



## THE RELATIONSHIP OF THE LEVEL OF INFORMATION SATISFACTION WITH THE LEVEL OF ANXIETY OF PATIENTS' FAMILIES IN THE ICU ROOM OF MEKARSARI HOSPITAL, BEKASI, 2025

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### Abstract

*The Intensive Care Unit (ICU) is one of the important service units in hospitals that provides intensive care. This unit is supported by trained nurses and adequate medical facilities to carry out monitoring, nursing actions and therapy on patients with critical conditions or life-threatening complications, but who still have the possibility of recovery. Patient care in the intensive care unit has a significant impact on the family, because it creates various forms of burden, including physical, social and cultural aspects. Globally, various studies show that more than 40% to 60% of the families of patients accompanying care in the ICU experience anxiety at a moderate to severe level. Family satisfaction reflects acceptance of the services received, especially in the communication aspect. in the Bekasi City Regional Hospital confirmed a similar pattern, where there was a significant relationship between the level of family understanding regarding the patient's condition and the level of anxiety experienced, indicating that a lack of medical information could increase family anxiety. Research objective to determine the relationship between the level of information satisfaction and the level of anxiety of the patient's family in the ICU room at Mekarsari Hospital, Bekasi in 2025. Research method this research design uses a quantitative research design with a correlational descriptive design, using a cross-sectional approach to identify the relationship between the level of information satisfaction and the level of anxiety of the patient's family in the ICU Room at Mekarsari Hospital, Bekasi. The sampling technique in this research was to use a total sampling technique with a total of 37 respondents. Research results the research results show that there is no significant relationship between information satisfaction and the anxiety level of patient families in the ICU room at Mekarsari Hospital, Bekasi in 2025, with a p-value of 0.730 ( $p > 0.05$ ). Conclusions and suggestions there is no significant relationship between satisfaction with information and the level of anxiety of the patient's family in the ICU room at Mekarsari Hospital Bekasi in 2025. With the results of this research obtained, it is recommended that future researchers can develop this research by adding other variables that have the potential to influence the anxiety level of the patient's family and using methods and a larger sample size to obtain more comprehensive results.*

**Keywords:** Satisfaction, Anxiety, Intensive Care Unit (ICU)

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## INTRODUCTION

The Intensive Care Unit (ICU) is an important service unit in a hospital that provides intensive care. This unit is supported by trained nurses and adequate medical facilities to carry out monitoring, nursing actions and therapy on patients with critical conditions or life-threatening complications, but who still have the possibility of recovery. In addition, the level of satisfaction of patients and their families is used as an important indicator to evaluate the quality of services provided and the effectiveness of information delivery while patients are undergoing intensive care. A patient's critical condition often results in an inability to make decisions regarding treatment due to decreased awareness or the severity of the disease. As a result, many patients are unable to assess the level of satisfaction with the services received, and do not even remember their experiences while undergoing intensive treatment. This causes patient satisfaction surveys in the ICU to often not be able to describe the actual conditions as a whole (Heriani & Gandi, 2022). Family satisfaction reflects acceptance of the services received, especially in the communication aspect. If nurses are unable to communicate therapeutically, patients and families may feel dissatisfied, which impacts the hospital's image and reduces trust in services. Effective communication is an important part of nursing care, because good quality nurse therapeutic communication tends to have an impact on increasing patient and family satisfaction (Amalia et al., 2019). Globally, various studies show that more than 40% to 60% of families of patients accompanying treatment in the ICU experience anxiety at a moderate to severe level. Meanwhile, research by (Amass et al., 2022) found that more than 60% of families of ICU patients experienced severe stress, some of whom even showed symptoms of post-traumatic stress disorder (PTSD) several months after the patient was discharged from intensive care. Furthermore, longitudinal research published by (Nosaka et al., 2024) revealed that anxiety in families can last between 12 and 18 months after treatment in the ICU, indicating a long-term impact on the family's psychological well-being. Empirical data further confirms the magnitude of the psychological burden on families while waiting. A study in the ICU by (Pitoy et al., 2023) reported that the proportion of families in the severe anxiety category reached around 63.3% of the total respondents, indicating a fairly high prevalence of

severe anxiety among patient waiters. This research also shows a relationship between situational factors such as length of treatment, lack of information, and service response with the level of family anxiety and satisfaction with hospital services. A local study at the Bekasi City Hospital confirmed a similar pattern, where there was a significant relationship between the level of family understanding regarding the patient's condition and the level of anxiety experienced ( $p=0.01$ ), indicating that a lack of medical information can increase family anxiety. Apart from that, research by (Agustina, 2020) in the Bekasi area shows that there is a significant relationship between therapeutic communication carried out by nurses and the level of anxiety of the patient's family in the ICU. According to Friedman in Wulan (2025), family system theory, the health of one family member will affect the balance of family functions as a whole. This is in line with the stress and coping theory according to Stuart (2016) which states that anxiety is an emotional response to stressors that arises when an individual or family faces a threat to the health condition of their family members. Patients' families who accompany their family members while undergoing treatment in the intensive unit often experience anxiety due to the patient's critical medical condition, high treatment costs, limited interaction, and lack of information from health workers regarding the patient's condition (Sugiyanto, 2014). Anxiety experienced by families has the potential to disrupt the patient care process, because this condition can trigger stress in family members, thereby reducing their ability to provide support during treatment. The stress felt by families can also limit their role in accompanying family members who are undergoing treatment in the intensive care unit

