

SPIRITUAL EMOTIONAL FREEDOM TECHNIQUE (SEFT) INTERVENTION FOR PREOPERATIVE ANXIETY: A LITERATURE REVIEW

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ABSTRACT

Anxiety is an emotional response that often occurs in patients who are about to undergo a procedure or surgery. Pre-operative anxiety not only impacts the patient's psychology, but also affects the patient's physiological condition. Non-pharmacological therapy is a safer option in handling pre-operative anxiety, one of the interventions that can be given is Spiritual Emotional Freedom Techniques (SEFT). The aim of the study is to identify and gain a better understanding of the benefits of implementing the Spiritual Emotional Freedom Technique (SEFT) intervention in overcoming pre-operative anxiety. This article's research method used a literature review study method. Articles were searched from several databases including Science Direct, PubMed, and Google Scholar. This study used inclusion criteria such as the research focus on Spiritual Emotional Freedom Technique (Seft), and articles from the last 5 years, from 2022 to 2026. Exclusion criteria were articles published before 2022, duplicate articles, and incomplete articles. The results of seven articles reviewed consistently show that the SEFT intervention is beneficial in reducing preoperative anxiety in patients through a combination of spiritual affirmations, self-acceptance, relaxation, and tapping on specific points on the body. This can improve psychological readiness, reduce emotional tension, and support patient readiness for preoperative procedures. The conclusion, intervention of SEFT may be beneficial for various patients experiencing anxiety, especially patients who are about to undergo surgery

Keywords: *Anxiety, emotional technique, preoperative, Spiritual Emotional Freedom Technique (SEFT)*

INTRODUCTION

Surgical procedures are among the interventions that frequently trigger psychological responses in patients, particularly anxiety. Anxiety is an emotional response that commonly occurs in patients who are about to undergo surgery. This condition is often characterized by worry and fear regarding the surgical procedure, anesthesia, and possible postoperative complications (Shebl et al., 2025). The global incidence of preoperative anxiety remains relatively high, at approximately 48%, with the highest prevalence reported in Africa at 56% and Asia at 44% (Abate et al., 2020). In Indonesia, the incidence of anxiety remains relatively high, ranging from 11% to 80% among adult patients (Nikmah & Supriatna, 2022). A relevant study conducted by Ulia (2022) reported that, among 84 respondents, 39 respondents (46.4%) experienced mild anxiety, 40 respondents (47.9%) experienced moderate anxiety, and 5 respondents (6%) experienced severe anxiety; no patients experienced panic-level anxiety or no anxiety. Therefore, it can be concluded that most patients who are scheduled for surgery experience anxiety.

Unmanaged preoperative anxiety can adversely affect surgical outcomes by triggering physiological stress responses, increasing pain perception, disrupting hemodynamic stability, and delaying postoperative recovery. It may also reduce patient cooperation and satisfaction with perioperative care. Therefore, anxiety management before surgery is an essential component of holistic and patient-centered nursing care. Previous research has shown that preoperative anxiety can influence changes in vital signs, including heart rate and respiratory rate, which may subsequently affect the implementation of surgery and the patient's postoperative recovery process (Umifa & MR, 2023).). In addition, preoperative anxiety may delay wound healing and increase the risk of cardiovascular complications, thereby influencing the success of surgical procedures and patient safety (Ding et al., 2025).

Considering the various psychological and physiological impacts experienced by patients with preoperative anxiety, both pharmacological and non-pharmacological interventions are required (Jerau et al., 2024). Pharmacological therapy given to patients before surgery can provide a calming effect; however, these drugs may interact with anesthetic agents and often have side effects, such as respiratory depression (Ding et al., 2025). Therefore, non-pharmacological therapy with SEFT is superior because it is a more holistic intervention, prioritizing the patient's bio-psycho-spiritual well-being before surgery. Furthermore, SEFT is easy to perform, relatively safe, and can be administered quickly, tailored to the patient's needs. One intervention that can be provided is a spiritual-emotional approach. Since every individual has faith in God and seeks healing through prayer, spirituality may serve as a preventive approach to reduce anxiety in patients (Kawanda & Relawati, 2023).

