

Spiritual Emotional Freedom Technique for Enhancing the Meaning of Life in Patients with Ischemic Stroke

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ABSTRACT

Beyond its effects on physical motor abilities, ischemic stroke frequently results in psychological and spiritual crises. Loss of "meaning in life," a commonly disregarded effect, can seriously impair a patient's motivation throughout long-term recovery. Psychospiritual therapies, such as the Spiritual Emotional Freedom Technique (SEFT), which combines spiritual affirmations with meridian-tapping procedures, are used to address this. The purpose of this study is to examine how SEFT treatment affects ischemic stroke patients' sense of purpose in life in a clinical environment. This study used a one-group pretest-posttest methodology and a quantitative pre-experimental design. All stroke patients at RSUD (Regional public hospital) Jenderal Ahmad Yani made up the population. A purposive sampling method was used to select 39 eligible respondents: individuals aged 20 to 60 who were willing to participate in the Spiritual Emotional Freedom Technique (SEFT). They were also of sound mind (*compos mentis*). The intervention included two SEFT therapy sessions, which took place over two weeks. To measure the differences before and after the intervention, the Meaning in Life Questionnaire (MLQ) was used for data collection, and the Paired Sample T-Test was used for data analysis. The results showed that the "meaning in life" ratings significantly increased after the SEFT intervention, with a significance value of 0.001 ($p < 0.05$). Patients said they felt more at ease, accepted their status better, and had more optimism for the future. By releasing negative emotions and bolstering spiritual resilience, SEFT is successful in assisting ischemic stroke patients in regaining their sense of purpose. To enhance holistic and humanistic healthcare services, this intervention is advised as a crucial component of psychospiritual nursing care. In addition to standard physical therapy, nurses are urged to educate patients and their families on this self-help method.



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INTRODUCTION

An ischemic stroke is a disruption of blood flow to the brain that causes oxygen deprivation, nerve cell death, and other neurological problems. The primary cause is a blockage in an artery, which leads to numerous issues such as hemiplegia, aphasia, cognitive problems, and physical weakness. In addition to physical symptoms, ischemia affecting the prefrontal cortex causes significant impairment in cognitive and affective functions. The patient's ability to manage emotions and find meaning in life is hindered by this neurological damage. Therefore, there is a direct correlation between psychological difficulties in finding a life purpose and brain tissue damage. This highlights the complex relationship between existential well-being and brain health. To develop effective rehabilitation strategies that encompass both the physical and emotional recovery of stroke patients, it is crucial to fully understand these impacts (Feigin et al., 2021).

Ischemic stroke is a medical emergency caused by a blockage in blood flow to the brain, resulting in brain cell damage and impaired neurological function. According to data from the World Stroke Organization (WSO), there are approximately 13.7 million new cases of stroke worldwide each year, and more than 80 million people are recorded as stroke survivors (World Stroke Organization, 2023). Stroke not only causes physical impairments such as hemiplegia and

aphasia but can also affect cognitive function and emotional stability, particularly when damage occurs in the prefrontal cortex of the brain (Feigin et al., 2022). This neurological impairment diminishes a survivor's ability to maintain a sense of meaning in life, directly correlating with a high prevalence of post-stroke depression (Medeiros et al., 2020).

In Indonesia, the frequency of stroke, according to medical opinion, the population aged 15 times and aged is 10.9 per 1,000 people, with the maturity of cases being ischemic strokes, accounting for roughly 80-85 of all stroke cases (Familah et al., 2024). Ischemic stroke remains a serious health issue to this day because its prevalence continues to rise and frequently leads to long-term disabilities (Ministry of Health of the Republic of Indonesia, 2023). This situation is decreasingly concerning because stroke is no longer limited to the senior but is decreasingly being seen in the working-age population, thereby potentially affecting work productivity and reducing the quality of life of those affected (Venketasubramanian et al., 2022).

These conditions are further exacerbated by psychological problems. Recent studies show that approximately 35% of stroke survivors in Indonesia experience severe anxiety and hopelessness due to their dependence on others (Setyopranoto et al., 2019). Difficulty controlling emotions in stroke patients generally arises from damage to brain tissue that affects their neurological condition and emotional balance. Therefore, stroke management must not only focus on medical treatment but also be supported by a psychospiritual approach to help reduce the risk of post-stroke depression, which remains relatively high in Indonesia. In Lampung Province, ischemic stroke remains a serious health issue, with a prevalence rate of approximately 8.3%. This condition is also one of the leading causes of death and disability among the population in the region (Ministry of Health of the Republic of Indonesia, 2018).

