



# PROCEEDING

INTERNATIONAL CONFERENCE ON

## Sustainable Development Goals of United Nations **ICSUN 2017**

Makassar, Indonesia  
March 9-11, 2017



# **ICSUN 2017 PROCEEDING**

**International Conference on Sustainable  
Development Goals of United Nations**

**Four Points By Sheraton Hotel, Makassar, Indonesia  
March 9-11, 2017**

**EDITOR**

**Abbas Panakkal, M.A., MCJ., Ph.D  
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# SPIRITUAL AND CULTURAL NEEDS IN PATIENT'S ANXIETY

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## Abstract

Anxiety is a normal adaptive stress response due to hospitalization. However, if anxiety is not treated properly, it can lead to complexity problems in the healing process of patients. Nurses have the greatest opportunity to provide comprehensive health services to help clients meet basic needs in a holistic manner. Appealing religion and culture are two ways that can be used to reduce anxiety of patients who are hospitalized. The purpose of this study is finding out a better approach that it is needed between religious and cultural approach in reducing anxiety. Crosssectional approach is used in this study involving patients who are hospitalized in the hospital and getting anxiety. Samples were involved in this study are 30 people and they were selected purposively. The collection of data is done using HARS Instrument, Berg Cultural Questionnaire and Spirirual Needs Questionnaire. Data were analyzed using Spearman correlation test. The results showed that there was a relationship between meeting spiritual needs with the anxiety of hospitalized patients ( $p = 0.014$ ) and there was no connection between the needs of cultural and the anxiety of hospitalized patients ( $p = 0.417$ ). Meeting spiritual and cultural needs are basic needs that should get more attention in reducing anxiety of patients who are hospitalized in the hospital. Further research would be able to dig up more details about spiritual and cultural needs that are expected by patient to nurse.

**Keywords:** *culture, religion, and anxiety*

## INTRODUCTION

Nursing care is an assistance form for providing services to patients for their physical and or mental weakness, lack of knowledge and lack of ability to meet the needs of patients in a day to day independently. In this case, the nurse helps a client or patient to overcome the effects of health problem or illness in their daily lives. This shows that the nature of nursing care is to help others (assistive in nature).

Assessment for all integral function of the patient is needed that includes the functionality of physical, biological, and psychological for successful treatment. Meeting the needs of the mental is no less important in the healing process of patients because unstable mental patients can affect the physical condition. Hospitalization is a potential or actual threat to the integrity of the person who can evoke psychological stress and physiological reactions (Ahmadi, 2008).

Anxiety is a normal adaptive response to stress due to hospitalization. Anxiety usually occurs when patients think about his illness, experiencing pain and discomfort, change the image and function of the body, to rely on others, lost control, lifestyle changes, and financial problems

(Baradero, 2009). However, if anxiety is not treated properly, it can lead to complexity problems in the healing process of patients. Patients who experience severe anxiety harder or longer to cure than those who experience mild anxiety. Therefore, spiritual guidance or spiritual become one of the efforts to reduce anxiety (Sundari, 2005).

Nurses as professional health workers have the greatest opportunity to provide health care, especially care / nursing care with a comprehensive help clients meet basic needs holistically. The nurse looked at the client as being a bio-psycho-socio-cultural and spiritual holistic and unique respond to changes in health or in a state of crisis (Asmadi, 2009).

Nursing care given by nurses can not be separated from the spiritual aspects that are integral and it is nurse interaction with clients. Nurses strive to help meet the spiritual needs of the client as part of the overall clients needs, such as by facilitating the spiritual needs of the client, even though the nurse and the client does not have a spiritual or religious beliefs of the same (Hamid, 2008).

Spirituality is something which believed by a person in connection with a higher power (God). It is rising need and love for their God and requesting for forgiveness for all the mistakes they have ever done (Alimul, 2009). Spirituality is the belief in conjunction with the Almighty and the Creator (Hamid, 2008).

Nurses in meeting the needs of psychosocial / spiritual can perform actions such as: (1) carry out an assessment of the needs of self-concept, (2) implement the use of the group as a support system and activities, (3) teaching assertive communication, (4) using the group as psychotherapy , (5) taught reinforcement techniques / coping, (6) teaching the techniques of therapeutic interpersonal communication, (7) perform the techniques to be an active listener, (8) facilitate an environment that assertive, (9) carry out a way to appreciate the value system and client confidence , (10) implement ways to facilitate clients who are in mourning, (11) do techniques increase the self-concept that includes the price of self, ideal self, and self-image, (12) facilitate the clients to spiritual fulfillment, therapeutic touch, spiritual guidance, (13) help clients recognize and accept the fact that impaired self-concept, (14) observe the behavior / thoughts were unrealistic, (15) conduct group therapy. (Hamid, 2008).

