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# THE INFLUENCE OF PSYCHORELIGIOUS THERAPY ON THE LEVEL OF ANXIETY IN CRITICAL PATIENTS IN THE ICU ROOM RSI SURABAYA

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#### **ABSTRACT**

Stress is pressure that occurs consequence discrepancy between desired situation \_ with hope , where there is gap between demands environment with ability individual . Patients who are treated in the ICU get more action \_ intensive compared to patient in the room take care stay other . Naturally level worry ICU patients will more high because \_ That needed support one of them through therapy psychoreligion . RSI Surabaya is House Sick Islam with own team build spiritual giving \_ support psychoreligion to patient and family .

In study This with sample ICU patients want know Influence Therapy Psychoreligion Against Anxiety Levels in Patients Critical in the ICU Room RSI Surabaya. With 30 samples respondent use the HRS-A questionnaire which was administered 2 times (pre-post). therapy psychoreligion.

Got results mark significant of  $0.00 < \alpha$  (0.05) which means there is influence between Therapy Psychoreligion Against Anxiety Level and value coefficient correlation (correlation) of 0.927. In conclusion spiritual therapy can lower level anxiety , stress and depression in patients treated in the ICU . Need considered For make spiritual therapy as one intervention nursing in management anxiety , stress and depression No only in patients treated in ICU only and made consideration implemented in other service units for can provide facility in the form of audio and guides procedures do needed spiritual healing especially patient with anxiety , stress and depression . Many patients are treated stay impact from reaction hospitalization experience anxiety .

**Keywords**: ICU, Therapy Psychoreligion, Anxiety patient,

# INTRODUCTION

Phenomenon in society about view impressed ICU room horror and as terminal room still become a trending topic in the community . ICU provides capabilities and facilities , infrastructure equipment special For support vital functions with use skills staff experienced medical , nursing and other staff in management circumstances (Permenkes , Number 56 Th . 2014). Moment This amount patient critical need \_ maintenance palliative care in the ICU is increasing . However , still \_ There is a number of received problem \_ patient critic and his family like height number death , conflict between patients , families and clinicians , lack understanding families and clinicians about maintenance patient critical , so need exists evaluation quality maintenance patient incoming critical \_ phase palliative has given by the clinician especially nurses and doctors in the ICU.

Stress is pressure that occurs consequence discrepancy between desired situation with hope, where

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there is gap between demands environment with ability individual For comply with what is assessed potential harmful , threatening , disturbing , and not under control or with another language stress is exceed ability individual For do good coping ( Amalina , 2018). The more critical Sick patient , increasingly big possibility For to be very vulnerable , no stable and complex , requires intensive therapy and care  $\_$  meticulous nursing ( Nurhadi , 2014) .

Spiritual support can relieve condition psychological like fear , shock , break up despair , anger , anxiety , and depression . One 's low spiritual power can raises problem psychosocial in the field health . Spirituality is the power that unites , gives meaning to life and values individual , perception , belief and attachment among \_ individual . In situation well being spiritual work make it easy in finish problem , help therapist reach strength emotional , reduce level stress , so can help create environment passionate , enthusiastic and able work \_ increase such mental abilities clarity thinking and taking despair . Based on background back above \_ so researcher want to do study with title "Influence Therapy Psychoreligion Against Anxiety Levels in Patients Critical in the ICU RSI Surabaya".

# **METHOD**

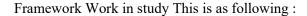
Methodology research that will be used in this research is *analytic with cross sectional method*, namely a study to study the dynamics of the correlation between risk factors and effects by way of approach, observation or data collection at one time. According to Notoatmodjo (2010). This study is useful to determine the effect of therapy psychoreligion to level anxiety in patients critical condition in the ICU RSI Surabaya. In study This there are 2 variables namely the independent variable form therapy psychoreligion and variables dependent that is level anxiety . in variable dependent grouped in become a number of criteria. Criteria sample inclusion in study This as following:

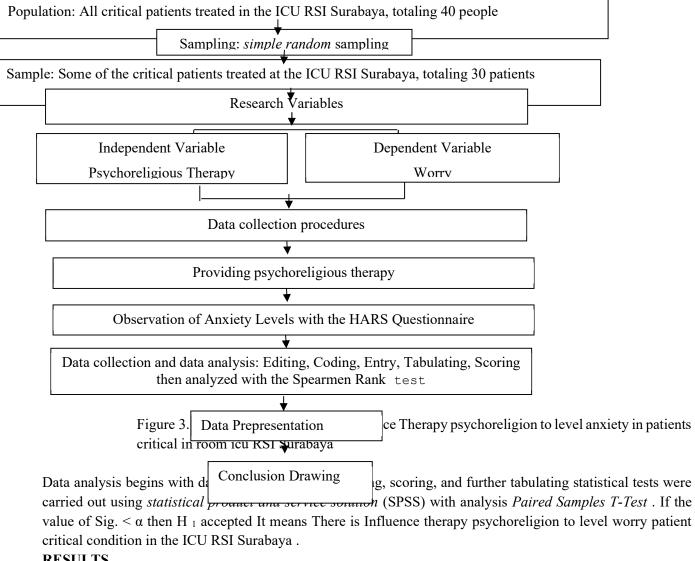
- 1. Patients treated in ICU in condition conscious.
- 2. Patients who experience anxiety,
- 3. Muslim patient,
- 4. Ready patient signed informed consent.

