

CHAPTER 5

SUMMARY AND RECOMMENDATIONS

A descriptive comparative study was conducted to explore the pain experiences of Javanese and Batak patients, to examine the differences in pain experiences, and to explore the cultural beliefs/practices about pain in the two ethnic groups. One hundred twenty three respondents were recruited by using purposive sampling from surgical wards of four government hospitals: Putri Hijau Army Hospital, Dr. Pirmgadi Hospital, Tembakau Deli Hospital, and Haji Adam Malik Hospital in Medan, Indonesia. Data were collected from 16 December 2002 to 28 February 2003. Quantitative data were analyzed by using descriptive statistics, and independent t-test. Simple thematic analysis was conducted to analyze qualitative data.

1. Summary of study findings

The majority of the respondents in this study underwent abdominal surgery and orthopedic surgery. Javanese patients experienced postoperative pain at severe level, and Batak patients also experienced postoperative pain at severe level. For relieving the pain, tramadol was the only medication received by the subjects. This study also found that postoperative pain experienced by Javanese and Batak patients interfered to some degree with their daily activities. The pain experienced by Javanese patients interfered at moderate level and for Batak patients at severe level.

Javanese patients and Batak patients had different pain experience for their worst pain, least pain, average pain, right now pain and for pain interference in general activity, mood, walking ability, normal work, relation with other people, and enjoyment of life. All aspects of pain experience measured in this study had significant difference between Javanese and Batak patients.

Cultural beliefs/practices about pain of Javanese and Batak patients were also revealed in this study. The meanings of pain for Javanese and Batak patients are quite similar. Javanese patients perceived pain as suffering, disturbing, and as a spiritual test. Batak patients perceived pain as disturbing, discomforting, and a tiring experience.

Javanese and Batak patients responded to pain differently. When they were in pain, Javanese patients tried to ignore and just kept silent, showing stoicism. They also tried to divert the pain through religious activities. Batak patients, on the other hand,

responded to pain by yelling, crying, or getting angry, to get attention from others, showing expressiveness. Others, like nurses, perceived it as if Javanese patients had no pain, and were strong enough to cope when suffering, and therefore paid less attention to them regarding the pain. As Batak patients were expressive in communicating their pain, others perceived that Batak patients had very low tolerance to pain or suffering.

2. Implications and Recommendations

1. Nursing Practice

The findings of this study show both that Javanese and Batak patients experienced postoperative pain at severe level, and Batak patients also experienced postoperative pain at severe level. In addition, for the worst pain, Javanese and Batak patients had significantly different experiences. Another important finding indicates that Javanese patients tended to show stoicism when they were in pain, while Batak patients were more expressive. These findings have important implications for nursing practice. When taking care of Javanese or Batak patients with pain, nurses should assess the pain carefully and avoid making judgments based only on their responses. These research findings can also be used by practice nurses, to gain greater understanding of Javanese and Batak patients during painful experiences.

2. Nursing Education

Six dimensions of pain experience of Javanese and Batak patients were examined in this study. Some aspects of pain experience are quite different between the two ethnic groups, such as worst pain experience, pain interference in general activity and responses to pain. Therefore, the findings can be used by nurse educators as baseline data in teaching about pain, and influence of culture to pain experience, for their students. This kind of knowledge is very helpful for students and other nurses to understand the concept of pain and cultural beliefs/practices in relation to pain experience.

3. Nursing Research

This study was conducted by using both a quantitative approach and qualitative approach, to investigate the pain experience. Because this study emphasized more on quantitative approach, a future study, using qualitative approach like phenomenology or ethnography, is needed to investigate the lived experience of the postoperative patient. So that better understanding of the differences in pain experiences between Javanese and Batak patients can be obtained. A replication study, using different populations, is also needed.