Provides for Inpatients' Self-Care Needs

Kamesyworo¹, Imas Zikriyani²
¹²Ministry of Health Health Polytechnic Palembang, South Sumatra, Indonesia

Email: bellaanggita@student.poltekkespalembang.ac.id, irakusumawaty@poltekkespalembang.ac.id

ABSTRACT

Self-care deficit is a person's inability to fulfill basic self-care needs independently. The aim of the research is to obtain an overview of the implementation of nursing needs to fulfill self-care needs in patients with self-care deficit. Descriptive research, with an implementation method using nursing care, with a process of assessment, interviews and direct observation carried out from 12 to 18 April 2021. The case study subjects were two schizophrenic patients with self-care deficit problems in the Stork Room at Ernaldi Hospital Bahr, South Sumatra Province. The results of this study indicate that fulfilling self-care needs is very effective in overcoming the problem of self-care deficit.

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1. INTRODUCTION

Mental disorders cause sufferers to be unable to properly assess reality, and no longer have control over themselves to prevent disturbing other people or damaging/hurting themselves. A common problem experienced by patients with mental disorders is a lack of self-care such as carrying out routine daily work (ADL), especially dental and oral hygiene (Katrili, 2015).

Self-care deficit is inabililty a person to perform basic ADL needs such as eating, personal hygiene, dressing, toileting, sleeping, social interaction, or safety. psychiatry nurses can provide professional practice to this specific group using several basic principles; namely the development of independence, therapeutic communication, and collaboration. To increase the level of independence, flexibility of nurses and provide opportunities for clients to succeed (Susanti, 2010).

According to WHO data (2016), there are around 35 million people affected by depression, 60 million people affected by bipolar disorder, 21 million affected by schizophrenia, and 47.5 million affected by dementia. WHO estimates that there are around 450 million people in the world who experience mental disorders. Mental disorders are also associated with suicide, more than 90% of the 1 million suicides each year are due to mental disorders.

Mental disorders According to Law No. 18 of 2014 are people with mental disorders (ODGJ) in thoughts, behavior and feelings which are manifested in the form of a set of symptoms or changes, behavior meaningful, and can cause suffering and obstacles in carrying out their functions as human beings. In ODGJ a third of this occurrence is developing, as many as 8 out of 10 sufferers of mental disorders do not receive treatment (Ministry of Health of the Republic of Indonesia, 2012).
2. **RESEARCH METHOD**

This research is descriptive in the form of a case study using an approach, the nursing process which includes assessment of nursing diagnosis, implementation planning and evaluation. The research subjects were two schizophrenic patients with self-care deficit nursing problems in the Stork Room at Ernaldi Bahar Hospital, South Sumatra Province. It was carried out for seven days on April 12-18 2021.

Before conducting the research, the researcher applied for research permission by sending an ethical review document to the Ernaldi Bahar Hospital Ethics Committee, South Sumatra Province, and was declared to have passed the ethical review with No: 420/06613/Rs.ERBA/2021

3. **RESULTS AND ANALYSIS**

3.1 **Results**

The first patient was named Mr. “F” is 23 years old. Male gender,. The patient is no longer in school, unmarried, Muslim religion. Entered the hospital on April 12 2021 with. Since ± 1 month ago, before entering the hospital, the patient often threw stones at the neighbor's house, the patient also often went into rages, previously the patient was shackled and unkempt. Because it was disturbing, the patient was finally taken to the Ernaldi Bahar Mental Hospital, South Sumatra Province. This patient is being treated for the first time at home.

Meanwhile, the second patient named Mr. “A” is 32 years old. Male gender, patient no longer in school, divorced status, Islamic religion. Entered the hospital on March 12 2021. Since ± 4 months ago, the patient often wandered around naked, the patient also often threw tantrums, and the patient often ate like an animal. Because it was disturbing, the client was finally taken back to the Ernaldi Bahar Mental Hospital, South Sumatra Province. The patient has previously been treated at Ernaldi Bahar Hospital, and this is the second time.

