Spiritual Experience of Productive Age Hypertensive Patients Conducting Therapy Programs at Aisyiyah Hospital of Kudus

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ABSTRACT

Hypertension is a chronic disease with a prevalence that is still quite high in the world. Spirituality becomes an important element in increasing confidence in the success of hypertension therapy. This study aims to explore the spiritual experience of hypertensive patients conducting the therapy program. This study is a phenomenological qualitative research involving 6 participants of hypertensive patients at Aisyiyah Hospital of Kudus who met the criteria. The results of the study found 6 (six) themes, namely: 1) Belief in improving body condition and mildening of disease symptoms through worship, (2) Belief in worship as a means of self-improvement from bad habits and increasing goodness, (3) Belief in pain is understood as a means for self-introspection and improvement of worship, (4) Belief in synchronizing worship and effort as a means of healing, (5) Belief in doing relaxation therapy through worship, (6) Belief in disease symptoms hinders worship. These results show that spirituality plays an important role for hypertensive patients to increase the success of therapy.

Keywords: Spiritual experiences, hypertensive patients, conducting therapy programs
ABSTRAK


Kata kunci: Pengalaman spiritual, pasien hipertensi, menjalani program terapi

INTRODUCTION

The world population aged 30-79 years is estimated to have 1.28 billion hypertension, two-thirds of people who have hypertension are in low- and middle-income countries. Spirituality and religiosity are one of the elements that receive attention in the treatment of patients with chronic diseases including hypertension. Spiritual as one of the holistic component elements in the care of hypertensive patients. The spiritual dimension will play a role in various dimensions in hypertensive patients (Silva, 2016).

Spiritual and religious are concerned with feelings, experiences of reverence, peace, or attachment between beings and their God. Spiritual-religious in hypertensive patients concerns life experiences in which God takes the initiative in the patient's relationship with his God. The effort made by the patient is principally an effort whose success value is determined by God. Closeness to God will promote spiritual well-being, peace, and comfort (Kretchy et al., 2014).

The aspect of spiritual care is not to promote the religion that the patient has actually embraced or practice to convince the patient of his religion but rather to give the patient the opportunity to express their values and needs, and empower them related to his illness including hypertension which is associated with his belief and relationship with God as the recipient of all hope. Worship activities carried out by patients in sick conditions have the hope of improving their relationship with God and conveying feelings and hopes to God so that they can overcome all the trials they face. A spiritual perspective is helpful in the patient towards accepting the changes in physical abilities experienced during illness (Hilsman, 2019).

Defining spirituality for nurses in health care is still very difficult because it will be biased with religion and the vulnerability of being considered to impose the religion adopted by nurses on patients. The study of spiritual experiences in patients varies with each other so that it is difficult for nurses in one area to use the conclusions of spiritual experiences in another area to be applied to spiritual healing. As a result, nurses may be hesitant or reluctant to examine, identify and integrate spirituality into nursing care practice. Extracting spiritual experiences in patients should be done more to multiply materials that can be used as materials in meeting spiritual needs and spiritual healing, including in hypertensive patients (Hawthorne & Gordon, 2019).

The spiritual dimension is also experienced by hypertensive patients with a variety of different experiences. Based on communication on 2 hypertensive patients at Aisyiyah Hospital of Kudus, Mrs. SE, 45 years old and Bp. B, 47 years old, in January 2023 in Kudus. Ny.SE said that she was surprised at first why at the young age of 40 years she had been given the ordeal of having hypertension, but Mrs.E tried to be grateful even though she was still healthy, could do activities and worship well. Mr. B conveyed hypertension as a disease that many people experience and is commonplace, the relationship with God also does not change with hypertension because it can actually help peace of mind if close to God.

The results of the initial study of 2 (two) participants showed that spirituality became an important component of the success of hypertension therapy. Extracting spiritual experiences that can be used as companion therapy for hypertension is still very little use in clinical services. Spiritual experience can be a material for spiritual healing models that are believed to increase the level of tranquility, happiness and tranquility of hypertensive patients during hypertension therapy so that the success of therapy will be better.
METHOD

Participant characteristics and research design
This research is qualitative research with a transcendent phenomenology study approach. This study explores the spiritual experiences of hypertensive patients of productive age who have undergone hypertension therapy.

Sampling procedures
The sampling technique that will be carried out in this study is purposive sampling. The inclusion criteria used to select respondents were: patients diagnosed with hypertension by a doctor for at least 1 year, routinely checking blood pressure, aged <50 years. The subjects in this study were 6 hypertensive patients who underwent outpatient treatment at Assiyiah Hospital of Kudus in the period of February – June 2023.

Measures and covariates
Data collection techniques are carried out by deep interviews. The interview was conducted at the residence of each respondent, conducted directly by the researcher himself with a recording tool from a mobile phone.

