The Investigation: The Amount Quality of Life and Quality of Life Experience and Spiritual Needs of the Elderly in Teratai and Myria Nursing Homes; Mix Methode

Suzanna and Trilia

Abstract —The increasing life expectancy of the elderly can not be separated from the problem that consists of various health problems, social, psychological, economic and spiritual will affect (Quality of Life). Quality of life is an individual's perception of life in the community in the context of culture and value system, and is strongly influenced by the physical, psychological and level of independence, and spiritual needs of the environment (WHOQOL, 2014). This research use two methode are quantitative; with descriptive and qualitative descriptive phenomenological study approach. Researchers will determine the sample information with purposive sampling. The number of participants ranged 6 in and 30 respondents in two social institutions elderly Teratai and Myria Palembang with in deep interview. Overall after interview all participant there are five theme about quality of life and spiritual needs: socialization in Nursing Homes was very good, the achieve of quality of life was optimum, spiritual of God was very powerfull, the miracle of God was very extraordinary, being soul of condition toward die. According to the quantitative the number of reachable quality of life is 70% elderly people. Overall the five of theme from result was connected and similiar with quality of life theory and Spiritual Consept ; Leinenger trancultural Theory (1985) was decribes abaout holistic dimension "Cultural Care Wordlview". One of important factors was an overview about "Well being or Rest in Peace". The only theme about socialization in nursing homes was very good, this theme was contradict with aging theory especially the change of spiritual.

Keyword: Elderly, Quality of Life, Spiritual Needs

I. INTRODUCTION

A. Backgrounds

The indicator progress of a country can be seen from the increase in life expectancy of the population that is increasing the life expectancy of individuals will increasingly also human qualities. Quality of life is determined by a health care can not be separated from the increasing development of science and technology aimed at improving social welfare and quality of life (Dharmojo, 2011; Suardiman 2011; Nugroho, 2006). It is also not known individuals with advanced age or older. Older people is an individual who enters the final stages of a human life span is very closely related to the aging process that occurs naturally with age classification over the age of 60 years (Miller, 2004; Stanley, 2005; WHO, 2010).

The growth of the elderly population has increased quite rapidly when compared with other age groups. The number of elderly in the world ranges from 600 million (11%) and is expected in 2025 increased to 1.2 billion (22%) and in 2050 will be increased to 2 billion (Hutapea, 2005; Suardiman, 2011; National Commission for the Elderly, 2011). In some developing countries the increase in the elderly population is evident in the 2025 range from 840 million (70%) of the total population, in 2050 estimated the number increased to 1.6 billion (80%) of the total population (National Commission for the Elderly, 2011). Indonesia is a developing country which ranks fourth after China, India and Japan which has the highest number of senior citizens. In the number of elderly people in Indonesia in the period 1990-2025 belong to the fastest in the world. The elderly population over 60 years in 2015 is estimated at 24.44629 million people or about 10% of the total population (CBS, 2012).

An increase in the growth of the elderly population will be followed by an increase in life expectancy. The increasing life expectancy of the elderly can not be separated from the various problems faced by the elderly consisting of health problems, social, psychological, and spiritual economy will have an impact on (Quality of Life) quality of life (Suardiman, 2011; WHO, 2014). Quality of Life is an individual's perception of life in the community in the context of the culture and value system and greatly

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influenced by the physical, psychological and level of independence, spiritual and environmental needs (WHOQOL, 2014). One of the aspects that affect the quality of life of the elderly is a spiritual necessity. Spiritual interpreted as meaning, transcendence, hope, love, quality, existence and harmony and closeness between himself with God, nature, and others (Hawari, 2009; Potter & Perry; 2007).

Based on research conducted Idler, et al (2009) stated that the elderly who have good spiritual fulfillment will have a positive impact on social relations, health aspects and psychological aspects that affect the achievement of the quality of life of the elderly. This is similar to the research conducted by Rusono (2009) which states that an understanding of the spiritual needs of the elderly as well as spiritual benefits for the improvement of working spirit, the spirit of worship and improve the quality of life of the elderly. Tucker (2012) illustrates that the spiritual connect people with God, so that the elderly feel peace, happiness, motivation towards kindness in dealing with various issues of life both physical and psychological, as well as provide opportunities for seniors to socialize with colleagues. However, the quality of life of the elderly are not all the same as Research conducted by Elvinia (2009) elderly people living at home physical and psychological health is better than the elderly who live at home Elderly. This is, because they have difficulty difficulty adapting to feel stress, loss of control over his life, and loss of self-identity that will indirectly affect the quality of life.

