Spirituality and Depression in the Elderly

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Abstract: Introduction: Depression Often Occurs in the elderly at UPT PSLU. Many factors can cause depression including physical deterioration, loss of loved ones, and loss of social roles. Spirituality can reduce depression. Spirituality seeks to maintain harmony or conformity with the outside world, trying to answer or gain strength when faced with depression, stress, and illness. This study aims to explain the relationship between spirituality and depression in the elderly.

Methods: This study used a cross-sectional design by taking all the population in UPT PSLU Magetan, which numbered 30 people. The independent variable in this study is spirituality and the dependent variable is depression. Data were collected by questionnaire and analyzed using the Spearman Rho test with a significant level of 0.05. Results and Analysis: The results showed that spirituality and depression in Magetan UPT PSLU value had a significant correlation ρ = 0.000 and r = -0.872, indicating that the correlation between the two variables was very strong.

Discussion and Recommendation: Spirituality can help overcome depression problems in the elderly. Mental and spiritual development activities are expected to increase spirituality to reduce depression in the elderly. For example, improves existing PSLU UPT spiritual or religious discourses lectures for parents to increase of religious knowledge. Mental and spiritual development activities are expected to increase of spirituality to reduce depression in the elderly. For example, improves existing PSLU UPT spiritual or religious discourses lectures for parents to increase of religious knowledge.

Keywords: Spirituality, depression, elderly.

1. PRELIMINARY

Spirituality is often described as a search for an individual to find meaning in life (Whelan-Gales, 2009). The spiritual dimension seeks to maintain harmony or harmony with the outside world, struggled to answer or gain strength when facing depression, emotional stress, physical illness or death (Hamid, 2000). Stoll (1995 in Hamid, 2008) outlines that the spiritual as a two-dimensional concept that the vertical dimension is the relationship with God or the Supreme Being that guides one's life, while the horizontal dimension is one's relationship with oneself, with others and with the environment.
The need for public health services is increasing. Most of these people are the elderly (the Goddess, 2007). Elderly times started when someone starts entering the age of 60 years (Saputri & Indrawati, 2011). Various efforts to help elderly people to be happy and prosperous, given at the time of the elderly is a stage of life that is not easy. During this period, individuals are faced with various obstacles both for their physical deterioration and the loss of social role. This condition causes the elderly tend to be more vulnerable to psychological problems such as depression, anxiety, sleep disorders, dementia and so on. Based on information from the head of UPT of Elderly Social Services Magetan on May 17, 2012 there are elderly who live at home depressed.

The world's aging rapidly. It is estimated that the proportion of elderly people (elderly) aged 60 years and above has doubled from 11% about 650 million in 2006 to 22% approximately 2 billion in 2050 (Ministry of Health, 2012). The prevalence of depression in elderly in the world ranges from 8-15%. Reports from the countries in the world states of depression in the elderly is 13.5% with a ratio of men and women was 14.1: 8.6. The prevalence of depression in the elderly undergoing treatment in hospital and Nursing Home Care amounted to 30-45% (Chaplin and Prabova Royanti, 1998, in Chandra, 2009). The number of elderly people in Indonesia in 2005 amounted to 15,814,511 inhabitants, or 7.2% and is projected to increase to 28,822,879 people in 2020, or by 11.34% (Statistics Indonesia, 2010). Health Survey of 2001 states that a mental disorder at the age of 55-64 years reached 7.9% while those aged over 65 years 12.3% (Dianingtyas & Sarah, 2008). According Soejono and Setiadji (2000), In the year 2020 depression will be topped illness suffered by the elderly in developing countries, including Indonesia. In East Java based on BPS data in 2011 of the total population of 37.5 million people, it turns out 11% of them are senior citizens, or about 4.1 million people (Communications and Information Agency of East Java Province, 2011). Data obtained from the Social Services Unit elderly Magetan on 16 April 2017 there are 87 the number of elderly people.

Phase entering old age will be experienced by everyone and could not be avoided, but the physical and psychological condition of the elderly is very different from the elderly with other seniors. Physical strength began to wane, power adjustment, a reaction to the environment, initiative and creative power began to decline in the elderly can lead to psychological problems (Wijayanti, 2007). Many found the elderly were sent to the home because it is not neglected by the family, there are elderly people who were exiled from the lives of his children despite living in the same environment, there are elderly people who still have to work hard though is old, and there are still many other things that cause (Wijaya, 2010). Nursing is one of the alternatives to the elderly to obtain adequate care and services, but this is not one hundred percent will be received by the elderly are gracefully. Generally elderly people who are in homes for various reasons will feel lonely when no activities are organized and rarely visited by family. These feelings occur due to interruption or loss of social interaction which is one of the trigger factors of depression in the elderly (Sumirta, 2009). Attitude patient and try to accept what their living conditions are quite effective antidote for the short term, but patience is not necessarily or automatically eliminate these feelings, patience is nothing other than the ego defense mechanism called repression. At a certain moment feelings will arise and lead to depression.

