

Benson Relaxation Technique to Reduce Anxiety in Inpatients: A Case Study

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ABSTRACT

Background: Anxiety is a common psychological condition often experienced by inpatients due to changes in health status, unfamiliar environments, and uncertainty about treatment. If left untreated, anxiety can lead to various negative outcomes, including increased blood pressure, sleep disturbances, and excessive restlessness. One effective non-pharmacological intervention to reduce anxiety is Benson relaxation therapy, which combines deep breathing techniques with the repetition of calming words or prayers. This study aimed to apply Benson relaxation therapy to reduce patient anxiety in the inpatient ward of Woodward Hospital, Palu. Methods: A descriptive case study design with a nursing care approach was employed. The subject of the study was one patient experiencing moderate anxiety. Benson relaxation therapy was administered for four days, twice daily, with each session lasting 10–20 minutes. Anxiety levels were measured using the Hamilton Anxiety Rating Scale (HARS). Result: The HARS score decreased from 25 (moderate anxiety) to 16 (mild anxiety). The patient also showed improvements in sleep patterns, reduced muscle tension, and alleviation of somatic symptoms such as dizziness and restlessness. Conclusion: Benson relaxation therapy effectively reduces anxiety in hospitalized patients, contributing to the resolution of anxiety-related problems.

INTRODUCTION

Hospitals are fundamentally service-oriented organizations that require effective management to ensure operational sustainability. Hospital management is critical in utilizing and managing human resources efficiently, effectively, and rationally to achieve organizational goals. Hospitals must provide various specialized units to meet patient needs as a service industry. Therefore, they organize departments, such as outpatient and inpatient care units, based on patient requirements. (1) Inpatient care refers to services provided to patients who are admitted to the hospital. These services typically involve using a bed for purposes such as observation, diagnosis, therapy, medical rehabilitation, and other medical support. Additionally, some hospitals offer specialized inpatient categories, such as Executive Inpatient Care, VIP Inpatient Care, and VVIP Inpatient Care, to meet patients' demands for services and facilities that exceed standard provisions. (2)

According to data from the 2018 National Socio-Economic Survey (SUSENAS), approximately 68% of the Indonesian population have been patients at some point. Among them, an estimated 32 out of every 100 patients underwent inpatient care, and 45% of these individuals experienced anxiety. Inpatients require more specialized care compared to other patients. Additionally, the duration of treatment for inpatients is 25% to 45% longer or more intensive than for non-hospitalized patients. This may be attributed to several factors, such as patients' lack of understanding about the reasons for hospitalization, stress related to changes in health conditions, unfamiliar environments, disruptions to daily routines, and limited coping mechanisms. (3)

Anxiety is often equated with fear; however, the two are distinct. Fear is a reaction to a real and immediate threat within the environment. In contrast, anxiety is the body's anticipatory response to a perceived or imagined threat that is not directly linked to the current surroundings. Individuals with anxiety disorders frequently experience excessive worry over trivial or minor issues. (4) If not promptly and adequately managed, anxiety disorders can lead to both psychological and physiological changes, resulting in increased sympathetic nervous system activity. This can cause elevated heart rate, increased blood pressure, irregular breathing, cold sweats, stomach discomfort, urinary disturbances, and reduced energy levels, which may further deteriorate the patient's overall condition. (5)

Health problems experienced by patients can be addressed through both pharmacological and non-pharmacological approaches, in order to avoid medication use and reduce additional costs for the patient. Non-pharmacological techniques used to manage anxiety disorders include cognitive therapy, among others. (6)

deepbreathing therapy, Music therapy (7), Play therapy (8) and Benson therapy.(9-11) Benson relaxation is a belief-based approach that relies on the “faith factor” through the development of a relaxation response method. This method involves the repeated utterance of a specific word or phrase in a rhythmic pattern, accompanied by a state of surrender or letting go. The focus may be directed toward the names of God or any words that hold a calming meaning for the individual. This approach aims to help individuals achieve a more relaxed and improved state of well-being.(10) Benson relaxation is an effective technique to help individuals achieve a more relaxed state. The primary goal of this nursing intervention is to reduce anxiety levels in patients undergoing medical procedures. However, it is important to note that Benson relaxation should not be applied to patients who are unconscious.(9)

Another advantage of this technique is that it is cost-free, relatively simple, and can be performed in a short period, typically between 10 to 20 minutes. One of its most notable aspects is the passive attitude required, which serves as a key factor in accelerating the patient’s relaxation process.(12) This makes it convenient for nurses, as it does not require extensive time and allows them to continue providing care to other patients. Based on this rationale, the researcher was motivated to conduct a case study on the application of Benson relaxation therapy to reduce anxiety levels in patients in the inpatient ward of Woodward General Hospital, Palu.

