing data into the system to determining the amount of financial compensation associated with submitted claims. Their responsibilities are governed by Service Level Agreement requirements that demand timely completion, while operational obstacles involving healthcare facilities require employees to respond rapidly and resolve problems without compromising procedural accuracy. Such conditions create a work environment in which quantitative targets, temporal constraints, administrative complexity, financial accountability, and interpersonal demands converge, potentially increasing vulnerability to work-related stress. At the same time, employees may draw upon spirituality and coping mechanisms as internal resources for interpreting workplace difficulties, regulating emotional reactions, and sustaining psychological functioning under pressure. The study therefore aims to determine the relationship between spirituality and coping mechanisms and levels of work-related stress among employees in the health insurance coverage department. Its theoretical contribution lies in integrating spirituality and coping mechanisms within the analysis of occupational stress in a health-insurance administrative context, while its methodological contribution lies in providing empirical evidence from a specific occupational population that can broaden the application of psychosocial perspectives beyond predominantly clinical healthcare settings.

RESEARCH METHODS

A quantitative cross-sectional design was employed to examine the relationships between spirituality, coping mechanisms, and levels of work-related stress among employees in the health insurance coverage department at PT Asuransi BRI Life. The study was conducted from May to June 2026 and involved all employees assigned to the health insurance verification units at the Semarang and Yogyakarta branches, with a target population of 90 employees. Total sampling was applied because the population was sufficiently accessible and manageable, allowing all 90 eligible employees to participate as research respondents. The inclusion criteria comprised employees who were actively working in the verification or health insurance coverage unit during the study period, had worked in the respective unit at the time of data collection, and were willing to complete the research questionnaire, whereas employees who were on extended leave, absent throughout the data-collection period, or unable to complete the questionnaire were excluded. The selection of employees within an occupational setting is relevant because workload and workplace demands have been associated with variations in occupational stress among workers (Sari & Febriyanto, 2022). Data were collected directly from respondents through a structured self-administered questionnaire distributed during the study period, following standardized instructions intended to ensure that respondents understood the items and provided responses reflecting their current psychological and occupational conditions.

The research instrument consisted of three standardized measures, namely the Perceived Stress Scale (PSS) to assess perceived work-related stress, the Daily Spiritual Experience Scale (DSES) to assess the frequency and intensity of everyday spiritual experiences, and the Brief COPE Inventory (Brief COPE/BCI) to assess coping mechanisms used when responding to stressful situations. The use of spirituality as an analytical variable is supported by previous evidence identifying a significant relationship between spirituality and stress among employees in healthcare institutions (Safitri et al., 2025). The inclusion of coping mechanisms alongside spirituality reflects empirical evidence indicating that coping strategies are associated with the level of occupational stress experienced by workers (Murti et al., 2024). Data were analyzed using univariate analysis to describe the distribution and characteristics of each study variable, followed by bivariate analysis using the Spearman rank correlation test because the analysis was intended to determine the direction and strength of associations between the measured variables without assuming a normal distribution of the data. The analytical framework was also consistent with evidence that coping mechanisms and occupational stress can demonstrate statistically meaningful associations across professional populations (Dewi et al., 2021). Ethical principles were maintained throughout the research process through voluntary participation, informed consent, confidentiality of respondent information, and the right to withdraw from participation without adverse consequences, with data used solely for research purposes and reported in aggregate form to protect individual respondents.

RESULTS AND DISCUSSION

Respondent Characteristics of Employees in the Health Insurance Coverage Department

The characteristics of respondents provide an important basis for interpreting the distribution of spirituality, coping mechanisms, and work-related stress among employees in the health insurance coverage department. This study involved 90 employees who met the predetermined inclusion criteria and participated through a total sampling approach. The respondents represented different age groups, genders, professional backgrounds, and lengths of employment within the organization. These characteristics are relevant because employees' perceptions of occupational demands may differ according to their personal and professional circumstances. Age and length of employment, for example, have been examined as characteristics associated with occupational stress among employees in different work settings (Antul et al., 2025). The respondent profile consequently provides the contextual foundation for interpreting the subsequent findings concerning spirituality, coping mechanisms, and work-related stress.