Impact of depressive disorders in the elderly can affect the physical, psychological and social interact in a harmful and worsen the quality of life and productivity of work in the elderly. Physical factors in question is a physical disease that affects the elderly. Psychological factors include socio-economic conditions, whereas social factors that influence the reduced social interaction or social support and loneliness experienced by elderly (Kaplan, 1998, in Dianingtyas & Sarah, 2008).

Seniors who experience psychological changes require a special attention from the health care team in both agencies Hospice physicians, nurses, psychologists or spiritual officer. Especially nurses as members of health teams that provide full service is expected to provide a quality service so it is important for nurses examine not only the physical aspects, but also aspects of bio-psycho-social-spiritual. Starting from the above, the authors were interested in doing research with the title of the correlation between spirituality and depression in the elderly UPT of Elderly Social Service Magetan.
2. MATERIALS AND METHODS

This research was conducted by using a cross-sectional study design, the type of study that emphasizes the time measurement / observation of the independent and dependent variable data only once, at one time. In this type of independent and dependent variables assessed simultaneously at any one time, so there was no follow-up. The population in this study were elderly UPT of Elderly Social Services Magetan as many as 87 elderly. The sample size in this study, 30 elderly people is done by using the quota sampling method based on inclusion criteria i.e. 60-74 year-old elderly (WHO) and the Elderly can read or write. Exclusion criteria in this study were elderly sick (known and not permitted by the institution) and the elderly suffering from cognitive impairment.

The independent variable in this study is spirituality. The dependent variable in this study was depression.

The instrument used to measure spirituality in this study was a questionnaire modification of the results of research conducted by Izzati (2011). Totaling 60 questions. Wherein each positive or answer questions favorable contained in a number (1, 3, 5, 7, 9, 11, 13, 15, 17, 19, 20, 22, 26, 28, 29, 32, 34, 37, 38, 40, 42, 44, 46, 47, 49, 51, 53, 56, 57, 60) by a score of 4 for answers strongly agree (SS), a score of 3 for answers to agree (S), a score of 2 to answer to disagree (TS) and a score of 1 for very disagree (STS). While the question of negative or unfavorable contained in number (2, 4, 6, 8, 10, 12, 14, 16, 18, 21, 23, 24, 25, 27, 30, 31, 33, 35, 36, 39, 41, 43, 45, 48, 50, 52, 54, 55, 58, 59) were given a score of 1 for strongly agree (SS), a score of 2 for the answers agree (S), a score of 3 for answers to disagree (TS) and a score of 4 to answer strongly disagree (STS). To measure depression in the elderly themselves using instruments that geriatric depression questionnaire adopted from Nursalam (2008). Where to question number 2, 3, 4, 6, 8, 9, 10.

3. RESEARCH RESULT

The distribution of demographic data of respondents in this study, of the general data by sex most of the respondents are female sex by 63% (19 people). Based on the age of most of the respondents, 44% (13 people) above the age of 70-74 years. Based on religion can be seen that all respondents (100%) is Muslim. Based on recent education most respondents ie 56% (17 people) are not in school.

Special Data displays data about the identification of the elderly spirituality that includes aspects of the relationship with oneself, with others, with the environment, and with God, identification of elderly depression and to identify the relationship between spirituality and depression in the elderly UPT of Elderly Social Service Magetan. Identification of the spirituality of the elderly showed that most respondents (80%) or as many as 24 people have high spirituality. Identification of elderly depression most respondents that as many as 21 respondents (70%) had mild depression.

Table 1. Relationship spirituality with depression in the elderly UPT of Elderly Social Service Magetan

<table>
<thead>
<tr>
<th>Depression</th>
<th>Spirituality</th>
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<tr>
<td></td>
<td>Moderate</td>
<td>High</td>
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<tr>
<td>Light</td>
<td>0</td>
<td>21</td>
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<tr>
<td>moderate</td>
<td>6</td>
<td>3</td>
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<td>weight</td>
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Spearman rho correlation analysis p = 0.000 r = -0.872

Information:
- r: correlation coefficient
- p: level of significance

4. DISCUSSION

According to the research that there is a very strong connection between spirituality and depression in the elderly UPT of Elderly Social Service Magetan. Based on the identification of elderly spirituality of the results showed that most respondents have a high spirituality. This is because of the
institution provides a lot of mental and physical development activities that could ultimately affect and enhance the spirituality of the elderly. The spirituality of a person can be influenced by means of his life experiences life experiences both positive and negative can affect a person's spiritual and vice versa is also influenced by how people interpret these spiritual experiences (Hamid, 2008). According to Rahmah (2010), when a person is growing and more mature then the spiritual knowledge and experience is growing because of the spiritual is closely related to the daily life of an individual. It is similar to spiritual development occur in the elderly. Spiritual someone who is on the vulnerable age of elderly people experiencing a spiritual deepening or can be said to be an elderly generally have a high spirituality as if someone had entered old age, he tends to be more willing to get closer to the Almighty and can start receiving their change in the life and activities of daily living as well as their fate was death that hit themselves, relatives or friends of the elderly. The demographic data indicate that all respondents are Muslim and in their own homes for Islamic religious spiritual activities included in the mental guidance in which many religious activities carried out and implemented on a daily basis as well as major centers in the mosque.

