The Effect of Psychospiritual Intervention on the Level of Spiritual Inpatients

Nur Aini*, Novi Kartika Dewi and Erma Wahyu Mashufa
Department of Nursing, Faculty of Health Sciences, University of Muhammadiyah Malang, Jalan Bendungan Sutami No. 188A, Malang, Indonesia

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Abstract: The problem faced by sick human are not only physical problems but also psychological and spiritual patients will experience imbalances. The purpose of this study was to determine the effect of psychospiritual interventions on the spiritual level of patients. This was a one-group pre-test post-test study conducted in May 2018 at the Aisyiyah Islamic Hospital in Malang. Samples of 15 inpatients were taken by purposive sampling technique. A socio-demographic questionnaire, the DSES (Daily Spiritual Experiences Scale) was utilized for data collection. This intervention was carried out 4 days (4 meetings) for 30-60 minutes each. The data were analyzed using Wilcoxon test in SPSS. The majority of the spiritual level of patients at pre was 13 people (86.7%) and low 2 (13.3%), after intervention 14 people (93.3%) had a high level and 1 (6.67 %) medium. p-value (0.001) < α (0.05), which means there is a spiritual level difference before and after intervention. The psychospiritual interventions is very effective in improving the spiritual quality of care patients. Thus, have a positive impact on patient health. Therefore, it is recommended that nurses not only focus on physical aspects but provide holistic care in all aspects, especially spiritual.

1 INTRODUCTION

The concept of holistic nursing, health is not only limited to physical, mental and social health but includes all elements of human beings, namely biological, psychological, social, cultural and spiritual aspects. But in some cases, the fulfillment of spiritual aspects is often forgotten. Especially when the patient has a worse condition of physical health conditions. Hosseini et al (2013), current studies have suggested that spiritual care has been a neglected aspect of nursing and spiritual care is neglected in the present Swedish health care system.

King and Gates (2006) in Mundakir et al (2016) that nursing services focus more on medical planning and only a little time to carry out aspects of holistic nursing. Mundakir et al (2016) nurse services to remind and teach patients to worship during a cure are only done 15% of nurses. The survey of Health Ministry results in hospitals in Indonesia It is estimated that around 54-74% of nurses carry out medical assignments, 26% of nurses do hospital administration work, and 68% of basic care tasks needed are carried out by family nurses (Puskom DepKes, 2014). The results of observations conducted by researchers at RSI Aisyiyah Malang in 2017-2018 show the results of meeting the spiritual needs of patients are still lacking.

Psychospiritual therapy is an approach that incorporates religion and spirituality into psychotherapy or a technique involves psychological and spiritual for the treatment of psychological problems (Mishra and Kotnala, 2016; Abbas, 2017). Islamic Psychospiritual Therapy have roots well embedded in the spiritual foundation of the Qur’an and the Sunnah of the Prophet Muhammad (S.A.W), in which it is a healing technique where the individual is transferred from the realm of ill health to the realm of wellbeing in a manner that is Godly (Adeeb and Bahari, 2017). Spirituality, religion, belief and practice are important elements of health and well being. The balance of services concerning bio, psycho and spiritual needs in hospitals is exactly necessary for patients during their hospital stay. Spirituality refers to connectedness, a sense of being human, transcendence, and meaning in life. Previous studies have reported the following, spirituality is a strong predictor and promoter of psychological health. It can increase resistance against mental health crises following the diagnosis and treatment of cancer in
patients (Guilherme et al., 2016; Xing et al., 2018). Therefore, the aim of this study is an effectiveness of psychospiritual interventions on the spiritual level of inpatients.

2 METHODS

2.1 Study Design and Ethical Approval

The pre-test and post-test design groups used in this study. The study was conducted on inpatients at Aisyiyah Islamic Hospital Malang in May - June 2018. Data collected before and after the intervention. Significant differences in the value of the pre-test and post-test are indicators that psychospiritual intervention could improve patient spirituality. The local ethics committee approved the study protocol. Before the enrollment in the study, each participant had been explained the main objective of the study in details and was asked to sign the written informed consent for his or her participation in this study.

2.2 Participants

The purposive sampling used in this study. Inclusion criteria: a minimum of 3 days hospitalization, Islam, which is mature, conscious and can read Indonesian. Fifteen participants joined in this study.

2.3 Instrument

The Daily Spiritual Experiences Scale (DSES) instrument is a questionnaire written by Lynn G. Underwood and used in this study. DSES has 16 items of questions consisting of 15 questions about spiritual experience and 1 item question about the closeness of the relationship with God. The questionnaire was conducted twice, before and after completing the intervention. Giving scores on DSES 1-15 questionnaire items using a Likert scale where: 1 (never), 2 (one at a time), 3 (several days), 4 (almost every day), 5 (every day), 6 (several times a day). For item no. 16 also uses a Likert scale with provisions; value 1 (not close at all), 2 (somewhat close), 3 (very close), 4 (very close). So that the total value obtained on all items is categorized as a spiritual level (Underwood, 2011): value 15-40 as low spiritual level, value 41-65 as moderate spiritual level, and value 66-90 as high spiritual level.

Validity and reliability tests were carried out, with the values in this questionnaire being 0.47-0.88> r table 0.444. The tool purchased is a module titled "The Beauty of Pain." The contents of this module are the beauty of pain, the wisdom of sickness, maybe pain, and how when the patient is sick (Aini, Fatmaningrum and Yusuf, 2011; Nihayati, 2015).

2.4 Study Protocol

Psychospiritual intervention gives 4 x, which is done for 30-60 minutes, intervention steps such as 1). on the first day: introduce yourself and foster trust, tell the story of the Prophet Job (Ayub’s Prophet), and collect data; 2). second day: filing complaints, giving interventions regarding pain and beauty of pain, 3). on the third days: an important intervention was given about the obligations of a Muslim when he or she was sick such as: praying and reciting dzikir to remembered Allah, 4). the last day repeated all the intervention on 1 - III day.