Data analysis
Data was analyzed using qualitative research analysis steps which include: verbatim preparation, keyword analysis, categories and theme determination. The preparation of verbatim was based on the results of interviews from each participant

RESULTS AND DISCUSSION
Participants amounted to 6 (six) hypertensive patients who had experienced hypertension for more than 1 year and had undergone hypertension therapy. Participants were 3 women and 3 men. The age of the participants all fell into the productive age category. Table 1 illustrates the characteristics of participants.

Table 1. Participant Characteristics

<table>
<thead>
<tr>
<th>No</th>
<th>Participants</th>
<th>Gender</th>
<th>Age</th>
<th>Period of hypertension</th>
<th>Profession</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>P1</td>
<td>Female</td>
<td>45 year</td>
<td>4 year</td>
<td>Housewives</td>
</tr>
<tr>
<td>2</td>
<td>P2</td>
<td>Male</td>
<td>36 year</td>
<td>9 year</td>
<td>Campus employees</td>
</tr>
<tr>
<td>3</td>
<td>P3</td>
<td>Male</td>
<td>48 year</td>
<td>6 year</td>
<td>Campus employees</td>
</tr>
<tr>
<td>4</td>
<td>P4</td>
<td>Female</td>
<td>36 year</td>
<td>1.2 year</td>
<td>Merchant</td>
</tr>
<tr>
<td>5</td>
<td>P5</td>
<td>Male</td>
<td>40 year</td>
<td>2 year</td>
<td>Merchant</td>
</tr>
<tr>
<td>6</td>
<td>P6</td>
<td>Female</td>
<td>48 year</td>
<td>3 year</td>
<td>Farmer</td>
</tr>
</tbody>
</table>

Research aimed at exploring the spiritual meaning of hypertensive patients conducting therapy programs to control blood pressure produced 6 (six) themes and 10 (ten) categories. These themes include:

1. Confidence in improving body condition and mildening of disease symptoms through worship
   Theme 1 consists of 2 categories, participants believe in doing worship to make the condition more and reduce symptoms of dizziness and anxiety. The theme is supported by the statement: ‘...during the Monday fast the tension tends to be normal, during the fasting Alhamdulillah is good.’ (P1), ‘... Usually those of us who never pray tahajud, usually those who are not worshippers become regular worshippers...’ (P3)

2. Belief in worship as a means of self-improvement from bad habits and increasing goodness
   Theme 2 (two) consists of categories of worship, giving confidence, choosing the right food, and motivating the pursuit of goodness. The theme is as quoted from the participant below: ‘... many dhikr, more worship, eating also not carelessly for iftar and suhoor’ (P1), ‘... Friends how many juz surely we are motivated to pursue... because if we are happy to do it, it is not a burden but instead we want to continue...’ (P1), ‘... after reading the Qur'an.... his mind was rather normal, then only his heart didn't want to be angry just made silent...’ (P4), ‘... Special prayers for the family to be healthy...’ (P5).

3. The belief in pain is understood as a means of self-introspection and improvement of worship
   Theme 3 (three) consists of 3 (three) categories, namely: taking wisdom from pain, believing in pain, increasing the desire for worship, and as a means of introspection. The theme is supported by participant statements such as the following quote: ‘... sickness is not a disgrace, it means to draw closer to God, be more grateful and be able to do more...’ (P1), ‘... ill and what is my introspection is also like that it should fix... ‘ (P2).
Belief synchronizes worship and endeavor as a means of healing

Theme 4 (four) consists of 1 (one) category, namely: the approach to worship must be accompanied by effort. The theme was supported by the following participant statements: ‘...as a man must keep trying, take regular medicine, pray a lot to Allah, because it comes from God’ (P1), ‘...We still try to stay to the doctor, still the doctor's care, take medicine gitu pak ’ (P2), ‘...After taking the medicine, it was felt that it was not dizzy ‘(P6).

Belief in doing relaxation therapy through worship

Theme 5 (five) consists of categories: doing relaxation by means of worship. The theme is as shown in the words of the participants: ‘... Fasting we don't think about anything... the mind is more relaxed, more relaxed...’(P1), ‘...... we just pray, just relax, the truth is not too afraid of the disease we suffer, sir...’(P1), ‘...if you pray, calm down....’(P6).

