

## **JURNAL KEBIDANAN**

**p-ISSN:** 2089-7669 ; **e-ISSN:** 2621-2870





## **Spiritual Needs of Pregnant Women**

Sri Wahyuni<sup>1</sup>, Henik Istikhomah<sup>1</sup>, Murwati<sup>2</sup>

<sup>1</sup>Department of Midwifery, Poltekkes Kemenkes Surakarta, Indonesia

<sup>2</sup>Department of Pharmacy Poltekkes Kemenkes Surakarta, Indonesia

Jl. Ksatrian no 2 Danguran Klaten, Jawa Tengah, Indonesia

Corresponding author: Sri Wahyuni Email: sriwahyuni.polkesta@gmail.com

Received: September 14th 2023; Revised: December 18th 2023; Accepted: April 30th 2024

### **ABSTRACT**

The pregnancy period is a condition that makes the mother's life more meaningful and the use of spirituality as a strong coping mechanism, thus it is necessary to provide services to increase the mother's spirituality starting from the pregnancy period. The aim of this research is to identify the spiritual needs of pregnant women. This research is qualitative using descriptive method. Data collection with focus group discussions with clergy from five religions (Islam, Christianity, Catholicism, Hinduism and Buddhism) and the midwives based on the Patients Spiritual Needs Assessment Scale. Data was analyzed using conventional content analysis. Spiritual needs based on spiritual informants were identified as follows: patience, meaning that pregnant women are able to endure things they don't like, discomfort during pregnancy and continue to try with a pleased and pleased heart and surrender to God. Gratitude means that as a pregnant mother she expresses gratitude to God, does not complain and expresses feelings of relief, joy and praise to God and doing good for what she has. The pleased is interpreted as meaning that pregnant women can accept everything that happens happily and realize that everything that happens is God's will. The ability to learn lessons means that pregnant women can use the condition of pregnancy as a lesson and take advantage of it and then use it as a basis for moving on in life. The results of consultation with language experts found that the answer options used a Likert scale, the content was related to the concept of pregnancy and spiritual concepts, several items were made unfavorable as a control function. The results of identifying spiritual needs are used as the basis for proposals to improve holistic midwifery care.

#### Keywords: spiritual needs; pregnant women

## Introduction

The pregnancy period is a condition that makes the mother's life more meaningful and the use of spirituality as a strong coping mechanism, thus it is necessary to provide services to increase the mother's spirituality starting from the pregnancy period. Themes that describe spirituality include the use of elements such as realizing one's purpose, feeling connected to God, oneself, others, nature, the search for wholeness, the search for hope or harmony, belief in a higher being or feeling the meaning that life is beyond material things, become aware of activities that provide meaning and value to others.

Holistic midwifery care has a fundamentally important role in optimizing spiritual elements and

developing the resources that the subject already has as an effort to improve maternal health, by paying attention to the spiritual needs of pregnancy for the development of midwifery services. A spiritual adaptive response is developed through the concept of realistic hope, being resilient and patient and being good at taking lessons[1].

Research on the assessment of spiritual needs in kidney failure patients found that the need was to get guidance beyond one's own strength, to pray, to be able to forgive oneself and others, to be grateful, to find meaning in suffering and to feel connected to the world [2]. Several studies on the spiritual needs of patients have been conducted, especially on patients with chronic and terminal illnesses, HIV and high-risk pregnancies. Research on the assessment of spiritual needs in chronic kidney

patients has proven that by assessing spiritual needs using the Assessing a Patient's Spiritual Needs (APSN) instrument, it was found that the highest needs were found on the divine dimension with a scale value of  $\leq 2$ , namely the need to obtain guidance outside of one's own strength of 80.76. %, and the need for prayer is 76.92%, the Resolution/death dimension is the need to be able to forgive oneself and others at 80.76%, the hope/peace/gratitude/positivity dimension is the highest need for the need to be grateful at 78.84%, the Meaning/purpose dimension has the highest need for finding meaning in suffering at 75%, the love/belong/respect dimension has the highest need for feeling connected to the world at 75%, the Appreance of Beauty dimension for each need is only below 50%[2].

Research on the psychometric spiritual needs assessment scale for patients with cancer, found that the spiritual needs scale for cancer patients can measure various aspects of spiritual needs and is reliable and valid. It is recommended that the scale for assessing the spiritual needs of patients with cancer be used in different populations of cancer patients separated by gender, age, type of cancer, and stage of cancer and that the spiritual needs of these patients be determined. Also, the designed scale was validated elsewhere and with different cultural conditions[3].