Stroke patients not only experience physical impairments but also often face psychosocial and spiritual challenges that can affect their recovery process. Conditions such as depression, anxiety, and a sense of loss of life's meaning are quite common among stroke survivors. Research indicates that approximately 33% of patients experience post-stroke depression, while another 20–30% experience anxiety, which can dampen their spirits and hinder the rehabilitation process (Pratiwi et al., 2018). Therefore, spiritual and emotional aspects must be addressed in holistic care, as they can help patients better accept their condition, boost self-confidence, and support a comprehensive recovery process (Dharma et al., 2020).

Spiritual Emotional Freedom Technique (SEFT) is a psychospiritual method that involves tapping on specific points on the body combined with affirmations or a spiritual approach. This therapy aims to help reduce emotional stress, improve self-acceptance, and help patients rediscover the meaning of their lives. Several studies indicate that SEFT can help reduce stress, improve emotional well-being, and enhance spiritual well-being in patients with chronic illnesses (Thalib & Saleh, 2022). However, specific evidence of SEFT's application in ischemic stroke patients remains limited.

This study aims to analyze the effect of SEFT in improving the meaning of life among ischemic stroke patients at RSUD Jenderal Ahmad Yani Metro. The novelty offered by this study lies in the application of SEFT as a psychospiritual care intervention specifically designed to enhance the meaning of life in stroke patients, thereby supporting the implementation of a more holistic and humanistic approach to patient care (Feigin et al., 2021).

Researchers argue that stroke patient care has thus far placed greater emphasis on physical recovery and neurological impairments, while patients' psychological and spiritual well-being is often overlooked. In fact, feelings of a loss of purpose and meaning in life following a stroke can trigger spiritual distress and reduce patients' motivation to engage in long-term rehabilitation. The strength of this study lies in the use of SEFT, which is not only utilized as a relaxation technique but also applied as a systematically structured psychospiritual intervention to help ischemic stroke patients rebuild their sense of life's meaning and boost their morale during the recovery process. Unlike conventional cognitive therapy, this study proposes a unique holistic synergy by combining neural stimulation through meridian tapping with spiritual affirmations aligned with the patients' personal beliefs. By positioning "meaning in life" as the primary outcome, this research is expected to fill a critical gap in holistic stroke care at RSUD Jenderal Ahmad Yani Metro, while also providing a framework for transforming clinical practice from a purely curative model into a more humanistic and holistic approach (Feigin et al., 2021).

METHOD

This study employed a quantitative pre-experimental design using a single-group pretest-posttest approach. The study was conducted from January to February 2025 at the Metro Jenderal Ahmad Yani Regional General Hospital, involving a total of 39 patients with ischemic stroke who met the inclusion criteria: aged at least 35 years, fully conscious, able to communicate, and willing to participate in therapy. Data collection was performed using the Meaning of Life Questionnaire (MLQ), which had undergone validity and reliability testing.

The intervention consisted of two SEFT therapy sessions conducted over two weeks, following standard tapping procedures on meridian points combined with spiritual affirmations. The equipment required included questionnaires, writing instruments, and a quiet and comfortable room for conducting the therapy sessions.

To analyze the data, the researcher used the Paired Sample T-Test through SPSS version 26, which aimed to examine the differences in meaning-of-life scores before and after the therapy. A p-value of less than 0.05 was considered statistically significant. This study had obtained ethical approval from the Health Research Ethics Committee of Poltekkes Kemenkes Tanjung Karang (No. 002/KEPK-PK/2025).

RESULTS

Table 1. Distribution of characteristics of ischemic stroke patients

Characteristics	Frequency	%
Gender		
Male	23	59
Female	16	41
Age Group		
Young adult	2	5.1
Early adult	2	5.1
Middle-aged adult	25	64.2
Elderly	10	25.6
Education level		
Basic education	2	5.1
Secondary education	23	59
Tertiary Education	14	35.9
Duration of illness		
<6 bulan	29	74.4
≥6 bulan	10	25.6

The demographic and clinical characteristics of the 39 participants in this study are presented in Table 4.1. In terms of gender, the majority of participants were male, accounting for 59.0% (n=23) of the total sample. Regarding age distribution, the largest proportion of study participants was in the middle-aged category at 64.2%, followed by the elderly group at 25.6%. Additionally, the majority of respondents had a secondary education level, accounting for 59.0% of the group. In terms of duration of illness, the majority of ischemic stroke patients 74.4% had been living with the condition for less than 6 months.

