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Change of Nurse Religiosity Rate in Makassar Hospital

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Abstract:
Objective: This study aims to determine changes in the level of religiosity of nursing staff in Makassar City Hospital for 1 year. **Methodology:** The study design was a cohort study. The study population is all non permanent nursing staff at Ibnu Sina Hospital, Faisal Islamic Hospital, and Haji Makassar General Hospital amounted to 78 nurses. Measurements were made to find out whether they had changed the religiosity of nursing staff particularly in the intellectual dimension (1 year later). Research location in Makassar City 2017 (Ibnu Sina Hospital, Faisal Islamic Hospital and Haji Makassar Hospital, with a research period of approximately 1 (one) year. **Results**: The results provide information that there is a change in the level of religiosity in several dimensions of religiosity. Experienced the greatest change at the level of the intellectual dimension.Increased improvement in the intellectual dimension. Conversely, there is a slight change of the consequential dimension. **Conclusion:** This research described that there was chage of experimental and ritual dimensions actually, a both of decreased. It is expected to the hospital management to keep actively improve and involve nurses on the program improvement of religiosity in the hospital.

Keyword: change of religiosity, nurse, hospital

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1. INTRODUCTION

Hospitals around the world are currently undergoing massive changes to their organizational structure. In some cases, organizational changes can mean hospital closures, job losses, changes in employee status and increased workload (Burke and Greenglass 2000; Muchlis et al. 2017). Unlike the case in Indonesia, precisely the growth of hospitals in quantity has increased significantly. The same thing happened in eastern Indonesia (KTI), precisely the opening of the hospital is increasing, especially managed by private parties. Makassar is one of the cities in South Sulawesi Province which has the largest population. Not surprisingly, if it has the largest number of hospitals compared to other districts or cities. There are 56.25% of hospitals in Makassar City owned by private parties. Although in quantity, the number of hospitals managed by the private sector increases, but has not been fully followed by the progress of quality(Hoonakker et al. 2013; Muchlis, Semmaila, and Amir 2022; Murgia et al. 2022; Tran et al. 2022).

Ibnu Sina Hospital (RSIS) Wakaf Foundation UMI is one of the private hospitals that has been providing health services for people in Makassar City and surrounding areas. Within a period of four years, the RSIS nursing unit provided a TT of varying numbers. On the one hand, hospitals must meet the standard number of TTs as type B hospitals and toward educational hospitals, but on the other hand hospitals have not been able to meet the standards of nursing staff needs. In addition, the number of nursing personnel has not met the standards of hospital requirements, the number of outgoing / resigning nursing personnel tends to be quite high for the last

four years(Muchlis, Semmaila, et al. 2022). In 2009, nurses who left and resigned 9.56% of existing nurses, in 2010 by 14.54%, in 2011 10.39% and in 2012 at 9.26%. Data turnover rate of nursing personnel in 2009 amounted to 33.76% (consisting of 11 outgoing and 42 incoming), in 2010 by 38.79% (consisting of 24 outgoing and 40 incoming) and 2011 start decreased to 18.89% (consisting of 19 outgoers and 15 admissions). The number is quite high, because the normal standard turnover rate of 10%. Average turnover per year in RSIS is 26.93%. According (Skagert and Dellve 2011) turnover in an organization should be identified, whether turnover is due to voluntary or involuntary turnover. If the turnover rate is high on the involuntary, then the organization should be more careful in recruitment, selection and training and the importance of increasing motivation. If voluntary turnover is higher, the organization needs to find out what causes it. High turnover is a major factor causing power shortages (Price and Mueller 1981). Turnover can result in the loss of talent plus additional recruitment and training costs. Some new hired employees have to start over from scratch, this can give a loss to the company resulting from reduced production quality and wasted work time(Thoits and Hewitt 2001).The vision set by RSIS is to be an educational hospital with Islamic Health Service Ekselen and Terkemuka in Indonesia, implies a spiritual meaning that must be carried by all hospital stakeholders, especially for nurses in providing services to patients. Given the vision of a spiritual-based hospital, performance appraisals at every level of employee status in RSIS also consider spiritual or spiritual elements. This can be seen from the obligation for the nurses to follow the program of heart enlightenment in the field of lampe. In addition, there are other religious ritual activities to improve the religiosity of RSIS employees. Religiosity is the quality of appreciation and attitude of a person's life based on the religious values he believes (Lucchetti and Vega-esca 2022; Muchlis and Indonesia 2020; Vega-esca 2022). RSIS often performs religious activities, such as involving its employees in the program of heart enlightenment, Jum'ah prayers together, memorials of the mawlid event, and several other religious events. But in fact, turnover rate every year is still high. Though research (Anon n.d.) also shows that religiosity on boundaries of commitment and behavior have a positive effect on organizational commitment and job involvement. in his research results explains that people who practice intense practice will produce brilliant thoughts that increase their creativity, in religious practice associated with work, then the person concerned will do his job seriously and finish all his business with creative and to cultivate organizational commitment requires creativity. Therefore researchers are interested to examine more about the level of religiosity to hospital turnover(Article 2009; Bachratá 2023; Taylor et al. 2023).