## METHODS

This research design uses a quantitative research design with a correlational descriptive design, using a cross-sectional approach to identify the relationship between the level of information satisfaction and the level of anxiety of the patient's family in the ICU at Mekarsari Hospital, Bekasi. This design was chosen because it allows researchers to measure both variables simultaneously at a certain time, so that it can be seen whether there is a relationship between the independent and dependent variables without intervening with the respondents. The sampling technique in this study was using a total sampling technique with a total of 37 respondents.

**RESULT**

1. Respondent Characteristi

No	Cahracteristic	Category	Frequences	Percent
1.	Age	Young (18-35 tahun)	19	51.4%
		Mid (36-55 tahun)	15	40.5%
		Old (> 55 tahun)	3	8.1%
		<b>Total</b>	37	100.0%
2.	Gender	Man	22	59.5%
		Woman	15	40.5%
		<b>Total</b>	37	100.0%
3.	Education	Elementary school	5	13.5%
		Junor High School	5	13.5%
		Senior High School	21	56.8%
		College	6	16.2%
		<b>Total</b>	37	100.0%
4.	Long treatment	< 5 day	24	64.9%
		> 5 day	13	35.1%
		<b>Total</b>	37	100.0%

Based on the data in the table above, the characteristics of respondents based on age show that the majority of respondents are in the young adult category (18-45 years), namely 19 respondents (51.4%). Characteristics of respondents based on gender, the majority of respondents are male, namely 22 respondents

(59.5%). Based on the characteristics of respondents' educational level, the majority of respondents had a high school/equivalent education level, namely 21 respondents (56.8%). Based on the characteristics of respondents according to the length of time the patient was treated,

*the majority of patients underwent treatment for less than 5 days, namely 24 respondents (64.9%)*

2. *Frequency Distribution of Level of Information Satisfaction and Level of Anxiety*

No	Cahracteristic	Category	Frequences	Percent
1.	<i>Information Satisfaction Level</i>	Satisfied	27	73.0%
		Mid satisfied	7	18.9%
		not satisfied	3	8.1%
		<b>Total</b>	37	100.0%
2.	<i>Anxiety level</i>	No anxiety	2	5.4%
		Mild Anxiety	8	21.6%
		Moderate Anxiety	10	27.0%
		Severe Anxiety	14	37.8%
		Panic	3	8.1%
		<b>Total</b>	37	100.0%

Based on the frequency distribution table of research variables, it is known that of the 37 respondents from the families of patients being treated in the ICU, some respondents stated that they were satisfied with the information provided, namely 27 respondents (73.0%). Furthermore, there were 7 respondents who were quite satisfied (18.9%), and 3 respondents who stated they were not satisfied (8.1%). The anxiety level of the

patient's family shows that of the 37 respondents from the patient's family, the majority experienced severe anxiety, namely 14 respondents (37.8%). Furthermore, 10 respondents experienced moderate anxiety (27.0%), 8 respondents experienced mild anxiety (21.6%), and 3 respondents experienced panic (8.1%). Meanwhile, there were 2 respondents who did not have anxiety (5.4%)

3. *The Relationship between Information Satisfaction and the Anxiety Level of Patient Families in the ICU Room at Mekarsari Hospital, Bekasi, 2025*

Variable	Anxiety				p	Total
	High	Low	Mid	Panic		

	Mid satisfied	1 (2.7%)	2 (5.4%)	3 (8.1%)	1 (2.7%)	0 (0.0%)	7 (18.9%)
Information Satisfaction	Satisfied	11 (29.7%)	5 (13.5%)	7 (18.9%)	2 (5.4%)	2 (5.4%)	27 (73.0%)
	not satisfied	2 (5.4%)	1 (2.7%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	3 (8.1%)
<b>Total</b>		14 (37.8%)	8 (21.6%)	10 (27.0)	3 (8.1%)	2 (5.4%)	37 (100.0%)
<b>p-value</b>		0.730					