This study involved 39 ischemic stroke patients who met the inclusion criteria. Before undergoing the SEFT therapy intervention, the respondents' mean score of meaning in life was 21.46 with a standard deviation of 2.13. After receiving two sessions of SEFT therapy over two weeks, the mean score increased to 26.82 with a standard deviation of 1.95. Based on the statistical analysis using the Paired Samples t-Test, a significant difference was found between the pre-intervention and post-intervention scores, with a p-value of 0.001 ($p < 0.05$).

Table 2. Mean life meaning scores before and after SEFT therapy

Measurement time	Mean ± SD	p-value
Before SEFT	21.46 ± 2.13	0.001
After SEFT	26.82 ± 1.95	

These results indicate that SEFT therapy effectively improved the life meaning of ischemic stroke patients at RSUD Jenderal Ahmad Yani Metro.

DISCUSSION

According to this study, stroke patients at Jenderal Ahmad Yani General Hospital in Metro have a far better quality of life after receiving the Spiritual Emotional Freedom Technique (SEFT) therapy. Before and after the intervention, the mean score for meaning of life was 22.28 ± 2.76 and 49.85 ± 6.14 , respectively, with a statistically significant difference ($p = 0.001$; $p < 0.05$).

The notable rise in life satisfaction from 22.28 to 49.85 shows that SEFT helps with cognitive and affective restructuring in addition to addressing perceptions. From a neuropsychological perspective, the tapping technique used in SEFT may help reduce hyperactivity in the amygdala, the brain's fear center, which often becomes overactive in post-stroke patients due to trauma. By reducing this biological "disturbance" in the form of anxiety, patients gain the mental clarity needed to respond to the spiritual affirmations delivered during the intervention. This finding is consistent with Frankl's concept that the search for meaning is a deliberate cognitive act; as emotional barriers diminish, patients are able to shift their focus from "what has been lost" (physical disability) to "what can still be achieved" (goals and legacy).

The results of this study show that psychospiritual interventions play an important role in supporting the rehabilitation process of stroke patients. Ischemic stroke is not only associated with physical damage to the brain due to blocked blood flow and nerve cell death, but can also cause profound psychological problems, including a loss of meaning in life for patients.

The improvement in patients' conditions observed in this study aligns with Viktor Frankl's existential theory, which explains that individuals unable to comprehend the meaning of their suffering tend to experience existential frustration. Through the SEFT approach, patients are assisted in reducing emotional burden via tapping techniques on meridian points combined with spiritual affirmations, thereby helping to enhance self-acceptance. Research by Thalib and Saleh (2022) also supports these findings by demonstrating that SEFT is effective in improving emotional well-being and helping patients with chronic illnesses rediscover their life purpose. Furthermore, the results of this study indicate that increased spiritual awareness can have a positive impact on patients' physical recovery process.

The researcher observes that as patients found higher meaning in life, their adherence to physical therapy tended to improve (qualitatively). This reinforces the theory of Astuti & Hastanti (2021) regarding psychological resilience. When a patient perceives their suffering as having a purpose, perhaps as a spiritual trial or a second chance at life, the physiological stress of rehabilitation becomes more bearable. Therefore, the improvement in meaning of life scores is a critical precursor to overall holistic recovery, acting as the 'psychological engine' that drives physical persistence (Astuti & Hastanti, 2021), which showed a positive correlation between life meaning and resilience in stroke patients.

Upon further analysis, the demographic findings indicate that the positive response from the majority of male respondents (59.0%) is noteworthy. Although statistically men tend to have more rigid or "closed" coping mechanisms, the structured yet spiritually rich nature of SEFT provides a safe space for expressing emotions, something that might be viewed negatively in traditional clinical settings. In the cultural context of Lampung, where men often serve as the backbone of the family, the loss of this role due to stroke creates an "existential void." The study results indicate that the spiritual component of SEFT effectively fills this void by redefining respondents' identities not based on their physical productivity, but rather on their spiritual resilience and presence within the family. In the middle-aged group (45–59 years), these findings align with the results of this study, which indicate that (Pinzon, 2016), who explained that male gender is a non-modifiable risk factor for ischemic stroke. Shahhosseini et al. (2020) explain that men generally tend to have more reserved coping mechanisms, so they often require a spiritual approach to help them cope with psychological stress following a stroke.

Viktor Frankl's existential theory also states that individuals who are unable to find meaning in their suffering are more prone to experiencing existential frustration. In midlife,

stroke patients often face various psychosocial changes, such as a diminished role within the family or social environment, which can lead to a diminished sense of meaning in life. Therefore, interventions such as SEFT are necessary to help patients reframe their experiences of suffering and rebuild a more positive sense of purpose in life (Frankl, as cited in the literature review).

