

The Correlation Between Students' Spiritual Care Abilities And Patient Satisfaction

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<https://doi.org/10.58439/jhrt.v4i1.444><https://e-journal.saku.co.id/index.php/JHRT>Iin Aini Isnawati^{1,2*}, Nisha Nambiar³, Faridah Mohd. Said⁴

Abstract

Introduction: Spiritual nursing training is one way to improve nursing students' abilities in providing spiritual nursing care to patients. After conducting training using the santri method, there was a proven increase in spiritual intelligence and spiritual care competence. The purpose of this study was to identify the correlation between students' spiritual care abilities and patient satisfaction during their treatment by previously trained nursing students. **Methods:** This cross-sectional study was conducted on 75 student nursing and 75 patients treated by nursing students, selected through simple random sampling. Data collection tools consisted of questionnaires on satisfaction with spiritual nursing care. The data obtained were analysed using SPSS 20 with descriptive and inferential statistics. **Results:** The results showed that the average spiritual care ability of students was 119.3 and the average patient satisfaction was 39.4. After performing a correlation test, a p-value of 0.000 was obtained, indicating that there is a significant correlation between students' ability to provide spiritual care and patient satisfaction. **Conclusion** The results of this study indicate that there is a correlation between the spiritual care abilities of nursing students and patient satisfaction, and that the higher the level of clinical spiritual care abilities, the greater the patient satisfaction in hospitals. Therefore, it is necessary to develop spiritual care training for nurses in hospitals, provide santri model training to improve nurses' spiritual care and develop their spiritual care competencies to increase patient satisfaction.

Keywords : Spiritual care, patient satisfaction, nursing students

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INTRODUCTION

Professional nurses must recognize that patients spiritual needs are also important to be met (Goli et al., 2024). Nurses must be sensitive to patients' spiritual needs (Diego et al., 2022). Furthermore, meeting patients spiritual needs can prevent other mental health disorders

(Najafi et al., 2022). Training in the nursing curriculum is required (Ross et al., 2022). In-depth training that takes into account local culture and customs can improve students' understanding of practicing spiritual nursing care (Panczyk et al., 2021). One way to do this is by monitoring students' worship activities and understanding of spirituality (Wibowo & Sujono, 2021). Several training activities have been shown to increase students knowledge and ability to meet patients spiritual needs. In some countries, such as Iran, students have a positive attitude towards spirituality (Farahani et al., 2019).

As a continuance of the success of spiritual care training, it is necessary to evaluate patient satisfaction in order to meet their spiritual needs while in the hospital. One of the reasons why spiritual care needs to be developed is the finding that Islamic culture has proven to be better in its approach to spiritual care (Taylor et al., 2023). Meeting spiritual care needs is an important requirement that nurses must fulfill. However, it has been found that patients are dissatisfied with the spiritual services available in hospitals (Mehika et al., 2021). and until now there has been no spiritual care training for nursing students, to prepare them to meet the needs of patients in hospitals.

To reinforce this, an integrated spiritual care curriculum was developed that combines Islamic boarding school values with a curriculum based on Western science, one of which is the 3 H (Head, Hand, and Hearth) approach. The Islamic boarding school values that are included are the 9 main virtues of *santri* which are the pillars of the Zainul Hasan Islamic boarding school (Imam Bukhori & Yaqub Cikusin, 2023). However, there is no impact known from the spiritual care training using the 9 main virtues of *santri* which leads to patients' satisfaction. Accordingly, this study aims to investigate the relationship between nursing students' competence in providing spiritual care and the level of patient satisfaction.

METHOD

A Crosssectional study was conducted with a sample of 75 nursing students and 75 patients. Sampling was conducted using random sampling. Participants in the study voluntarily participated in the survey, The inclusion criteria were as follows: students who had received spiritual care training, aged 18-20 years; willing to participate; and not sick, resulting in 75 respondents (65 females and 10 males) and 75 patients who received spiritual care and were willing to participate. The research procedure was that all participants were informed about

the purpose of the study and provided written informed consent. After signing the informed consent form, participants were given a questionnaire. The following data collection tools were used : a questionnaire SCCS on spiritual care in Likert form is 27 items and patient satisfaction 14 items, had been tested for validity and reliability. Then the data was analyzed and presented in descriptive statistics, including the mean and standard deviation of the main research variables. and has received approval from the KEPK UNHASA with the number 705/KEPK-UNHASA/IX/2025.

RESULTS

Sample Characteristics

The majority of participants were female (n = 87%) (see Table 1).

Table 1 Demographic data student nursing and patients (n = 75)

Variables	Students (%)	Patients (%)
Age, year (Mean ± SD)	19.39	45,8
Gender		
Male	10 (13)	29 (38,7)
Female	65 (87)	46 (61,3)
Semester level/Education		
Elementary		25 (33,3)
Junior High		10 (13,3)
Senior High		16 (21,3)
University		24(32,1)
IV	37 (49,3)	
VI	38 (50,7)	

Source: Processed primary data, 2025

The mean age of the respondents was 19,39 years for nurses and 45,8 years old for patients. Age is an important factor in understanding something, and influences the ability to absorb the information received. From the above characteristics data, it can be concluded that the majority of patients were female, with 65 (87%) female students and 46 (61,3%) female patients. gender is not a barrier to obtaining information and training. The majority of patients were elementary school graduates 25 (33,3%), and 38 (50,7%) were sixth-semester students who had participated in spiritual care training.