The age distribution shows that the largest proportion of respondents was in the 26–35-year category, consisting of 36 employees (40.0%). Respondents aged ≤ 25 years accounted for 11 employees (12.2%), while those aged 36–45 years comprised 23 employees (25.6%). The 46–55-year group consisted of 16 employees (17.8%), and only 4 employees (4.4%) were aged > 55 years. The predominance of employees aged 26–35 years indicates that the department was largely composed of workers in an active stage of their occupational development. Employees within different age groups

may have different levels of experience, familiarity with organizational procedures, and perceptions of occupational demands, although these differences cannot be interpreted as direct determinants of stress in a cross-sectional study. Previous research has demonstrated that age may be associated with occupational stress when considered together with other employment characteristics, particularly work tenure and job conditions (Antul et al., 2025).

The gender distribution indicates that female employees constituted the majority of respondents, with 58 employees (64.4%), compared with 32 male employees (35.6%). This composition describes the demographic structure of the employees included in the health insurance coverage department during the research period. Gender may be relevant in occupational research because employees can experience workplace demands through different social and professional circumstances. However, the present study did not specifically examine gender differences in spirituality, coping mechanisms, or work-related stress. Evidence involving healthcare workers indicates that psychological distress and occupational stress can occur across healthcare-related professional groups when employees face substantial work demands (Nguyen et al., 2023). The gender distribution in this study is therefore more appropriately interpreted as a characteristic of the respondent population rather than as evidence of differences in stress between male and female employees.

The professional composition demonstrates a substantial concentration of nurses, who accounted for 76 respondents (84.4%) of the total sample. Public health professionals represented 6 respondents (6.7%), pharmacy professionals accounted for 4 respondents (4.4%), midwives accounted for 3 respondents (3.3%), and medical records personnel accounted for 1 respondent (1.1%).

Table 1. Characteristics of Respondents

Characteristic	Category	n	%
Age	≤25 years	11	12.2
	26–35 years	36	40.0
	36–45 years	23	25.6
	46–55 years	16	17.8
	>55 years	4	4.4
Gender	Male	32	35.6
	Female	58	64.4
Profession	Nurse	76	84.4
	Public Health	6	6.7
	Pharmacy	4	4.4
	Midwife	3	3.3
	Medical Records	1	1.1
Length of Employment	<5 years	39	43.3
	≥5 years	51	56.7
Total		90	100.0

The dominance of nursing professionals indicates that the occupational profile of the respondents was strongly influenced by employees with healthcare-related professional training. Such a composition is relevant because professional responsibilities and occupational demands may influence how employees perceive and respond to stressful situations. Nursing work is commonly characterized by substantial responsibility toward service recipients, continuous attention to work demands, and the need to maintain professional performance under varying conditions (Potter et al., 2020). At the same time, the presence of public health, pharmacy, midwifery, and medical records personnel demonstrates that the health insurance coverage department involves employees from several professional backgrounds. Differences in professional roles may result in variations in responsibilities and work demands, although the present study did not compare stress levels according to profession. The concentration of nurses should consequently be considered when interpreting the generalizability of the findings to other occupational groups within the insurance sector.

The distribution of length of employment shows that 51 respondents (56.7%) had worked for ≥5 years, whereas 39 respondents (43.3%) had worked for <5 years. The larger proportion of employees with ≥5 years of employment indicates that more than half of the respondents had relatively long

experience within their occupational environment. Longer tenure may provide greater familiarity with organizational procedures, job expectations, and recurring work demands. At the same time, longer exposure to occupational demands does not necessarily eliminate work-related stress because prolonged responsibilities may also create sustained psychological demands. Research examining employee characteristics has identified work tenure as a relevant factor to consider when assessing occupational stress, particularly in relation to the conditions and demands of the specific workplace (Antul et al., 2025). Employees with shorter tenure may face adjustment demands, while longer-tenured employees may experience different forms of occupational pressure associated with accumulated responsibilities.

The overall respondent profile shows that the study population was predominantly composed of employees aged 26–35 years, female employees, nurses, and workers with ≥ 5 years of employment. This composition provides an important descriptive context for understanding the subsequent distribution of spirituality, coping mechanisms, and work-related stress. The predominance of nursing professionals also means that the findings largely represent employees with healthcare-related professional backgrounds rather than an evenly distributed multidisciplinary workforce. Occupational stress in healthcare-related settings can be influenced by workload and the intensity of responsibilities encountered during work activities (Awalia et al., 2021). The relatively substantial proportion of employees with ≥ 5 years of employment further suggests that the respondents included many individuals who had experienced the organizational work environment for an extended period. From an organizational behavior perspective, employee characteristics and workplace conditions interact in shaping employees' experiences, attitudes, and responses to occupational demands (Robbins & Judge, 2022). These respondent characteristics therefore establish the demographic and occupational context required to interpret the findings on spirituality, coping mechanisms, and work-related stress presented in the following sections.