Research on the influence of religiosity level (dimension ideological level, ritualistic dimension, experiental dimension, intellectual dimension, and consequential dimension) to nursing personnel turnover aims to anticipate the high turnover that occurs in nursing staff that can lead to inefficiency of hospital financing and negative impact on service effectiveness patient (Muchlis, Amir, et al. 2022; Murgia et al. 2022; Tran et al. 2022). The second year research aims to analyze the influence of the level of Religiosity on Turnover and Intention to leave (ITL) on the turnover of nursing personnel. In the second year research, a survey was conducted at the same location and population to analyze the religiosity level directly to turnover and intention to leave on turnover. In addition, based on the results of the study in research I, it is considered important to conduct additional studies on the level of patient satisfaction in each location related to the religiosity services provided by the hospital. Considering the different method of improvement program of religiosity conducted at each research location.

2. METHOD

The research is divided into 3 main sections, consisting of; the first stage is the stage of development of the concept through the literature of the reviuw, the second stage of data collection and third stage of data analysis. This research is classified as quantitative research with cohort study design, using survey method. The aim of this research is to explain causal relationship between variables and research designed to analyze the influence of religiosity level on the turnover of nursing personnel in Makassar City Hospital. Unit of analysis of this research nursing personnel at 3 research sites (RSI Faisal, Haji Makassar Hospital, and RS Ibnu Sina Makassar). The population is all nursing staff working in 3 research sites (RSI Faisal, Haji Makassar Hospital, and Ibnu Sina Hospital Makassar). Sample is all nursing personnel at 3 research sites (RSI Faisal, Makassar Haji Hospital, and

Ibnu Sina Hospital Makassar) that meet the criteria of samples, which is a sample in the first phase of the study. Nursing staff consisting of non permanent nursing staff, working for a minimum of 1 year, are not on leave or or continue to study outside the city.

The sampling technique used is purposive sampling(Ahyar et al. 2020). The type of data used in this study comes from primary and secondary data. Primary data, which is collected directly by the researcher based on the research objectives, while the secondary data, ie data collected from other written documents that have been available.

The research was conducted on 3 research sites that almost have the same characteristics that is type B with 2 research sites that have religious background that is RS. Ibn Sina and RSI Faisal, and as a comparison of 1 other private public hospitals namely Haji Makassar Hospital, the survey was conducted on the entire treatment room. This research is categorized as quantitative research with cohort study design using survey method. The study aimed to explain the causal relationship between variables and research designed to analyze the influence of religiosity on turnover and the influence of intention to stay on the turnover of nursing personnel in Makassar City Hospital. The population is all nursing personnel working in 3 research sites (Ibnu Sina Hospital, Islamic Faisal and Haji Makassar General Hospital) which are samples in research I and research II. This research used proportionate stratified random sampling. The type of data used in this study comes from primary and secondary data. Primary data, which is collected directly by the researcher based on the research objectives, while the secondary data, ie data collected from other written documents that have been available.

3. RESULTS

Given an ethical imperative to respect patient spirituality and religiosity, nurses are increasingly taught and expected to provide spiritual care (Bachratá 2023; Irawati et al. 2023; Taylor et al. 2023). Respondents in this study are the same as respondents in the first phase of research (year I). It's just that in the second year of research, experienced a reduction in the number from 101 to 78, this is because some nurses who previously worked in the hospital, some are resigned. In addition, some are continuing education and leave. Some of the respondents, mutated in the non-nursing section (medical record).1. Dimensi Ideology. The ideological dimension consists of the belief that God has established the destiny of all humanity, believing that to obtain the happiness of the life of the world and the hereafter we must have religious beliefs, and the belief that books according to their respective religions can be guided by life.

