



CORRELATION BETWEEN EMOTION REGULATION AND SPIRITUALITY WITH STRESS ON THE CAREGIVER OF ELDERLY

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Abstract

Keywords:

*emotion regulation;
spirituality; stress
in caregiver of the
elderly*

Stress occurs while caring for the elderly due to several factors, namely the emotion regulation and spirituality. This study aims to examine the correlation between stress with emotion regulation and spirituality in caregivers of the elderly at Karangmojo 1 Health Center, Gunungkidul. The purposive sampling method was used to obtain data from 36 caregivers on the emotion regulation and spirituality as well as stress scale with Alpha Cronbach's reliability coefficient of 0.871, 0.921, and 0.905, respectively. The results showed that $r = 0.485$ and Sig. 0.012 ($p < 0.05$). Therefore there is a correlation between stress, emotion regulation, and spirituality. This means that the higher the control of emotion and spiritual level, the lower the pressure. Furthermore, this research expects to provide input in the realm of psychology. For example, it can be used as a reference to help caregivers deal with stress by increasing their emotion regulation and spirituality skills.

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Abstrak

Kata kunci:

regulasi emosi; spiritualitas; stres pada pengasuh lanjut usia

Stres pada pengasuh lanjut usia terjadi disebabkan kombinasi tugas selama merawat lanjut usia. Terdapat beberapa faktor yang mempengaruhi tingkat stres, yaitu regulasi emosi dan spiritualitas. Penelitian ini bertujuan untuk mengetahui hubungan antara stres dengan regulasi emosi dan spiritualitas pada pengasuh lanjut usia di Puskesmas Karangmojo 1, Gunungkidul. Subjek penelitian yaitu caregiver lanjut usia, berjumlah 36 orang, didapatkan dengan purposive sampling. Data diambil menggunakan skala regulasi emosi (koefisien reliabilitas Alpha Cronbach sebesar 0,871), spiritualitas (koefisien reliabilitas Alpha Cronbach sebesar 0,921), dan stres caregiver lansia (koefisien reliabilitas Alpha Cronbach sebesar 0,905). Hasil penelitian menunjukkan bahwa $r=0,485$ dan Sig. 0,012 ($p<0,05$), sehingga terdapat hubungan antara stres dengan regulasi emosi dan spiritualitas. Semakin tinggi regulasi emosi dan tingkat spiritualitas, maka semakin rendah stres yang terjadi. Penelitian ini diharapkan memberi masukan untuk ilmu pengetahuan terutama di ranah psikologi, misalkan dapat digunakan sebagai referensi dan membantu para caregiver dalam mengatasi stres dengan meningkatkan keterampilan regulasi emosi dan spiritualitas.

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INTRODUCTION

The Indonesian society comprises of numerous ethnicities, linguistics, and age groups, with the elderly classified as those individuals above 60 years (Papalia, Olds, & Feldman, 2008; Santrock, 2011). Some of them reside in orphanages, while others live with their families. The results of the 2017 National Economic Survey (SUSENAS), showed that 62.64% of the elderly lived with their

extended families or three generations, namely those that reside with their children and grandchildren, or in-laws in a particular household (BPS, 2017). In relation to those residing with their families, several members play a huge role in attending to them. A person or group of individuals that provide direct care for the elderly are usually regarded as elderly caregivers.

The tasks of the elderly caregiver are time-consuming because they carry out numerous daily chores. Besides, the behavior of the elderly being attended to is also a source of burden (Peetoom, Lexis, Joore, Dirksen, & De Witte, 2016). The weight of the elderly causes stresses because caregivers usually feel fatigued and in certain instances, this leads to physical pain. In addition, they find it difficult to control their emotions (Putri, 2013).

Generally, relatively 65%(81 persons) out of 125 elderly caregivers are reported to experience high-levels of stress (Bobbitt, Baugh, Andrew, Cook, Green, Pei, & Rasmussen, 2016). Stress is commonly elucidated as a non-specific reaction which tends to occur when humans are faced with pressure or stimulation (stimulus stressor). It also includes varying adaptive reactions, which is because people respond differently to stress. This reaction is influenced by educational background, maturity, and the individual's ability to adapt to the environment (Hartono, 2007). Meanwhile, stress encountered by elderly caregivers is defined as a series of psychological and physiological reactions that arise from the attempts to adapt to this type of task (Llanque, Savage, Rosenburg, BA, & Caserta, 2016, Noonan & Tennstedt, 1997, Deater-Deckard, 2004).