Pschiatry Nurse within the scope of the community has a very important role in helping the elderly to achieve the quality of life through spiritual fulfillment. Final results are expected from the achievement of the quality of life of individuals can achieve a good quality of life so that the elderly can enjoy life on the final phase of the development stage and avoid stress and depression and can die in peace according to the theory Leinenger (end of life). In fact it is sometimes still neglected by health care providers who only focus less on medical services and psychological and spiritual services. This is related to the shape of health care provided in some social institutions and community Tresna Elderly.

Various phenomena that occur need to do more research to see how far the quality of life of the elderly who are also influenced by the spiritual aspect, so it can be input for health care providers to be able to pay attention to various aspects of health care but especially the spiritual aspects.

B. Significance of proposed project

This project has significan to explore and make evidence a theory by Madeline Leinenger about Rest in

Peace combine with Quality of Life from WHO. The final result is expected to achieve a good quality of life so that the elderly can enjoy life in the final phase of the development stage and avoid the stress and depression can die in peace according to the theory of Leinenger (Rest in peace).

C. Aims / purposes:

This study aims to gain experience of quality of life and spiritual needs of the elderly who settled in the Home nursing of elderly in Palembang. After that can make a specific assessment about spiritual needs for six religion in Indonesia which it relegated by Madeline Leninger Theory Rest in Peace and a consept Quality of Life by WHO. In academic research aims to provide modifications to the nursing education curriculum that focuses on life in the area of nursing and gerontic community to pay more attention to the spiritual needs that impact the quality of life of the elderly as well as helping the elderly to avoid problems such as stress, depression and even suicide.

II. MATERIAL AND METHODS

A. Material:

This research use two material first a guiedline of interview quality of life by WHO to explore the experience reach out for quality of life and spiritual needs. Second a quesionare Quality of Life by Nottingham

B. Methods

Research methods there are two methode study was qualitative with phenomenological study and quantitative descriptive analytic.

Researchers determine the sample information with purposive sampling was used to determine the participants and respondents with certain considerations that are considered the most widely know associated with extracting information.

III. RESULT

Table I The Frequency of Age by Elderly Respondents in Nursing Homes Teratai

Number	Clasification	Frequnecy	Percent
1	Old	19	64
2	Very Old	11	36
	Total	30	100

According above table, it show Mayority of age elderly Respondent on old classification about 19 (64%).

Table II The Frequency of Sex by Elderly Respondents in Nursing Homes Teratai

Number	Clasification	Frequnecy	Percent
1	Man	12	40
2	Woman	18	60
	Total	30	100

According above table, it show Mayority of sex elderly Respondents woman classification about 18 (60%).

Table III The Frequency of Education by Elderly Respondents in Nursing Homes Teratai

Number	Clasification	Frequecny	Percent
1	School	1 9	64
2	No School	11	36
	Total	30	100

According above table, it show Mayority of education elderly Respondents school classification about 19 (64%)

Table IV The Frequency of Job History by Elderly Respondents in Nursing Homes Teratai

Number	Clasification	Frequency	Percent
1	Work	19	64
2	No Work	11	36
	Total	30	100

According above table, it show Mayority of job history elderly Respondents work classification about 19 (64%).

Table V The Frequency of Ilness by Elderly Respondents in Nursing Homes Teratai

Number	Clasification	Frequnecy	Percent
1	Illnes	19	64
2	Not Illnes	11	36
	Total	30	100

According above table, it show Mayority of Ilness elderly Respondents ilness classification about 19 (64%).

