

Changes in the signs, symptoms, and anger management of patients with a risk of violent behavior after receiving assertive training and family psychoeducation using roy's theoretical approach: A case report

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Abstrak

Mental disorders are predicted to increase every year. Patients with severe mental disorders, such as schizophrenia, often engage in violent behavior. The treatment of such patients can use general nursing treatments (anger management with physical therapy, taking medicines regularly, and verbal and spiritual methods) and specialist nursing interventions (assertive training and family psychoeducation). This case report involved 11 patients, with the majority aged between 26 and 60 years, unemployed, high school graduates, unmarried, and with previous inpatient history. Generalist and specialist nursing interventions (assertive training and family psychoeducation) use Roy's adaptation theory and Stuart's stress adaptation approach. Nursing interventions were conducted sequentially, starting with generalist nursing interventions, followed by specialist ones. The method used was a pre-posttest in which each patient received generalist and specialist nursing interventions, assertive training, and family psychoeducation, each consisting of five sessions. Results of assertive training therapy and family psychoeducation showed a decrease in the signs and symptoms of violent behavior as well as an improvement in the patient's ability to overcome the risk of violent behavior. The application of Roy's adaptation theory and Stuart's stress adaptation approach is potentially appropriate for the treatment of patients with a risk of violent behavior.

.....Gangguan jiwa secara keseluruhan diprediksikan akan semakin meningkat setiap tahunnya. Pasien dengan masalah gangguan jiwa berat seperti skizofrenia seringkali melakukan perilaku kekerasan. Penanganan pasien dengan perilaku kekerasan dapat menggunakan tindakan keperawatan generalis (mengontrol marah dengan cara fisik, minum obat teratur, cara verbal dan cara spiritual) dan tindakan keperawatan spesialis (latihan asertif dan psikoedukasi keluarga). Laporan kasus ini melibatkan 11 pasien dengan karakteristik mayoritas usia 26–60 tahun, tidak bekerja, tingkat pendidikan SMA, belum menikah, dan memiliki riwayat dirawat sebelumnya. Tindakan keperawatan yang diberikan adalah tindakan keperawatan generalis dan ners spesialis latihan asertif dan psikoedukasi keluarga dengan menggunakan pendekatan teori adaptasi Roy dan adaptasi stress Stuart. Tindakan keperawatan dilakukan secara berurutan/ bertahap dimulai dengan tindakan keperawatan generalis kemudian dilanjutkan dengan tindakan keperawatan ners spesialis. Metode yang digunakan adalah pre-posttest dimana setiap pasien mendapatkan tindakan generalis serta tindakan ners spesialis latihan asertif dan psikoedukasi keluarga yang masing-masing terdiri dari 5 sesi. Hasil penerapan terapi latihan asertif dan psikoedukasi keluarga menunjukkan terjadinya penurunan tanda dan gejala risiko perilaku kekerasan serta terjadinya peningkatan kemampuan pasien dalam mengatasi risiko perilaku kekerasan. Penggunaan pendekatan teori adaptasi Roy dan teori adaptasi stress Stuart berpotensi sesuai diterapkan pada penanganan pasien dengan risiko perilaku kekerasan.