

# Penerapan terapi penghentian pikiran, relaksasi otot progresif, terapi kognitif dan psikoedukasi keluarga pada klien ansietas dengan penyakit fisik melalui pendekatan teori adaptasi Roy di Rumah Sakit Umum = Implementation of thought stopping therapy progressive muscle relaxation therapy cognitive therapy and family psychoeducation for anxiety clients using adaptation roy model in General Hospital

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## Abstrak

Klien dengan penyakit fisik cenderung mengalami ansietas dan kondisi tersebut dapat memperburuk kondisi fisiknya. Karya ilmiah akhir ini bertujuan untuk mengetahui hasil penerapan terapi penghentian pikiran, relaksasi otot progresif, terapi kognitif dan psikoedukasi keluarga terhadap respons ansietas klien.

Responden sejumlah 71 klien ansietas dengan penyakit fisik, terdiri dari 36 klien mendapatkan paket pertama yaitu tindakan ners dan ners spesialis (terapi penghentian pikiran, relaksasi otot progresif dan psikoedukasi keluarga) serta 35 klien mendapatkan paket kedua yaitu tindakan ners dan ners spesialis (terapi kognitif dan psikoedukasi keluarga).

Analisis dilakukan terhadap tanda dan gejala dan kemampuan klien dan keluarga sebelum dan sesudah dilakukan tindakan keperawatan. Hasil penerapan tindakan paket pertama dan paket kedua menunjukkan penurunan tanda gejala ansietas secara bermakna pada semua respons, kedua paket tidak ada perbedaan signifikan. Kedua paket tindakan ini direkomendasikan untuk mengatasi ansietas pada klien.

.....Clients with physical illness tend to experience anxiety and the condition can worsen their physical condition. The aim of this study was to determine the result of the implementation of the thought stopping therapy, progressive muscle relaxation therapy, cognitive therapy and family psychoeducation for client with anxiety. A total of 71 anxiety clients with physical illness participated in this study, from which 36 clients received the first intervention: general nurses and nurse specialists intervention (thought stopping therapy, progressive muscle relaxation and family psychoeducation) and 35 clients received the second intervention: general nurses and nurse specialists intervention (cognitive therapy and family psychoeducation).

The analysis was conducted on the signs and symptoms of anxiety clients and the ability of clients and families before and after the nursing intervention. The results of the first and second of nursing intervention showed a decrease in signs and symptoms of anxiety on all the responses and the increased capacity of clients and families in overcoming anxiety. There was no significant difference from giving the first and second intervention in the reduction of the signs and symptoms of anxiety. This intervention, therefore, is recommended to overcome anxiety in clients.