In times of anxiety, people will seek the support of religious beliefs. This support is necessary to be able to receive sickness is experienced, especially if the disease requires a long healing process with an uncertain outcome. Fixing physical condition without repairing soul is not useful. Even if the body is damaged, as long as the heart remains good, the danger will be very small. That is the danger that would be lost, and then followed with benefits precisely and perfectly continuous (Al Jauziyah, 2009). Nurses can do effective outreach program includes guidance and assistance in the use of resources and community agencies (Roussel, Swansburg, and Swansburg, 2009). Spiritual



guidance given to the patient can be given by prayer guidance for example at night for those who will undergo a surgical procedure.

Application principle of cultural aspects in care services can assist, facilitate, adapt and change lifestyle patterns or patient meaningful or profitable health. Competent nurses must be sensitive to the culture, so as to recognize and meet the needs of patients. The use of the same culture will be greatly assisting in the provision of health services, with a cultural approach can provide holistic care, physical, psychological, social and spiritual individual.

The results of research undertaken by Savitri (2008) and Khasanah and Widaryati (2014) states that there is an effect of giving information with a cultural approach to the anxiety level of patients admitted to ward. Patients were informed by a cultural approach experiencing lower anxiety than patients who did not get the information. This suggests that the cultural approach can be used in a strategy to overcome anxiety in hospitalized patients. Seeing the importance of religious and cultural approach in overcoming anxiety in hospitalized patients. The researchers wanted to know more what is more needed to overcome patients anxiety between religious or cultural approach.

## **METHOD**

This study design using cross-sectional approach involving hospitalized patients in Haji General Hospital of Makassar as respondents. The number of respondents involved 30 people were selected by purposive sampling. The instrument used for data collection consisted of three questionnaires that instrument Hamilton Anxiety Rating Scale (HARS), Berg Cultural Questionnaire, and an instrument to measure the spiritual needs that have been tested for validity and reliability by previous research. Analysis of data using linear regression.

## **RESULT**

### **Characteristics of Respondents**

Respondents involved in this study are patients hospitalized with the majority being in adulthood. The percentage of men and women is almost balanced. For more details can be seen in the following table:

**Table 1. Characteristics of Patient in Haji General Hospital of Makassar**

<b>Variable</b>	<b>Frequencies</b>	<b>Percentage</b>
Age:		
17-21 years old	5	16.7
22-40 years old	13	43.3
41-60 years old	4	13.3
≥ 60 years old	8	26.7

Gender;		
Male	19	63.3
Female	11	36.7

### Relations spiritual needs with anxiety

Results of data analysis showed that the majority of patients who met spiritual needs felt mild anxiety states. Patients who are at moderate to severe anxiety mostly from groups who claim to spiritual needs are not met. Spearman correlation analysis shows that there is a significant relationship between spiritual needs fulfillment with the anxiety levels of patients were hospitalized ( $p = 0.014 < \alpha = 0.05$ ). For more details can be seen in the following table:

**Table 2 Relations spiritual needs fulfillment with anxiety inpatients**

Spiritual Needs	Anxiety Level				Total		p*
	Mild		Medium-Heavy		n	%	
	n	%	n	%			
Fulfilled	18	60	2	6,7	20	66,7	0,014
Unfulfilled	5	16,7	5	16,7	10	33,3	
Total	23	76,7	7	23,3	30	100	

\* Spearman correlation

### Relationship cultural needs with anxiety

Results of data analysis showed that the majority of patients who met cultural needs felt mild anxiety states. However, patients who are at moderate to severe anxiety is almost balance their cultural needs which are met and not met. Spearman correlation analysis shows that there is no significant relationship between the fulfillment of the cultural needs with the anxiety levels of patients were hospitalized ( $p = 0.014 < \alpha = 0.05$ ). For more details can be seen in the following table:

**Table 3 Relations cultural needs fulfillment with patients anxiety**

Kultural Needs	Anxiety Levels				Total		p*
	Mild		Medium-Heavy		n	%	
	N	%	n	%			
Fulfilled	14	46,7	3	10	17	56,7	0,417
Unfulfilled	9	30	4	13,3	13	43,3	
Total	23	76,7	7	23,3	30	100	

\* Spearman correlation

## DISCUSSION

### Meeting spiritual needs with anxiety

This results indicates that there is a relationship between spiritual needs fulfillment with the anxiety of patients who are hospitalized. Forms of relationship evident that patients expressed spiritual needs are met by nurses also expressed concern that a milder. In contrast, patients who

experience moderate to severe anxiety majority come from the group of patients who expressed spiritual needs are not met.

Anxiety is an emotional response to the judgment of the intellectual to something dangerous and threatening. Anxiety is an emotional response without a specific object that is subjectively experienced and communicated interpersonally. Anxiety caused confusion, fear of something that will happen with the cause is not clear, and is associated with feelings of uncertainty and helplessness (Stuart and Sunden, 2007). Anxiety is also described as the fear that is not clear and is not supported by the situation. When feeling anxious people feel uncomfortable fear and an inkling of the disaster struck when she did not understand why the emotion that threatens happened (Videbeck, 2008).

The results consistent with studies conducted Nataliza (2011) that there is a relationship between the ministry of spiritual needs of patients with preoperative anxiety levels. Patients assigned to the service of the spiritual needs by nurses before surgery procedures decreased anxiety levels of 55% experienced anxiety level was at 45%.