Table VI The Frequency of Spiritual Activity by Elderly Respondents in Nursing Homes Teratai

Number	Clasification	Frequnecy	Percent
1	Routine	15	50
2	Seldom	15	50
	Total	30	100

According above table, it show Mayority of spiritual activity elderly Respondents routine classification about 15 (50%)

Table VII The Frequency ability of Spiritual Activity by Elderly Respondents in Nursing Homes Teratai

Number	Clasification	Frequnecy	Percent
1	By self	1 6	54
2	With help	14	46
	Total	30	100

According above table, it show Mayority ability of spiritual activity elderly Respondents by self classification about 16 (54%)

Table VIII The Frequency of Quality of Life by Elderly Respondents in Nursing Homes Teratai

Number	Clasification	Frequnecy	Percent
1	Reachable	21	70
2	Not Reachable	9	30
	Total	30	100

According above table, it show Mayority Quality of life elderly Respondents Reachable classification about 21 (70%)

The data analysis by Qualitative

P1: I am very happy living here...without husband living alone and no enemy here....

P2: I am not married but i needed by many people are already.....

P3: Alhamdullilah..many friend in here...

P4: I am happy even though i live alone...many friend...

P5: I am happy...... there is no enemy......

P6: I remain unhappy, i remain unhappy, have to stay alive despite a person who loved no more but God?



Theme 1: The Socilazation in Nursing Homes was very good

P1: I was feel successful, better than past time, my purpose is optimum

P2: I had just, have no desire nothing, I have been happy with this condition...

P3: I prefer living in nursing homes..., no the other onejust relax my life

P4: I was happy living in nursing homes....there is no more life purpose, just enjoy it......

P5: I am happy here let alone can help to healthy....

P6: I feel better living in the nursing homes could serve all the needs...no more that i want my quality life is optimum..........



Theme 2: The achieve of quality of life was optimum

- P1: it was just own will, God Yesus always give a peacefull.....my spirit of Yesus more and more strong......
- P2: I am doing Misa together with all freind.....prayer...have to go to Church together....Everyday Yesus....give me powerfull was very strong....
- P3: I always pray five of time, Allah SWT guideance me...and give me spirit was deep and strong.....
- P4: Praying, going to mosque together.....Allah SWT everyday give me peacefull and powerfull was very strong.......
- P5: My spiritual more and more very strong and Allah SWT is everything......
- P6: Pasting, prayer, listening speech by Ustad on Mosque....overall...make my spiritual,,,,was strong.....



Theme 3: The spiritual of God was very powerfull

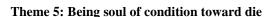
- P1: Yesus....give me the miracle was very extraordinary with my negative experience Yesus help me from Pastur Said on Church...
- P2: Yesus...help my family...especially my brother was chonic disease ten years ago....the miracle was: Yesus give me the power to care my brother and guide him until died.....
- P3: I have miracle from Allah SWT within my dream....miracle is my knee not feel so pain....eventhough doing spiritual activieties....it so extraordinary.....
- P4: Allah SWT give me miracle about the good sound if i do to reading a holy Al QURAN everyday.....
- P5: My Miracle from Allah SWT is massage some people if there was some fracture or dislocation on knee, hand and foot......so extraordinary......
- P6: Eventhough...my eyes blind...but i can walk without help nurses and friend....it is my miracle from Allah SWT.....



Theme 4: The miracle of God was very extraordinary

P1: Every people will be death, so that i must prepare itmy soul has already if time will arrive.....

- P2: Yesus....said: Death is certainly, now....I have some prepare like: prayer, helping much peolpe, fasting, i am already if i will be death on this place....
- P3: If i death in here, i am alreadybecause i have prepare
- P4: I am very old, there no family....my soul will meet a dead.....i am ready....my prepare: fasting, prayer, reading al quran, listen speech from Ustad.....
- P5: Since I living here....my soul was already about Death...because is certainly...
- P6: If someone dead....alone....but it will be happen ...i am prepare it.....



IV. DISCUSSION

Theme I: The Socilazation in Nursing Homes was very good

The socialization life in the institution based on interviews and analysis of data has been obtained on the theme of the institution in life. Based on the theory of the quality of life WHO (2014) outlining five domains measurement of quality of life of individuals and one of them talk about social relationships is an important element in the achievement of individual quality of life.

Domains a social environment can have a positive impact psychologically satisfied against elderly in the form of a sense of comfortable, as well as the interaction of proximity of warmth in a social environment and esteem. Based on the results of research as well as theory and were related to the concept of senior people and the quality of life then the researcher having the assumption that socialization of life from the institution is one of the aspects the achievement of the quality of life for the elderly

The theme about the socialization of life from the institution can emerge from a component or domains social relationships in the theory of the quality of life WHO (2014). Social relations will continue to be lived by seniors at phase of her life that cannot be separated in the condition and any situation. This is not there is a difference for the socialization of life from the institution or the same community perceived by seniors. The theme concerning socialization life from the institution this is a little opposed to the theory regarding the changes social.

