

The Relationship of Spiritual Level and Patient Anxiety in the General Ward

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Abstract: Spiritual state has a wide and strong influence on health. Spiritual level can decrease anxiety, depression, anger, and improve the life quality of the patient. Anxiety is one of many psychological problems experienced by patients in hospital. The purpose of this research was to define the relationship of spiritual and anxiety levels in patients. The research design was used correlational observation. Simple random sampling was used to obtain sample consisting of 52 respondents. The independent variable was the spiritual level, whereas the dependent variable was the level of anxiety. Instruments using questionnaires. Data were analyzed using Spearman's Rho ($\alpha < 0.05$). Out of 52 respondents, 57,7 % were indicated to have high spiritual level. In addition to 30,8% were medium level, 17,3 % of whom were indicated low. There was a significant relationship of spiritual and anxiety levels of the patient in general ward. The Spearman rho test results obtained by value $\rho = 0.01$ with a level of trust $< \alpha = 0.05$. The role of nurses is very important in providing nursing care holistically, especially on the fulfillment of spiritual needs.

1 BACKGROUND

Anxiety is one of the many psychological problems experienced by patients during their stay in the hospital. Anxiety is a common human experience that is the basic human emotion with anxiety, discomfort, uncertainty, or fear of a danger (Varcarolis, Elizabeth M & Jordan, 2010).

Spirituality is one's belief in the existence of God, and this belief becomes a source of strength in times of illness that affects his beliefs about the cause of illness, the process of healing illness and choosing the person who will take care of it (Hamid, 2008). A person's faith has a broad and powerful influence on health. Wahyu (2012) mentions that spiritual factors influence the likelihood of increasing life expectancy, decreased anxiety, feelings of depression and anger other than that affect the decrease in blood pressure, and improve the quality of life for patients. Until now research of spiritual level can affect anxiety has not been studied further. The purpose of this research was to define the relationship of spiritual and anxiety levels in patients.

Basic Health Research in 2013 showed that 14 million people in Indonesia aged over 15 years experienced an emotional mental disorder shown by symptoms of anxiety and depression (Kementerian Kesehatan - Ministry of Health/Indonesia, 2014).

Survey of researchers in the month of September until December 2017 in the hospital room dr. Ramelan Surabaya showed 40% of patients experienced very severe anxiety, 20% experienced severe anxiety and 20% experienced moderate anxiety and the rest did not experience anxiety.

Asmadi (2008) states that anxiety experienced by patients will affect the physiological system of the patient This occurs through a series of actions mediated by the pituitary adrenal hypothalamus, anxiety will stimulate the hypothalamus to increase the production of corticotropin releasing factor This will stimulate the anterior pituitary hormone to produce adrenocorticotrophic hormone adrenocorticotrophic hormone will stimulate the adrenal cortex to secrete cortisol. cortisol will suppress the body's immune system

The spiritual dimension is an individual way of maintaining harmony with the outside world in order to maximize the power it has in itself to deal with emotional stress, chronic, critical, terminal and death physical illnesses (Utami, 2009). Spiritual approach through praying will increase the autosuggestion that can encourage someone to do according to the prayed, ask for healing, optimism of hope for healing (Good, 2010). Therefore the role of nurses is very important

to help patients in meeting spiritual needs such as providing prayer equipment, always remind and motivate to pray.

2 METHODS

This research was correlational analytic research with cross sectional approach. The independent variable was the spiritual level and the dependent variable was the level of anxiety. The population of this study were patients who were hospitalized in the hospital room Dr. Ramelan hospital Surabaya during November 2017 – January 2018 with random sampling technique obtained 52 respondents

The inclusion criteria such as 1) patients treated in at ward room of internal disease in Dr. Ramelan hospital Surabaya 2) the final adult age is 36 – 45 years 3) willing to be a respondent 4) all religion. Exclusion criteria include 1) Patients experiencing disorientation 2) Patients who experience a decrease in consciousness. This study was conducted on 3 to 7 January 2018 at general ward in Dr. Ramelan hospital Surabaya.