Based on the identification of depression in the elderly of the results showed that most respondents experiencing mild depression. This is due mostly elderly already have a high spirituality that makes the elderly have good coping in solving the problem, resulting in only elderly depressed levels of light. Advanced age is a period where everyone hopes to live a quiet life, and enjoy retirement with my children and grandchildren affectionately beloved. However, a variety of life issues that plagued all his life elderly such as poverty, the failure of successive, prolonged stress, or conflict with family and children, or other conditions such as no children to take care and so forth. The condition can lead to depression in the elderly (Shamsuddin, 2006). Depression is very common in the elderly, and they may not realize that they are depressed (Hibbert et al, 2004). Many found the elderly sent to homes for neglected or abandoned by families that can ultimately lead to depression (Wijaya, 2010). According Dianingtyas & Sarah (2008), people who lived in the orphanage have been fused with activities at home will feel that he is still meaningful and still have a role that would be less likelihood of depression. That means if depression elderly likely will experience only a mild depression. But if the family is still there while the elderly are placed in an institution then the sense of isolation will be faster trigger depression. Feelings of isolation occurs because the elderly live alone, knocked out of the family environment. In this case it is possible for the vulnerable elderly suffering from depression, especially depression with moderate or even fall into a deep depression. Results of the study did show a large majority of elderly suffering from depression, but only a mild depression that does not interfere with daily activities of the elderly themselves. Here spirituality factor was instrumental in overcoming the problems faced, saw most of the elderly have a high spirituality it is very likely only get depressed elderly people with mild level for own defense in the form of positive coping mechanisms to deal with problems that come up. Related to the level of depression in the elderly in addition to the influence of spirituality possessed it may also be influenced by the old elderly living in nursing and support of the family. The point here if the elderly themselves had not been in homes plus no family to visit, this will continue to weigh on the feelings and thoughts of the elderly which can ultimately lead to depression in the elderly to levels further.

Spirituality relationship with depression in the elderly UPT of Elderly Social Services Magetan of the results of this research is that spirituality will affect the level of depression experienced by elderly where if spirituality increases, the rate of depression in the lower. Those results proved by Spearman rho correlation statistical test that shows the relationship between spirituality and depression with significant value ($\rho = 0.000$). In addition the value of the correlation coefficient ($r = -0.872$) describe the level of a very strong relationship with the higher spiritual significance owned by the lower levels of depression. Some studies show that religion and spirituality can be useful for a person or family whose members suffer from psychological disorders such as depression, religion proved instrumental in providing support to any person or caregiver and are a major source of entertainment (Videbeck, 2001). According to Nelson in Videbeck (2001) found that religious orientation is useful as a coping mechanism and source of social support for the elderly who experience depression. Gallup research in Tangdilintin (2008) find someone who commited spiritually turns two times happier than
someone less committed. Someone high spirituality also have a lower risk for developing depression and more satisfied with where he is. According Astuti (2010), marked depression of moderate melancholic picture, feel inferior, feel helpless can occur in the elderly even though the elderly who have high spiritual, this is because the elderly do not have the support of the family. According to some other experts stated that in addition to spiritual growth, family support is very helpful in preventing and overcoming depression in the elderly. Depression in the elderly came from a sense of loneliness and isolation because abandoned by their families, as time went on with their mental development and physical make spirituality of elderly increases, the elderly began to believe that the current situation had been destined by the Almighty and began to forget the incident that occurred at the time of then so can reduce the problem of depression in the elderly themselves. By this it can be concluded that a high spirituality makes the elderly have good coping in solving the problem, resulting in only elderly depressed levels of light. Related elderly people who have a high spirituality, but still depressed being this close relationship with the elderly living in old homes and family support. Thus, the elderly still have feelings and thoughts will be members of his family who are outside and can not accept wholeheartedly that the elderly who are in nursing it is a new family.

5. CONCLUSIONS AND SUGGESTIONS

5.1 Conclusion:

a. Most elderly UPT of Elderly Social Services Magetan have a high spirituality. This is because of the institution provides a lot of mental and physical development activities that could ultimately affect and improve the spirituality in the elderly.

b. Most elderly UPT of Elderly Social Services Magetan experiencing mild depression. This is because most of the elderly already have a high spirituality that makes the elderly have good coping in solving the problem, resulting in only elderly depressed levels of light.

c. There is a very strong relationship between spirituality and depression in the elderly UPT of Elderly Social Services so that it can be interpreted Magetan the higher spirituality owned the elderly, the lower levels of depression.

5.2 Suggestion:

a. For UPT of Elderly Social Services Magetan expected to increase the intensity of the mental and physical development that has existed with the aim to increase the spirituality in the elderly due to the high spirituality gives coping well in solving the problem so as to prevent terjadiya depression in the elderly.

b. For further research to conduct further research on the analysis of factors related to the incidence of depression in nursing with more samples or with different research methods.

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