The research described that there is a change of religiosity level of nursing personnel from year I to year II. There was a decrease in the percentage of poor category from 37.6% in I, to 35.9% for year II, while the good category increase from 62.4% to 64.1%. This shows that in the ideology dimension of nursing personnel showed a good change. In the ritual dimension depicted in graph 5.2 it is informed that there is a good category decline from 60.4% to 56.41%. This suggests that in general, there is a decrease in the degree of religiosity in the ritual dimensions of nursing personnel. Despite the increased religiosity of the ideological dimension, there is a decrease in the degree of religiosity in the ritual dimension.

The reseach result that a change in the religiosity level in the intellectual dimension of the nursing staff for the good category, ie from 52.48% in the first year to 66.67% in the second year. This is positive because based on the intellectual dimension, the level of religiosity of energy has increased. There is a change of religiosity level for good category in nursing staff from the first year that is 52.48% to 52.56% in year II. Although the increase is quite small, it is positive because it can show that the degree of religiosity in the consequences dimension can survive. This is important, because the consequential dimension is the only dimension of religiosity that shows a positive and significant statitstick test value for intention to leave. The research result that there is a decrease in the level of religiosity in the experimental dimensions of nursing personnel for the good category, ie from 56.44% year I to 50% in year II.

Based on picture 1 obtained information that, the dimension that experienced the greatest change is at the level of the intellectual dimension, while the lowest change is the consequential dimension. In the survey of patient / community satisfaction level on religiosity service in hospitals, there are still unsatisfied patients / societies at

Ibnu Sina Hospital and there are still patients / communities who feel less satisfied with the service at haj hospital, no patient dissatisfied and dissatisfied with the service of religiosity at Faisal's Islamic hospital.

4. CONCLUSION

There were variations in the religiosity of the nursing staff in each dimension. Dimensions that experience namely; , while dimnesi which decreased namely; there is an increase in the level of religiosity of nursing personnel in the first year of the year, in the survey of patient / community satisfaction level on religiosity service in hospitals, there are still unsatisfied patients / societies at Ibnu Sina Hospital and there are still patients / to the service at the Haj hospital, no dissatisfied and dissatisfied patients are available to the religiosity service in Faisal's Islamic hospital. In general, the patient / community considers hospital religiosity service important to be provided, and expects the hospital to improve the quality services, especially facilities for worship. It is expected that the management of the hospital should continue regularly and periodically to evaluate the religiosity needs of hospitals in order to increase the satisfaction of pediatric staff and patients on hospital religiosity services. The management of hospitals through efforts to increase the religiosity program of nursing personnel on a regular basis, especially on the intellectual and consequential dimensions. The management of the hospital made an improvement of innovation program about religiosity service in hospital. For further researchers to conduct studies on religiosity in addition to the nursing profession profession at the hospital.

5. REFERENCES

1. Ahyar, Hardani, Universitas Sebelas Maret, Helmina Andriani, Dhika Juliana Sukmana, and Universitas Gadjah Mada. 2020. *Buku Metode Penelitian Kualitatif & Kuantitatif*.
2. Anon. n.d. "Pengaruh_Religiositas,Ghozali.Pdf."
3. Article, Special. 2009. "Religiosity / Spirituality and Mortality." 81–90. doi: 10.1159/000190791.
4. Bachratá, Zuzana. 2023. "Religious Needs of Hospitalized Patients." 120–24. doi: 10.2478/pielxxiw-2023-0015.
5. Burke, Ronald J., and Esther R. Greenglass. 2000. "E Ects of Hospital Restructuring on Full Time and Part Time Nursing Sta in Ontario." 37.
6. Hoonakker, Peter L. T., Pascale Carayon, Kerry McGuire, Adjhaporn Khunlertkit, Douglas A. Wiegmann, Bashar Alyousef, Anping Xie, and Kenneth E. Wood. 2013. "Motivation and Job Satisfaction of Tele-ICU Nurses." *Journal of Critical Care* 28(3):315.e13-315.e21. doi: 10.1016/j.jcrc.2012.10.001.
7. Irawati, Kellyana, Ferika Indarwati, Fahni Haris, Jing-yi Lu, Yin-hwa Shih, Kellyana Irawati, Ferika Indarwati, and Fahni Haris. 2023. "Religious Practices and Spiritual Well-Being of Schizophrenia: Muslim Perspective Religious Practices and Spiritual Well-Being of Schizophrenia : Muslim Perspective." doi: 10.2147/PRBM.S402582.
8. Lucchetti, Giancarlo, and Juan Vega-esca. 2022. "Burnout and Spirituality among Nurses: A Scoping Review." 18. doi: 10.1016/j.explore.2021.08.001.
9. Muchlis, Nurmiati, Haeril Amir, Desy Dwi Cahyani, Rizqy Iftitah Alam, Nurfitri Landu, Mikawati Mikawati, and Nur Febrianti. 2022. "The Cooperative Behavior and Intention to Stay of Nursing Personnel in Healthcare Management." (October):1311–17. doi: 10.25122/jml-2022-0277.
10. Muchlis, Nurmiati, and Universitas Muslim Indonesia. 2020. "Effect of Religiosity to Intention to Leave of the Nursing Staffs." (June). doi: 10.2139/ssrn.2852348.
11. Muchlis, Nurmiati, Baharuddin Semmaila, and Haeril Amir. 2022. "Perceived External Prestige: Meta-Perception of Nurses and Customers ' Opinion in Hospital , Makassar City." 6(2):1169–76.
12. Muchlis, Nurmiati, Fendy Suhariadi, Nyoman Anita Damayanti, and Ah Yusuf. 2017. "Student' s Perceived External Prestige (PEP) In Teaching Hospital." 5(2):7–11.
13. Murgia, Carla, Ippolito Notarnicola, Rosario Caruso, Maddalena De Maria, Gennaro Rocco, and Alessandro Stievano. 2022. "Spirituality and Religious Diversity in Nursing : A Scoping Review." 1–22.
14. Price, James L., and Charles W. Mueller. 1981. "A Causal Model of Turnover for Nurses ^." 24(3):543–65.