Distribution of Spirituality, Coping Mechanisms, and Work-Related Stress

The distribution of spirituality, coping mechanisms, and work-related stress provides an overview of the psychological and occupational conditions experienced by employees in the health insurance coverage department. These three variables represent interconnected dimensions of how employees experience work demands, interpret personal resources, and respond to stressful occupational situations. Spirituality may provide an internal source of meaning and emotional orientation when individuals encounter demanding circumstances, while coping mechanisms reflect the strategies used to manage perceived stressors. Work-related stress represents the psychological response that emerges when occupational demands are perceived as exceeding available resources or capacities. Understanding the distribution of each variable is important before examining their statistical relationships because the dominant categories indicate the general condition of the respondent population. The following tables present the frequency and percentage distributions of spirituality, coping mechanisms, and work-related stress among the 90 respondents.

The distribution of spirituality indicates that most respondents were classified as having moderate spirituality, with 48 employees (53.3%). A further 27 respondents (30.0%) were categorized as having high spirituality, whereas 15 respondents (16.7%) were classified as having low spirituality. The predominance of the moderate category suggests that spiritual experiences and resources were present among most respondents but were not uniformly expressed at a high level. Spirituality encompasses dimensions of meaning, connectedness, values, and personal resources that can contribute to the way individuals understand and respond to difficult experiences (Puchalski et al., 2014). Research among employees in healthcare institutions has also identified a significant relationship between spirituality and stress, indicating that spirituality may constitute a relevant psychological dimension within occupational settings (Safitri et al., 2025). The distribution observed in this study consequently indicates that spirituality was present as a meaningful characteristic among respondents, while the relatively smaller proportion of respondents with low spirituality suggests that limited spiritual resources were not the dominant condition.

Table 2. Distribution of Spirituality

Spirituality	n	%
High	27	30.0
Moderate	48	53.3
Low	15	16.7
Total	90	100.0

The predominance of moderate spirituality can also be interpreted in relation to previous findings concerning spiritual resources and stress. Studies involving nursing students and other populations have reported an association between levels of spirituality and stress, suggesting that stronger spiritual resources may coincide with more favorable psychological conditions (Fahmi et al., 2022). Spirituality does not necessarily operate as a single behavioral practice because it may be reflected through personal meaning, inner awareness, connectedness, and the interpretation of life experiences. The moderate category found in this study may therefore indicate that many respondents possessed spiritual resources that were sufficiently present in everyday life but varied in intensity. A smaller group with high spirituality may have had stronger or more frequent spiritual experiences, while the low-spirituality group may have had fewer such resources available when facing occupational demands. Evidence concerning spiritual well-being has likewise indicated its relevance to stress, although the strength and direction of this relationship may differ according to population and contextual conditions (Zahrani & Idulfilastri, 2024). The distribution of spirituality thus provides an important baseline for interpreting the subsequent relationship between spirituality and work-related stress.

The coping mechanism distribution shows that 61 respondents (67.8%) were classified as having adaptive coping mechanisms, while 29 respondents (32.2%) were classified as having maladaptive coping mechanisms. The larger proportion of adaptive coping indicates that most employees reported strategies that were categorized as more constructive in responding to stressful situations. Coping mechanisms are important because individuals may respond to occupational pressure through different cognitive, emotional, and behavioral approaches. Previous research has demonstrated that coping mechanisms are associated with occupational stress among workers, including healthcare professionals who face demanding work environments (Dewi et al., 2021). The predominance of adaptive coping in the present sample may indicate that most respondents had developed approaches that enabled them to manage work-related demands without predominantly relying on maladaptive responses. This pattern is particularly relevant in a health insurance coverage environment, where employees may need to process health-related information, perform verification activities, and maintain accuracy while dealing with organizational demands. The distribution does not, however, establish whether adaptive coping directly reduces stress because the causal direction between the variables cannot be determined from the cross-sectional design.