One type of spiritual therapy that can be provided to patients is Spiritual Emotional Freedom Technique (SEFT). This technique is useful for addressing emotional and physical problems by integrating the mind and body, with the aim of improving the patient's emotional, cognitive, and behavioral condition (Lamangantjo & Purnamasari, 2025). Several studies have shown that SEFT therapy can significantly reduce anxiety levels in preoperative patients through relaxation mechanisms and the enhancement of inner calmness. This literature review offers a specific contribution by synthesizing current evidence on the role of SEFT in managing preoperative anxiety and by emphasizing its novelty as a holistic intervention that integrates emotional regulation, spiritual coping, and somatic stimulation through tapping. This review also provides practical insight into the potential integration of SEFT into perioperative nursing care as a feasible complementary approach to support patients' psychological readiness before surgery. (Choi & Sung, 2025). This literature review aims to identify and obtain a better understanding of the benefits of Spiritual Emotional Freedom Technique (SEFT) interventions in managing preoperative anxiety by synthesizing evidence from relevant studies that investigate SEFT as a non-pharmacological approach for reducing anxiety among patients scheduled for surgery.

RESEARCH METHOD

This research is an observational literature review using the PRISMA framework according to key elements to increase transparency, including recognition, screening, eligibility assessment, and inclusion. A literature review is a study that uses secondary data from previous literature as references and a basis for research (Sartika et al., 2022). The purpose of the literature review was to obtain an overview, understand, and examine literature from various sources regarding the application of Spiritual Emotional Freedom Technique (SEFT) interventions in managing preoperative anxiety. The study designs included quasi-experimental studies, qualitative research designs, randomized controlled trials (RCTs), and free full-text articles. The inclusion criteria consisted of studies focusing on Spiritual Emotional Freedom Technique (SEFT) and articles published within the last five years, from 2022 to 2026. The exclusion criteria were articles published before 2022, duplicate articles, and incomplete articles. Article searches were conducted through ScienceDirect, PubMed, and Google Scholar, identifying 4,940 articles using keywords such as “Spiritual Emotional Freedom Technique”, “SEFT”, “Emotional Freedom Technique”, “emotional therapy”, “anxiety” and “Preoperative”. These articles were screened through title and abstract screening to 1,180, and full-text eligibility assessment based on inclusion and exclusion criteria to 11 articles and after removal of duplicate articles to 7 articles. These 7 articles were screened using a checklist in accordance with the JBI Critical Appraisal, to assess methodological quality, relevance, clarity of intervention, outcome measures, and risk of bias. After the screening and appraisal process, seven articles met the criteria and were included in the final review. The following figure shows the literature review data processing carried out sequentially through the stages shown in Figure 1.

