ABSTRACT

Hospitalization of a family member and treated in intensive care is a life threatening situation and can be a trigger to heavy stress in the family that lead to imbalance of family system. Several factors that can be a trigger to stressful situation in family are environment changes and rules in the ward, changes of family emotional status, changes of family member roles, changes of daily activities, financial changes, and health care attitude in giving information on patient's health status. The objective of this study is to assess the most dominant predictor of stress in the family which one of the members is hospitalized at General Intensive Care Unit in Dr. Hasan Sadikin Hospital Bandung.

Type of this study is analytical correlation with cross-sectional design. Number of subjects included in this study was 60 respondents that represent family member whose one of the family members was hospitalized at General Intensive Care in Dr. Hasan Sadikin Hospital Bandung. Sampling technique used was purposive sampling. Instrument used to measure stress predictor was formed based on theoretical review and modification of family inventory live events standard instrument, mean while instrument used for measuring family stress was Depression Anxiety Stress Scale 42. Data was analyzed using Chi-square and logistic regression.

The results of this study show environmental changes and rules in the ward, emotional status changes, and daily activities changes have significant correlation with p value 0.01, 0.04 and 0.03, respectively. None of the 6 family predictors was dominantly predict stress, however financial changes has 10 times higher probability to cause family stress.

Hypothesis testing show Ho was accepted and Ha was rejected, whereas predictors of environmental changes and rules in the ward has not been proven to be the most dominant predictors among 5 other predictors to predict occurrence of family stress at General Intensive Care Unit. Nurses are expected to do early detection towards psychological family problems and optimize supportive-educative treatment in the form of counseling for family members (in consultation room).

Keywords: Predictor, Intensive Care Unit, Family Stress