Table 3. Distribution of Coping Mechanisms

Coping Mechanisms	n	%
Adaptive	61	67.8
Maladaptive	29	32.2
Total	90	100.0

The proportion of adaptive coping found in this study is consistent with the broader understanding that coping strategies can shape how individuals respond psychologically to stressful circumstances. Problem-focused coping, for example, involves efforts directed toward managing or addressing the source of a stressful situation rather than merely responding to its emotional consequences (Pitaloka & Mamahit, 2021). Religious or spiritual coping can represent another form of coping resource, particularly among workers who use spiritual beliefs and practices when confronting occupational stress (Nopa et al., 2023). Research among healthcare workers during periods of substantial occupational pressure has similarly documented the importance of coping strategies in

managing demanding circumstances (Suminanto et al., 2021). The adaptive coping category in this study should therefore be understood as an indicator of the respondents' predominant coping pattern rather than as evidence that all adaptive strategies were equally effective across individuals. The presence of 29 respondents with maladaptive coping remains important because this group represents nearly one-third of the sample and may require greater organizational attention when occupational demands become more intense.

The distribution of work-related stress shows that 40 respondents (44.4%) experienced moderate stress, 38 respondents (42.2%) experienced low stress, and 12 respondents (13.3%) experienced severe stress. The moderate category therefore represented the largest proportion, although the proportion of respondents with low stress was relatively close. The presence of 12 employees experiencing severe stress indicates that a substantial level of occupational psychological burden existed within a smaller segment of the workforce. Work-related stress can emerge when occupational demands interact with individual resources and the conditions under which work is performed. Previous research has identified workload as an important factor associated with stress among healthcare workers, particularly in occupations characterized by substantial responsibilities and demands (Awalia et al., 2021). Research in the insurance sector has likewise highlighted the relevance of work-related stress to employee functioning and performance, indicating that occupational pressure warrants attention within insurance organizations (Gudi & Sumbogo, 2022). The distribution in this study therefore suggests that moderate stress was the most common condition, while the existence of severe stress among some respondents remains an important occupational concern.

Table 4. Distribution of Work-Related Stress

Work-Related Stress	n	%
Severe	12	13.3
Moderate	40	44.4
Low	38	42.2
Total	90	100.0

The relatively high proportion of respondents with moderate and low stress indicates that severe work-related stress was not the dominant condition in the study population. Nevertheless, the combined presence of moderate and severe stress among 52 respondents demonstrates that more than half of the respondents experienced at least a moderate level of occupational stress. Such a pattern is relevant because moderate stress may still influence concentration, emotional regulation, work satisfaction, and the capacity to sustain performance when occupational demands persist. Occupational stress has also been examined in relation to work-life balance and employee performance within insurance organizations, highlighting the importance of considering psychological demands as part of organizational management (Nurasyifa & Rakhman, 2025). The current distribution should be interpreted descriptively because the data do not establish which specific organizational factors produced the observed stress levels. The relatively small proportion of severe stress should not obscure the broader finding that moderate stress was common among the respondents. Taken together, the three distributions show a population characterized predominantly by moderate spirituality, adaptive coping mechanisms, and moderate work-related stress, providing the descriptive basis for testing the relationships between these variables in the subsequent analysis.

Relationship Between Spirituality and Work-Related Stress

The relationship between spirituality and work-related stress was examined using the Spearman rank correlation test to determine the direction and strength of the association between the two variables. The analysis produced a significance value of $p = 0.000$, which is lower than the significance level of 0.05. This result indicates a statistically significant relationship between spirituality and work-related stress among employees in the health insurance coverage department. The correlation coefficient of $r = -0.551$ demonstrates that the relationship was negative, meaning that higher spirituality tended to be associated with lower work-related stress. The magnitude of the coefficient indicates a moderate association between the two variables. The finding provides empirical evidence that spirituality was

relevant to differences in work-related stress among the respondents, although the cross-sectional design does not establish a causal relationship.

The distribution of respondents across spirituality and stress categories provides further detail regarding the direction of the statistical relationship. Respondents with high spirituality were predominantly classified as experiencing low work-related stress, whereas respondents with low spirituality were concentrated in the severe-stress category. Specifically, 21 of the 27 respondents with high spirituality (55.2%) experienced low stress, while only 1 respondent (8.3%) experienced severe stress. In the low-spirituality group, 9 of 15 respondents (75.0%) experienced severe stress, while only 2 respondents (5.3%) experienced low stress. The moderate-spirituality group was primarily concentrated in the moderate-stress category, with 31 respondents (77.5%). This distribution illustrates a consistent pattern in which higher spirituality coincided with lower observed stress levels, supporting the negative direction of the Spearman correlation.