This research has been ethical clearance with number ND/09/I/2018/Diklat in Dr. Ramelan Hospital Surabaya. The instrument used to measure the spiritual level was the spiritual experience scale which adapted from Underwood and Teresi (2002). Hamilton Anxiety Rating scale was used to measure anxiety level. The Statistical test used was Spearman rho test

3 RESULTS

Based on table 1 the majority of respondents are female 41 (78.8%). Related age, the majority of respondents aged 38-39 years were 13 respondents (25%) and 40-41 year olds were 13 respondents (25%). Related to the level of education, the majority of respondents last high school education as much as 24 respondents (46.2%). Regarding employment, the majority of respondents who work private sector as much as 23 respondents (44.2%). Related diseases, the majority of respondents suffering from diabetes mellitus as many as 19 respondents (36.5%). With regard to health insurance, the majority of respondents who are responsible for the cost of using BPJS as much as 45 respondents (86.5%).

Based on table 2 majority of respondents have high spiritual level as many as 30 respondents (57.7%) followed by moderate spiritual level as many as 13 respondents (25.0%), and the remaining

Table 1: Selected sociodemographic variables of study participants.

Characteristic		(%) n 52
Age	36-37	15,4
	38-39	25
	40-41	25
	42-43	19,2
	44-45	15,4
Sex	Male	21,2
	Female	78,8
last education	No School	9.6
	primary school	3.8
	Junior high school	21.2
	Senior High School	46.2
	3-year diploma	9.6
	Bachelor	9.6
Occupation	No job	1.9
	Private	44.2
	TNI/POLRI	23.1
	government employees	21.2
	Farmer	9.6
Disease experienced	Diabetes Mellitus	36,5
	Chronic Kidney Disease	21,2
	Disease	5,8
	Gastroenteritis	9,6
	Hypertension	3,8
	Urinary Tract Infection	3,8
	Gastritis	19,2
	Hepatitis	
Health Insurance	Not using health insurance	13,5
	Social Insurance Administration Organization (BPJS)	86,5

Table 2: Spiritual levels on respondents in general ward (n = 52).

Spiritual level	Frequency (f)	Percentage (%)
Low	9	17,3
Medium	13	25,0
High	30	57,7
Total	52	100

Table 3: Level of anxiety in respondents in the general ward.

Anxiety level	Frequency (f)	Percentage (%)
No sense of anxiety	28	53,8
Mild anxiety	14	26,9
Medium anxiety	0	0
Serious anxiety	7	13,5
Very severe anxiety	3	5,8
Total	52	100

low spiritual level as much as 9 respondents (17.3%).

Based on table 3, The majority of respondents experienced no anxiety as much as 28 respondents (53.8%) followed by mild anxiety as many as 14 respondents (26.9%), severe anxiety 7 respondents (13.5%), and anxious weight once 3 respondents (5.8%). Result of analysis relation of spiritual level with patient anxiety level through Spearman rho test got value $\rho = 0,01$ with level of meaning $<\alpha = 0,05$ and correlation coefficient $-0,708$.

It can be concluded that there is a relationship between the spiritual level with patient anxiety. The direction of the relationship is strong and the opposite where the higher the spiritual value the lower the level of anxiety

4 DISCUSSION

According to Mohammed (2017) that a mother's spirituality is a form of maintenance by providing for the needs of the child and her husband. It is used as a symbol of the nature of divine providence, because the point of spirituality is obedience and obedience to God. But another thing that needs to be considered in this study is the characteristics of respondents who are not homogeneous because the number of female respondents more than the number of male respondents

Respondents with high spiritual level (30 respondents) comprised 56.7% were 40-45 years old and 43.3% were 36-39 years old. Researchers argue that early adulthood is a transitional period, in that age a person is usually more concerned with work and social pursuits, whereas the spiritual changes that occur in late adulthood are characterized by maturity in their diverse lives.

Mature spiritual development will help in the face of reality, play an active role in life, formulate the meaning and purpose of life (Monir, R., Kazemnejad, A., & Mohammadi, 2014). Based on the results of research related to age, the majority of respondents

(53.8%) did not feel anxiety. The data of 28 respondents are over the age of 40 years. According to Nursalam (2014) young age more easily anxious than individuals with older age.

According to the researchers' observation why the anxiety of the late adult respondents is lower because they are already taking a step and believe that God is giving a trial. This appears in the phenomenon of some respondents who have a good quantity of worship show a calm attitude. The majority of them believe that illness is a guidance to be able to reduce some of their sins.

Another case in the respondents with low spiritual level found the majority felt the severe anxiety as much as 6 respondents (66.70%) followed by respondents who felt very heavy anxiety as much as 3 respondents (33.30%).