METHODS

This study employed a descriptive case study method involving a single respondent who met the criteria of experiencing a nursing problem in the form of mild to moderate anxiety and being over 18 years of age. The research began by obtaining approval from Woodward Hospital Palu through the submission of a research proposal and direct interviews regarding the implementation of the therapy. Permission to conduct the study was granted under letter number 801/VI.II/III/2025. In accordance with research ethics, the researcher provided an informed consent form to the patient as a confirmation of the patient’s willingness to participate and undergo the intervention. The anxiety level was measured before and after the intervention using the Hamilton Anxiety Rating Scale (HARS), which has a reliability coefficient ranging from 0.75 to 0.937, indicating high reliability and strong validity in assessing anxiety disorders. Additionally, the HARS instrument demonstrates a sensitivity of 85.7% and a specificity of 63.5%. Anxiety severity based on HARS is categorized as follows: <14 = no anxiety; 14–20 = mild anxiety; 21–27 = moderate anxiety; 28–41 = severe anxiety; and 42–56 = very severe anxiety. The Benson relaxation therapy was administered over four consecutive days, with each session lasting 15 minutes, conducted in the morning and evening during the hospitalization period.

RESULT AND DISCUSSION

RESULT

Table 1. Patient Assessment Data at Woodward Hospital Palu

Pre Intervention	Post Intervention
Patient felt anxious	Anxiety decreased
Patient felt worried	Complaints of dizziness reduced
Patient felt dizzy	Sleep patterns improved
Frequent sleep disturbances	Decreased muscle tension
Blood pressure: 130/80 mmHg	Reduced restlessness
Pulse: 85 bpm	Blood pressure: 120/80 mmHg
HARS score: 25 (moderate anxiety)	Pulse: 80 bpm
	HARS score: 16 (mild anxiety)

Table 1 describes the assessment results of a patient identified as Ms. A, aged 19, who was diagnosed with gastritis. During the assessment, Ms. A, who was hospitalized in the inpatient ward, expressed feeling anxious about her current illness, stating that she had experienced similar episodes frequently, but this time it was severe enough to require hospitalization. The patient reported being worried and anxious about the academic activities she was missing due to her illness. She also complained of frequent dizziness and disrupted sleep. Her blood pressure was recorded at 130/80 mmHg, pulse at 85 beats per minute, and her anxiety level, measured using the Hamilton Anxiety Rating Scale (HARS), was 25, indicating moderate anxiety. Following the implementation of nursing

interventions using Benson relaxation therapy over a period of five days, the patient reported a reduction in anxiety, decreased complaints

DISCUSSION

The Effect of Benson Relaxation Therapy on Patient Anxiety Levels at Woodward Hospital Palu

Several signs and symptoms commonly experienced by individuals with anxiety disorders include increased heart rate and blood pressure, self-focused attention, rapid and excessive speech, restlessness, sweating, fatigue, feelings of insecurity, difficulty concentrating, feelings of worthlessness, headaches, and trouble sleeping.(17) This anxiety may be experienced by patients during hospitalization. It is likely triggered by several factors, such as a lack of understanding about the reason for their admission, stress caused by changes in health conditions, unfamiliar environments, disruption of daily routines, and limited coping mechanisms.(3) Anxiety is a vague and pervasive form of worry that often arises alongside feelings of uncertainty and helplessness, without any identifiable object (18). Anxiety can be described as “something that is felt,” an emotional condition characterized by fear, tension, nervousness, and worry. It is often accompanied by physical arousal and may have a positive effect, especially when facing perceived threatening situations (10).

Several signs and symptoms are commonly experienced by individuals with anxiety disorders. Observable behaviors include increased heart rate and blood pressure, self-focused attention, rapid and excessive speech, restlessness, sweating, fatigue, feelings of insecurity, difficulty concentrating, feelings of worthlessness, headaches, and sleep disturbances (17). If not properly and promptly managed, anxiety or anxiety disorders may lead to both psychological and physiological changes, which activate the sympathetic nervous system. This can result in increased heart rate, elevated blood pressure, irregular breathing, cold sweats, stomach discomfort, urinary disturbances, and decreased energy levels, all of which may further worsen the patient’s condition (5).