Table 5. Relationship Between Spirituality and Work-Related Stress

Spirituality	Work-Related Stress								pvalue	r
	Severe		Moderate		Low		Total			
	f	%	f	%	f	%	f	%		
High	1	8,3	5	12,5	21	55,2	27	30	0,000	-0,551
Moderate	2	16,7	31	77,5	15	39,5	48	53,3		
Low	9	75	4	10	2	5,3	15	16,7		
Total	12	100	40	100	38	100	90	100		

The pattern in Table 5 is consistent with previous evidence concerning the relationship between spirituality and stress in populations exposed to demanding circumstances. Spirituality can provide individuals with sources of meaning, connectedness, and personal orientation when dealing with difficult experiences (Puchalski et al., 2014). Research among nursing students has also demonstrated a significant relationship between spiritual level and stress, indicating that spirituality may be relevant to psychological responses to demanding situations (Fahmi et al., 2022). Similar evidence has been reported among employees in healthcare institutions, where higher spirituality has been associated with differences in stress levels (Safitri et al., 2025). The current findings extend this pattern to employees working within a health insurance coverage department, whose responsibilities involve health-related verification and administrative processes. The negative correlation observed in this study indicates that spirituality may function as an important psychological resource, although it should not be interpreted as the sole explanation for variations in employees' stress levels.

The relationship can also be interpreted through the concept of spiritual well-being and the broader role of spiritual resources in psychological adaptation. Spiritual well-being has been associated with stress among individuals in educational settings, suggesting that stronger spiritual resources may correspond with more favorable psychological conditions (Zahrani & Idulfilastri, 2024). Spirituality may assist individuals in assigning meaning to challenging experiences and maintaining an internal sense of direction when facing psychological pressure. Religious coping research among nurses further indicates that spiritual strategies can be used as resources for managing work-related stress in demanding healthcare environments (Nopa et al., 2023). The present finding is compatible with this perspective because respondents with high spirituality were more frequently represented in the low-stress category, while respondents with low spirituality were more concentrated in the severe-stress category. Nevertheless, spirituality should be viewed as one component of a broader set of psychological and organizational resources rather than as an independent mechanism that automatically determines stress outcomes. The moderate magnitude of the correlation also indicates that other factors may contribute substantially to employees' experiences of work-related stress.

The contrast between the high- and low-spirituality groups provides a particularly clear illustration of the observed relationship. More than half of respondents with high spirituality were classified as having low stress, whereas three-quarters of respondents with low spirituality were classified as having severe stress. This distribution corresponds closely with the negative correlation coefficient of -0.551 obtained through the Spearman rank analysis. Similar associations between

spirituality and stress have been observed among employees in hospital environments, supporting the relevance of spirituality in occupational psychological research (Safitri et al., 2025). The finding also suggests that employees who report stronger spiritual resources may have greater psychological resources for dealing with occupational demands. However, the observed association cannot determine whether spirituality reduces stress, whether lower stress facilitates stronger spiritual experiences, or whether both variables are influenced by other factors. The interpretation is consequently limited to an association between the measured levels of spirituality and work-related stress within the study population.

From an occupational-health perspective, the significant inverse relationship indicates that spirituality represents a relevant dimension for understanding work-related stress among employees in the health insurance coverage department. The finding does not support treating spirituality as a replacement for organizational measures addressing workload, work processes, leadership, or other sources of occupational pressure. Instead, spirituality can be considered as one potential personal resource within a broader framework of employee well-being and stress management. Occupational stress among healthcare-related workers may emerge from multiple interacting demands, including workload and professional responsibilities, which means that psychological resources need to be considered alongside workplace conditions (Awalia et al., 2021). The present correlation of -0.551 demonstrates that spirituality had a meaningful association with stress but did not account for all variation in stress levels among respondents. Organizational attention to employee well-being may therefore benefit from approaches that recognize individual sources of meaning while simultaneously addressing the structural characteristics of work. The statistical evidence ultimately demonstrates a significant moderate negative relationship between spirituality and work-related stress, with higher spirituality associated with lower levels of observed work-related stress among the employees studied.