There has been no research on needs assessment in normal pregnancies along with the increasing addition of spiritual aspects in midwifery services. Based on the description above, we encourage researchers to conduct cultural and local wisdom-based spiritual needs assessment research that is needed by pregnant women so that they can accept their pregnancy and the conditions they face with patience, gratitude, joy, and good at taking lessons. The results of the assessment are then used as material for developing spiritual instruments for normal pregnant women in general.

#### Methods

The aim of this research was achieved with a qualitative design with descriptive methods, through focus group discussions (FGD) to explore the spiritual needs of pregnant women. FGD was used to identify spiritual needs from the perspective of clergy and midwives to obtain a detailed description of spiritual needs. The FGD was guided by referring to the spiritual needs instrument using the Patients Spiritual Needs Assessment Scale (PSNAS)[3] which is referred to identify the spiritual needs of pregnant women.

The sampling technique used in the research was purposive sampling, namely clergy and midwives were asked to become FGD informants. A total of 5 clergy participated in this research consisting of 5 religions including Islam, Christianity, Catholicism, Hinduism and Buddhism. A total of 8 midwives were willing to become FGD informants, consisting of Muslim, Christian and Catholic midwives. The FGD was conducted on 21 – 22 August 2023. The results of the interviews were recorded and field notes were made.

The next process were to validate a language expert to determine the suitability of the language used in formulating the results of identifying spiritual needs. Validation with language experts was carried out on September 6 2023. This research took place at the Klaten Regency Regional Health Center. Test the data using the general analysis approach in the form of inductive, then the next stage becomes deductive. This research has passed the ethical test by the Surakarta Ministry of Health Polytechnic Ethics Committee number DP.04.04/F.XXV.1/827/2024.

#### **Results and Discussion**

Identification of spiritual needs began by conducting FGDs with 5 religious clergy and FGDs with 8 midwives. The results of identifying the spiritual needs of pregnant women with clergy from the five religions became material for FGDs with midwives. Table 1 explains that the aspects in the instrument correspond to the five religions. Islamic clergy added indicators to provide solace for the family. Buddhist clergy add indicators of the desire to live an independent life. Hindu spiritualists add indicators to reflect and evaluate themselves. So, it can be concluded that the spiritual needs contained in the instrument are in accordance with the clergy of the five religions.

Based on table 6, it can be seen that the aspects in the instrument are in accordance with interviews with midwives. Midwife informants added indicators of a conducive place, a safe and comfortable place, ritual activities such as three-month pregnancy ceremonies, seven-month pregnancy ceremonies and baby showers. Indicators of issues leading up to delivery combined with statements of worry. Midwife informants added indicators of positive thinking. Based on table 6, it can be concluded that the spiritual needs contained in the instrument are in accordance with the midwife informants.

# Table 1. Indicators of spiritual needs of pregnant women based on spiritual informant sources from 5 religions

Indicators of the spiritual needs of pregnant women based on spiritual informant sources from 5 religions

More loved by the family

Talk to other people about your fears and worries/anxiety

Concern from someone in our environment (such as a religious leader)

Reflect on your previous lifestyle (including eating patterns, rest, activities) to improve your pregnancy so that you become healthier

Unite (enjoy) the beauty of nature

Living in a place that is conducive to supporting pregnancy

Finding inner peace in pregnancy

Finding meaning in pregnancy from the discomforts of pregnancy

Talk to others about the meaning of pregnancy in life

Turn into a person full of love

Give something to yourself

Apologize to others

Pray and ask others for prayers

That the family prays for the best for you

Pray the best for yourself

Participate and be enthusiastic in religious ceremonies

Believe that your life is meaningful and has meaning

Get involved again by your family in various matters

Gratitude or thankfulness

Issues encountered before delivery

For friendship and inner bonds with fellow pregnant women

Adequate care and fulfillment of pregnancy needs

To understand the process of pregnancy and fetal development

#### Table 2.

## Indicators of spiritual needs of pregnant women based on Islamic clergy informant sources

Indicators of spiritual needs of pregnant women based on Islamic clergy informant sources

Becomes solace (good news) for the family

Read the holy book

Get closer to the majesty of the highest power (the Oneness of God)

Want to find the meaning of pregnancy and the discomfort you are experiencing

Want to talk/assure that you can have a safe pregnancy and delivery

Increase good deeds

Prepare a good name for the baby

Prepare for all possibilities that occur during pregnancy and childbirth by surrendering to God