Table 2 Spiritual care and patient satisfaction (n = 75)

Variables dan sub variable	Mean ± SD	p
Spiritual care	119.3±12	0.000
Patient Satisfaction	39,4	

Source: Processed primary data, 2025

From the data above, it can be concluded that the average spiritual care score for students was 119.3±12, falls into the high category, so that it is able to fulfill the patients spiritual needs and the average patient satisfaction score was 39.4 entered into very satisfied, and the patient was able to fulfill his spiritual needs well, with a p-value of 0.000. Therefore, it can be concluded that there is a correlation between spiritual care ability and patient satisfaction.

DISCUSSION

Based on the data above, there is a relationship between the spiritual care competency of nursing students and the level of patient satisfaction. Improvements in nursing services can increase patient satisfaction and loyalty during treatment, and fulfilling the patient's spiritual needs has an impact on the patients physical, mental and spiritual health, as well as providing a sense of security and increasing patient satisfaction (Ardian et al., 2021). Spiritual care services that provide spiritual support also require nurses to have spiritual abilities, By providing training to nursing students (Mustar, 2024).

This training also has a positive impact on the spirituality of nursing students, that they feel confident in meeting the spiritual needs of patients. Fulfilling patients spiritual care needs has a positive impact on patient health and can also improve their quality of life (Nugrahini et al., 2024). Several studies have shown an increase in satisfaction whenever there are efforts to fulfil holistic care with spiritual care for patients (Tan et al., 2020).

Increasing patient satisfaction with nursing care services by fulfilling bio, psycho, social and This includes fulfilling patients spiritual needs (Elasari et al., 2023). A wide range of factors contribute to patient satisfaction, among which age, In this study, the average age of students was 19 years and the age of patients was 45 years. At this adult patient age, they were able to follow and understand the instructions and information given by students. and educational background are particularly significant, Of the patients, 33% had primary education and 67%

had secondary and higher education. Formal education is a benchmark for patient understanding in receiving information.

Adult patients tend to demonstrate greater cognitive maturity, enabling them to make well-reasoned decisions and act with a clear understanding of what is beneficial for their well-being. Moreover, individuals with higher educational attainment are generally more adept at seeking health-related information, comprehending medical guidance, and adhering effectively to healthcare instructions. Thus, educational background serves as an essential determinant in facilitating patients' ability to acquire, process, and apply new health knowledge provided by healthcare professionals (Richa Yuswantina, Niken Dyahariesti, Nur Laeli Fitra Sari, 2019). Hospitals should involve Islamic scholars (Taylor et al., 2023) and collaborate with spiritual leaders (Klimasiński, 2021).

The application of spiritual care to patients is a necessity in nursing. The needs for spiritual care are experienced by all patients, not only in inpatient rooms but also in critical care units (Lucchetti, 2022). In practice, the spiritual care provided by students also involves nurses and families. Spiritual services are provided based on patient needs, spiritual support from the patient's family, and spiritual support from medical personnel (Pasole & Sobirin, 2023). The spiritual care actions carried out by nursing students also help patients worship during their illness and provide guidance with prayers for safety and health at Islamic boarding schools. The availability of worship guidelines, a recovery prayer, and Quran recitation, which are considered comprehensive and practical by nurses and patients (Wisuda et al., 2024). It has been proven that improving patients spirituality is effective in supporting their recovery (Sinanto et al., 2023). It also improves sleep quality and spiritual health (Yousofvand et al., 2023). Patients spiritual well-being also depends on the competence of nurses in providing spiritual care (Bangcola, 2022).

The implementation of meeting patient needs by carrying out Islamic values, such as greetings, friendly, empathy, caring and sincere service to patients, and reminding them to pray five times a day (Muhammad Farhan Hadytiaz, KZulfitriani Murfat, Nur Fadhillah Khalid, Nasrudin Andi Mappaware, Shulhana Mokhtar, Nur Isro, 2022). Spiritual guidance such as teaching how to do ablutions and how to pray. The most common way nurses fulfil these needs is by leading a communal prayer (Mokh. Sujarwadi, Mukhammad Toha, Ida Zuhroidah, 2023). Self-esteem also increases (Karimi, Roya; Mousavizadeh, Ruhollah;

Mohammadirizi, Shahla; Bahrami, 2022). Patient satisfaction with the services provided is a key strategy for promoting religious-based hospitals, and it is also important to socialize these services (Sumanti & Mandagi, 2022). and increased patient comfort (Keivan et al., 2019).

CONCLUSIONS

Based on the research results above, there is a correlation between the spiritual care abilities of nursing students and the satisfaction of patients who receive their care. The academic implications of this research are strengthened by regular training, and this training can be developed and made into a learning curriculum in nursing study programs. Meanwhile, for practical students, a module model can be developed and is also needed for nurse training in hospitals. Limitations in this study are the relatively similar age of patients, and only in the Islamic religious group. Recommendations for further research are needed to explore the motivations and perceptions of patients about performing religious rituals when they are sick, in a larger number of patients and varying patient ages, as well as the development of modules for other religions.

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