Relationship Between Coping Mechanisms and Work-Related Stress

The relationship between coping mechanisms and work-related stress was analyzed using the Spearman rank correlation test to determine the direction and strength of the association between the two variables. The analysis resulted in a significance value of $p = 0.000$, which is below the significance level of 0.05 . This finding demonstrates a statistically significant relationship between coping mechanisms and work-related stress among employees in the health insurance coverage department. The correlation coefficient was $r = -0.664$, indicating a negative relationship between coping mechanisms and work-related stress. The magnitude of the coefficient represents a strong association, suggesting that differences in coping categories were accompanied by substantial differences in observed stress levels. The negative direction indicates that adaptive coping was associated with lower work-related stress, whereas maladaptive coping was associated with higher work-related stress.

The distribution of respondents across the coping and stress categories further illustrates the strength of this relationship. Among the 61 respondents with adaptive coping mechanisms, 38 employees (100.0% of respondents in the low-stress category) were classified as experiencing low work-related stress, while 22 employees (55.0%) experienced moderate stress and only 1 employee (8.3%) experienced severe stress. In contrast, all 29 respondents with maladaptive coping mechanisms were distributed between severe and moderate stress, with 11 respondents (91.7%) experiencing severe stress and 18 respondents (45.0%) experiencing moderate stress. No respondent with maladaptive coping was classified in the low-stress category. The concentration of severe stress among respondents with maladaptive coping and the concentration of low stress among respondents with adaptive coping provide a clear descriptive pattern corresponding to the negative Spearman coefficient. This pattern indicates that coping mechanisms were strongly associated with the level of work-related stress observed among the respondents.

Table 6. Relationship Between Coping Mechanisms and Work-Related Stress

Coping Mechanisms	Work-Related Stress								pvalue	r
	Severe		Moderate		Low		Total			
	f	%	f	%	f	%	f	%		

Adaptive	1	8,3	22	55	38	100	61	67,8	0,000	-0,664
Maladaptive	11	91,7	18	45	0	0	29	32,2		
Total	12	100	40	100	38	100	90	100	Total	12

The findings in Table 6 are consistent with previous research demonstrating an association between coping mechanisms and occupational stress among healthcare professionals. Dewi et al. (2021) reported a relationship between coping mechanisms and work-related stress among nurses, supporting the relevance of coping strategies in occupational psychological conditions. The present study shows a comparable pattern within employees in a health insurance coverage department, where adaptive coping was predominantly observed among respondents with lower stress levels. Coping mechanisms involve cognitive and behavioral efforts used to manage demands perceived as stressful, meaning that differences in coping strategies may correspond with differences in psychological responses to workplace demands. Research among nurses in emergency settings has likewise emphasized the role of coping mechanisms in distress associated with demanding occupational environments (Angdriany & Erwandi, 2026). The strong negative correlation found in this study therefore reinforces the importance of coping mechanisms as a variable associated with work-related stress, while the cross-sectional design prevents the relationship from being interpreted as a causal effect.

The distinction between adaptive and maladaptive coping provides an important explanation for the distribution observed in the study. Adaptive coping generally involves strategies directed toward managing stressful circumstances in constructive ways, whereas maladaptive patterns may be less effective in addressing the underlying source of stress. Research on problem-focused coping demonstrates that individuals may attempt to address stressful situations through active efforts directed toward the problems they encounter (Pitaloka & Mamahit, 2021). Evidence from healthcare settings has also shown that coping strategies become particularly important when workers encounter sustained occupational demands and emotionally challenging circumstances (Suminanto et al., 2021). The current finding that all respondents in the low-stress category were classified as having adaptive coping suggests a close empirical correspondence between coping patterns and stress levels in this population. Conversely, the absence of respondents with maladaptive coping in the low-stress category indicates that maladaptive coping was concentrated among respondents experiencing moderate or severe stress. This distribution strengthens the interpretation that coping mechanisms are meaningfully associated with occupational stress, although other individual and organizational factors may also contribute to the observed pattern.

The strength of the relationship is reflected in the correlation coefficient of -0.664 , which indicates a stronger association than that observed between spirituality and work-related stress in the preceding analysis. This finding suggests that coping mechanisms may have a particularly important relationship with how employees experience occupational stress. Masthura et al. (2023) similarly examined the relationship between stress and coping mechanisms and identified an association between the two variables, reinforcing the relevance of coping in understanding psychological responses to stressful conditions. Comparable evidence has also been reported among employees outside the healthcare sector, indicating that coping mechanisms remain relevant when individuals face occupational or situational stressors (Murti et al., 2024). The consistency across different occupational and educational populations suggests that coping is a broadly relevant psychological construct in stress research. Nevertheless, the strength of the correlation in the present study should not be interpreted as proof that coping mechanisms alone determine employees' stress levels. Workload, organizational conditions, interpersonal relationships, leadership, and individual characteristics may operate alongside coping mechanisms in shaping occupational stress.

