

Penatalaksanaan asuhan keperawatan jiwa pada klien harga diri rendah dan risiko perilaku kekerasan dengan pendekatan model adaptasi di Ruang Sadewa RSMM Bogor = The implementation of psychiatric nursing care on low self esteem and violence behaviour risks clients by utilizing adaptation model approach in Sadewa Room at RSMM Bogor

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Abstrak

Harga diri rendah (HDR) merupakan penilaian atau perasaan negatif mengenai diri sendiri atau kemampuan diri sendiri. Munculnya pikiran negatif pada klien skizofrenia dikarenakan adanya kesulitan dalam berfikir jernih dan logis, sering kali sulit konsentrasi sehingga perhatian mudah teralih yang berlanjut membuat klien gaduh gelisah dan menyebabkan perilaku kekerasan. Upaya yang dapat dilakukan untuk pasien dengan gangguan jiwa yang didiagnosa HDR dan risiko perilaku kekerasan (RPK) yaitu dengan memberikan psikoterapi diantaranya cognitive therapy (CT), cognitive behaviour therapy (CBT), rational emotive behaviour therapy (REBT), dan assertive training (AT). Tujuan penulisan karya ilmiah akhir ini adalah menggambarkan penatalaksanaan asuhan keperawatan dengan pendekatan model adaptasi. Kegiatan asuhan keperawatan dilakukan pada 13 orang klien di ruang Sadewa RSMM Bogor. Hasil pelaksanaan menunjukkan bahwa CT, CBT, dan REBT efektif diberikan pada klien HDR dan AT, CBT, REBT, serta kombinasi CBT dan AT efektif diberikan pada klien RPK. Berdasarkan hasil diatas perlu direkomendasikan bahwa terapi spesialis perlu diberikan pada klien HDR dan RPK.

<hr>Low self esteem (HDR) is a negative feelings or assessment about ownselves or ownselves capability. The emergence of negative thoughts on schizophrenia clients are caused by the difficulty in thinking clearly and logically, and frequent difficulty in concentrating leading to easily distracted attention which ends up in restlessness. This condition later would trigger violence behaviors. Amongst some treatments that can be given to clients diagnosed with HDR and violence behaviour risks (RPK) are psychotherapies as cognitive therapy (CT), cognitive behaviour therapy (CBT), rational emotive behaviour therapy (REBT), and assertive training (AT). This article aims to describe the implementation of nursing care management by using adaptation model approach. The nursing care was given to 13 clients at Sadewa room RSMM Bogor. The findings showed that the implementation of CT, CBT, and REBT were given effectively to HDR clients; and AT, CBT, REBT, and the combination of CBT and AT were effectively given to RPK clients. Based on the above findings, it is recommended that specialist therapies to be given to HDR and RPK clients.