Belief in disease symptoms hinders worship

Theme 6 (six) consists of a category of complaints of dizziness hindering worship activities. The theme is as shown in the words of the participants: ‘... Related to emm... Allah Himself, yes, if you are dizzy, you are very dizzy, you can’t carry out the obligation of worship, there is a feeling of wanting to worship, how come it feels difficult, yes, with dizzy symptoms...’(P2)

This study has answered the purpose of the study: exploring the spiritual meaning of hypertensive patients undergoing therapy programs to control blood pressure. The patient's spiritual experience can be through various activities of daily living including worship. Worship (religiosity) is an activity from the religious dimension that can generate spiritual value (Aldwin et al., 2014). The results showed the important role of spirituality in the management of hypertension, among others: belief in improving body functionality and alleviating symptoms of disease, fostering optimism, spiritual belief as relaxation therapy, changing bad habits for the better, worship efforts in healing facilities must be in sync with efforts and symptoms that appear in hypertension can be a barrier to worship. Most people associate spirituality with activities of daily life because it has been done routinely. Spiritual is associated with the belief in the practice of religion that is associated with forces outside the self as a great force (Hilsman, 2019).

Spiritual activity is believed to have many roles in improving body functions and alleviating symptoms of disease, reducing bad habits and being a means of relaxation therapy. Coping mechanisms formed from spiritual activities can help patients to reduce the impact of stress-related cardiovascular reactivity and life stresses such as increased blood pressure, increased heart rate, complaints of headaches and other feelings of heaviness in the body (Johnstone et al., 2012). The patient's ability to grasp the meaning of symptoms caused by illness such as hypertension is closely related to how the patient can interpret his spiritual life (Corbett et al., 2017). Higher levels of spirituality in hypertensive patients were significantly correlated with lower levels of somatic symptoms, anxiety and insomnia, social dysfunction and major depression (Papathanasiou et al., 2020). Chronic and progressive diseases such as hypertension are emotionally and spiritually challenging experiences. Interventions that enhance spirituality can have a significant impact on overall health and well-being in patients. Studies prove spiritual intervention can improve spiritual well-being and optimism towards treatment (Browne et al., 2014).

Spiritual can be one of the relaxation therapies developed for therapy in hypertensive patients. Health workers including nurses should begin to realize that spiritual activities such as praying, dhikr and meditation can result in small to moderate reductions of some negative dimensions of psychological stress. The nurse should discuss with the patient about the role that a spiritual healing program can have in coping with psychological stress so that it can have a positive effect on health (Goyal et al., 2014). Dhikr which is a religious spiritual activity has been shown to relax, reduce stress and lower cortisol levels in patients undergoing treatment (Amir et al., 2018).

In addition to the element of worship, illness can also affect spiritual values, including illness can be a means of self-introspection and improve relationships with God through worship. Studies show a positive spiritual correlation with well-being, happiness, hope, optimism, and gratitude. While the spiritual value is not good impact negatively affects depression, suicide, anxiety, psychosis, substance abuse, delinquency / crime, marital instability. In the field of spiritual health can contribute to the occurrence of heart disease, hypertension, cerebrovascular disease, Alzheimer's disease and dementia, immune function, endocrine function, cancer, death, physical disability, pain, and somatic symptoms (Koenig, 2012). The results showed the positive impact of religious beliefs and other spiritual approaches on health and the course of recovery from acute and chronic diseases (Tabei et al., 2016).

Illness on the other hand can also hinder religious spiritual activity. A good religious life requires various components including good physical condition. Many patients need religious support when sick because of limited physical and mental abilities. Experts advise policymakers on the importance of religiosity, spirituality and social support as coping strategies during chronic illness (Sohail et al., 2020). The importance of meeting spiritual needs for patients so that patients often choose health care places that pay attention to the spiritual dimension well, because spiritual is the second reason in determining the choice of health services (Bawono, 2016).
LIMITATION OF THE STUDY
The limitations of this study are the number of samples that are still relatively small and exploration of spiritual aspects that can help hypertension therapy is still limited to activities related to Islamic religious routines. Researchers are still struggling to find participants who are religious other than Islam.

CONCLUSIONS AND SUGGESTIONS
Spiritual is one of the important pillars in the management of hypertension because it increases confidence and good life habits in supporting the success of hypertension therapy in patients of productive age. Research related to spirituality should be explored more deeply to be used as companion therapy in hypertensive patients.

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ETHICAL CONSIDERATIONS
This research applies ethical principles by providing research explanations, maintaining fairness between respondents and groups, maintaining respondent confidentiality and upholding human values. This research has received approval from the Ethics Committee of the Faculty of Nursing, University of Indonesia with number KET-062/UN2.F12.D1.2.1/PPM.00.02/2023

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Conflict of Interest Statement
This research has gone through the stages of licensing and good approval from the parties involved in the research. The participants involved are not from the researcher's family or who are in the same place working with the researcher so that the conflict of interest that occurs is very minimal and has been anticipated with a research approval letter. Researchers are also not involved in joint projects with journal managers or reviewers.

REFERENCES
Goyal, M., Singh, S., Sibinga, E. M. S., Gould, N. F., Rowland-Seymour, A., Sharma, R., Berger, Z., Sleicher, D.,


Hilsman, G. (2019). *Spiritual Care in Common Terms.* Jessica Kingsley Publisher.