In accordance with the prospective problems of these caregiver interviews were conducted on three of them on the 4th of November, 2018, in Gunung Kidul District. It was discovered that they all felt depressed and burdened with this task. However, two of the elderly caregivers reported that these feelings were overwhelmed immediately the understood that

it was an obligation that needed to be fulfilled by the family members. They also understood that there was a reward for them hereafter. On the contrary, one of them always felt depressed and usually fails to focus when carrying out these chores. The caregivers also stated that they often felt dizzy whenever the thought about the burden. Based on the statements of these three elderly caregivers, it was concluded that they had a variety of feelings. Besides, the duration of their depression also varies, irrespective of the fact that they all felt the same way initially. This type of indicator shows that the caregivers of elderly parents are usually stressed.

However, it need not be ignored because it leads to physical and mental pain. Also, stress causes chronic negative emotions, as well as has an impact on depression (Schoenmakers, Buntinx, & Delepeleire, 2010, Wade, Garry, & Tavriss, 2013). The results from certain studies showed that it deteriorates the well-being of the caregivers and it also leads to the emergence of neurological problems. Therefore, perceived negative emotions are handled in various ways, which includes coping.

Lazarus (1966), stated that there are two types of coping, namely, problem-focused and emotion-focused strategies. The problem-focused strategy is defined as an individual's efforts to alleviate stressful circumstances, whereas emotion-focused coping is a person's effort to reduce or regulate emotional consequences of potentially stressful events (Baqtayan, 2015, Lazarus, 1966). Subsequently, both strategies play a role in managing stress although in different ways. Problem-focused coping is usually more effective when the stressor is controlled, while emotion-focused tends to be more efficient when the cause of stress is uncontrollable. Therefore, emotion regulation is considered the most appropriate means of managing stress.

Coping strategies are related to emotion regulation (Pascual, Conejero, & Etxebarria, 2016, Ruiz-Robledillo & Moya-Albiol, 2013). It is the process of reassessment, characterized by cognitive evaluation of

stimuli which is carried out to influence certain experiences and reduce the harmful effects of emotions, both physical, psychological, and social impacts (H. Chen, 2016, Gross, 2002). Furthermore, it does not only serve as a means to change emotions, rather it is an indirect way of reducing stress.

Consequently, stress is also reduced and avoided when an individual possesses a high level of spirituality, which is defined as the person's relationship with God (The Higher Power) (Hendriani, 2018). Additionally, it is deep-rooted in human beings and relates to their belief systems. Spirituality also aids humans to realize the highest awareness of self-transcendence. In addition, it also helps them to achieve the meaning and purpose of life (Saifuddin, 2019). Spirituality is based on expectations, the individual connotation of things, as well as peoples' relatedness to the highest dimension or transcendence, and belief systems (Dyson, Cobb, & Forman, 1997). Therefore, a high level of spirituality serves as a modality used to reduce stress. It is because individuals foster hope with spirituality, which is the belief that life difficulties are overcome through their connection with the highest dimension.

Consequently, for those that often encounter stressful situations, religious and spiritual systems are valuable resources that tend to make their experiences meaningful (Krok, 2015, Monteiro, Santos, Kimura, Baptista, & Dourado, 2018). Therefore, supposing the caregivers are able to understand the entire situation, their duties of attending to the elderly is not considered as a burden, and they are also protected from stress.

Based on some of these explanations, this study was carried out because of persistent stress on the caregivers although the duration differs. In accordance with the data obtained before carrying out this research, it was discovered that some caregivers desired to unearth the implication of their roles. On the contrary, the impact of stress on them is considered dangerous because it leads to depression as

well as the disruption of other activities. Therefore, it is crucial to examine the psychological constructs or variables (emotion regulation and spirituality) relating to stress, including exploring the correlation between them.

The purpose of this research was to examine the correlation between emotion regulation, spirituality, and stress encountered by caregivers for the elderly parents at the Gunungkidul Health Center. In addition, three hypotheses were postulated in this study; namely, the correlation between emotion regulation and spirituality, the correlation between emotion regulation and stress, and the correlation between spirituality and stress encountered by the caregivers in the Karangmojo 1 Gunungkidul health center.

