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THE ROLE OF SPIRITUAL WELL-BEING ON THE PSYCHOLOGICAL RESILIENCE OF CHRONIC DISEASE PATIENS

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ABSTRACT
Resilience and spiritual well-being are important aspects of life. Objective: This study aims to analyze the relationship between psychological resilience and spiritual well-being in individuals with chronic illnesses. The researcher used a cross-sectional approach to analyze this study. The sample consisted of 106 respondents living in Jember Regency. The researcher selected the sample using a purposive sampling technique. Data for this study were collected using a structured questionnaire administered to eligible respondents. The questionnaire was distributed electronically, and participants provided responses based on their experiences and perceptions related to the variables under investigation. Data were analyzed using the Pearson Correlation test. The results of the univariate test showed that the average score of psychological resilience was 64.70, and the average score of spiritual well-being was 22.35. The results of the bivariate test proved that there was a relationship between resilience and spiritual well-being in respondents (p-value = 0.000). The conclusion of this study is that there is a relationship between resilience and spiritual well-being in individuals with chronic illnesses in Jember Regency.

Keywords: chronic illness; psychological resilience; spiritual well-being

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INTRODUCTION

Chronic diseases such as hypertension, stroke, diabetes mellitus, and pulmonary tuberculosis are becoming a growing health problem in Indonesia. WHO data indicates that by 2025, an estimated 1.5 billion people will suffer from chronic diseases, including hypertension, and 9.4 million people will die annually from chronic diseases and their complications (Purnamasari A T, 2023). Chronic diseases not only cause physical health problems but also psychological ones. Individuals with chronic illnesses often experience psychological stress, even to the point of negative psychological reactions such as despair, feelings of helplessness, and depression (Abraham et al., 2024). These reactions arise in response to the long-standing illness, lengthy treatment, and lifestyle changes. People with chronic illnesses also tend to have a lower quality of life and are more susceptible to psychological problems (I Nengah S, I Wayan C, 2025). These psychological reactions can reduce the psychological resilience of those with chronic illnesses. Psychological resilience is an individual's ability to adapt positively when facing difficulties (Métais et al., 2022).

Psychological resilience is essential for individuals with chronic illnesses to recover or improve their quality of life (Isokaanta, 2021). Individuals with high psychological resilience adapt easily to their illness, have positive expectations for the future, and tend to be more compliant with treatment. One factor believed to contribute to improving the psychological resilience of people with chronic illnesses is spiritual well-being (Ghezelseflou, 2023). Spiritual well-being helps individuals achieve balance in maintaining adaptive coping. Spiritual well-being in chronic illness sufferers is not only demonstrated through religious practices, but also through belief in the meaning of the illness and acceptance of their condition (Fadilah N, Kholifah S N, Sulistijono H, Wibrata D A, Wiyatno E R, 2023). Spiritual well-being in chronic illness sufferers has two

dimensions, namely vertical and horizontal. The vertical dimension relates to the individual's interaction with God Almighty, while the horizontal dimension relates to the individual's interaction with the environment and those around them. Without spiritual care, biological, psychological, and social aspects cannot function properly, because humans are holistic beings.

Several previous studies, such as Windi's 2023 study, showed a significant relationship between spiritual well-being and the quality of life of patients with chronic kidney failure (Hasanah et al., 2023). Through spiritual values, individuals with chronic illnesses find positive meaning in their illness and view illness as a test that must be endured with patience and sincerity. However, research related to spiritual well-being and psychological resilience in people with chronic illnesses is still limited, especially in areas with religious cultural characteristics such as Jember Regency. Yet, understanding the spiritual aspects of people with chronic illnesses is crucial as a basis for psychosocial interventions in providing health services in the community.