15. Skagert, Katrin, and Lotta Dellve. 2011. “A Prospective Study of Managers Õ Turnover and Health in a Healthcare Organization.” 1–11. doi: 10.1111/j.1365-2834.2011.01347.x.
16. Taylor, Elizabeth Johnston, Sabina Pariñas, Iris Mamier, Associate Mohd, and Arif Atarhim. 2023. “Frequency of Nurse- - Provided Spiritual Care: An International Comparison.” (August 2022):597–609. doi: 10.1111/jocn.16497.
17. Thoits, Peggy A., and Lyndi N. Hewitt. 2001. “Volunteer Work and Well-Being *.” 42:115–31.
18. Tran, Dinh, Ngoc Huy, Nawroz Ramadan Khalil, Kien Le, Ahmed B. Mahdi, Laylo Djuraeva, Ho Chi, Minh City, Ho Chi Minh, Nawroz Ramadan Khalil, Tran Ngoc Huy, and B. Mahdi. 2022. “Religious Beliefs and Work Conscience of Muslim Nurses in Iraq during the COVID-19 Pandemic.” 1–6.
19. Vega-esca, Juan. 2022. “The Efficacy of Religious and Spiritual Interventions in Nursing Care to Promote Mental, Physical and Spiritual Health: A Systematic Review And.” 67(January). doi: 10.1016/j.apnr.2022.151618.

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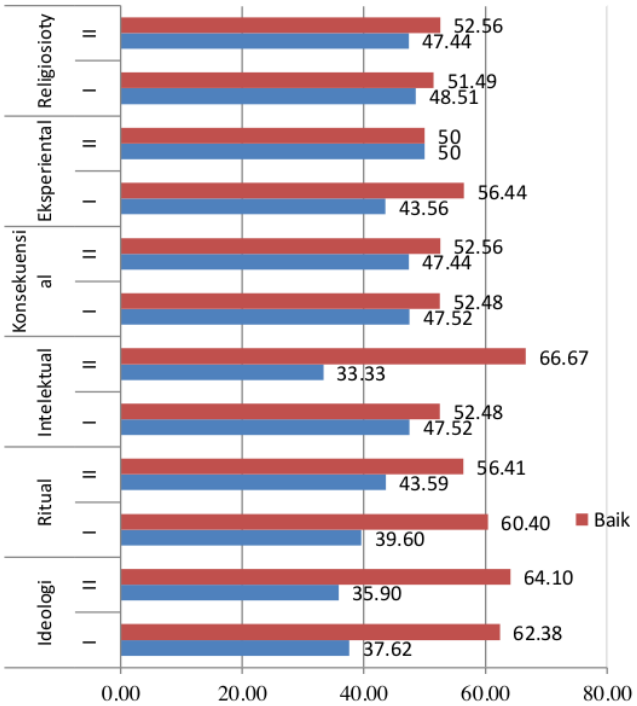
Appendix



Picture 1: Chage of Nurse Religiosity Rate year I to year II

Change of Nurse Religiosity Rate in Makassar Hospital

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