The spiritual level when associated with age according to Hamid (2009) that spiritual development is divided into several levels seen from age. The middle age group and the elderly have more time for religious activities and seek to understand the value of religion. In the elderly the feeling of loss due to retirement, facing the death of another (brother, friend) will cause a sense of loneliness and introspection.

The more mature religious physiological developments can often help the elderly to face reality, play an active role in life and feel valuable, and more acceptable to death as something that can not be denied or avoided. High spiritual level when attributed type of disease experienced shows the majority of respondents who suffer from chronic diseases such as DM, chronic renal failure, hepatitis and hypertension as much as 27 respondents (90%)

Other types of acute diseases such as gastritis and urinary tract infections are experienced by respondents who have moderate and low spiritual levels. When the anxiety level is associated with the type of disease, the results showed 28 respondents (58.3%) did not feel anxiety with the majority of respondents 24 respondents (85.7%) suffered from chronic diseases such as diabetes mellitus, chronic renal failure, hepatitis, and hypertension.

According to the researchers that respondents who have chronic diseases and often hospitalized majority have a low level of anxiety compared with respondents who first entered the hospital. This is because the respondent has adapted to the hospital environment. In addition there are other factors that affect the anxiety of respondents is the length of care. But researchers are not the focus of current research.

According to the researcher's analysis of spirituality is also a force that the patient needs during

hospitalization. Spirituality can affect the process of healing and self-reinforcement or coping of the patient in the face of his illness.

Putri, S. (2013) mentions spirituality as one's belief in the existence of God, and this belief becomes a source of strength during illness and thus affects his beliefs about the causes of illness, the process of healing illness and choosing the person who will care for him

According to Nursalam (2014) the anxiety experience of each individual varies and depends on the situation and interpersonal relationships. There are two precipitation factors that affect anxiety that is internal factors and external factors. External factors include the threat of self-integrity including physiological inadequacies to basic needs due to physical illness and trauma.

Respondents with low spiritual level showed the majority felt the severe anxiety as much as 6 respondents (66,70%), felt very heavy anxiety counted 3 respondents (33,30%). According to Basofi (2016) religious approach becomes one form of coping in the face of anxiety. In this case spiritual life has an important role, someone who is grateful for the favors will feel more sincere in the face of life.

Researchers analyzing religious activities can result in an increase in serotonin levels that affect spiritual awareness by generating fun / excitement. Pleasure and happiness brings the effects of relaxation, so relaxation can suppress anxiety that arises feeling relaxed. Researchers analyze mild anxiety that occurs in patients with high spiritual levels due to several factors that can affect a person's spiritual culture, life experience, and religious practice.

One's spirituality is also influenced by life experience. A person's positive and negative life experiences can affect a person's spirituality and are also influenced by how one perceives spiritually the experience. Hamid (2008) states events in a person's life are regarded as a trial God gives humans to test their faith

According to Iswara (2016) severe anxiety greatly reduces the field of individual perception. Individuals will tend to focus on something detailed and specific and do not think about anything else. All behaviors are shown to reduce tension. Individuals need a lot of referrals so they can focus on other areas.

From the observation of the researchers that respondents with severe anxiety have a low spiritual level associated with spiritual support.

Spiritual support serves as the shaper of individual coping mechanisms against life-threatening situations, in this case a reference to healing (Riley *et*

al., 1998). The spiritual role in coping mechanisms is as a spirit or motivation for life. The coping mechanism that is formed depends very much on the personality of the person and the extent to which the pressure of a condition it faces.

Dr. Ramelan Hospital Surabaya has also provided spiritual guidance on a regular basis. This is illustrated by reminding of the prayer times announced through the speakers in each treatment room. The role of nurses in providing nursing care holistically includes physiological, psychological, sociocultural, and spiritual dimensions is very important. Such spiritual support as bringing religious leaders to the faith of the believer, giving privacy to prayer, giving the patient the opportunity to interact with others, family or friends

5 CONCLUSIONS

Based on the findings of the study, it was concluded that the role of nurses is very important in providing nursing care holistically, especially on the fulfillment of spiritual needs For further research it is necessary to note the gender homogeneity of the respondents so that the results obtained are more representative and also with the larger number of samples in addition to the length of treatment is also an influential factor. Subsequent research can be done by comparing spiritual levels in hospital-based patients with religious values with other private hospitals

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