The data obtained from the patient assessment were used to determine nursing problems or diagnoses, as well as to establish goals and nursing care plans. The planned interventions included 5 observational, 5 therapeutic, and 6 educational interventions, with five targeted outcomes: reduced anxiety, decreased dizziness, improved sleep patterns, reduced muscle tension, and reduced restlessness. These align with the expected interventions and outcomes according to the SIKI Working Group of DPP PPNI (2018) and source (20).

The primary focus of intervention in this case study was Benson relaxation therapy, aimed at minimizing the use of medication and reducing healthcare costs for patients by alleviating anxiety. Benson relaxation is a technique that incorporates the patient’s faith factor to help achieve a state of relaxation, which supports better health and well-being (10). This therapy relies on positive affirmation expressed through calming words, creating an internal environment that fosters the patient’s optimal state of health and wellness (21). One of the primary goals of nursing interventions is to reduce anxiety in patients undergoing medical procedures. However, it is important to note that Benson relaxation should not be used on unconscious patients (9).

On the first day, an assessment was conducted on the patient’s complaints, where the patient expressed feelings of anxiety. Anxiety levels were measured using the Hamilton Anxiety Rating Scale (HARS), and a score of 25 was recorded, indicating moderate anxiety. Observations were then made regarding the patient’s previous experience with relaxation techniques. The patient stated that she had tried deep breathing techniques before, but when asked to perform them, she appeared to struggle with applying the technique correctly. Therefore, the patient was educated about Benson relaxation therapy, including its definition, benefits, and implementation procedure. After the explanation, the patient was asked to practice the relaxation technique. Before and after each session, vital signs and muscle tension were measured to evaluate the effectiveness of the intervention. The therapy was continued for the next three days, twice daily in the morning and evening. On the final day, anxiety levels were reassessed using the HARS, and the score had decreased from 25 (moderate anxiety) to 16 (mild anxiety), with all five expected outcomes achieved: reduced anxiety, decreased dizziness, improved sleep quality, reduced muscle tension, and reduced restlessness.

Several journal studies have reported that the duration of Benson relaxation therapy to reduce anxiety typically involves twice-daily sessions, in the morning and evening, lasting 15–20 minutes over four weeks (22–24); twice daily for 20 minutes over one month (25,26); or twice daily for 10 minutes over four days (27). Despite

the variations in duration, all of these studies concluded that regular and consistent practice of the therapy is effective in reducing patient anxiety. In addition to the reduction in anxiety levels, the patient in this study also no longer complained of dizziness, demonstrated improved sleep patterns, less muscle tension, and decreased restlessness. Blood pressure also improved from 130/80 mmHg to 120/80 mmHg.

The final results of implementing Benson relaxation therapy in this study show a decrease in anxiety, although not a complete resolution of anxiety symptoms. The researcher believes this outcome may be due to the limited duration of therapy provided during hospitalization and the short implementation time, as well as the sample size being limited to only one participant, which may have affected the ability to measure the therapy's effectiveness significantly. This aligns with previous studies where similar therapy was given over four days to anxious patients, resulting in reduced but not eliminated anxiety levels. These previous findings indicate that overcoming anxiety entirely may require a longer, more intensive, and closely monitored therapy period (27).

CONCLUSION

Based on the findings of the case study on the application of Benson relaxation therapy in the inpatient ward of Woodward General Hospital Palu, it can be concluded that this therapy is effective in reducing anxiety levels. This is evidenced by the decrease in the HARS questionnaire score from 25 (moderate anxiety) to 16 (mild anxiety). In addition, the patient no longer reported dizziness, showed improved sleep patterns, reduced muscle tension, and decreased restlessness. Blood pressure also improved from 130/80 mmHg to 120/80 mmHg.

The recovery process from anxiety requires more time and intensive effort, particularly in the application of Benson relaxation therapy. Therefore, it is recommended that nursing staff incorporate Benson relaxation into the nursing care process, especially when addressing anxiety-related issues. Future researchers are advised to consider the duration of therapy, anxiety levels, and number of respondents when implementing this intervention.

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