The existence of social change that was felt by seniors as: a change in the status and the role of good in the group

and the community, or the acts of lost a living spouse or lose the support system as neighbors and friends (Ebersole & amp; Hees 2010). A result of the existence of social changes will make for elderly cenderunag withdraw; limiting activity or social. Activity. This condition in accordance with Disengagement theory by Cumming Henry (1961) Meiner 2006 explain that aging someone then gradually disengage from social life of a social environment (Meiner, 2006). For the elderly in more likely to interact with age similiar because a parallel in thought and means adaptation, of hope and desire.

This is consistent with the theory of stratification age as suggested by Marshall (1996 Ebersole & Hess). The presence of the difference between a theory about social changes with the results of research obtained the theme in the form of socialization life in shelters. It was because the differences in health status and shelter for elderly. Overall all participants having the status of health have the disease and yet do not hinder social activities has the routine on a scheduled shelters. The abode of also can affect the lives for the elderly especially for a social environment.

Theme II: The achieve of quality of life was optimum

According quantitative result, it show Mayority Quality of life elderly Respondents Reachable classification about 21 (70%) from 30 respondents.

According to the interviews as well as data available for analysis that has been carried out the theme was the achieve of quality of life was optimum. According to the theory the quality of life of WHO: 2014) there are six domains the achievement of the quality of life of individuals: phsycal helath, pschological health, independent level, social relationship, environment, spiritual and religion.

Based on Ventegodt (2003) the quality of life means life is good, the level of high measure, there are 3 aspect: subjective quality of life is depend on perception, eksistensial quality of life is harmonization of each other, objective quality of life is how people can adaptation about culture and value.

According Avis (2006) there are two factors influence quality of life: 1. Sociodemografi such as sex, age, ethnic, education, job, married status. 2. Medical record, level of disease. According research by Idler 2009 on religion and quality of life on as 499 informants for the elderly who died in the 12 months after an interview in new haven of Californi. The result is overall informant getting quality of life was high level, every elderly can get quality of was satisfied.

Similiar with research by Elvinia (2006) comparative study: the quality of life widow and widower living homes and nursing homes, the result describes abaout quality of life widow and widower living nursing homes more better than living homes

Based on research by Setyoadi (2008) the difference quality of life level in elderly women at the community and nursing homes, the result explain no difference quality of life level in elderly women at the community and nursing homes.

Based on theories and research have related to the elderly has a good quality of life eventhough they living on nursing homes, because in nursing homes make them happy, can share everything, doing a positive activities. There are six domain has reach by elderly including: physical health, pschological health, level of independence, social relationship, environment, spiritual and religion. Overall elderly can balance six domains, so thats the quality of life achieve in good level.

Overall The achieve of quality of life was optimum the amount Reachable classification about 21 (70%) from 30 respondents. Eventhough, the elderly people living in nursing homes, but quality of life has been reachable with optimum.

Theme III: The spiritual of God was very strong

According data analysis it show Mayority ability of spiritual activity elderly Respondents by self classification about 16 (54%). According data analysis it show Mayority of spiritual activity elderly Respondents routine classification about 15 (50%).

According to the interviews as well as data available for analysis that has been carried out the theme was obtained for belief there is a god is so strong. According to the theory the quality of life of WHO: 2014) six domains the achievement of the quality of life of individuals and one of them was spiritual, religion and belief were elements of the important consist of: connection spiritual, purpose and meaning life, readiness and experience a miracle, wholeness and intregrasi, the power of spiritual agency peace on that self, hope and oprimisme and faith. This is in line with the definition spiritual always changes from time to time and closely related to mental and physical health.

The national interfaith coalition on aging was organized in 1971; lavretski 2010 equate spiritual welfare as an affirmation of human life namely human relations with the lord, yourself, other people and the environment. There are some words used to outline the meaning of spirituality namely, transcendent, hope, sympathy, the quality of relations, and existence (Emblen 1992 in Potter & Perry, 2009). The other

describing that gave the discussion about spirituality in covering the power themselves, purport and purpose, and knowing and become something (Burkhardt , 1994 Carpenito, 2009).

