

---

## Bridging Social Capital And Health Outcomes: The Mediating Role Of Maternal Agency In Stunting Prevention Services In Kendari City, Indonesia

Cindy Ayu Oktavia<sup>1)</sup>, Rica Tri Septinora<sup>2)</sup>, Sri Mulyati<sup>3)</sup>

<sup>1,2,3)</sup> Undergraduate Nursing Study Program, Faculty of Medicine and Health Sciences, Adiwangsa University, Jambi

\*Corresponding Author

Email : [cindyayu098@gmail.com](mailto:cindyayu098@gmail.com)

---

### Abstract

*Degenerative diseases in older adults can cause physical and psychological changes, including anxiety. Spiritual well-being is an important factor that helps older adults accept their illness and undergo treatment more calmly. This study aimed to determine the relationship between spiritual well-being and anxiety levels among older adult patients with degenerative diseases in the inpatient ward of Royal Prima Hospital Jambi. This study used a quantitative approach with a cross-sectional design. The sample consisted of 42 respondents selected through purposive sampling. Data were collected using spiritual well-being and anxiety questionnaires, then analyzed using univariate and bivariate analysis with the Chi-Square test. The results showed that most respondents had moderate spiritual well-being, with 19 respondents (45.2%), and experienced moderate anxiety, with 19 respondents (45.2%). The Chi-Square test obtained a p-value of  $0.000 < 0.05$ , indicating a significant relationship between spiritual well-being and anxiety levels among older adult patients.*

**Keywords:** *Spiritual Well-Being, Anxiety, Older Adults, Degenerative Diseases B Indokan.*

---

## INTRODUCTION

An increase in life expectancy is one of the key indicators in evaluating the success of development in the health sector. Improvements in healthcare services, increased public awareness of healthy lifestyles, and advances in medical technology have contributed to the rising life expectancy of the population. However, this increase in life expectancy has also brought changes to the demographic structure, namely the growing number of older adults (elderly population). This condition has become a phenomenon that is currently emerging in various countries, including Indonesia.

Based on data from the Central Statistics Agency, Indonesia has entered the era of an aging population, a condition in which the proportion of older adults continues to increase from year to year. In 2023, the number of older adults in Indonesia reached approximately 29.9 million people or about 11.75% of the total population (Badan Pusat Statistik, 2023). This percentage shows an increase compared to previous years. In addition, population projections indicate that the number of older adults is expected to continue rising in the future along with increasing life expectancy. This condition indicates that Indonesia will face various new challenges, particularly related to meeting the healthcare needs of the elderly population.

The increasing number of older adults is closely related to the rising prevalence of various health problems commonly experienced by this group. Older adults are a population group that undergoes a natural aging process involving changes in biological, psychological, social, and spiritual aspects of life. This aging process is generally accompanied by a decline in physiological function, making older adults more vulnerable to various health disorders. One of the most common health problems among older adults is degenerative diseases such as hypertension, diabetes mellitus, heart disease, and stroke. Degenerative diseases are chronic conditions that develop slowly and usually require long-term treatment (Andriyanto & Badriyah, 2023).

Currently, degenerative diseases are one of the leading health problems among older adults. According to the World Health Organization, non-communicable diseases (NCDs) account for approximately 74% of deaths worldwide. Diseases such as cardiovascular disease, stroke, diabetes, and cancer are among the most common conditions affecting older populations (World Health Organization, 2023). This indicates that degenerative diseases are a major global health challenge. In

Indonesia, Basic Health Research data also show that the prevalence of chronic diseases such as hypertension, diabetes mellitus, and heart disease tends to increase with age. For example, the prevalence of hypertension among individuals aged over 60 years is significantly higher compared to other age groups (Kementerian Kesehatan RI, 2018). This condition indicates that older adults are at higher risk of developing various degenerative diseases.

