

THE INFLUENCE OF APPLICATION OF THE FIVE FINGER HYPNOSIS PROCEDURE ON THE LEVEL OF FAMILY ANXIETY IN CARING FOR THE ELDERLY

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ABSTRACT

An increase in the number of elderly will cause various health problems such as an increase in degenerative diseases. These health problems can cause the inability of the elderly to carry out activities and meet their daily needs, thus requiring long-term care (PJP). One of the psychological responses that appear in the family (family) is anxiety. To reduce the level of anxiety, proper nursing therapy is needed, one of which is by giving five finger hypnosis therapy. Based on the results of the case study by Yuni Nukholifah et al (2022) stated that there was a change in anxiety levels before and after the five finger hypnosis therapy was carried out in the three patients. Five finger hypnosis therapy can reduce anxiety levels in hypertension sufferers. The purpose of this study was to determine the effect of applying the five finger hypnosis procedure on the level of family anxiety in caring for the elderly. The research design used was pre-experimental in one group (One group Pre Test Post Test Design). where the respondent was pre-tested before being given treatment and the respondent was given a post-test after being given treatment. The results of the study showed that there was a significant effect of the application of the Five Finger Hypnosis Procedure on the Level of Family Anxiety in Caring for the Elderly at pre and post intervention. This can be seen from the results of p value = 0.00 ($\alpha < 0.005$) which means that there is no significant effect on the occurrence of anxiety.

Keywords: anxiety; elderly; five finger hypnosis

INTRODUCTION

Increasing the life expectancy of the population can lead to an increase in the number of elderly from year to year. An increase in the number of elderly will cause various health problems such as an increase in degenerative diseases which will cause a decrease in the productivity of the elderly. These health problems can cause the inability of the elderly to carry out activities and meet their daily needs so that the family has a very important role in accompanying and helping the elderly to carry out activities and meet their daily needs.

One of the psychological responses that appear in the family is anxiety. Families caring for patients with chronic illnesses, 40% experience anxiety with signs of feeling tense/uncomfortable, feeling afraid if something bad happens, feeling worried, uncomfortable, nauseous, shortness of breath, and restless

Anxiety experienced by the family can hinder the family in caring for sick members. To reduce the level of anxiety, proper nursing therapy is needed, one of which is by giving five finger hypnosis therapy. The use of five-finger hypnosis is a verbal communication art that aims to bring the subject's thought waves into a trance (alpha/theta waves) (Evangelista et al, 2016) also known as self-hypnosis which aims at self-programming, eliminates anxiety by involving the parasympathetic nerves and will reduce increased work heart, breathing, blood pressure, sweat glands (Kozier, 2010).

Five-finger hypnosis therapy which is a form of self-hypnosis that can have a relaxing effect, thereby reducing anxiety, tension and stress from one's mind by touching one's fingers while imagining things one likes. Five-finger hypnosis therapy also affects a person's limbic system so that it affects the release of hormones that can trigger stress (Keliat 2013).

Research conducted by Indah Marwati and Yuliana on Five-Finger Hypnosis in Anxiety Patients (2021) says that Five-finger hypnosis therapy affects the anxiety level of anxiety patients in the psychiatric polyclinic before and after being given therapy. From the results of Suhadi and Ayu's research (2022) concerning the Effect of Five Finger Hypnosis on Preoperative Anxiety Levels in the Surgical Treatment Room of Paku Haji Hospital, the results of the Wilcoxon test found that the p value was 0.000, which means that there is a difference in anxiety between the pre-test and post-test groups. Conclusion: preoperative patients who experience anxiety after being given five finger hypnosis experience a decrease in anxiety levels.

Five-finger hypnosis is a form of self-hypnosis that can have a high relaxing effect, thereby reducing tension and stress, anxiety and one's thoughts. Basically, five-finger hypnosis is similar to hypnosis in general, namely by putting the client to sleep (hypnotic sleep), but the technique is more effective. for self-relaxation and the time is about 10 minutes (Jenita, 2008).

When feeling anxious, the individual feels uncomfortable, afraid or may have a premonition that disaster will befall him even though he does not understand why these threatening emotions occur (Videbeck, 2008). This shows that the anxiety experienced by individuals is subjective and not the same as one another. The most frequent negative psychological impact is anxiety, depression and helplessness, which is manifested in the form of distress, disability and discomfort.

METHOD

Research design that will be used in this research is quasi experiment. Research design is design form used in carry out research procedures. This research using the One Group Pretest design – Posttest, where this design does not exist comparison group (control), but most no first observation has been made (pretest) which allows testing changes thereafter intervention (treatment) (Notoatmodjo, 2015).

The treatment for the family was in the form of Five Finger Hypnosis by the researcher for approximately 10 minutes in 5 meetings. The population in this study were the elderly who were in the RW 08 area of Cipayung sub-district, East Jakarta, totaling 30 respondents. The sampling technique used a non-probability method, a type of purposive sampling based on calculating the sample size.

The sample of this study is a family that cares for elderly patients. Based on the calculation of the number of samples in this study were 30 respondents.