This is consistent with the research by an idler 2009 on religion and quality of life on as 499 informants for the elderly who died in the 12 months after an interview in new haven of California . A design study that used with qualitative and quantitative. Obtained the results of that for the elderly who have needs fulfillment spiritual good and optimal will give positive impact on social relations, the health aspect and the aspect of psychological impact on the quality of life for the elderly

This is further strengthened the research by Rusono (2009) said that understanding of advanced age against spiritual needs of benefits to an increase in spirit of working, the spirit of serve and improve the quality of life of advanced age. Similar with the research by Tucker (2012) depicting that spiritual human connecting with the God for the elderly so that felt this sense of peacefulness , happiness , motivation to the projected kindness in to face a range of a matter of life both physically and psychology , as well as provide opportunities for seniors to socialize with their colleagues.

The description of the specific pertaining to belief in the lord explain in a study by 2009 Wittnik et al: in a journal losing faith and using Faith: Ameicans dicsuss sprituality older african, religous activities and depression. Participants said that overall activity: pray three spiritual discussion is a form which gives poise and heart peace. The God gave help very fundamental when people feel a lot of problems and leads to depression, god help to escort the man with a very abstract but it can be felt. Is negotiating with other activities are a priest, is one way to convey a flurry of heart as well as various problems. Participants choose from the priest in discussions because of a priest can respond directly and solutions of the problem.

In line with the transcultural theory by Paula 2009 Madeline Leinenger (1985 in which talk about holistic health care from wordlview cultural dimension. The seven factors that must be considered is technological factors, philosophical and religious factors, kinship and social factors, lifeways and cultural values, political and legal factors, economic factors and educational factors. One factor that is an important component is a belief or religion that can help seniors well being or dying. Based on the description above the researchers assumed that outlines Leinenger that an individual for the elderly in all phase in his life in a holistic health dimension consisting of seven factors and one is religious belief or factors that

can deliver peace for the elderly in the heart and soul peace.

Based on theories and research have related to the elderly and the quality of life and researchers have the confidence of the God is powerful is one very important aspect is the spiritual, religion and belief in the quality of life for elderly. The description of the God there is strong confidence that is a very positive impact on lives in the house such as: elderly and heart peace calm people, faithful and spiritual power. This line as well as in accordance with the concept of the quality of life and development in the elderly. Spiritual is a basic human need for all loosed from any good health both physical and spiritual condition. Theoretically of living according to the organisation said the spiritual consisting of a direct link to the God: and the goal, the readiness and magic, and intregation.

The researchers assumed that spiritual needs obtained in the form of accept the existence of the lord is so strong on the activity for the elderly in the form of worship prayer five time, fasting month on the moon romadhon, routine quran recitation listen to ustad, follow holy mass daily reading prayers koronka, prayer rosary, prayer a chaplaincy the lord fasting month are not consumption of material enough food vegetable. This is also in line with the concept of the development of spiritual for elderly. The Spiritual change cannot be separated from the development of spiritual elderly with the development of spiritual which ripens going to be very helpful for the elderly to be able to adapt to changes that exist and play an active role and not surrender and having a goal at the late phase of life. Elderly have the kind a good spiritual will be able to accept changes and prepare will of death and avoiding the disstres spiritual.

Overall, the spiritual of God was very strong the amount spiritual activity routine classification about 15 (50%) from 30 respondents and the ability spitual activity by self classification about 16 (54%). Eventhough, the elderly people have many some ilness, but spiritual activity has been good with spiritual of God was very strong.

Theme IV: The miracle of God was very extraordinary

According data analysis it show Mayority of spiritual activity elderly Respondents routine classification about 15 (50%).

The researchers assumed that spiritual is obtained in the form of accept the existence of the lord is so strong on the activity for the elderly in the form of worship solat five time, fasting month on the moon romadhon, routine the koran recitation listen to lectures, following the holy mass daily reading prayers koronka, rosary prayer, a

prayer a chaplaincy of the lord fasting month are not consumption of material enough food to animal vegetable.this is also in line with the concept of the development of spiritual for elderly.