There are several previous studies relating to stress, spirituality, and emotion regulation experienced by elderly caregivers (Branscum, 2010; Kurasawa et al., 2012; Longacre, Valdmanis, Handorf, & Fang, 2017; Mehta, 2005; Murdiyanto & Gutomo, 2017; Padmini & Diyanayati, 2015; Shen, Wan, Xie, Chen, & Li, 2019; Tang, 2009; Putri, 2013; Moustafa & Moustafa, 2018; Naing, May, & Aung, 2020; Oliveira, Souza, Luchesi, Inouye, & Pavarini, 2017; Popli & Panday, 2018; Sabzwari, Badini, Fatmi, & Shah, 2016; Tamdee et al., 2019; Widyakusuma, 2013; Yigitalp, Gumus, Surucu, & Evinc, 2017; Ibad, Ahsan, & Lestari, 2015; Missesa & Syam'ani, 2017; Widyastuti, Sahar, & Permatasari, 2011)

Conversely, the differences between previous studies and this research occurred in several aspects. The theme of these studies was centered on the dynamics of stress in elderly caregivers. Similarly, this research examined the correlation between emotion regulation and spirituality in accordance with stress faced by the caregivers. Certain previous studies applied qualitative, longitudinal, and cross-sectional methods. In contrast, a quantitative correlational approach was applied in this research and the subject is related to the correlation between spirituality and emotion

regulation based on stress. Additionally, the measuring instrument utilized is also different from previous studies. Therefore, this study has originality.

METHODS

This quantitative correlational study measures three variables. They are emotion regulation as well as predictor, and criterion variables which comprise of spirituality and stress respectively.

The operational definition of stress encountered by elderly caregivers is a form of response that relates to their mental, physical, emotional, and spiritual inability to cope with the problems associated with the tasks of attending to the elderly. Also, this study applied a psychosocial approach, namely emotional, cognitive, social behavior, and biological aspects (Sarafino & Smith, 2016). A Likert scale model is used to measure the stress variable, subsequently, when a high score is obtained, it simply means that the level of stress experienced by the caregivers is also high, and vice versa.

The operational definition of emotion regulation involves the process of reassessment, which is usually carried out by monitoring, evaluating, and modifying sentimental reactions. It is also applied to reduce the negative effects of emotions perceived by humans. Consequently, emotions are either positive or negative. According to Thompson (1991), aspects of emotion regulation include monitoring, evaluating, and modifying. The higher the score, the greater the emotion regulation of the caregiver, and vice versa.

Spirituality is operationally defined as a fundamental belief in the care, hope, kindness, love, optimism, and the enormous power that governs the universe. It is also the relationship between an individual and a transcendent being (God). The aspects of spirituality applied in this research are transcendent elements, awareness of suffering, meaning and purpose in life, altruism, the sanctity, material values,

idealism, personal mission, and outcome (Elkins, Hedstrom, Hughes, Leaf, and Saunders, 1988). The tool for measuring this variable is the Likert scale model, and when the score is high, the caregiver's spirituality is also high, and vice versa.

The research sample used in this study are adults responsible for attending to the elderly in Gunungkidul Community Health Center. The sample was acquired using the purposive sampling method based on several characteristics, such as married caregivers attending to elderly parents aged 70 years and above. In addition, 36 research samples were obtained.

The measuring instrument used for data collection is a Likert scale model. There are three scales, namely the level of emotion regulation in accordance with the theory formulated by Thompson (1991), spirituality is based on Elkins, L. James Hedstrom, Hughes, Leaf, & Saunders (1988), and the stress relates to the theory reported by Sarafino & Smith (2016) theory. The validity of the measuring instrument is qualitatively assessed by professional judgment, and the difference is calculated using the corrected item-total correlation test. A statement is considered to have good contrast when the correlation value obtained for each of them is above 0.300 (Azwar, 2016; Saifuddin, 2020).

The reliability of the measuring instrument was determined using a single presentation method, which was tested on a group of people with characteristics similar to the sample used in this study. The results from this trial were analyzed using the Alpha reliability coefficient formula, and the minimum limit of the measuring instrument is 0,700 (DeVellis, 2016).

Table 1.

Aspects and Indicators of Emotion Regulation Scale After Try Out

No.	Aspect	Indicators	Total
1	Monitoring emotions	Can realize the feelings that arises	3
		Understand the background of actions	3
2	Evaluating emotions	Able to manage emotions	2
		Emotional balance	6
3	Modifying emotions	Able to change emotions	4
		Able to motivate oneself when experiencing negative emotions	4
Total			22

The results from calculating the Alpha reliability coefficient showed that the scale of emotion regulation was an estimation of $\alpha = 0.871$. In accordance with the different power items, the measuring instrument for emotion regulation ranges from 0.329 to 0.619. Therefore, it is considered to be reliable with a high power difference.

Table 2.