SEFT is performed using a tapping technique on the body's meridian points, combined with spiritual affirmations, to help reduce negative emotions, improve self-acceptance, and strengthen the patient's spiritual well-being. This is supported by research by Thalib & Saleh (2022), which shows that SEFT is effective in improving emotional well-being and a sense of life's meaning in patients with chronic illnesses. Another study by Lubis (2024) also found that SEFT is capable of reducing anxiety in preoperative patients, thus demonstrating that this therapy can be applied in various clinical conditions. These findings underscore the importance of incorporating psychospiritual interventions into nursing practice. By addressing patients' emotional and spiritual needs, SEFT not only aids in physical recovery but also supports a holistic and humanistic care approach to comprehensively improve patients' quality of life (Feigin et al., 2021).

Therefore, this study has several limitations, including the absence of a control group and a relatively small sample size, both of which may limit the generalizability of the findings. Future studies are expected to employ randomized controlled trials with larger sample sizes to strengthen the evidence regarding the effectiveness of SEFT.

The demographic profile in this study showed that the majority of respondents were male (59.0%) and belonged to the middle adulthood age group (45–59 years). This distribution is consistent with existing clinical literature identifying male gender as a non-modifiable risk factor for ischemic stroke. From a psychosocial perspective, men tend to adopt a more "closed" coping style compared to women, often internalizing stress rather than expressing it openly. This makes spiritual approaches particularly important in addressing psychological trauma following a stroke (Shahhosseini et al., 2020).

In middle age, physical impairments resulting from stroke, such as hemiplegia, aphasia, and memory loss, often lead to changes in patients' roles within their families and at work. These circumstances can affect patients' self-confidence and how they perceive their lives. A multicenter study conducted by Setyopranoto et al. (2019) in Indonesia found that approximately 35% of stroke survivors experience severe anxiety and a loss of hope after having to rely on others to perform daily activities. The inability to work or engage in activities independently often leads patients to feel that their lives no longer have meaning. In such circumstances, SEFT can serve as an approach to help patients reframe their experiences of suffering from a more adaptive perspective, so that these conditions are not merely viewed as suffering but also as part of a process of personal growth and spiritual strengthening.

From a biomedical perspective, damage to the prefrontal cortex caused by ischemic stroke can affect patients' cognitive abilities and emotional regulation. Impairments in this brain region make it harder for patients to process emotional experiences positively, thereby increasing the risk of prolonged feelings of despair. However, holistic interventions such as SEFT stimulate psychological pathways that extend beyond the brain's physical damage. Through the use of spiritual affirmations, SEFT helps patients develop renewed hope despite permanent physical limitations.

In the Indonesian context, where national stroke prevalence stands at 10.9 per thousand, and Lampung Province reports a high prevalence of 8.3%, integrating SEFT into standard nursing care is both relevant and urgent. By fostering a sense of meaning through SEFT, patients gain the internal motivation required to persist with rigorous physical therapy, ultimately improving their overall quality of life (Feigin et al., 2021).

CONCLUSION

Spiritual Emotional Freedom Technique (SEFT) is a highly effective intervention for increasing the sense of meaning in life among ischemic stroke patients. The integration of meridian tapping and spiritual affirmations successfully helps patients release emotional distress and reconstruct a purposeful life despite physical limitations. This study highlights that middle-aged male patients are particularly vulnerable to losing their life meaning due to the sudden loss

of social roles. Therefore, a holistic nursing approach that combines neurobiological recovery with existential support is essential for modern clinical practice.

AUTHOR'S DECLARATION

We hereby declare that this manuscript is our original work. It has not been previously published and is not currently under consideration for publication by any other journal. We confirm that all sources used and any help received in the preparation of this manuscript have been appropriately acknowledged and cited.

Authors' contributions and responsibilities

DSK: Conceptualization, methodology, formal analysis, and original draft preparation.; **AGN:** Data curation, investigation, and software management; **SS:** Supervision, project administration, and critical review of the manuscript; **AM:** Validation, resources, and technical support; **SN:** Visualization and assistance in drafting the discussion section; **SF:** Final review, editing, and ensuring the clinical accuracy of the nursing interventions.

Availability of data and materials

The datasets generated and analyzed during the current study are not publicly available due to participant privacy and ethical restrictions, but are available from the corresponding author upon reasonable request.

Competing interests

The authors declare that there are no conflicts of interest in this study, whether financial, professional, or personal, that could affect the objectivity or the results reported in this manuscript.

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