Spiritual change cannot be separated from the development of senior spiritual with the development of spiritual which ripens going to be very helpful for the elderly to be able to adapt to changes that exist and play an active role and not surrender and having a goal at the late phase of life.seniors have the kind a good spiritual will be able to accept changes and prepare will of death and avoiding the disstres spiritual.

A miracle was an event that occurred at an individual beyond human ability of sensing coming through various ways such as a dream meditation, prayers night, a spiritual and others. The perceived by individual is unusual perceived by some individual tucker (2010). The outlook for the other to the description on spirituality as well as events that occur to help the people in the emerging power within the self purport and purpose, and knowing and being something that is not an ordinary people (Burkhardt, 1994, in carpenito 2009).

It is also spiritual change cannot be separated from the development of spiritual for the elderly, with the development of spiritual which ripens going to be very helpful for the elderly to be able to adapt to changes that exist and play an active role and not surrender and having a goal at the late phase of life .Seniors have the kind a good spiritual will be able to accept changes and prepare will of death and avoiding the spiritual disstres (Papalia, 2008; Meiner 2006) .Spiritual change in the works felt by all the informants who experienced a unusual in the form of the magic: the help of the lord in an event that differ between each informants. This miracle affect the life patterns of the pertaining to spiritual. The form of a miracle that happens in all informants melaui: a dream , tahajud , praying in church , a chronic disease .

According to Taylor (1997 and Craven in Hamid 2009, important factors that can affect a person spiritual spiritual the development associated with the ability of someone think abstract before starting to understand and explore spiritual a relationship with the almighty. The background of ethnic and cultural impact on attitudes, confidence, value and religious activities and spiritual family, previous experience of life that is considered by someone as ordeal of the God to humans.

Life experience positive or negative experience of life both positive and negative can affect a person spiritual and otherwise also influenced by how does one define a spiritual the experience .In line with the experience acquired by all informants who experienced bankruptcy in phase in the stage of life for the elderly. The form of negative experience of life or bankruptcy among other: a lot of debt, the couple death, According to the concept spiritual change that explains about the experience of being alive is ordeal from the lord it is equal to the experience acquired by the informant as an ordeal. Ordeal from the lord passed by through a process of reflection long and activity of worship that the more powerful that informants made a comeback where they found a miracle from the lord out of the ordinary.

This is in according with the research by Idler (2009) about religion and the quality of life in 499 informants seniors who died in the 12 months after of interviews in new haven california. A design research that is used with qualitative and quantitative. Obtained the result that seniors having the fulfillment of a need spiritual good and optimal will give a positive impact on social relations, the health aspect and facets psychological who is influential on achieving the quality of life for the elderly .

Based on the results of penerlitian as well as theory and were related to the concept of senior people and the quality of life then the researcher having the assumption that a miracle from god out of the ordinary is one of a very important aspect that is spiritual, religion and belief in the achievement of the quality of life for the elderly.

According to the theory the quality of life WHO 2014) six domains the achievement of the quality of life of individuals and one of them was spiritual, religion and belief were elements of the important consist of: spiritual connection, the meaning and the purpose of life, readiness and experience a miracle, and intregrasi wholeness, the power of spiritual agency, peace in themselves, hope and optimism and faith. Based on the description above said a miracle is one of the parts from the domain of spiritual, religion and belief.

Obtained by a miracle that all activities funded by several informants: tahajud, worship for example , religious and meditation. Based on observations on the spiritual change not in spite of spiritual development for the elderly, with the development of a spiritual ripe will be very helpful for the elderly to capable of adapting to changes and an active role and not surrender and have a purpose in the late phase of life . Elderly who have the kind of spiritual good will can accept changes and will prepare disstres avoid from spiritual death as well as often happens in the late phase of life for the elderly.

Based on the discussion about a negative experience of life that occurs in all informants closely related to the problems of life sebalikanya not make for the elderly being helpless and desperate. Make a negative experience of life for the elderly to surrender themselves

with the God. This would give the very them were found in the quality of life for elderly though far from family. Similar to theorizing on spirituality as well as events that occur to help the people in the emerging power within the self purport and purpose, and knowing.

Overall, the miracle of God was very extraordinary the amount spiritual activity routine classification about 15 (50%) from 30 respondents.

