

## THE EFFECT OF IMPLEMENTING PERSONAL HYGIENE INDEPENDENCE: BATHING ON SELF-CARE DEFICIT

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### Abstrak

*There are 42 people suffering from mental disorders at the Duren Sawit Regional Special Hospital, Jakarta in the Bengkoang Room in June 2023. With cases of Low Self-Esteem in 15 patients and Self-Care Deficit in 20 patients. This research aims to determine the comparison between three patients using the correct and independent method of bathing in the Bengkoang Room at the Duren Sawit Regional Special Hospital, Jakarta. The research method used a case study approach to providing nursing care for patients with low self-esteem self-concept disorders who experience bathing self-care deficits in three patients starting from assessment, data analysis, diagnosis, intervention, implementation and nursing evaluation. The nursing process was carried out for 6 days at a special hospital in the Duren Sawit area of Jakarta. Data analysis required collaboration with room nurses and patients to assist in the success of providing nursing care. The research results of three patients with low self-esteem self-concept disorders who experienced bathing self-care deficits by teaching them how to bathe correctly from day 1 to day 6, by improving how to bathe correctly independently and the desire to bathe. From the results of this research, three patients were able to bathe in the correct way and independently because of the motivation and support provided.*

**Keywords:** Low self-esteem, self-care deficit, personal hygiene: Bathing.

### 1. INTRODUCTION

Mental health according to WHO (Word Health Organization) is when a person feels healthy and happy, able to face life's challenges as well as accept the people around him and as it should be, has a positive attitude towards himself and others. Mental health is a condition where a person can develop physically, mentally, spiritually and socially, so that the person can realize their own abilities, can handle pressure, can work productively, and can contribute to their group or community. At the moment, the World Health Organization (WHO) estimates that the global prevalence of hypertension is 22% of the world's total population. Of the number of sufferers, only less than a fifth make efforts to control their blood pressure. Data from WHO estimates that there are 1.13 billion people with hypertension worldwide, two-thirds of cases are in countries with lower middle income. The number of cases will continue to increase every year and in 2025 it is estimated that it will reach 1.5 billion cases, and the death rate due to hypertension and its complications is estimated to reach 9.4 million people every year.

The role of the family in caring for family members who suffer from hypertension is very necessary to overcome nursing problems in individuals who suffer from hypertension.

Hypertension sufferers who receive support and attention from their families tend to be able to overcome the common problem of hypertension, namely compliance with taking medication. If the family pays attention to the client's lifestyle such as smoking habits, consuming foods high in sodium, physical activity, hypertension treatment will tend to be easy to carry out with optimal results, in contrast to sufferers who do not receive support from the family. Self-care is one of the basic abilities that humans have to fulfill their needs in order to maintain their life, health and well-being in accordance with their health condition. Patients are declared to have impaired self-care if they are unable to carry out self-care.

Limited self-care is usually caused by stressors that are quite severe and difficult for the patient to handle so that he does not want to take care of or look after himself in terms of bathing, dressing, titivate, eating, defecating and urinating. If an interview is done by a nurse, then it is possible that the patient could experience a high risk of social isolation. Self-care deficit in patients is characterized by refusing to do self-care, unable to bathe or wear clothes, or titivate independently, as well as a lack of interest in carrying out self-care. The signs that appear in patients with self-care deficits are very typical of distancing themselves from the principles of cleanliness or personal hygiene, where all these signs tend to be actions and feelings of rejection or being lazy about carrying out personal hygiene. If the patient's personal hygiene is not fulfilled, it will cause problems, such as physical disorders, namely the oral mucosa, skin integrity, etc. You can also experience psychological disorders.

## **2. METHODOLOGY**

The design used in preparing this research is descriptive in the form of an experimental case study with the aim of exploring the problem of nursing care for respondents with self-care deficits in personal hygiene independence: bathing. The approach used is a nursing care approach which includes assessment, diagnosis, planning, action and nursing evaluation at RSKD Duren Sawit, East of Jakarta. 10 respondents are taken with the same medical diagnosis and nursing problem. The location used in this research is RSKD Duren Sawit, East of Jakarta. The data collection technique carried out by using the interview method using the format of assessment, observation, documentation studies by looking at the results of physical examination data, and experimental studies carried out by providing self-care deficit interventions in personal hygiene independence: bathing for respondents who experienced depression. Low self-esteem at RSKD Duren Sawit, East of Jakarta. The validity of the data carried out by researchers is intended to prove the quality of the data or information obtained in the research so as to produce data with high validity. In addition, data validity is carried out by extending the observation or action time, additional sources of information using data triangulation in data collection. The data analysis process evaluates the extent of the success of the nursing actions that have been carried out in self-care, independence, personal hygiene: bathing. Research ethics uses informed consent, anonymity and confidentiality.