Sampling is a selection process portion from population For can represent population (Nursalam , 2014). On research This is the sample used technique sample used \_ is simple random sampling, which is sampling member sample from population done in a manner random without shows the existing strata in population it . That way done when member population considered homogeneous . Taking sample random simple done with method lottery (Sugiyono , 2011).

Research done with 30 samples respondent with given therapy Psychoreligious (Religious Lectures, Istighosah and Prayers) conducted 2 times with each duration not enough more 30 minutes in accordance with guide interventions / SOPs that have been made. Evaluation results worry done 2 times ie before gift therapy Psychoreligious and after. Research This conducted in April -May 2023 in space ICU RSI Surabaya with use instrument study form Hamilton Rating Scale for Anxiety (HRS-A) questionnaire.

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# **RESULTS**

The results of the analysis using the Paired Samplels T-Test obtained the following results:

**Table 1.** Tables and figures should be valuable, relevant, and visually attractive.

| Statements and subscales | Mean    | Std. Deviation | N  | Correlation | Lower | Upper | Signification (α) |
|--------------------------|---------|----------------|----|-------------|-------|-------|-------------------|
|                          |         |                |    |             |       |       |                   |
| Pre                      | 23.4333 | 4.917          | 30 | 0.927       | 1.344 | 2.855 | 0.00              |
| Post                     | 21.3333 | 3.717          | 30 |             |       |       | 0.00              |

on the table on is known that mark significant of  $0.00 < \alpha (0.05)$  which means there is influence between Therapy Psychoreligion Against Anxiety Levels in Patients Critical in the ICU Room RSI Surabaya. As well as value coefficient correlation (correlation) of 0.927 which means that correlation or level connection influence between 2024; Vol 13: Issue 3

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Therapy Psychoreligion Against the level of anxiety in the very strong category (0.80 - 0.10) ( Sugiyono , Statistics For Research , 2004:183) .

Average yield for level worry patient before given therapy psychoreligion that is of 23.4333 and after given therapy psychoreligion of 21,333. this \_ means there is decline level worry patient after given therapy psychoreligion, for see exists decline matter the so can seen in the result and discussion graph below.

#### **DISCUSSION**

on the table under is known that chart show part big patient experience decline level worry after given therapy psychoreligion. Difference high stress level that is, in patients number 1 with difference mark by 7. Before done therapy psychoreligion level her anxiety by 35 (Moderate Anxiety Level) and after given therapy psychoreligion of 28 (Moderate Anxiety Level). Although in the category level the same anxiety but difference score mark counted big.

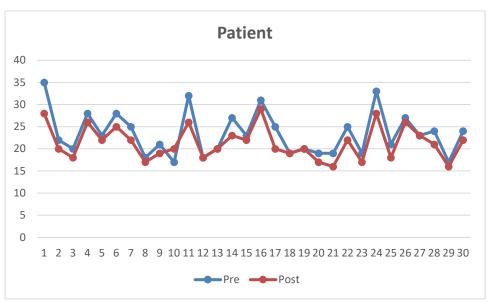


Figure 1. Comparison of success rate of items in the experimental and control class.

|                       | Pre | Post |
|-----------------------|-----|------|
| Level Worry Mild (15- | 21  | 24   |
| 25)                   |     |      |
| Anxiety Level (26-36) | 9   | 6    |
| TOTAL                 | 30  | 30   |

on the table on is known that There were 3 patients who experienced change from level worry currently to remember worry light as many as 3 patients . this \_ show that exists influence from he gave therapy psychoreligion to ICU RSI Surabaya patient .

A while individual for a long time often experience a series of episodes of the same experience then emergency no will emerge (Potter & Perry, 2006). Proven spiritual healing can lower anxiety. Research results This in line with research conducted by Elizabeth et.al (2013) where technique combination spiritual therapy and *guided* 

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imagery can lower anxiety and depression in postoperative patients . \_ The facts on research This the spiritual element is very effective For raises perception positive cause \_ circumstances relaxation in patients treated in the ICU . Same result seen in research study Nurliana (2011) found that stimulation verses Holy Quran for mother did \_ curettage can lower anxiety . Research Qadri (2003) stated that after recited the Koran to a number of patient at home sick , 97% of patients feel calm down and gain healing disease with fast . Research This strengthened by the results study North American medicine ( Elzaky , 2011) which concluded 97% of respondents after be heard patient reading the Koran become more calm and wave brain they from acceleration motion (12-13 db per second ) becomes more slow (8-18 db per second ) so patient feel more comfortable . Relaxation can stimulate reward center \_ so that arise serenity . As ejector from the feeling of relaxation and calm that arises , the midbrain will secrete gamma amino butyric acid (GABA), enkephalin, beta endorphins, so anxiety too \_ reduced .

#### **CONCLUSION**

Based on results study This can concluded that spiritual therapy can lower level anxiet stress and depression in patients treated in the ICU . Need considered For make spiritual therapy as one intervention nursing in management anxiety , stress and depression No only in patients treated in ICU only and made consideration implemented in other service units for can provide facility in the form of audio and guides procedures do needed spiritual healing especially patient with anxiety , stress and depression . Many patients are treated stay impact from reaction hospitalization experience anxiety .

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# **AUTHOR CONTRIBUTION**

All authors contributed equally to this study's preparation, execution, and manuscript writing.

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None.

## **CONFLICT OF INTEREST**

potency conflict interest is Writer state that they No own interest finance or connection mutual personal \_ compete that can affect job .

# ETHICAL CLEARANCE

This study has been approved by the Ethical Committee of Ahmad Yani Islamic Hospital Surabaya.

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