Spirituality Scale Aspects and Indicators After Try Out

No.	Aspect	Indicators	Total
1.	Transcendent	Belief in the transcendent dimension	3
		Possess transcendent experiences such as being able to envision those not detected with the plain eyes	4
2.	Life of purity	Believe that there is afterlife and need for holiness	2
		Feeling sacred or religious throughout their entire life	1
3.	Life mission	Have a sense of responsibility towards life	1
		Possess the urge to fulfill their life mission	1
4.	The meaning and purpose of life	Believing that life is meaningful	4
		Possess an evident meaning and purpose in life	1

No.	Aspect	Indicators	Total
5.	Material values	Realizing the fact that the highest satisfaction in life is not derived from money and position	2
		Highest satisfaction is obtained from spirituality	4
6.	Idealism	Committed to ensuring the world is a better place	3
		Actualize potential	4
7.	Awareness of suffering	Realizing the existence of suffering	2
		Realizing the existence of death	2
8.	Altruism	Being aware of the suffering of others	3
		Possessing strong feelings or a sense of social justice	1
9.	The result from spirituality	Individual relationships with others	3
		Relationship with a transcendent being and nature	3
Total			44

The results from calculating the Alpha reliability coefficient showed that the scale of spirituality is approximately $\alpha = 0.921$. Based on the different power items, the measuring instruments for emotion regulation ranges from 0.307 to 0.694, therefore, it is considered reliable with a high power difference.

Table 3.
Aspects and Indicators of Elderly Caregiver Stress Scale After Try Out

No.	Aspect	Indicators	Total
1.	Cognitive	Impaired memory	2
		Lack of attention and concentration	3
2.	Emotion	Anxiety and resentful	1
		Extremely depressed	1
3.	Social Habits	Hostile, and insensitive to the needs of others	6
		Increase in negative behavior	2

No.	Aspect	Indicators	Total
4.	Biological	Physiological reaction	3
		Indigestion	5
Total			23

The results from calculating the Alpha reliability coefficient showed that the scale of spirituality is approximately $\alpha = 0.905$. In addition to the different power items, the measuring instruments for emotion regulation range from 0.345 to 0.757. Therefore, it is reliable and has a high power difference.

Multiple linear regression tests in SPSS version 24 is used for data analysis. Consequently, the basic prior test and classical assumptions, which include normality, linearity, heteroscedasticity, and multicollinearity were also carried out.

RESULTS AND DISCUSSION

Research Results

This study applied descriptive analysis to obtain a general picture of the emotion regulation, spirituality, and stress conditions in the sample, namely elderly caregivers.

Table 4.
Mean and Standard Deviation of Hypothetic and Empirical Data

Scale	N	Hypothetic Data		M	SD	Empirical Data		M	SD
		Min Score	Max Score			Min Score	Max Score		
Emotion Regulation	36	22	88	55	11	63	76	67,72	3,029
Spirituality	36	44	176	110	22	120	152	133,69	7,778
Elderly Stress Caregiver	36	23	92	57,5	11,5	38	51	45,75	2,892

However, the normality, linearity, heteroscedasticity, and multicollinearity tests were also conducted.

Table 5.

Normality Test Results Table

One-Sample Kolmogorov-Smirnov Test				
		Emotion Regulation	Spirituality	Stress
N		36	36	36
<i>Normal Parameters^b</i>	<i>Mean</i>	67,72	133,69	45,75
	<i>Std. Deviation</i>	3,029	7,778	2,892
<i>Most Extreme Differences</i>	<i>Absolute</i>	,132	,099	,146
	<i>Positive</i>	,132	,099	,083
	<i>Negative</i>	-,082	-,097	-,146
<i>Test Statistic</i>		,132	,099	,146
<i>Asymp. Sig. (2-tailed)</i>		,117 ^c	,200 ^{cd}	,052 ^c

Based on the results from calculating the normality test using Kolmogorov-Smirnov, it was discovered that the magnitude of the normality coefficient for the emotion regulation variable was 0.132 with Asymp. Sig. (2-tailed) of 0.117 ($p > 0.05$), while for spirituality it is 0.099 with Asymp. Sig. (2-tailed) of .200 ($p > 0.05$), and for stress it is 0.146 with Asymp. Sig. (2-tailed) of 0.052 ($p > 0.05$). Therefore, the data distribution for the three variables is a normal curve.

Table 6.

Table of Linearity Test Results Between Stress and Emotion Regulation

ANOVA Table							
			<i>Sum of Squares</i>	<i>Df</i>	<i>Mean Square</i>	<i>F</i>	<i>Sig.</i>
Stress *	<i>Between Groups</i>	<i>(Combined)</i>	144,050	10	14,405	2,422	,035
Emotion		<i>Linearity</i>	36,648	1	36,648	6,161	,020
Regulation		<i>Deviation from Linearity</i>	107,402	9	11,934	2,006	,082
		<i>Within Groups</i>	148,700	25	5,948		
		<i>Total</i>	292,750	35			

The linearity test is a technique for detecting the presence or absence of a linear relationship between the predictor and the criterion variables. A good correlation occurs when both of them are linear. Based on the results from the linearity test between stress and emotion regulation, an F of 6.161 and Sig. Of 0.020 ($p < 0.05$) was obtained. In conclusion, the data from the two variables are linear.