## **3. RESULTS**

### **3.1. Nursing Care for Patients with Hypertension**

#### **3.1.1 Assessment**

Assessment is the initial stage of the nursing process which aims to collect data so that problems that occur in patients can be identified. Assessment was the initial stage and main basis of the nursing process which consists of collecting data and formulating patient needs or problems. Collecting assessment data includes aspects of patient identity, reason for admission, predisposing factors, physical

examination, psychosocial, mental status, need for discharge preparation, coping mechanisms, psychosocial and environmental problems, lack of knowledge about, and medical aspects. In collecting data, the author used interview methods with respondents, room nurses, and medical records. From the study of patient identity in theory and cases, there was no gap between theory and cases as found by the author.

### **3.1.2 Nursing Diagnosis**

From the results of the assessment carried out on the respondents, nursing diagnoses were obtained, namely Low Self-Esteem, Ineffective therapeutic regimen, Self-care deficit, and social isolation.

### **3.1.3 Nursing Intervention**

The general nursing plan has been created and adjusted by the author and a time has been set to make it easier to carry out evaluations as well as in accordance with the time for providing nursing care.

### **3.1.4 Nursing Implementation**

Nursing implementation is the stage when the nurse applies the nursing care plan to help the patient achieve the goals that have been set. At the nursing implementation stage, the author carried out nursing actions on these respondents which referred to nursing interventions that had been previously determined based on theory and cases according to the patient's conditions and needs. From the diagnosis found in the case, what can be implemented is the diagnosis of Bathing Self-Care Deficit. TUK 1: Patients can recognize the importance of personal hygiene when bathing, TUK 2 Patients can identify personal hygiene by bathing correctly, TUK 3 Patients can carry out self-care hygiene by bathing in the correct way independently accompanied by a nurse, TUK 4: Patients can maintain personal hygiene and bathe in the correct way independently.

Supporting factors in the implementation stage are cooperative respondent, happy to communicate with, has an interest in bathing after being motivated and is easy to direct. Inhibiting factors in the implementation stage are: respondent often looks away and stutters, lacks eye contact, the patient doesn't talk much. There was no family visiting, so TUK 5 could not be held. The solution in solving the problem is that the author frequently interacts even briefly, collaborates with the room nurse to continue implementation, and provides support/motivation to the respondent.

### **3.1.5 Nursing Evaluation**

Evaluation is the final stage of the nursing process, where this activity is carried out continuously to determine whether the plan is effective and how the nursing plan should be continued. The evaluation carried out by the author was based on the condition of the respondents and was made according to the problems in the evaluation, namely by using SOAP (Subjective, Objective, Analysis and Planning). Supporting factors in the final evaluation of respondents are that respondents are willing to express their feelings at each meeting and are willing to take actions that have been taught by the author and nurse. This makes it easier

for the writer to analyze and makes it easier for the writer to carry out the nursing actions that have been given to the respondents.

The inhibiting factors found in the field among respondents in carrying out self-care by bathing properly were that respondents were lazy to do activities and lazy to take a shower in the morning because it was cold. Nursing problems are achieved because they are often given motivation and often communicated with by writers, nurses and colleagues to help provide support to patients. The solution in solving the problem is to give motivation to respondents who experience a decrease in interest in bathing properly.

#### 4. CONCLUSIONS

The author has done research on respondents with low self-esteem self-concept disorders who experience self-care deficits: bathing at RSKD Duren Sawit, East of Jakarta. From the data obtained, each respondent was able to build a relationship of mutual trust, could carry out self-care with the help of a nurse and carry out self-care independently, as well as evaluating the daily activity schedule. The supporting factor in implementing nursing actions was the existence of supporting data and sources, making it easier for the author to make a diagnosis. Respondents were coherent and can be directed, making it easier for the writer to carry out actions. The inhibiting factor in confirming the diagnosis was that the three patients appeared lethargic and often looked away when spoken to

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