Respondent inclusion criteria: families who care for elderly patients, can read and write, adult > 20 years old, and elderly with degenerative diseases and mild to moderate dependence.

Exclusion Criteria: elderly with high dependence

Data analysis in this study carried out included univariate analysis and bivariate. With the help of the SPSS program (Statistical Product and Service Solution) version 21.0. Univariate analysis was performed for know the frequency distribution and description of each variable so analysis next time it will be easier. Bivariate analysis in This research was conducted to find out treatment change by comparison conditions before and after the intervention. If the t test cannot be performed because it does not meet the requirements then it is done Wilcoxon test.

RESULTS AND DISCUSSION

In this chapter the researcher discusses the results of the progress that has been achieved in conducting the research with the title: The Effect of Applying the Five Finger Hypnosis Procedure on the Level of Family Anxiety in Caring for the Elderly which was carried out from July to October 2022. The number of respondents in this study were 30 people.

Table 1. Distribution of respondents' anxiety before and after the intervention

Category	Before Intervention	After Intervention
Mild Anxiety	12 (40 %)	19 (63.3 %)
Moderate Anxiety	15 (50%)	10 (33.3 %)
Severe anxiety	3 (10%)	1 (3.3 %)

Table 2. Paired Samples Test

Mean	Std. Deviation	Std. Error Mean	Paired Differences		t	df	Sig. (2-tailed)
			95% Confidence Interval of the Difference Lower	Upper			
.300	.535	.098	.100	.500	3.071	29	.005

The results of the analysis using the Dependent t-test showed that the level of anxiety showed a significant decrease before and after the intervention of deep breathing relaxation and five-finger hypnosis where p value = 0.00 ($\alpha < 0.005$). Conclusion: there is an influence between the combination of deep breathing relaxation and five finger hypnosis on the level of anxiety in the elderly.

From the results of the study, it was found that there were 12 respondents who experienced mild anxiety before the intervention, after the intervention it increased to 19 people. For respondents who experienced moderate anxiety before the intervention as many as 15 people after the intervention decreased to 10 people. Respondents who experienced severe anxiety before the intervention were 3 people, after the intervention it became 1 person.

From the results of this study, it was obtained that the p value = 0.00 ($\alpha < 0.005$) there was an effect between the combination of deep breathing relaxation and five-finger hypnosis on the level of anxiety in the elderly.

This research is in accordance with research conducted by Agnes Erida W (2021). Based on the evaluation of the results of the activity, it can be seen that there are differences in the level of anxiety in the elderly before and after giving five finger hypnosis therapy. After being evaluated after the five finger hypnosis therapy action, the client looks more relaxed and does not look tense.

Likewise, the results of a study by Rindayati et al (2020) said that the description of events and levels of anxiety in the elderly mostly did not occur anxiety and almost half experienced mild anxiety.

The results of the analysis of the relationship between age and anxiety level showed that there were 16 (66.7%) elderly who experienced mild anxiety, 7 (29.2%) moderate anxiety and and 1 respondent had severe anxiety.

While elderly respondents who experienced mild anxiety and respondents who experienced moderate anxiety were 3 (50%) each. The statistical test results obtained $p = 0.581$, so it can be concluded that there is no difference in the proportion of anxiety between the elderly and the elderly. (no significant relationship between age and anxiety level)

From the results of the study, it was found that there was no relationship between the age factor and anxiety, this is because the cognitive abilities of the elderly have decreased so that the elderly do not focus on their life problems.

According to Kaplan and Sadock (2000), factors that influence patient anxiety include age. Anxiety disorders can occur in all humans, more often in adults and more in women. Most anxiety occurs at the age of 21-45 years.

Based on the results of Gerardina Sri Redjeki's research (2019) said there was no significant relationship between age and the anxiety of the elderly with a p value = 0.307, Stuart G.W & Laraia M.T (2007) stated that individual maturity or maturity will affect a person's coping mechanism abilities so that more mature individuals are more difficult to experience anxiety because individuals have a greater ability to adapt to anxiety than immature age. It is proven in research that mature age, namely adulthood, has a lower prevalence of anxiety levels compared to adolescents. This proves that a mature age has adequate coping skills in dealing with anxiety. In this study, the age factor is not significant for the occurrence of anxiety. This can happen because of a decrease in cognitive factors in the elderly. So that the elderly do not think realistically about their anxiety.

The results of the analysis of the relationship between gender and anxiety level showed that there were 7 (50%) men experiencing mild anxiety and 7 (50%) moderate anxiety and no male respondents experienced severe anxiety. While 12 female respondents (75%) experienced mild anxiety, 3 (18.8%) with moderate anxiety and 1 with severe anxiety. The statistical test results obtained $p = 0.150$. It can be concluded that there is no difference in the proportion of anxiety between male and female respondents. (no significant relationship between gender and anxiety level).