Spiritual domain is seen as important in the health and covers have a relationship with a higher power, to appreciate one's mortality, and foster self-actualization. (Perry & Potter, 2009). At times of stress, people will seek the support of religious beliefs. This support is necessary to be able to receive sickness is experienced, especially if the disease goes a long healing process with uncertain outcomes as patients who will undergo surgery.

Spirituality is an aspect of human personality that can provide the power and influence of the individual in living his life, the spiritual is also the essence of who and how people live in the world. The spiritual aspect is very important for human existence. The spiritual dimension seeks to maintain harmony / alignment with the outside world, struggled to answer or gain strength when facing emotional stress, physical illness (chronic, critical, terminal) and death (Sururin, 2010).

One of the most important considerations to show the religious and spiritual beliefs of patients in health care settings is the effect of their behavior and decisions on health-related. There are 60% of Americans say that religion is the most important influence in their daily lives. People who are hospitalized or outpatients said using a strong spiritual and religious where 150 outpatients showed that more than 90% believe in God, 85% use a prayer, and 74% feel closer to God. A survey of people hospitalized in two hospitals revealed that 98% believe in God, 73% pray daily, 94% agree that spiritual health as important as physical health (Waal, 2008).

Many studies have proven that spiritual needs fulfillment is very influential on the healing process. Spiritual needs is a resting-place and source of support for patients treated in the hospital. Based on the results of research conducted by Aeni (2008) at Islamic Hospital of Sunan Kudus and Mardi Rahayu Kudus Hospital that 80% of the 15 respondents who have received spiritual guidance states were motivated to undergo treatment at the hospital and optimistic to recovering. So that it

helps the healing process of patients. From the result of the study also states 100% of respondents believe that every disease has a cure, psychologically it can motivate the patient to be patient in their illness.

Spiritual and religious faith are very important in human life because it can affect their lifestyles, habits and feelings of morbidity. When sick, loss or pain affects a person, a person's energy depleted, and the effect on the person's spirit. Therefore, nursing care that nurses given can not be separated from the spiritual aspect as the integration of the nurse with the patient.

Spiritual needs is basic needs that are needed by every human being. When a person is sick, then the relationship with God were getting closer, to remember someone in a state hospital is getting stronger in every way, nothing was able to raise him from healing, except the Creator. In health care, nurses as health care personnel should have a role to fulfill spiritual needs.

Religion is one way to express the spiritual needs of patients with worshipping, praying and reading scriptures (Syria, 2010). Confidence can give strength to the people when experiencing difficulties such as pain by leaning to God. Meanwhile, hope can help patients deal with and coping with the pain expect a cure.

According to the theory that was advanced by Taylor, Lilian & Le Mone (1997) and Craven & Hirnle (1996), an important factor that affects a person's spirituality is the provision of nursing care. Hidayat (2009) states the problems that often occur in the spiritual fulfillment is distress spiritual, which is a situation when an individual or group experiencing or at risk of disruption in the belief or value system that gave him the strength, hope and meaning of life, which is characterized by patients asking for help spiritual, expressing their doubts in belief systems, their excessive doubt in interpreting the life, expressing concern over the death of life after life.

### **Meeting the Needs of Cultural Relations with Anxiety**

Results of this study indicate that there is no relationship between the fulfillment of the cultural needs with the anxiety of hospitalized patients ( $p = 0.417$ ). Patients who are at moderate to severe anxiety almost draw comes from groups who claim their cultural needs are met and not met. Nevertheless, the majority of patients who met the needs of cultural felt milder anxiety states.

Culture is an integral components for either healthy or sick, because of genetic characteristics, values and beliefs learned obtained from family and society. A nurse is necessary to know culture and culture of client. One and other has variety of culture, thats whyit called unique. In wide view of the world, values, beliefs and traditions occur generation to generation. Therefore, nurses must be sensitive to the needs of the culture, character and individual value, family and society (Hidayat, 2009).

This research is not in line with the study done by Savitri (2012) and Sudaryanti (2013) about the influence of pre-surgical information with a cultural approach to the level of anxiety. It can be

affected by as respondents and nurses who served the majority come from the same culture namely Bugis and Makassar.

Corona et al (2017) states that anxiety is influenced by cultural stressors, for instance discrimination and stress acculturative, but anxiety does not have a relationship with the cultural values (family, respect, and religion). However, cultural factors can strengthen or weaken the cultural stressors that can lead to mental health problems.

## CONCLUSION

There is a correlation between spiritual needs fulfillment with the anxiety of patients who are hospitalized. The majority of respondents stated that their spiritual needs are met experiencing mild anxiety, while experiencing moderate to severe anxiety majority coming from the group unfulfilled spiritual needs. However, there was no association between cultural needs fulfillment with hospitalized patients anxiety. In caring for hospitalized patients, let the nurse to attend to the spiritual and cultural needs of patients in order to reduce anxiety of patients so as to achieve optimal health status.

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