According to Roy's Adaptation Theory, humans are biopsychosocial and spiritual systems that continuously strive to adapt to internal and external stimuli (Yeşilyurt, 2023). Changes in biological, psychological, and social aspects in chronic disease sufferers become stimuli that influence the adaptation process. Adaptation responses occur through four modes of adaptation: physiological, self-concept, role function, and interdependence (Nagy et al., 2024). Spiritual well-being is related to self-concept and interdependence, in which individuals try to rediscover the meaning of life, beliefs, and hopes. When spiritual well-being increases, individuals have a greater ability to interpret their illness and rebuild their self-identity in a positive way, thereby increasing psychological resilience. Based on the background outlined above, this study is novel in that it is basic research aimed at analyzing the role of spiritual well-being in psychological resilience specifically in people with chronic illnesses. Furthermore, this study is novel in placing spiritual well-being as a central focus contributing to psychological resilience.

METHOD

This study used a descriptive analytical design with a cross-sectional analytic study design. Population and sampling were conducted in the working area of the Sukorambi Community Health Center, Jember Regency. The population was 236 people with chronic diseases. Using the Cochran formula, a sample of 106 respondents was obtained. The sampling technique used was purposive sampling with sample criteria: aged ≥30 years, able to communicate well, suffering from chronic diseases such as hypertension, stroke, diabetes mellitus, and pulmonary tuberculosis, suffering from chronic diseases for at least the last 6 months and living in the working area of the Sukorambi Community Health Center, Jember Regency.

The spiritual well-being variable was measured using the Spiritual Well-Being Scale (SWBS) instrument consisting of 20 question items developed by Ellison and Paloutzian (1982). The psychological resilience variable was measured using the Connor Davidson Resilience Scale (CD-RISC) instrument consisting of 10 question items developed by Kathryn M. Connor and Jonathan R.T. Davidson (2003). The questionnaire has been tested for validity and reliability. The validity test results showed that all item-total correlation coefficients ranged from 0.432 to 0.781, exceeding the minimum acceptable value of 0.30. In addition, the reliability test yielded a Cronbach's Alpha coefficient of 0.875, indicating a high level of internal consistency. Therefore, the questionnaire was considered valid and reliable for data collection. Data analysis using the Pearson Correlation statistical test. The results of the data processing will be presented in tables and diagrams. The research process began with the preparation of a research proposal and protocol, which were then submitted for ethical clearance to the research ethics committee of the Faculty of Health Sciences, Muhammadiyah University of Jember. Next, the research permit process was submitted to BAKESBANGPOL to obtain a recommendation letter to conduct research in the Sukorambi Community Health Center.

RESULT

Respondent characteristics based on age, education level and employment status

Respondent characteristics based on age, education level, and employment status are presented in table 1 below.

Table 1.
Respondent Characteristics Based on Age, Education and Occupation

Variables	Respondents	
	f	%
Age		
26-45 years	24	22.8
>45 years	81	77.1
Education levels		
Elementary school	14	13.3
Junior high school	16	15.2
Senior high school	61	58.1
College	14	13.3
Employment status		
Employed	27	25.7
Unemployed	78	74.2

Table 2 shows that the majority of respondents in this study were aged >45 years (77.1%), had a high school education (58.1%), and were unemployed (74.2%). These characteristics are important to analyze because age, education, and employment status are closely related to the psychological condition and spiritual needs of people with chronic illnesses.

Respondent characteristics based on psychological resilience and spiritual well-being

Respondent characteristics based on their level of psychological resilience and spiritual well-being are presented in the table below.

Table 2.
Analysis of Psychological Resilience and Spiritual Well-being Levels

Variable	Mean	SD	Min-Max	CI 95%	*P value*
Psychological Resilience	64.70	8.46	42-83	63.07-66.34	0.000
Spiritual Well-being	22.35	2.30	17-25	21.91-22.80	

Table 2 shows that respondents had an average psychological resilience score of 64.70 and an average spiritual well-being score of 22.35. Bivariate statistical tests demonstrated a relationship between resilience and spiritual well-being among respondents (p-value = 0.000). The results of this study indicate that respondents' psychological resilience levels ranged from moderate to high, with an average score of 64.70. This indicates that individuals experiencing chronic illness demonstrate moderate resilience, meaning they still have the ability to survive and adapt to the changes they experience.