Almighty

Always consume food that is halal and good for pregnancy

Pray for a healthy baby

Diligently perform worship

To maintain a positive outlook on pregnancy

Experiences related to feelings of joy and happiness

#### Table 4.

## Indicators of spiritual needs of pregnant women based on Hindu spiritual informant sources,

Indicators of spiritual needs of pregnant women based on Hindu spiritual informant sources

Forgive someone from a different time of your life

Confer with family

Want to live an independent life (without feeling inferior) with other people

Sympathy and empathy

Experience in appreciating the beauty of sound (music, spiritual songs, meditation rhythms, classical music)

Mental and spiritual readiness in facing childbirth

#### Table 5.

## Indicators of spiritual needs of pregnant women based on Buddhist spiritual informant sources

Indicators of spiritual needs of pregnant women based on Buddhist spiritual informant sources

Feeling perfect as a woman and mother

Share life experiences with others

To reflect and evaluate/reflect on yourself

To live an ethical and moral life

Ethics/culture relating to recommendations/prohibitions on pregnancy between husband and wife

#### Table 6.

## Indicators of spiritual needs of pregnant women based on informant sources

Indicators of spiritual needs of pregnant women that need to be combined are based on midwife informant sources

Unite (enjoy) the beauty of nature

Talk to others about the meaning of pregnancy in life

Pray and ask others for prayers

Read the holy book

Feel connected (close) to family

Believe that your life is meaningful and has meaning

Get involved again by your family in various matters

Want to find the meaning of pregnancy and the discomfort you are experiencing

To reflect and evaluate/reflect on yourself

Experiences related to feelings of joy and happiness

Increase good deeds

Issues encountered before delivery

Pray for a healthy child

To live an ethical and moral life

Prepare for all possibilities that occur during pregnancy and childbirth by surrendering to God

Almighty

Based on FGD with language experts, it was found that the answer options were made using a Likert scale with odd answer choices (5 options). The contents of the instrument were connected to the theoretical concept of pregnancy and the concept of spiritual theory, and indicators were created. These indicators are then poured into statement items. Some questions are made negative (unfavorable) for the respondent's control function in answering. The instrument needs to be equipped with a description or explanation of each item to

clarify the statement. Next, the statement items are compiled at a maximum of 40 items.

Based on literature studies, there are eight questionnaires, namely patients spiritual needs assessment scale (PSNAS), spiritual needs inventory (SNI), spiritual interests related to illness tool (SpIRIT), spiritual needs questionnaire (SpNQ), spiritual needs assessment for patients (SNAP), spiritual needs scale (SNS), spiritual care needs inventory (SCNI), and spiritual needs questionnaire for palliative care[4].

The results of this research refer to spiritual adaptive responses, namely patience, gratitude, joy and the ability to learn wisdom [5], [6]. This is in accordance with previous research stating that the scope of the dimensions of spirituality and religiosity includes welfare, beliefs, needs and distress [7]. Other research states that four reflective themes emerge: meaning and understanding; culture of birth; embodying connection and intuition; and Spiritual midwifery space/place/time. overarching theme. There are eight areas of individual transformation and action related to spirituality and birth: 1) disseminating the findings of the investigation; 2) motivate new conversations and ways of thinking; 3) remembering connections across space and time; 4) changing relationships; 5) transformational practice; 6) produces reflexivity; 7) inspire yourself and others to change, and 8) inspire creative[8].

The study results align with previous research suggesting that spiritual needs are common in an ethnically, religiously, and linguistically diverse population of cancer patients, but may differ based on cultural background. High levels of spiritual need were associated with lower levels of satisfaction and reduced perceptions of service quality. Training physicians to address patients' spiritual concerns, while taking into account cultural differences, can improve the patient care experience[9].

#### **Patient**

Patience means being able to accept or face something you don't like and continue to work steadfastly and surrender to Him. Emotional adjustment contains an element of patience. An attitude of patience can be used as a means of healing both physically and psychologically. A person can use patience to endure pain by returning all decisions to Him, so that pain becomes an effort to get closer to Him [10].

The results of the research show that patience is interpreted as acceptance of all conditions, showing compassion and sincerity and remaining calm in facing conditions, accepting with joy whatever tests Allah gives and always having a good opinion of all problems, the ability to restrain oneself and emotions regarding conditions and the ability to regulate emotions properly. how to try to suppress the ego [11].

Most participants had positive experiences and attitudes towards pain during childbirth which were influenced by cultural, contextual and religious factors [12]. The literature increasingly discusses how spirituality is a concern for human well-being. Although spirituality is still part of the Copyright @2024, JURNAL KEBIDANAN, http://ejournal.poltekkes-smg.ac.id/ojs/index.php/jurkeb/index

current discourse on childbirth. Spiritual care guidelines are currently being developed. Yet spiritual care guidelines do not seem to recognize the experience of birth as a spiritually meaningful experience[13].