In addition to physical health problems, older adults also experience various psychological changes. This condition may lead to psychological problems, one of which is anxiety. Anxiety is an emotional response characterized by feelings of worry, fear, or uncertainty about a situation. In older adults with chronic or degenerative diseases, anxiety may arise due to concerns about health conditions, possible disease complications, and dependence on others in daily activities (Shabani et al., 2023). Anxiety in older adults can affect overall health conditions, both physically and psychologically. Older adults experiencing anxiety often show symptoms such as sleep disturbances, decreased appetite, and reduced motivation to undergo treatment. These conditions may affect the healing process and reduce the quality of life. Therefore, healthcare services for elderly patients should not only focus on physical conditions but also consider psychological aspects. A holistic healthcare approach is essential to meet patients' needs comprehensively, including biological, psychological, social, and spiritual aspects.

One factor that can help older adults cope with stress caused by chronic illness is spiritual well-being. Spiritual well-being is a condition in which an individual experiences inner peace, has a good relationship with God, and is able to find meaning in life. Spirituality often serves as a source of strength for individuals in facing life difficulties, including chronic illness (Shabani et al., 2023).

Spiritual well-being also plays a role in helping individuals accept their current health conditions. Older adults with good spiritual well-being are generally more able to accept their condition with a more positive attitude. In addition, spirituality can provide calmness and help individuals cope with stress and psychological pressure caused by illness (Cheng et al., 2025).

Several previous studies have also shown a relationship between spiritual well-being and psychological conditions in older adults. A study by Iswatun et al. (2023) found a relationship between spiritual well-being and anxiety levels among older adults with hypertension. The study showed that older adults with higher levels of spirituality tended to have lower levels of anxiety compared to those with lower spirituality levels. Other studies also indicate that fulfilling spiritual needs in older adults with chronic diseases can improve psychological well-being and quality of life. Older adults who are able to interpret illness as part of life tend to have a more positive attitude in facing their condition (Luthfa & Khasanah, 2022).

Based on the description above, it can be understood that spiritual well-being plays an important role in helping older adults cope with anxiety arising from degenerative diseases. Therefore, research on the relationship between spiritual well-being and anxiety levels among older adult patients with degenerative diseases is necessary. This study is expected to provide an overview of the relationship between spiritual well-being and anxiety levels in older adult patients receiving inpatient care at Royal Prima Hospital Jambi

## RESEARCH METHODS

This study employed a quantitative research approach using a cross-sectional design to determine the relationship between spiritual well-being and anxiety levels in older adult patients with degenerative diseases.

The population in this study consisted of all older adult patients with degenerative diseases who were hospitalized in the inpatient ward of Royal Prima Hospital Jambi. The sample in this study amounted to 42 respondents, selected using a purposive sampling technique based on predetermined inclusion criteria.

The variables in this study included spiritual well-being as the independent variable and anxiety level as the dependent variable. Data collection was carried out using primary data obtained

directly from respondents through standardized questionnaires measuring spiritual well-being and anxiety levels. Secondary data were obtained from hospital medical records and related documentation.

The data analysis in this study was conducted using univariate analysis to describe the frequency distribution of each variable, and bivariate analysis using the Chi-Square test to determine the relationship between spiritual well-being and anxiety levels. The significance level used in this study was  $\alpha = 0.05$ . Data processing was carried out using statistical software to obtain accurate and reliable results.

## RESULTS AND DISCUSSION

### Spiritual Well-Being of Older Adult Patients

**Table 1. Frequency Distribution of Spiritual Well-Being in Older Adult Patients**

| No           | Spiritual Well-Being | f   | %    |
|--------------|----------------------|-----|------|
| 1            | Low                  | 6   | 14.3 |
| 2            | Moderate             | 19  | 45.2 |
| 3            | High                 | 17  | 40.5 |
| <b>Total</b> | 42                   | 100 |      |

Based on Table 1, most respondents had a moderate level of spiritual well-being, namely 19 people (45.2%). Respondents with high spiritual well-being were 17 people (40.5%), while those with low spiritual well-being were 6 people (14.3%).

### Anxiety Levels of Older Adult Patients

**Table 2. Frequency Distribution of Anxiety Levels in Older Adult Patients**

| No           | Anxiety Level    | f   | %    |
|--------------|------------------|-----|------|
| 1            | No anxiety       | 6   | 14.3 |
| 2            | Mild anxiety     | 11  | 26.2 |
| 3            | Moderate anxiety | 19  | 45.2 |
| 4            | Severe anxiety   | 6   | 14.3 |
| <b>Total</b> | 42               | 100 |      |

Based on Table 2, most respondents experienced moderate anxiety, namely 19 people (45.2%). Respondents with mild anxiety were 11 people (26.2%). Those who did not experience anxiety were 6 people (14.3%), while respondents with severe anxiety were also 6 people (14.3%).