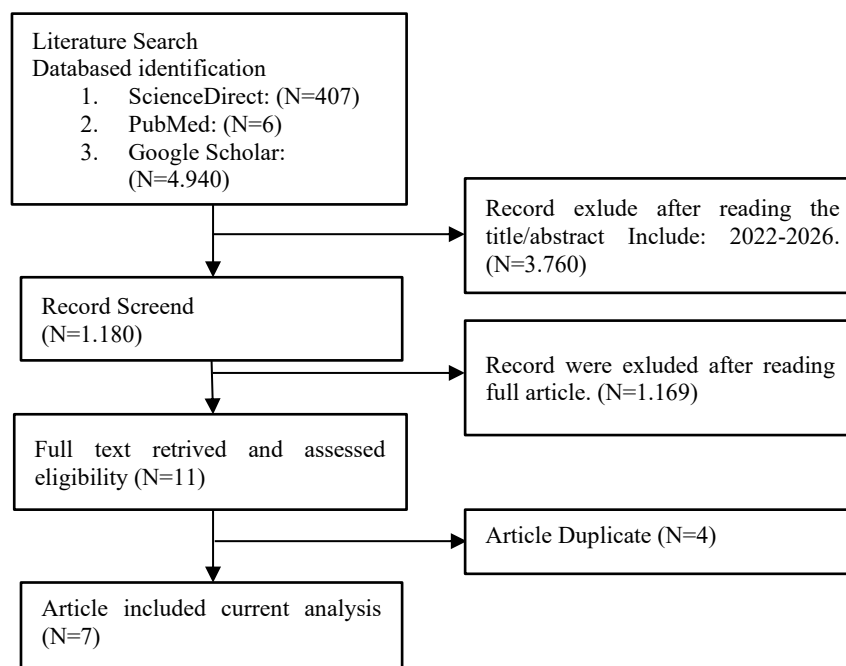


Figure 1. Article Flowchart Based on PRISMA

RESULTS AND DISCUSSION

Results

After being reviewed using PRISMA, seven research articles were found to be relevant to the issue of anxiety among patients before surgery who received Spiritual Emotional Freedom Technique therapy. The article collection process was conducted through a systematic literature search, and the results were selected based on predefined criteria from various publication sources. Each of the seven articles was thoroughly reviewed by the authors to describe all relevant information and ensure that no important information was overlooked.

The research characteristics of several articles are as follows in Table 1 which shows the results.: 7 articles used quasi-experimental studies, 4 articles did not use a comparison group, and 3 articles had two groups: intervention and control. The results of these articles had various preoperative respondent criteria, including anxiety in preoperative cesarean section patients, patients before PCI, and pre-hysterectomy patients. Two articles provided SEFT therapy for 20-30 minutes, two articles for 15 minutes, one article for 10 minutes, and two articles did not specify the number of minutes of SEFT administration.

Table 1. Article Summary Table

Researcher, Year	Title	Method	Intervention	Results
(Cici & Özkan, 2022)	Effects on Anxiety and Vital Signs of the Emotional Freedom Technique and Music Before Surgery for Lumbar Disc Hernia	Quasi-experimental study	A total of 162 patients were divided into three groups. The EFT and music therapy groups received therapy for 30 minutes for each respondent. The control group received only standard education from the hospital.	Emotional Freedom Technique (EFT) and music therapy were shown to be significantly effective in reducing preoperative anxiety and distress ($p < 0.001$). Both interventions also had positive effects on vital signs. However, EFT demonstrated greater effectiveness than music therapy, particularly in reducing anxiety and respiratory rate ($p < 0.05$).
(Sukardi et al., 2026)	The Effect of Spiritual Emotional Freedom Technique (SEFT) on Anxiety Levels of Pre-	Pre-experimental design (one-group pretest-posttest)	Preoperative caesarean-section patients received SEFT therapy for approximately	The statistical test using the Wilcoxon Signed-Rank Test showed a p-value of 0.001 ($p < 0.05$), indicating a significant difference between anxiety levels before and after the

	Caesarean Section Mothers		10 minutes.	intervention. Thus, SEFT therapy was proven effective in reducing anxiety.
(Puspita & Purwanti, 2024)	Spiritual Emotional Freedom Technique and Level Anxiety among People with Pre- Percutaneous Coronary Intervention	Quasi- experimental study	SEFT therapy was provided before the PCI procedure. The therapy was performed by trained nurses and consisted of the set-up, tune-in, and tapping stages, with an additional gamut procedure in the intervention group. The intervention group received EFT, while the control group received routine therapy. The respondents consisted of 140 women who were scheduled to undergo hysterectomy.	SEFT was shown to be an effective complementary nursing intervention based on spiritual and psychological approaches in reducing anxiety among pre-PCI patients, with a p-value of 0.001.
(El-kurdy et al., 2023)	Effect of Applying Emotional Freedom Technique on Fear and Anxiety among Women Undergoing Hysterectomy	Quasi- experimental study with a pre-posttest nonequivalent control group design		Emotional Freedom Technique was proven to reduce anxiety and fear levels among preoperative hysterectomy patients, with a p-value of 0.001.
(Mardika et al., 2024)	Differences in Anxiety Levels Before and After SEFT Therapy among Preoperative Patients	One-group pretest- posttest quasi- experimental study	SEFT was provided for 20-30 minutes to 50 respondents.	The research analysis using a paired t-test showed a p-value of 0.00, indicating a decrease in anxiety among patients after receiving SEFT therapy.
(Arini & Hardianto,	Nursing Experimental	One-group pretest-	The intervention	The Wilcoxon analysis showed a p-value of