Table 7.

Table of Linearity Test Results Between Stress and Spirituality

		ANOVA Table					
			Sum of Squares	df	Mean Square	F	Sig.
Stress * Spirituality	Between Groups	(Combined)	206,500	21	9,833	1,596	,186
		Linearity	57,106	1	57,106	9,269	,009
		Deviation from Linearity	149,394	20	7,470	1,212	,362
Within Groups			86,250	14	6,161		
Total			292,750	35			

In accordance with the results of the linearity test between the stress and spirituality variables an F of 9.269 and Sig. Of 0.009 ($p < 0.05$) were obtained. Conclusively, the data from the two variables are linear.

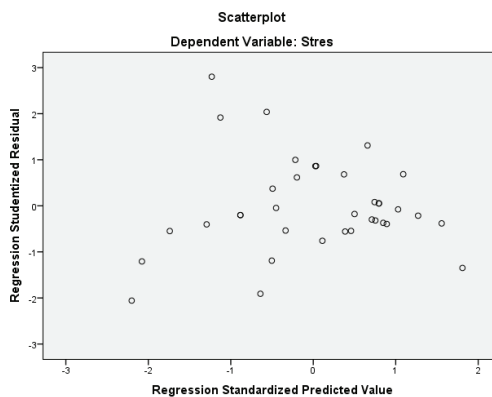


Figure 1. Heteroscedasticity Test Results With Scatterplot

The heteroscedasticity test is used to determine the variance in residual values during the observation or measurement period. Homoscedasticity rather than heteroscedasticity tends to occur when the variance is fixed. Data is evaluated by regression analysis when there is a lack of heteroscedasticity. Based on the scatterplot method, it was concluded that heteroscedasticity did not occur. This is because the data points spread above and below the number 0, and they did not only gather at line 0, as well as the patternless distribution.

Table 8.
Multicollinearity Test Results Table

		Coefficients						
<i>Model</i>	<i>B</i>	<i>Unstandardized Coefficients</i>		<i>Standardized Coefficients</i>	<i>t</i>	<i>Sig. Tolerance</i>	<i>Collinearity Statistics</i>	
		<i>Std. Error</i>	<i>Beta</i>				<i>VIF</i>	
1	<i>(Constant)</i>	77,605	10,679		7,267	,000		
	Emotion Regulation	-,207	,157	-,217	-1,316	,197	,854	1,171
	Spirituality	-,133	,061	-,359	-2,179	,037	,854	1,171

a. Dependent Variable: Stress

In this study, the autocorrelation test was not carried out because the research data was taken at a specific time, and measurements were repeated. The multicollinearity test was subsequently carried out to determine the presence or absence of a strong correlation between the independent variables (predictors). A good regression occurs when there is a lack of multicollinearity, and this simply means that there is no existent correlation between an independent variable and another. Based on calculations, it was discovered that the tolerance value for emotion regulation was 0.854 ($p > 0.10$), and the VIF value was 1.171 ($p < 10.00$). Likewise, the tolerance value for spirituality was 0.854 ($p > 0.10$) and the VIF value was 1.171 ($p < 10.00$). In conclusion, there is no existent correlation between emotion regulation and spirituality, or it lacks multicollinearity.

Table 9.
 Hypothesis Test Results Table or Regression Analysis

ANOVA ^a						
Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	68,856	2	34,428	5,074	,012 ^b
	Residual	223,894	33	6,785		
	Total	292,750	35			

Subsequently, the hypothesis is evaluated using multiple linear regression tests supported by SPSS (Statistical Product and Service Solution). This testing aims to determine whether the hypothesis is accepted or not and it is based on the correlation between the three variables. The results from the hypothesis testing using multiple regression analysis regarding the correlation between emotion regulation, spirituality, and stress shows a regression coefficient of 5.074 and Sig. amounted to 0.012 ($p < 0.05$). Therefore, the first hypothesis is accepted, or there is a significant correlation between emotion regulation, spirituality, and stress.

Table 10.
 Correlation Test Results Table

Model Summary ^b				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	,485 ^a	,235	,189	2,605

The correlation coefficient (R) obtained is 0.485, which means that emotion regulation, spirituality, and stress has a moderate level of relationship, which is within the range of 0.400 to 0.599.