DISCUSSION

Respondent characteristics based on age, education level and employment status

Individuals in late adulthood (>45 years) are at higher risk of chronic diseases such as hypertension, diabetes, and other metabolic diseases due to degenerative processes and physiological changes (Shangzhi Xiong, Nicholas Peoples, Truls Ostbye, Michael Olsen, Xuefeng Zhong, Caroline Wainaina, Shujun Fan, David Wambui, 2023). In addition to physical impacts, chronic illness in individuals over 45 years of age often causes psychological distress in the form of anxiety, depression, fear of complications, and concerns about dependence on others. In this context, spiritual well-being plays a role as an adaptive coping mechanism. Research by Jafari et al. in the Journal of Religion and Health shows that spiritual well-being is significantly associated with reduced levels of depression and anxiety in patients with chronic illness. Individuals with good spiritual well-being tend to have a stronger sense of meaning in life, greater acceptance of their illness, and greater psychological resilience (Tirgari, 2022).

In this study, most respondents had a high school education (58.1%). Education level influences an individual's ability to understand their medical condition, comply with treatment, and interpret the experience of illness rationally and emotionally. Research by Zhang shows that education level correlates with health literacy and emotional regulation skills in patients with chronic illnesses (Wong et al., 2023). Secondary education, such as high school, generally provides basic skills in understanding health information, but still requires a clear and contextual communication approach.

The results of this study also showed that the majority of respondents were unemployed (74.2%), who were likely housewives or individuals who were no longer economically active. Unemployment can have two psychological implications. On the one hand, limitations on productive activities can increase the risk of feelings of helplessness, stress, or low self-esteem, especially for those with chronic illnesses. On the other hand, more flexible time can provide greater opportunities for religious activities and spiritual reflection (Jimenez, 2026).

Respondent characteristics based on psychological resilience and spiritual well-being

Regarding spiritual well-being, the results showed that the majority of respondents fell into the good category, with an average score of 22.35. The majority of respondents maintained a strong relationship with God and felt a sense of meaning and purpose in life. In this study, the dimensions of spiritual well-being were relatively homogeneous among respondents and were an important internal strength for individuals with chronic illness (Bhuiyan, 2022). The results also illustrate that religious life, worship practices, and spiritual values remain deeply embedded in daily life even during illness.

The results of the bivariate analysis between psychological resilience and spiritual well-being showed a significant correlation between the two variables, as reflected by a p-value of 0.00. These results suggest that both variables can serve as important psychological resources, enabling individuals to find meaning in adversity, maintain hope, and develop adaptive coping mechanisms when facing difficulties. Psychological resilience and spiritual well-being can serve as internal assets that help individuals cope with stress and life's challenges (Akbayram, 2024).

Conceptually, these findings align with previous research showing that spiritual well-being provides a foundation for meaning, purpose, and faith in God Almighty, enabling individuals to accept their circumstances, recover, and experience hope amidst life's difficulties (Hamka, 2022). Therefore, resilience and spiritual well-being can be understood as integral components that support mental health in navigating the dynamics of everyday life.

From a mental health nursing perspective, the results of this study emphasize the need to integrate spiritual dimensions into community mental health promotion efforts. Programs designed to increase community resilience can be more effective if they align with deeply rooted religious and spiritual values, for example through strengthening religious activities, community-based support groups, and spiritually sensitive reflection or counseling spaces (Ventriglio, 2026). Furthermore, the results of this study can serve as a basis for nurses and other healthcare professionals to routinely assess psychological resilience and spiritual well-being as part of a comprehensive evaluation (Alshammari, M.M; Alboliteeh, 2024). Such an approach ensures that interventions address not only physical and social aspects but also spiritual needs, which have been shown to be closely related to an individual's ability to cope and recover from life's challenges (Hu, 2025).

CONCLUSION

The results of this study indicate that most respondents had levels of resilience and spiritual well-being ranging from fair to good, although this was influenced by many factors. Bivariate analysis showed that psychological resilience was related to spiritual well-being. This suggests that an individual's ability to adapt, cope with stress, and make sense of life experiences are important factors in developing healthy psychological and spiritual resilience.

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