## Gratitude

Gratitude contains the meaning of gratitude, not complaining, a statement of feeling relieved, happy and praising Him and doing good for what is in oneself. The teaching about the human obligation to be grateful for the blessings God has bestowed on him occupies a very important position in Islamic teachings. The command to be grateful together with the command to think (remembering Allah) shows an important position.

Gratitude is divided into three parts, namely gratitude with the heart is knowing that the blessing comes from Him and no other than Him, verbal gratitude is by saying Alhamdulillah and praising Him and physical gratitude is by using every part of the body and what is given by He takes the form of worldly pleasures to increase obedience to Him, not for evil [14].

#### **Pleased**

Pleased means willing, interpreted as accepting His destiny with joy and realizing that everything that happens to a person is His will. Pleased attitude is an effort to calm the soul regarding all of Allah's decisions. Due to the loss of willingness to accept the situation, illnesses often become worse and illnesses become difficult to cure. Willingness to accept the disease that Allah determines for someone will determine the healing that Allah gives to His beloved servant. [10]. Pleased is closely related to human attitudes and understanding of His gifts and blessings.

Pleased means truly believing that what happens to us, both joy and sorrow, is for the best according to Him, and whatever He prescribes to His servants will definitely have a good impact on His servants. Pleased is related to an attitude of heart that is willing to accept what is the destiny of a person's life, because he is sure that behind all events there is wisdom and goodness.

The results of previous research state that the empathy and spiritual care of midwives is evidence that the experience of giving birth for women appears to be increasing, thereby providing a strong foundation for becoming confident mothers.[15].

#### The ability to take wisdom

The ability to learn wisdom is a deep understanding and understanding of people, things, events or situations, which results in the ability to apply perceptions, judgments and actions according

to that understanding. The ability to draw wisdom requires mastering one's emotional reactions, so that principles, considerations, experience and knowledge are used to determine actions.

The ability to learn wisdom is formed through improving knowledge, increasing patience, a sense of gratitude and a willing heart accompanied by stability of faith, strengthening oneself and appreciating meaning. The ability to learn wisdom is felt after someone experiences an event that is considered unusual, such as pregnancy and giving birth to a child, or an unpleasant event such as a disaster [1].

The ability to learn lessons is strengthened by past experiences, where a person takes lessons from experiences or events that have been experienced. Giving birth to a child is a biological event for women to develop humanity on this earth, but giving birth itself is not easy, but contains various risks and problems. The event of giving birth itself is His nature and the process has been regulated, determined and under His knowledge, and He believes that women are chosen to be able to get pregnant, give birth and breastfeed.

The ability to learn wisdom creates maturity in thinking, self-confidence, the memory to always be grateful for all His gifts, as well as new understanding and knowledge so that a mother becomes motivated in facing pregnancy, childbirth and postpartum, and ultimately mothers in the perinatal period have better mental health.

The results of this study differ from previous research regarding the content validity of items related to social and spiritual dimensions, it was found that the responses could be understood by almost all respondents, the meaning given to these items was expressed in the themes: maintaining personal identity and autonomy, resilience, letting go, feel balance in life, as well as death and the afterlife[16].

#### Conclusion

Spiritual needs based on FGD with clergy from 5 religions (Islam, Christianity, Catholic, Hindu and Buddhist) and with midwives (Muslim, Christian and Catholic), were identified as follows: Patience, meaning that pregnant women are able to endure something they don't like, discomfort during pregnancy and continue to try with a pleased and pleased heart and surrender to Him. Gratitude means that as a pregnant mother she expresses gratitude to Him, does not complain and expresses feelings of relief, joy and praise to Him and does good for what she has. Pleased is interpreted as

meaning that pregnant women can accept everything that happens happily and realize that everything that happens is His will. The ability to learn wisdom means that pregnant women can use the condition of pregnancy as a lesson and take advantage of it and then use it as a basis for moving on in life.

#### Acknowledgements

The researcher would like to thank the clergy of 5 religions from the Ministry of Religion of Klaten Regency, midwives and Indonesian language experts who were willing to become informants.