2025)	Research: Analysis of the Effectiveness of Spiritual Support on Pre-Operative Patient Anxiety in the Central Surgical Installation	posttest pre- experimental study	was provided by nurses by guiding patients to pray according to their respective beliefs, including Islam, Christianity, Catholicism, Buddhism, and Hinduism. The intervention was conducted for 15 minutes while patients waited for the surgical procedure. Respondents were divided into two groups: 12 respondents in the intervention group and 12 respondents in the control group. The intervention group received EFT.	0.001, indicating that spiritual support was effective in reducing anxiety among patients.
(Deka & Risca Felicia, 2022)	The Effect of Emotional Freedom Technique (EFT) to Anxiety Level of Pre- Percutaneous Coronary Intervention	One-group pretest- posttest quasi- experimental study with a control group		Emotional Freedom Technique had a significant effect on reducing anxiety among patients scheduled to undergo PCI, with a p- value of 0.00001.

Discussion

Spiritual Emotional Freedom Technique (SEFT) consistently provides significant benefits for patients who are scheduled to undergo surgery. This study aligns with research conducted by Rejeki et al. (2022), which found an effect of SEFT therapy on anxiety levels in pre-CS patients, with a p-value of $0.000 < 0.05$. This indicates an average decrease after SEFT therapy compared to before, with a difference in scores of 0.9. These benefits include reducing anxiety and stabilizing vital signs in patients (Cici & Özkan, 2022). Anxiety is a feeling of worry, discomfort, and fear caused by a situation perceived

as threatening. Patients who are scheduled for surgery often experience fear, such as fear of pain resulting from the surgical procedure (Umifa, 2024).

Along with the development of health services, psychological aspects have become an important focus in holistic nursing practice, which views patients as whole individuals encompassing biological, psychological, social, and spiritual dimensions. Therefore, SEFT can be considered a non-pharmacological approach that supports medical and psychological therapy (Rosyanti et al., 2024). In line with research conducted by de Diego-Cordero et al (2024), spiritual interventions are effective in improving health, well-being and physical well-being, so it is very important for nurses to provide holistic care to their patients. SEFT therapy is a healing technique that combines psychological energy with spirituality through simple movements to relieve physical and psychological problems (Erika & Kusmawati, 2024).

The application of SEFT is relatively similar to acupressure, as it stimulates meridian energy points, namely the 12 energy pathways of the body, by providing tapping or light tapping on these points combined with spiritual therapy. As a result, patients may feel more relaxed and calmer. In addition, this technique is safer, easier, and simpler than acupuncture therapy (Pasha et al., 2025). Through tapping techniques on meridian points, SEFT can restore energy balance in the body and reduce psychosomatic symptoms. It not only provides temporary effects but may also provide progressive benefits during patient care.

Therefore, SEFT can be further developed as a non-pharmacological therapy for patients experiencing anxiety. This review can be an update on the use of Spiritual Emotional Freedom Technique (SEFT) in the management of preoperative anxiety as a holistic (bio-psycho-spiritual) and culturally acceptable intervention that combines spiritual coping, emotional regulation and somatic stimulation by tapping on specific points. This integration can provide practical implications for health professionals in considering SEFT as a supportive, non-invasive, and easy-to-implement intervention to improve patient psychological readiness before surgical procedures.