So that, more elderly people routine doing spiritual activity it can make elderly to talking to God by directly. They do it for long time and they get the miracle of God. Eventhough they have some disaability but they still doing spiritual activity in nursing homes.

Theme V: Being soul of condition toward die

According data analysis it show Mayority ability of spiritual activity elderly Respondents by self classification about 16 (54%). According data analysis it show Mayority of spiritual activity elderly Respondents routine classification about 15 (50%).

Based on interviews and analysis of data has been obtained on the condition of the theme of soul ready to to ahead of death. Based on the theory of the quality of life according WHO 2014) outlining six domains the achievement of the quality of life of individuals and one of them is spiritual, religion and belief is an important element consisting of: spiritual connection, purpose and meaning of life, readiness and experience a miracle, and the wholeness intregrasi, spiritual power, peace in themselves, hope and optimism and faith. Based on the description above the preparation of death is one part of the domain of spiritual, religion and belief that relating to the unity and intregration in spiritual dimension.

It is also supported by the concept of the development of spiritual religious philosophical about more mature can often help parents to face reality, an active role in life and feel valuable as well as more can receive the death of as something that cannot be denied or avoid (Hamid, 2009. Spiritual change not in spite of spiritual development for the elderly, with the development of a spiritual ripe will be very helpful for the elderly to capable of adapting to changes and an active role and not surrender and have a purpose in the late phase of life. Elderly who have the kind of spiritual good will can accept change and to prepare the will of death and avoid from spiritual disstres (Papalia, Meiner; 2008, 2006. Similiar with the concept of above and based on observations in the interview all informants said that the form of fate about the death which is a sure thing happened to all individuals alike. As for the form of fate expressed by the informant is for the elderly said

the attitude has been prepared if are dying pick up later though it without accompanied by family.

Based in theory transkultural by Madeline Leinenger (1985 in Paula 2009) about holistic from health dimension cultural care worldview. The seven factors should be factors, namely technological religious and philosophical factors, kinship and social factors, cultural values and lifeways, political and legal factors, economic factors and educational factors. One factor is an important component is religious beliefs or to help elderly well being or dying or rest in peace.

Based on the description above then the researcher assume that Leinenger disentangle that an individual for the elderly in all phase of her life enters at the health dimension that holistic consisting of seven factors and one of them is the factor belief or religion that can deliver peace for the elderly in the liver and tranquility soul. Peace a heart that is felt by all the informants were located at a single position that a sense of peace which is located in the liver as well as feeling a happiness which closely a relationship with the God. A sense of peace in this heart will make elderly have fatalistic attitude about the death of that of the thing surely comes true and could not be rejected human. This is consistent with the theory leinengier who said that religous factors that intregation in their entirety will help lead mankind on the condition of rest in peace.

Based on theories and research have related being soul of condition toward die. Elderly has a good preparation toward die such as always prayer, doing more spiritual activities, social relationship. This result similiar with Madeline Leinenger theory "Rest in Peace" it depend on the elderly personality. Overall if elderly has peace a heart and powerfull spiritual and the end of time they can being soul on condition toward die.

Overall, being soul of condition toward die the amount spiritual activity routine classification about 15 (50%) from 30 respondents and they do it by self.

So that, more elderly people routine doing spiritual activity and they do it by self. All spiritual activity has been done, it was provisions and elderly people submit to God. Finally, being soul of condition toward die. Eventhough the elderly people not a couple they only living nursing homes alone.

V. CONSLUSIONS

Overall, The Investigation: The amount Quality of Life and Quality of Life Experience The Elderly In Teratai and Myria Nursing Homes has been reachable and optimum. The spiritual needs mayority elderly people doing spiritual activity with routine and byself, it

can makes elderly people have spiritual of God was very strong and the miracle of God, finally being soul of condition toward die. All of it happens with long time and long process on elderly people.

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AUTHORS' PROFILE



Suzanna, S.Kep, Ns, M.Kep, is a Lecturer in the Department of Nursing Pschiatry at STIKes Muhammadiyah Palembang, Indonesia. She obtained the Master of Nursing Pschiatry from University of Indonesia in 2013.



Trilia is a Lecturer in the Department of Nursing Geriartry, Muhammadiyah Health Science and High School Nursing Science Study Program, Palembang City, Indonesia. She obtained the Master of Biomedic from University of Sriwijaya in 2007.