### Relationship Between Spiritual Well-Being and Anxiety Levels in Older Adult Patients

Based on the cross-tabulation results, it was found that all 6 respondents with low spiritual well-being experienced severe anxiety (100.0%). Among 19 respondents with moderate spiritual well-being, all experienced moderate anxiety (100.0%). Meanwhile, among 17 respondents with high spiritual well-being, 6 people (35.3%) did not experience anxiety, and 11 people (64.7%) experienced mild anxiety. The Chi-Square test showed a p-value of 0.000. This value is lower than  $\alpha = 0.05$ , indicating that  $H_a$  is accepted and  $H_0$  is rejected. This means there is a significant relationship between spiritual well-being and anxiety levels among older adult patients with degenerative diseases in the inpatient ward of Royal Prima Hospital Jambi.

## Discussion

### Overview of Spiritual Well-Being in Older Adult Patients with Degenerative Diseases

The results showed that most older adult patients had a moderate level of spiritual well-being (45.2%). This indicates that most patients have relatively good spiritual coping abilities in facing degenerative diseases. They are still able to pray, accept their illness, and maintain hope for recovery, as well as interpret their illness as part of life. However, moderate spiritual well-being also suggests that their spiritual stability is not fully optimal. This condition may be influenced by pain, activity limitations, length of hospitalization, dependence on family, and concerns about their illness.

Spiritual well-being is very important for older adults because degenerative diseases are long-term conditions that require continuous care. Older adults with good spirituality tend to accept their condition more easily, control fear, and remain motivated during treatment. Conversely, those with low spiritual well-being tend to feel hopeless, anxious, fearful, and struggle to accept their condition.

According to Paloutzian and Ellison, spiritual well-being consists of two main dimensions: relationship with God and the ability to find meaning in life. For older adults, these two aspects can serve as a source of strength in facing illness. Inner peace, prayer, worship, and family support can help patients feel stronger during treatment.

This finding is consistent with Iswatun et al. (2023), who stated that spiritual well-being is related to psychological conditions in older adults. Older adults with good spirituality are better able to cope with stress from chronic illness. Luthfa and Khasanah (2022) also found that fulfilling spiritual needs in older adults can improve comfort, self-acceptance, and quality of life.

According to the researcher's assumption, the moderate level of spiritual well-being among patients is due to their belief in God and family support. However, illness conditions, old age, and worries about recovery still affect their emotional and spiritual stability.

Therefore, holistic nursing care is needed. Care should not only focus on physical conditions but also psychological and spiritual aspects. Nurses can provide emotional support, listen to patients' concerns, facilitate worship according to beliefs, provide motivation, and involve family members. Hospitals should also create a supportive environment for spiritual needs, such as providing space for prayer, spiritual visits, and good therapeutic communication.

### **Overview of Anxiety Levels in Older Adult Patients with Degenerative Diseases**

The results showed that most older adult patients experienced moderate anxiety (45.2%). This anxiety may arise from concerns about health conditions, fear of disease progression, fear of being a burden to family, and discomfort during hospitalization. In patients with degenerative diseases, anxiety is also influenced by long-term illness, ongoing treatment, activity limitations, and risk of complications.

Anxiety in older adults must be addressed because it can affect both physical and psychological conditions. Patients with anxiety may experience sleep disturbances, loss of appetite, restlessness, fatigue, difficulty concentrating, and reduced motivation for treatment. If not properly managed, anxiety may delay recovery and reduce quality of life.

According to Stuart, anxiety is an emotional response to perceived threats, whether real or imagined. In older adults, anxiety often arises due to health decline, reduced body function, and uncertainty about the future. Older adults with degenerative diseases are more vulnerable because the illness is chronic and requires long-term care.

This finding is consistent with Iswatun et al. (2023) and Luthfa and Khasanah (2022), who reported that chronic illness in older adults can lead to anxiety, fear, and feelings of helplessness.