#### References

- [1] Nursalam, "Model Asuhan Keperawatan Terhadap Peningkatan Adaptasi Kognisi dan Biologis pada Pasien Terinfeksi HIV," *J. Ners*, vol. 6, no. 2, 2011.
- [2] F. Himawan, A. Anggorowati, and S. Chasani, "Asesmen Kebutuhan Spiritual Pasien Penyakit Ginjal Kronik Yang Menjalani Hemodialisa Dengan Instrumen APSN dan SPNQ," *J. Holist. Nurs. Sci.*, vol. 6, no. 1, pp. 1–12, 2019, doi: 10.31603/nursing.v6i1.2053.
- [3] K. Hatamipour, M. Rassouli, F. Yaghmaie, K. Zendedel, and H. Alavi Majd, "Development and psychometrics of a 'spiritual needs assessment scale of patients with cancer': A mixed exploratory study," *Int. J. Cancer Manag.*, vol. 11, no. 1, 2018, doi: 10.5812/ijcm.10083.
- [4] R. Seddigh, A. A. Keshavarz-Akhlaghi, and S. Azarnik, "Questionnaires measuring patients' spiritual needs: A narrative literature review," *Iran. J. Psychiatry Behav. Sci.*, vol. 10, no. 1, pp. 1–8, 2016, doi: 10.17795/ijpbs-4011.
- [5] S. Wahyuni, Anies, A. Soejoenoes, S. T. Putra, and M. A. Syukur, "Spiritual Dhikr Reduces Stress and Depression Symptom on Primigravidas," *Pakistan J. Med. Heal. Sci.*, vol. 12, no. 3, pp. 1368–1371, 2018.
- [6] S. Wahyuni, Anies, A. Soejoenoes, and S. T. Putra, "Psychoeducation Dzikr reduces perceived stress and postpartum depression syndromes on primiparous women," *Indian J. Public Heal. Res. Dev.*, vol. 10, no. 3, pp. 946–951, 2019.
- [7] P. Austin, J. Macdonald, and R. Macleod, "Measuring spirituality and religiosity in clinical settings: A scoping review of

Copyright @2024, JURNAL KEBIDANAN, http://ejournal.poltekkes-smg.ac.id/ojs/index.php/jurkeb/index

- available instruments," *Religions*, vol. 9, no. 3, pp. 1–14, 2018, doi: 10.3390/rel9030070.
- [8] S. A. Crowther *et al.*, "Spirituality and childbirth: An international virtual cooperative inquiry," *Women and Birth*, vol. 34, no. 2, pp. e135–e145, 2021, doi: 10.1016/j.wombi.2020.02.004.
- [9] A. B. Astrow, G. Kwok, R. K. Sharma, N. Fromer, and D. P. Sulmasy, "Spiritual Needs and Perception of Quality of Care and Satisfaction With Care in Hematology/Medical Oncology Patients: A Multicultural Assessment," *J. Pain Symptom Manage.*, vol. 55, no. 1, pp. 56-64.e1, 2018, doi: 10.1016/j.jpainsymman.2017.08.009.
- [10] M. A. Syukur, "Sufi Healing: Terapi dalam Literatur Tasawuf," *Walisongo*, vol. 20, no. 2, pp. 391–412, 2012.
- [11] A. D. Putri and Lukmawati, "Makna Sabar Bagi Terapis (Studi Fenomenologis di Yayasan Bina Autis Mandiri Palembang)," *PSIKIS-Jurnal Psikol. Islam.*, vol. 1, no. 1, pp. 47–58, 2015.
- [12] Z. Taghizdeh, A. Ebadi, M. Dehghani, M. Gharacheh, and P. Yadollahi, "A time for psycho-spiritual transcendence: The experiences of Iranian women of pain during childbirth," *Women and Birth*, 2017.
- [13] S. Crowther and J. Hall, "Spirituality and spiritual care in and around childbirth," *Women and Birth*, vol. 28, no. 2, pp. 173–178, 2015, doi: 10.1016/j.wombi.2015.01.001.
- [14] M. M. Basri, 24 jam Dzikir dan Do'a Rasulullah (berdasarkan Al-Qur'an dan Al-Hadist). Surakarta: Biladi, 2014.
- [15] S. Moloney and S. Gair, "Empathy and spiritual care in midwifery practice: Contributing to women 's enhanced birth experiences," *Women and Birth*, pp. 6–11, 2015, [Online]. Available: http://dx.doi.org/10.1016/j.wombi.2015.04. 009
- [16] S. de Vries, T. Lormans, E. de Graaf, C. Leget, and S. Teunissen, "The Content Validity of the Items Related to the Social and Spiritual Dimensions of the Utrecht Symptom Diary-4 Dimensional From a Patient's Perspective: A Qualitative Study," *J. Pain Symptom Manage.*, vol. 61, no. 2, pp. 287-294.e2, 2021, doi: 10.1016/j.jpainsymman.2020.07.036.