Discussion

The simultaneous results from these tests are consistent with previous studies which stated that emotion regulation causes individuals to feel undisturbed when they are stressed (Deater-Deckard, Li, & Bell

2016; Finlay-Jones, Rees, & Kane 2015; Katana, Röcke, Spain, & Allemand 2019; Lewis, Yoon, & Joormann 2017; Wang & Saudino 2011). Emotion regulation reduces the negative effects of stress, this is because it involves cognitive activities and strategies (positive reappraisal), considered to be the most appropriate (Folkman & Moskowitz, 2000, Garland, Gaylord, & Fredrickson, 2011). Individuals tend to be understandable when their cognitive emotions are regulated (Doré et al., 2017). This is in accordance with the research which stated that people with positive emotion regulation can use their cognitive abilities in managing emotions, and vice versa. In addition, it is also realized through several other ways, such as suppression which restrains emotional impulses and expressions. Although, a comparison between reappraisal and suppression, shows that suppression has a negative impact on emotion regulation (Peters, Overall, & Jamieson, 2014). It is also less effective when managing emotions, therefore it has a lesser impact on stress. Suppression causes lower life satisfaction (Nam, Kim, & Tam, 2018).

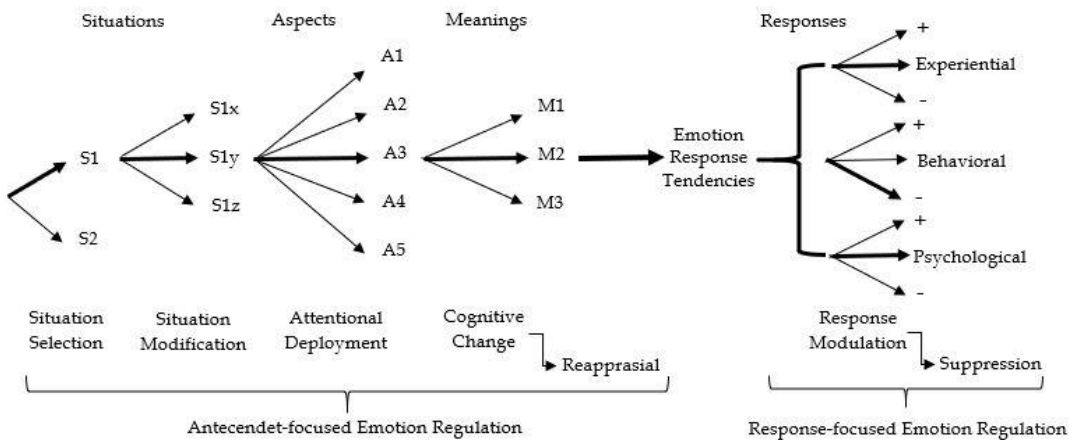


Figure 2. Emotion Regulatory Process Model (Quoted from Gross, 2002)

The application of cognitive reappraisal emotion regulation is

considered to be more effective than suppression because it makes it possible for individuals to be understood. However, when triggered by the existence of spirituality, the suppression of emotion regulation tends to occur even without cognitive reappraisal. According to several studies, spirituality causes one to be obedient, (Dyson et al. 1997; Koerniawan & Candrawulan 2018; Mok, Wong, & Wong 2010; Newman, 2004). Individuals can decipher the events that occur in their lives thereby making it easier for them to handle stressful situations (Tuck, Alleyne, & Thinganjana, 2006; Yadav & Khanna, 2014). A high level of spirituality enables individuals to develop the most effective coping mechanism to either reduce or prevent stress (Baldacchino & Draper, 2001, Baruah & Pandey, 2016, Krok, 2008). It also causes people to be able to handle difficult circumstances encountered, thereby preventing them from being stressed by these conditions (Ardilla & Wahyuni, 2012). Besides, spirituality creates an acceptance mechanism that causes caregivers not to become stress-prone (Hervey, 2017).

Based on some of the studies, it was concluded that elderly caregivers that apply cognitive reappraisal emotion regulation can deal with stress effectively, compared to those that apply suppression. In addition, assuming the caregiver possesses a high level of spirituality, then whatever emotion regulation utilized, causes them to easily deal with stress. This is because spirituality plays a similar role as cognitive reappraisal.