SEFT therapy consists of three stages: the set-up, the tune-in, and the tapping. The set-up stage functions as a form of psychological reversal by eliminating negative thoughts and asking patients to pray and surrender all worries to God. The second stage, the tune-in, involves aligning thoughts and verbal expressions simultaneously. The final stage, tapping, involves lightly tapping specific points seven times with the aim of relieving emotional disturbances or perceived pain (Yoviana et al., 2024). Emotional disturbances or illness may disrupt the body's energy balance. Through SEFT, negative thoughts are reduced by providing positive suggestions that stimulate endorphin release and help the brain enter alpha-wave activity, thereby creating a sense of comfort and relaxation in patients (Zheng et al., 2025).

When an individual experiences anxiety and tapping is applied to specific points, brain-wave activity may decrease, resulting in a reduction in the fight-or-flight response. The relaxation that emerges can neutralize emotional tension in the patient (Latifah & Sari, 2024). SEFT influences the limbic system of the brain, which regulates emotions.

Positive affirmations in patients may reduce sympathetic nervous system activity and place the body in a state of relaxation. This condition enables the brain to release endorphins and serotonin (Pasha et al., 2025). This is in line with Rosyanti et al. (2024), who stated that SEFT therapy has a significant effect in reducing Brief Psychiatric Rating Scale scores related to feelings such as anxiety, guilt, hopelessness, and somatic complaints; therefore, it can be used continuously to monitor patient development.

This review focuses on the spiritual emotional freedom technique intervention that focuses on patient anxiety before surgery. Many previous studies have examined the administration of SEFT for pain and anxiety, but there is still little research on the administration of SEFT for preoperative anxiety (Mustofa & Hudiyawati, 2025). This review demonstrates an update in the provision of SEFT therapy as a biopsychosocial-spiritual approach in managing pre-operative anxiety. SEFT as a complementary intervention that is not only oriented towards reducing anxiety, but also on increasing the psychological readiness of pre-operative patients through a holistic approach. These findings expand the understanding that pre-operative anxiety management can be done not only through a pharmacological approach, but also through non-pharmacological interventions that combine energy point stimulation, positive affirmations, relaxation, and spiritual strengthening of patients (Sahrullah et al., 2025).

The application of Spiritual Emotional Freedom Technique (SEFT) therapy to pre-operative patients has shown a significant effect on reducing anxiety levels. The effectiveness of this therapy is highly dependent on the accuracy of SEFT implementation; therefore, if performed properly and correctly, this intervention can have a positive impact on the patient's psychological well-being. In general, SEFT is used to help reduce stress, anxiety, and various emotional problems through a combination of gentle stimulation of the body's energy points and focusing attention on specific thoughts and feelings (Abdurrohman et al., 2023). In line with Lamangantjo's & Purnamasari (2025) which stated that there was a significant decrease in anxiety levels in the group that received SEFT intervention before and after treatment.

CONCLUSION

In Conclusion, Based on the systematic literature review analyzed by the authors, it can be concluded that anxiety frequently occurs in preoperative patients due to fear related to their illness and the surgical process. One non-pharmacological therapy that can be provided is Spiritual Emotional Freedom Technique (SEFT). The implementation of SEFT exercises may be beneficial for various patients experiencing anxiety, especially patients who are about to undergo surgery. This therapy can serve as a complementary nursing intervention for patients experiencing anxiety through a biopsychosocial-spiritual therapeutic approach. The broader implication of this finding is that SEFT may strengthen nursing practice by providing a holistic, culturally sensitive, and patient-centered intervention that can be applied across diverse healthcare settings globally, especially to improve emotional support, psychological readiness, and quality of care among patients undergoing medical procedures.

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