Based on the results of Rindayati's research (2020), the gender group showed that the majority of respondents were female, 27 respondents (66%) and almost half of the respondents were male, 14 respondents (34%). This study found that gender can affect the occurrence of anxiety in the elderly where women are twice as likely to experience anxiety in the elderly. Another difference in sex is caused by brain chemistry (brain chemistry), hormonal fluctuations in women are different than men. Women with hormonal influences are more prone to experience changes in feelings, and are less able to maintain emotional stability. This research is in accordance with the results of Gerardina Sri Redjeki's research (2019) showing that there is no significant relationship between gender and elderly anxiety with a p value = 0.680,

The results of the analysis of the relationship between marital status and anxiety levels showed that 15 (68.2%) respondents with married status experienced mild anxiety, 6 (27.3%) moderate anxiety and 1 married respondent with severe anxiety. Meanwhile, 4 (50%) unmarried respondents experienced mild anxiety, 4 (50%) with moderate anxiety. The statistical test results obtained $p = 0.454$, so it can be concluded that there is no difference in the proportion of anxiety with marital status. (no significant relationship between marital status and anxiety level). In the elderly, marital status is no longer a supporting factor. This is because the elderly are used to being alone. Many elderly people have been abandoned by their partners.

This also means that between the elderly who have married status and the elderly who are widows/widowers and those who are not married have different levels of loneliness. The results of this study indicate that the elderly with married status have the highest level of loneliness among the widowed and unmarried elderly.

It is more difficult for men to express loneliness explicitly than for women. Then the longer age factor in elderly women causes the elderly to have a lot of time alone and causes the elderly to feel more lonely. In the group of widows/widowers and unmarried women, the feeling of loneliness is most felt by elderly women. In this group, elderly women both do not have partners. This is related to the characteristics that are generally owned by women where a woman is a gentle, loving figure, and most importantly, a woman needs protection. (Amriani, et al 2015)

The results of the analysis of the relationship between education level and anxiety level found that there were 14 (70%) respondents with low education experiencing mild anxiety, 5 (25%) moderate anxiety and 1 (5%) respondents with low education with severe anxiety. Meanwhile, 5 respondents (50%) who were highly educated experienced mild anxiety and 5

respondents (50%) experienced moderate anxiety. The statistical test results obtained $p = 0.338$, so it can be concluded that there is no difference in the proportion of anxiety with education level. (There is no significant relationship between marital status and anxiety level.

Education for everyone has its own meaning. Education is generally useful in changing mindsets. Patterns of behavior and patterns of decision making (Noto Atmojo 2000). A sufficient level of education will make it easier to identify stressors within oneself even from outside. The level of education also affects the awareness and understanding of the stimulus. From the results of the study this is not appropriate due to the aging process, where cognitive conditions are decreasing.

Unlike the results of Puspitasati's research (2013), the anxiety experienced by respondents was found in respondents who did not go to school. The relationship between education and the occurrence of anxiety was affirmed, where it was stated that there was a significant negative correlation between the level of anxiety and the level of education. The higher the subject's education, the lower the anxiety level and the lower the subject's education level, the higher the anxiety level.

The results of the analysis of the relationship between the length of illness and the level of anxiety showed that there were 4 (57.1%) respondents who had been sick for less than a year experiencing mild anxiety and 3 (42.9%) with moderate anxiety. While respondents who experienced anxiety for more than 1 year there were 15 (65.2%) experienced mild anxiety, 7 (30.4%) with moderate anxiety and 1 person (4.3%) with severe anxiety.

The statistical test results obtained $p = 0.738$, so it can be concluded that there is no difference in the proportion of anxiety with the duration of illness. (there is no significant relationship between the status of duration of illness with the level of anxiety). This is because the elderly are conditioned by their illness.

The process of aging is a natural process that is accompanied by a decrease in physical condition with the appearance of a decrease in the function of the body's organs, psychological and social decline. Changes from the biological aspect, changes that occur in a person's cells to become elderly. Physiological changes that occur in sexual activity in old age usually take place gradually and show the basic status of the vascular, hormonal and neurological aspects.

In accordance with the results of Befly F Tokala's research (2015) stated that there was no relationship between the length of time undergoing hemodialysis and the level of anxiety in CKD patients in the hemodialysis unit, even though there were some respondents who experienced anxiety.

This is also in accordance with the results of Andar Setyawati's research (2015) which said that there is no relationship between anxiety levels and length of stay in patients with acute myocardial infarction in the Intensive Coronary Care Unit (ICCU).

CONCLUSION

There is a significant influence between the application of the Five Finger Hypnosis Procedure on the level of family anxiety in caring for the elderly at pre and post intervention. This can be seen from the results of p value = 0.00 ($\alpha < 0.005$). This means that there is an influence between the combination of deep breathing relaxation and five-finger hypnosis on the level of anxiety in the elderly. From the results of the study, it was found that 12 respondents experienced mild anxiety before the intervention, after the intervention it increased to 19 people. For respondents who experienced moderate anxiety before the intervention as many as 15 people after the intervention decreased to 10 people. Respondents who experienced severe anxiety before the intervention were 3 people, after the intervention it became 1 person. Characteristics such as age, gender, education, status and length of illness have no effect on the anxiety of the elderly where the results of the analysis are p value > 0.005 , which means that there is no significant effect on the occurrence of anxiety. From the results of the multivariate analysis, it can be seen that gender and marital status can significantly influence the level of anxiety in this study

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