The observed relationship also has implications for understanding the role of coping in occupational adaptation. Employees who employ adaptive coping may be better positioned to organize their responses to workplace demands, seek appropriate solutions, regulate emotional responses, or mobilize available resources. Research on coping among nurses during periods of substantial occupational pressure has demonstrated the importance of coping strategies in dealing with demanding work conditions (Suminanto et al., 2021). Studies of coping in other populations have likewise shown that the strategies individuals employ are associated with variations in stress levels (Rinarta et al., 2025). The present findings are particularly notable because 61 respondents (67.8%) were classified as having adaptive coping, while 29 respondents (32.2%) were classified as having maladaptive coping. The

existence of nearly one-third of respondents in the maladaptive category indicates that coping-related vulnerability remains relevant despite adaptive coping being the dominant pattern. Organizational support aimed at strengthening constructive coping resources may therefore be relevant when addressing employees who experience greater occupational stress, while recognizing that such support should complement rather than replace improvements in working conditions.

The significant negative association between coping mechanisms and work-related stress provides an important empirical finding for employee well-being in the health insurance coverage department. The concentration of low stress among respondents with adaptive coping and severe stress among respondents with maladaptive coping demonstrates that the statistical relationship is also visible in the distribution of the respondent categories. The finding is compatible with evidence that coping strategies can be relevant to stress management among workers who face occupational demands (Angdriany & Erwandi, 2026). From an organizational perspective, attention to coping mechanisms can form part of a broader approach to occupational stress management, particularly when employees encounter persistent demands requiring psychological adjustment. The result does not establish that changing coping mechanisms would directly reduce stress because the cross-sectional design only demonstrates an association between the measured variables. The strong correlation of $r = -0.664$ nevertheless indicates that coping mechanisms were substantially associated with differences in work-related stress within the study population. The findings support the importance of considering employees' coping resources alongside workplace conditions when developing approaches to occupational well-being and stress management.

CONCLUSION

The characteristics of employees in the health insurance coverage department at PT Asuransi BRI Life indicate that most respondents were aged 26–35 years, predominantly female, primarily employed as nurses, and had a length of employment of ≥ 5 years. The distribution of the research variables showed that spirituality was predominantly categorized as moderate, while most employees demonstrated adaptive coping mechanisms. Work-related stress was primarily classified as moderate, although a proportion of employees experienced severe stress, indicating that occupational psychological demands remained relevant within the studied workforce. Statistical analysis demonstrated a significant moderate negative relationship between spirituality and work-related stress, with $p = 0.000$ and $r = -0.551$, indicating that higher spirituality was associated with lower levels of work-related stress. The distribution of the spirituality and stress categories further supported this pattern, as respondents with high spirituality were more frequently represented in the low-stress category, whereas respondents with low spirituality were predominantly represented in the severe-stress category. These findings indicate that spirituality represents a relevant personal resource in understanding variations in work-related stress among employees in the health insurance coverage department. The finding should be interpreted as an association rather than a causal effect because the study employed a cross-sectional design.

The analysis also demonstrated a significant strong negative relationship between coping mechanisms and work-related stress, with $p = 0.000$ and $r = -0.664$. Employees with adaptive coping were predominantly found in the low-stress category, whereas employees with maladaptive coping were concentrated in the moderate- and severe-stress categories. Notably, all respondents classified as having low work-related stress belonged to the adaptive coping group, while the majority of respondents experiencing severe stress were classified as having maladaptive coping. This pattern indicates that coping mechanisms had a stronger observed association with work-related stress than spirituality within the study population. The findings highlight the importance of considering both personal spiritual resources and coping strategies when understanding occupational stress among employees responsible for health insurance coverage processes. From a practical perspective, organizational efforts to support employee well-being may incorporate approaches that strengthen adaptive coping while respecting individual sources of meaning and spirituality, alongside attention to workload and other workplace demands. Further research using longitudinal or intervention-based designs is needed to examine the temporal and causal mechanisms underlying the relationships between spirituality, coping mechanisms, and work-related stress.

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