2.5 Statistical Analysis

Data analyzed by the Statistical Package for Social Sciences (SPSS) version 21. Descriptive statistics conducted sociodemographic characteristics (mean, standard deviation, frequency, and percentage). Wilcoxon test was utilized to compare the pre and post-intervention by scores of the DSES.

3 RESULTS AND DISCUSSION

Total of participants was 15 person. Arrange of age 23 to 78 years (M = 49.8; SD: 11.2). 6 person of male (40%) and female 9 (60%). The patient's spiritual level as measured by the DSES questionnaire before and after the intervention seen in table 1.

<table>
<thead>
<tr>
<th>No</th>
<th>Level of spiritual</th>
<th>Pre n</th>
<th>Pre %</th>
<th>Post n</th>
<th>Post %</th>
<th>p value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>High</td>
<td>13</td>
<td>86.7</td>
<td>14</td>
<td>93.3</td>
<td>0.001</td>
</tr>
<tr>
<td>2</td>
<td>Medium</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>6.67</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Low</td>
<td>2</td>
<td>13.3</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>15</td>
<td>100</td>
<td>15</td>
<td>100</td>
<td></td>
</tr>
</tbody>
</table>
Table 1 showed that differences of the level spiritual of the participants before and after the intervention. The value of $p (0.001) < \alpha (0.05)$, a data analyzed by Wilcoxon, that means the intervention psychospiritual improved spiritual of participants. The study’s findings obtain a change in spiritual level after given psychospiritual interventions. Although some of the participants have high spiritual level before the provided intervention, the post-test results showed a significant increase. The spiritual approach is an individual experience, a person's belief in the meaning of life experienced and represent a power that exists in the individual himself.

The provision of psychospiritual interventions remain one form of intervention that refers to the use of spiritual experiences of worship, especially those related to God, which can be applied by always being thankful for everything that has been received to assist the individual adjust to the emotional problems faced, how to overcome a change in life, promote effective changes to spur someone in developing personality, and create therapeutic interactions (Nihayati, 2015).

Spiritual well-being can be necessary resource for patients and their families who struggle with serious or chronic illness (Musarezaie et al., 2015). Studies which supported these findings were (Hosseini, Davidson and Green, 2013) that there were positive correlations between spirituality and hope, happiness, mental health, health and well-being, quality of life, job satisfaction, coping and recovery in both patients and caregivers. The prayer and religious psychotherapy can improve happiness and physical health and alleviate anxiety, and depression (Mardiyono and Petpichetchian, 2011).

The spiritual level influenced by age. The average age of respondents is 49,8 years and includes late adulthood. Age related to maturity and the ability of a person. Increasing age is increasingly able to show mental maturity. It stated in a hadith Qudsi narrated by HR. Tirmidzi, that the emergence of a person's tendency to start self-improvement is at the age of 60 years. Normally that age, a person could be compelled to return to improve his spiritual values through efforts to adjust to the initial nature of his creation. Making himself a servant of God who is always obedient to Him (Jalaluddin, 2015). Beside the age factor, changes in one's spiritual quality occur due to other internal factors and external factors. Internal factors relate to conditions that exist in a person (internal). While external factors concern conditions, situations and experiences in interacting with their environment.

This includes experience through education, socio-cultural conditions, and experiences in other social interactions. The internal factors that are considered to play an active role in the occurrence of religious conversion are personality factors and innate factors. While external factors that can have an influence on the occurrence of religious conversion. Among the factors mentioned are family factors, living environment factors, changes in status, poverty (Jalaluddin, 2015). The majority of respondents are female.

Women are better at managing stress, this is because it is influenced by emotional focused coping (EFC). EFC allows individuals to recognise the good idea (wisdom) of an event, expect sympathy and understanding on others, or try to forget everything related to things that have suppressed his emotions, meaning that individuals learn to try and take lessons or values from all efforts that have been done before and used as a consideration exercise to solve the next problem. This will further foster a person’s positive emotions in interpreting something that happens especially in spiritual matters.

The provision of psychospiritual interventions is a stimulus that is carried out by providing knowledge and experience on the importance of fulfilling spiritual needs in this matter relating to God, always grateful for what happened and always believing God gives is the best so that later can change perceptions someone in the face of stress is faced especially in patients who are undergoing a period of treatment at the hospital. Spiritual care plays an important role in increasing person’s spiritual well-being and has positive effects on their stress responses, a sense of integrity and excellence, and interpersonal relationships. Spiritual enable a person to a purpose and purpose statement in life and promotes access to inner strengths and resources that will enhance the overall health (Torabi, Sajjadi and Nourian, 2017; Younas, 2017).

Studies which supported these findings were Abedi et al (2016), spiritual care of cancer patients decreases the physical sign problems, anxiety, sleep disorders, depression and disorders in their social functions. There are a significant influence of the psycho-spiritual intervention on global QOL (quality of life) and physical, role, emotional, cognitive, and social isolation. The spirituality is seen as a unique concept that stands in relationship to quality of life (Jafari et al., 2013).

The limitation of this study is that research does not involve several other factors that can affect the patient's spiritual condition like the type of illness,
duration of illness. In addition, the number of respondents in the study was lacking.

4 CONCLUSIONS

Performing psychospiritual interventions can improve the patient's spirituality. A spiritual is particularly important because it has a positive effect and affects the health of patients. Therefore, in providing nursing care to patients, nurses not only need to be on the physical aspect but must provide holistic care that includes and spiritual aspects because it has proven to be truly a spiritual also greatly improves patient health.

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REFERENCES