Based on the table above, the results of the cross tabulation show that the majority of respondents with satisfied information satisfaction experienced severe anxiety, namely 11 respondents (29.7%), followed by moderate anxiety of 7 respondents (18.9%), mild anxiety of 5 respondents (13.5%), panic anxiety of 2 respondents (5.4%), and 2 respondents who did not experience anxiety (5.4%). Of the respondents with sufficient information satisfaction, the majority experienced moderate anxiety, namely 3 respondents (8.1%), followed by mild anxiety as many as 2 respondents (5.4%), severe anxiety as many as 1 respondent (2.7%), panic anxiety as many as 1 respondent (2.7%), and there were no respondents who did not experience anxiety. Meanwhile, in the group of respondents with less satisfaction with information, the majority experienced severe anxiety, namely 2 respondents (5.4%), and mild anxiety as much as 1 respondent (2.7%), and there were no respondents who experienced moderate anxiety, panic, or no anxiety. Based on the results of statistical tests using the Chi-Square test, it was discovered that there were cells with an expected count value of less than 5, so the cells were merged, then continued with the alternative Fisher Exact Test. The results of the analysis obtained a p-value = 0.730 with an  $\alpha$  value = 0.05. Because the p value >  $\alpha$ , it can be concluded that the null hypothesis (H0) is accepted and the alternative hypothesis (Ha) is rejected, which means there is no relationship between information satisfaction and the respondent's anxiety level.

### Discussion

Based on the research results, most of the respondents were families of patients in the young adult age group (51.4%), followed by the middle adult group (40.5%) and the older adult category (8.1%). This shows that families of young adults are more involved as waiters for patients in the ICU. Young adulthood is a productive phase,

where individuals have better physical and mental abilities in dealing with stressful situations and are more active in seeking information regarding the health conditions of their family members. The results of this study are in line with research by Siringoringo & Sigalingging (2023) which states that the age of the respondent influences the emotional response of the families of ICU patients, psychological pressure can still trigger anxiety even though they are of productive age (Siringoringo & Sigalingging, 2023). Age factors can also influence a person's emotional response and adaptation to stressful situations such as being in an intensive care environment. Previous research shows that demographic characteristics such as age can influence stress and anxiety levels in stressful clinical situations due to differences in the psychological and social abilities of each age group (Scott et al., 2019)

Characteristics of respondents based on gender showed that the majority of respondents were men (59.5%), while the number was women (40.5%). Gender differences can influence how individuals respond to stress and anxiety, especially in situations of waiting for critical family members. Psychologically, men tend to suppress or not express anxiety verbally, while women are more expressive of feelings of anxiety and fear. However, both men and women still have the potential to experience significant anxiety when their family members are treated in the intensive care unit. Previous research shows that gender is related to the level of anxiety of families of ICU patients, where women tend to have higher levels of anxiety than men, although the difference is not always statistically significant (Dwi Winarti et al., 2024).

Education level influences an individual's ability to understand medical information, the treatment process, and the risk and prognosis of the patient's disease. The analysis also shows that respondents with a high school/equivalent education level are the largest group (56.8%).

Education level can play a role in a person's ability to receive and understand the information provided by health workers. The higher the level of education, the better the ability to understand medical information and patient care plans, which can have an impact on how respondents evaluate the information services they receive during their stay in the ICU. Previous research also found that the level of education influences understanding of medical information and the family's psychological response to the patient's condition in the ICU (Ariffudin et al., 2019).

The results of the study showed that the majority of patients were treated for less than 5 days (64.9%), while the remainder were treated for more than 5 days (35.1%). The length of treatment in the ICU is often related to the intensity of information received by the family and the level of anxiety experienced. The length of patient monitoring in the ICU can affect the family emotionally, where the longer the treatment period, the higher the possibility of the family experiencing worry and uncertainty regarding the patient's condition, as found in previous research which shows a relationship between the length of patient care and the family's anxiety level (Ariawan et al., 2025)

on the results of the analysis, it was found that there was no statistically significant relationship between the level of information satisfaction and the level of anxiety of the patient's family in the ICU room at Mekarsari Hospital, Bekasi in 2025 ( $p = 0.730$ ). This shows that although the majority of respondents expressed satisfaction with the information provided by health workers, satisfaction with this information did not always correlate with a reduction in the anxiety level of the patient's family. The insignificance of this relationship could be influenced by several factors. First, satisfaction with general information may not address the emotional or psychological needs of the patient's family in facing a crisis situation. Second, anxiety of families of patients in the ICU can be triggered by other factors such as concerns about the patient's prognosis, previous experiences or high levels of stress due to uncertainty about their family's health condition. Several studies support that the information provided in general is not always enough to reduce the anxiety of the patient's family. Research shows that knowledge and information needs that are met comprehensively are significantly related to reducing the level of anxiety of families of patients

in the ICU, where respondents who have knowledge and information

## CONCLUSION

There is no significant relationship between information satisfaction and the level of anxiety of the patient's family in the ICU room at Mekarsari Hospital, Bekasi in 2025. With the results of this research obtained, it is recommended that further researchers can develop this research by adding other variables that have the potential to influence the anxiety level of the patient's family and using methods and a larger sample size to obtain more comprehensive results.

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