

# Hubungan dukungan sosial, spiritualitas, dan stres terhadap beban keluarga dan kenyamanan pasien kanker di dua rumah sakit di Jakarta = Relationship between social support, spirituality, and stress towards the burden of family caregivers and the comfort of cancer patients in two hospital in Jakarta

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## Abstrak

Tujuan: Penelitian bertujuan untuk menilai hubungan antara dukungan sosial, spiritualitas, dan stress terhadap beban keluarga dan kenyamanan pasien kanker. Metode: Desain penelitian yang digunakan adalah cross sectional dengan teknik purposive sampling, melibatkan 106 keluarga dan 106 pasien kanker. Penelitian ini menggunakan lima instrumen yaitu: Multimodal Scale of Perceived Social Support (MSPSS), Functional Assessment of Chronic Illness Therapy Spiritual Well-Being Scale (FACIT-sp), Perceived Stress Scale (PSS-10), Caregiver Reaction Assessment Scale (CRA), dan kuesioner kenyamanan pasien kanker. Hasil: Penelitian ini menunjukkan bahwa terdapat hubungan yang signifikan antara dukungan sosial dengan beban keluarga ( $p$  value 0.030), spiritualitas dengan beban keluarga ( $p$  value 0,000), dan stress dengan beban keluarga ( $p$  value 0.024). Stadium kanker tidak memiliki hubungan yang signifikan dengan kenyamanan pasien kanker ( $p$  value 0.080). Kesimpulan: Dukungan sosial, spiritualitas, dan stress berpengaruh terhadap beban keluarga. Diperlukan intervensi terkait dukungan sosial, spiritualitas, dan menagamen stress untuk menurunkan beban keluarga pasien kanker.

.....To determine the relationship between social support, spirituality, and stress towards the family caregivers burden and patients comfort. Method: Cross sectional was used. Purposive sampling technique involving 106 family caregivers and 106 cancer patients. This study utilized five instruments: Multimodal Scale of Perceived Social Support (MSPSS), Functional Assessment of Chronic Illness Therapy Spiritual Well-Being Scale (FACIT-sp), Perceived Stress Scale (PSS-10), Caregiver Reaction Assessment Scale (CRA), and instrument for cancer patients comfort. Result: There was a significant relationship between social support and family caregiving burden ( $p$  value 0.030), spirituality and family caregiving burden ( $p$  value 0,000), stress and family caregiving burden ( $p$  value 0.024). There was no significant relationship between cancer stage and patients comfort ( $p$  value 0.080). Conclusion: Social support, spirituality, and stress affect the family caregiving burden. It need intervention in social support, spirituality, and stress management to decrease the family caregiving burden.