The second hypothesis stated that there is an existent correlation between emotion regulation and stress faced by the caregivers of the elderly. However, the results from the partial test show that the significance value of $(p) 0.197 > 0.05$, this simply means that the second hypothesis in this study is rejected, or there is no correlation between emotion regulation and stress. In this study, the second hypothesis was not proven because the average educational background of the caregivers was elementary, and junior high school, therefore the respondents in this study possess

a lesser tendency to use cognitive-emotion regulation. This is consistent with the results from the research carried out by Ratnasari & Suleeman (2017), which stated that education has an influence on the selection of emotion regulation strategies, therefore the higher the educational qualification, the more the research samples tend to apply cognitive-emotion regulation. These dynamics occur because individuals usually try to regulate their emotions when carrying out and completing tasks in school. Some learning activities carried out in schools or educational institutions involve emotion regulation strategies. According to King & Chen (2019), emotions play an essential role in education. Individuals that develop emotion regulation easily handle problem-solving issues and pressure (Bahrami, 2017). Therefore, it affects the performance of private education in specific contexts (Gumora & Arsenio, 2002), as well as on the individuals' attitudes towards problems in the general context. Based on these explanations, it was concluded that the emotion regulation in this research is negative or maladaptive. Stress is turned into distress, and the emotion regulation undertaken becomes less influential.

Furthermore, the third hypothesis in this study, stated that there is a correlation between spirituality and stress. In other words, the third hypothesis is accepted. This is indicated by the partial test, which shows that the significance value is $(p) 0.037 < 0.05$. The results from this analysis are consistent with the study carried out by Le, Piedmont, & Wilkins (2019), which stated that spirituality has been proven to be a predictor of stress in middle-aged Vietnamese. In addition, other studies include the research carried out by Sharif & Ong (2019), which reported that individuals with high-level spirituality, encounter less stressful experiences. According to some studies, spirituality helps individuals find meaning and purpose in the role they play (Yadav & Khanna 2014, dan Yun, Kim, & Awasu 2019). This leads to an increase in the positive perceptions of life activities. Finally, individuals with a high level of spirituality minimize the

occurrence of stress. In the context of this study, the research subjects that attend to elderly parents perceived the role as an obligation and responsibility which is rewarded in the afterlife. According to Powers, Cramer, & Grubka (2007), spirituality has little impact on the ability to discover the meaning of life.

This research also shows that the stress level experienced by elderly caregivers varies. This is based on the age, sex, occupation, and education of the caregivers, as well as the health of elderly parents.

Table 11.
Research Respondents Categorization

Variable	Norma	Categorization	Total Respondent	
			Frequency	Percentage
Emotion Regulation	X < 65	Rendah	4	11,1%
	65 X < 71	Sedang	27	75,0%
	X 71	Tinggi	5	13,9%
Spirituality	X < 126	Rendah	5	13,9%
	126 X < 141	Sedang	24	66,7%
	X 141	Tinggi	7	19,4%
Stress	X < 43	Rendah	5	13,9%
	43 X < 49	Sedang	26	72,2%
	X 49	Tinggi	5	13,9%

According to table 11, the level of emotion regulation, spirituality, and stress on the average is moderate furthermore, the number of respondents for emotion regulation is 27 (75.0%), 24 (66.7%) for spirituality, and 26 (72.2%) for stress. Based on this table, it is concluded that the elderly caregivers working in Karangmojo 1 Gunungkidul Public Health Center are among the few that are highly stressed from attending to elderly parents. Also, the majority tend to regulate emotions and possess an adequate level of spirituality.

Table 12.

Categories of Research Respondents on the Stress Variable of Caregivers for the Elderly based on the Age of Elderly

The Age of caregivers	Stress			Total
	Low	Average	High	
28-35	0	6	0	6
36-48	4	16	4	24
49-56	1	4	1	6
Total	5	26	5	36

According to table 12, six of the subjects aged between 28-35 years, experiences moderate stress levels, and none have low or high-stress levels. Furthermore, 4 people within the age range of 36-48 years are faced with low-stress levels, while 16 of them experience moderate stress levels, and as many as four people encounter a high-stress level. Finally, only 1 subject aged 49-56 years, have low-stress level, while 4 of them possess moderate stress level, and 1 person has a high-stress level. Based on the table, it is concluded that irrespective of various age groups, the level of stress encountered by caregivers working in Karangmojo 1 Public health center, Gunungkidul is slightly different, namely at the moderate level. It simply means that age has little or no impact on stress. This is inconsistent with the studies carried out by Aldwin, Sutton, Chiara, & Spiro-III (1996) dan Chen, Peng, Xu, & O'Brien (2018), which stated that age has an impact on coping strategy, therefore, it affects stress levels.