According to the researcher's assumption, moderate anxiety occurs because patients can still control their fear, but still worry about their condition. Hospitalization, environmental changes, limited activity, and dependence on family also contribute to anxiety. Lack of understanding about the illness and treatment plan may also increase anxiety.

Therefore, effective communication, clear explanation of disease conditions, emotional support, comfortable care environment, family involvement, and spiritual support are needed to reduce anxiety.

### **Relationship Between Spiritual Well-Being and Anxiety in Older Adult Patients with Degenerative Diseases**

The results showed a significant relationship between spiritual well-being and anxiety levels in older adult patients with degenerative diseases. All patients with low spiritual well-being experienced severe anxiety (100%). All patients with moderate spiritual well-being experienced moderate anxiety (100%). Meanwhile, most patients with high spiritual well-being did not experience anxiety or only experienced mild anxiety.

The Chi-Square test showed a p-value of 0.000 ( $< 0.05$ ), indicating a significant relationship. Thus, the alternative hypothesis is accepted. Higher spiritual well-being is associated with lower anxiety levels, while lower spiritual well-being is associated with higher anxiety.

This finding shows that spirituality plays an important role in helping older adults cope with anxiety during treatment. Patients with strong spiritual well-being tend to accept their illness more easily, feel calmer, have hope, and show greater resilience. Faith in God, prayer, family support, and meaning-making of illness help reduce fear and worry.

This is consistent with previous studies (Iswatun et al., 2023; Luthfa & Khasanah, 2022), which found that spirituality reduces anxiety and improves psychological well-being in older adults with chronic diseases.

According to the researcher's assumption, this relationship exists because spirituality serves as a psychological coping resource. Patients with strong spirituality tend to think positively and feel supported, while those with low spirituality are more likely to feel fear, anxiety, and hopelessness.

Therefore, holistic nursing care is essential, integrating physical, psychological, social, and spiritual aspects. Nurses should provide therapeutic communication, emotional support, spiritual facilitation, and family involvement. Hospitals should also support spiritual care services to improve patient comfort and reduce anxiety.

## CONCLUSION

This study concludes that spiritual well-being is significantly associated with anxiety levels among older adult patients with degenerative diseases in the inpatient ward of Royal Prima Hospital Jambi, as shown by the Chi-Square test results with a p-value of 0.000 ( $< 0.05$ ). Patients with higher spiritual well-being tend to experience lower anxiety, while those with lower spiritual well-being tend to experience higher levels of anxiety. Spiritual well-being plays an important role as a coping mechanism that helps older adults achieve inner peace, accept their illness, and undergo treatment with greater calmness. Therefore, strengthening spiritual well-being through holistic nursing care that integrates physical, psychological, social, and spiritual aspects is essential to reduce anxiety and improve the overall well-being of older adult patients.

## REFERENCES

- Andriyanto, A., & Badriyah, L. (2023). Keperawatan gerontik dalam pelayanan kesehatan lansia. EGC.
- Badan Pusat Statistik. (2023). Statistik penduduk lanjut usia Indonesia 2023. Jakarta: BPS.
- Cheng, Q., et al. (2025). Spiritual well-being and psychological health among older adults with chronic illness. *Journal of Aging and Health*.
- Iswatun, I., Sari, D. P., & Rahmawati, R. (2023). Hubungan kesejahteraan spiritual dengan tingkat kecemasan pada lansia penderita hipertensi. *Jurnal Keperawatan Indonesia*, 26(2), 115–123.
- Kementerian Kesehatan Republik Indonesia. (2018). Laporan nasional Riset Kesehatan Dasar (Riskesdas) 2018. Jakarta: Kemenkes RI.
- Kementerian Kesehatan Republik Indonesia. (2022). Profil kesehatan Indonesia 2022. Jakarta: Kemenkes RI.
- Luthfa, I., & Khasanah, U. (2022). Pemenuhan kebutuhan spiritual pada lansia dengan penyakit kronis. *Jurnal Keperawatan Gerontik*, 5(1), 45–52.
- Notoatmodjo, S. (2018). Metodologi penelitian kesehatan. Rineka Cipta.
- Sugiyono. (2019). Metode penelitian kuantitatif, kualitatif, dan R&D. Alfabeta.