From the results of the research and data analysis above, it can be concluded that the nursing diagnoses in the first and second patients are self-care deficit, impaired self-concept, low self-esteem, high risk of violent behavior. The primary diagnosis raised was self-care deficit.

3.2 **Discussion**

Based on the results of the study after implementing nursing to fulfill self-care for Mr. F and Mr. The patient's application is to fulfill self-care needs independently which aims to reduce the problem of self-care deficit in Mr. F and Mr. A. This is confirmed by theory Halida et al (2016) stated that fulfilling self-care needs is an effort to overcome personal hygiene problems by inviting patients to carry out personal hygiene care independently on a daily basis.

When the client's condition was assessed, it was found that his clothes were not neat, his hair looked long and unkempt, his nails were long, his body was bad and he rarely bathed. Results study Hastuti & Rohmat (2018) which states that in nursing care for patients with self-care deficits there are four Implementation Strategies (SP), namely the first SP explains the importance of personal hygiene, the second SP teaches eating and drinking in an orderly and neat manner, the third SP teaches dressing up and decorating, and the fourth SP teaches defecation/BAK independently.

The implementation of nursing on the first day is to build a relationship of mutual trust by greeting the patient with friendly, introduce yourself, ask the client how he feels today, explain the purpose of the meeting, make a contract for the next time. Then the implementation continues on the second day, namely observing the patient's behavior regarding self-care and explaining the importance of maintaining personal hygiene. Then implementation on the third day, namely teaching and inviting the patient to carry out dressing and decoration independently, making a contract for the time of the next meeting.

The implementation on the fourth day was to teach patients to eat and drink in an orderly and neat manner without being messy and to include it in the patient's daily activities, continued the SP. Continued with the implementation on the fifth day, namely explaining to the patient the importance of bathing twice a day, explaining to the patient the impact of not bathing, and teaching the patient how to bathe properly. Then the last implementation on the sixth day is evaluating the self-care activities independently that have been taught to the patient, and including them in the patient's daily activity schedule.
In carrying out the implementation, researchers found that there were supporting and inhibiting factors. The factor that supports the success of this research is therapeutic communication, this is strengthened by Sari (2016). One of the efforts besides implementing implementation strategies is by implementing therapeutic communication. Communication is very necessary to support success in healing patients. Communication aims to build relationships of mutual trust, improve interpersonal relationships, and achieve realistic personal goals.

Therapeutic communication can be carried out by patients with friends, nurses and family. Communication can be an influential determinant of engagement and benefits for psychiatric services.

Apart from that, there was also an inhibiting factor that was found, namely that clients often forgot the actions that had been explained, this was confirmed by research Jalil (2015) which suggests several inhibiting factors which are influenced by several factors such as age, gender, level of development, health status, family system, environmental, socio-cultural factors and the availability of resources/facilities.

Positive and negative symptoms that occur as a result of schizophrenia can also cause self-care deficits regarding care and lack of family support, as well as low self-esteem. Lack of family support greatly influences the patient's health, this is confirmed by Videbeck's (2011) research, namely that the family is a part The most important thing is to support the patient to resolve the problem of hallucinations. The family must also know the patient's feelings and condition every day when he is at home.

4. CONCLUSION

After the researcher implemented mental nursing on Mr. F and Mr. A with the problem of Self-Care Deficit disorder in the Bangau Room at the Erdal Bahar Mental Hospital, South Sumatra Province in 2021 which was carried out from April 13 to April 19 2021. The researcher carried out the implementation of self-care independently according to the intervention. The researcher was able to apply the implementation to both patients. The patient already knew and could demonstrate the implementation of what had been taught.

Looking at the results of what the researchers have done, the success of implementing the implementation strategy can be said to be successful if the development of both clients is able to eat and drink in an orderly manner and is able to clean themselves independently and apply the methods that the nurse has taught during implementation.

REFERENCES