Table 13.
 Categories of Research Respondents in the Stress Variable of Elderly
 based on the Gender of The Elderly

Gender	Stress			Total
	Low	Average	High	
Male	1	4	1	6
Female	4	22	4	30
<i>Total</i>	5	26	5	36

According to table 13, only one male subject has a low-stress level, while four persons have moderate stress levels, and one person has a high-stress level. Meanwhile, 4 female subjects have low-stress levels, while 22 people have moderate stress levels, and 4 of them have a high-stress level. Although in this study, the sample of female caregivers was more than their male counterparts, based on the table, there was no difference in stress levels between the sexes of the workers in Karangmojo 1 Public health center, Gunungkidul. The results of this research are inconsistent with the study carried out by Matud's (2004), which reported that gender affects the coping and stress model.

Table 14.
 Categories of Research Respondents on the Stress Variable of Caregivers
 for the Elderly based on the Caregivers' Occupation

Occupation	Stress			Total
	Low	Average	High	
Farmer	2	5	4	11
Housewife	2	10	0	12
Freelance	0	5	0	5
Teacher	0	2	0	2
Entrepreneur	1	3	1	5
Private Employee	0	1	0	1
<i>Total</i>	5	26	5	36

Based on the table, 2 of the farmers have low-stress levels, while 5 are moderate, and 4 are faced with high-stress levels. Conversely, 2 of the housewives have low-stress levels, ten people experience moderate stress level, and none has a high-stress level. It was discovered that five of the laborers, experienced moderate stress levels, and none encountered low or high-stress levels, also 2 teachers were discovered to possess moderate stress levels. Furthermore, one of the privately employed people has a low-stress level, while three of them experience a moderate stress level, and one individual has a high-stress level. Conclusively, only one private employee experienced moderate stress. The table shows that despite the various occupations of elderly caregivers in Karangmojo 1 Public health center, Gunungkidul, they experience a moderate level of stress.

Table 15.
Categories of Research Respondents in the Variable Stress of Caregivers for the Elderly based on Caregivers' Education

Education	Stress			Total
	Low	Average	High	
S1	0	3	0	3
D3	1	0	0	1
SMA/SMK	0	10	0	10
SMP	2	7	2	11
SD	2	6	3	11
Total	5	26	5	36

In accordance with the data on table 15, it is evident that 3 S1 subjects experience moderate stress levels, while none of them experiences low or high. However, one of the D3 subjects experienced a low-stress level. Approximately 10 subjects from high or vocational schools, experienced moderate stress levels. Furthermore, 2 of the junior high school graduates, experienced low-stress levels, while seven people possess moderate stress levels, while two are high-stress level. Finally, two people from elementary school were discovered to possess low-stress levels, while six of them

experienced moderate stress levels, and three had high-stress levels. It was therefore concluded that an insignificant difference occurred in the stress level of elderly caregivers in Karangmojo Public Health Center 1, Gunungkidul. Although, it is an obvious fact that most elderly caregivers have elementary and junior high school qualifications, therefore educational factor influences the type of emotion regulation applied.

CONCLUSION AND SUGGESTION

Conclusion

Based on the results from this research, it was concluded that there is a correlation between emotion regulation, spirituality, and stress on the elderly caregivers at the Gunungkidul Public Health Center. Emotion regulation and spirituality both have a significant effect on stress. A significant and negative correlation exists between spirituality. This simply means that the higher the spirituality, the lower the level of stress and vice versa. However, there is an insignificant correlation between emotion regulation and stress.

In accordance with the results of this study, it is expected that caregivers need to be able to reduce stress through emotion regulations and spirituality. In addition, the elderly also do not hesitate to ask for help from their families when needed. The results from this study are recommended for the Public Health Center or agency when carrying out a counseling session for the elderly and their companions. It also serves as an additional reference for future studies related to stress experienced by elderly caregivers.

Suggestion

The results of data analysis found that the average caregiver of the elderly regulates emotions and spirituality at a moderate level. Although they do not experience severe stress, they can improve their emotion

regulation and spirituality to help the elderly in living a physically and spiritually healthy life.

To avoid stress, it is expected that caregivers of elderly parents can improve the ability to regulate emotions, by carrying out activities that can cause positive emotions. For instance, when angry, pray to be calmer, and think positively to avoid being sad when experiencing bad events. In addition, to increase emotion regulation, caregivers are expected to also improve their spirituality, by drawing closer to God and taking meaning from events in life. The elderly caregivers need to only pay attention to them, and those they are meant to take care of by being patient and accommodating. The elderly, themselves, are also expected to work together with the caregivers to enable a good relationship. For example, the elderly need to eat the food provided by the caregivers and seek treatment when sick. The Public Health Center, are expected to conduct counseling on how to care for the elderly, to avoid. Future studies are also expected to avoid the shortcomings that exist in this research by replacing the variables with loneliness, self-acceptance, resilience, etc.

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