

RESEARCH ARTICLE

Family Support Relationship with Self Concept of Lepers Elly Uyo Public Health Centre (Puskesmas)

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ABSTRACT

Family support for leprosy patients in the Working Area of Puskesmas Elly Uyo is low. In the early days the patient suffered from leprosy, there was absolutely no family support for 2 to 4 months. The concept of leprosy in the working area of Puskesmas Elly Uyo is still low; they often isolate themselves from the community as well as to the family. Every month the puskesmas collect lepers to be given medicine and counseling, but only about 10 lepers come. Based on this background, researchers want to know the relationship of family support to the concept of self-leper. This study aims to find out the relationship between family support and the concept of self-leper in the working area of Puskesmas Elly Uyo. This research is a quantitative correlational research with cross sectional approach. The research population is leprosy patients in Puskesmas Elly Uyo Ardupura Village as many as 60 people. Research instrument was in the form of questionnaires. Data analysis techniques are using Chi Square test.

This study concluded that:

- (1) Family support in lepers in the working area of Puskesmas Elly Uyo is mostly low at 70%.
- (2) The concept of self in lepers in the working area of Puskesmas Elly Uyo is less (55%).
- (3) There is a relationship of family support with the concept of self in lepers in the working area of Puskesmas Elly Uyo, where the better the family support, the better the concept of leprosy patients will be better (p -value = 0.956).

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Keywords

- Leper
- Family support
- Self-concept

INTRODUCTION

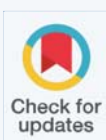
Leprosy (leprosy) is a chronic disease caused by mycobacterium leprae infection. Leprosy is common in tropical and subtropical areas where the community has a low socioeconomic level, the lower the socioeconomic the heavier the disease. The effects of leprosy will affect sufferers from various aspects and also result in a declining quality of life [1].

The effects of leprosy will affect sufferers from various aspects and also result in a declining quality of life [1]. Prevention of leprosy transmission behavior is important in order to reduce the number of lepers as targeted by the global WHO in the Leprosy Eradicating Year (EKT) 2010 is expected to be less prevalence of leprosy and 1 per 10,000 inhabitants and can be prevented by intervention of predisposing factors, supporting factors and driving factors. Based on the initial survey conducted on the family of sufferers showed that there are still families of sufferers

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who do not know the understanding of leprosy, signs and symptoms of leprosy and there are 2 lepers in one house, it shows that there is transmission in the house contact. Leprosy transmission can be prevented by means of health education so that families who are in contact with lepers and the public understand about the understanding of leprosy, causes arising from leprosy, signs and symptoms of leprosy, ways of transmission and consequences if not treated early and regular leprosy [2].

The number of new cases of leprosy in the world in 2015 was about 210,758. Of these, the most were in Southeast Asia (156,118) followed by the Americas (28,806), Africa (20,004), and the rest in other regions (www.who.international leprosy, 2018).

Indonesia in leprosy management has been better; this is shown with Indonesia ranked 4th after India, Brazil, and Nepal. Indonesia in the last 10 years (until December 2003) has managed to show leprosy pain rate of about 85% from 107,271 people to 17,137 people. In 2000 the prevalence was 0.86 per 10,000 inhabitants to 1.05 per 10,000 inhabitants in 2007. Based on distribution per province, the highest prevalence of leprosy is found in West Papua province at 9.69 followed by North Maluku at 6.66 and Papua at 4.42 per 10,000 inhabitants [3].

Papua province data shows that in 2016 there were 1240 cases of leprosy consisting of leprosy type Paucity Bacillary (PB) children amounted to 148 cases, while adult Paucity Bacillary (PB) type cases amounted to 144 cases and adult Leprosy Multi Bacillary (MB) amounted to 865 cases. Raise Case Detection Rate (CDR) population of 33.95 per 100,000 inhabitants in 2017 data shows found cases of leprosy as many as 1166 cases with details of leprosy type PB children amounted to 110 cases and leprosy type MB children totaled 171 cases, while leprosy type PB adults amounted to 147 cases and leprosy type MB adults amounted to 738 cases [3-5].

Leprosy patients will experience some problems either physically, psychologically, socially, or economically. This usually arises because leprosy patients do not want treatment; patients are late for treatment and patients relapse causing persistent and terrible defects. This is because usually the clinical manifestations seen on the patient's skin are reddish white patches, bumps, slow nose, elongated ears, severed fingers and toes, amputation scars, thus giving a frightening picture, these clinical manifestations will cause feelings of shame, low self-esteem, depression, loneliness, or even self-refusal, and the public will isolate leprosy patients so that it is difficult to find work until a psychological, social, and economic problems. Disability is one of the causes of stressors in any change in the Individual. In clients treated at Elly Uyo Health Center, a change in self-esteem is very likely if there is a stressor accompanying the client. Disability can also mean changes in body structure, changes in body shape, installation of body tools, changes in function, limited

movement and changing appearance. A person with changes in body structure, body shape, and limited motion is most likely to cause the individual to lose a role in his or her life.

From the results of interviews with health cadres' of puskesmas, lepers are still reluctant to gather because of problems with the condition of the body. They are given counseling, given treatment, and the main goal is for patients to socialize to the community to improve the concept of leprosy. From the results of the interview of researchers from the health cadres at The Elly Uyo Health Center, in the early days of the sufferer suffered from family leprosy there was no support at all for 2-4 months. The family only surrenders to the condition of the patient who is also excluded from the family.

Based on the data obtained in the leprosy P2P room at Elly Uyo Health Center is very high, namely in 2018 to 2019 reached 93 patients consisting of MB 64 and PB 29 while in 2019 to 2020 the incidence of leprosy amounted to 64 patients consisting of MB 30 and PB 34. Thus epidemiologically the situation can describe that leprosy is still a public health problem in the working area of The Elly Uyo Health Center Jayapura city.

Based on the background above, researchers are interested in conducting research using the title "Family support relationship to the treatment of lepers in the work area of Elly Uyo health center". This study aims to find out the relationship between family support and the concept of self-leper in the working area of Elly Uyo health center.

METHODS OF RESEARCH

Research approach

This research is quantitative research with cross sectional approach. This type of research conducted independent and dependent variable data measurement / observation is only done once at the same time [6]. This research was conducted in June-July 2020 by taking place at The Elly Uyo Health Center in Jayapura City. The population used in this study consisted of lepers numbering 60 people in Polimak Village, Jayapura City. The sample of this study is all leprosy sufferers in Polimak subdistrict, which is a number of 60 lepers and families of lepers. This study used a closed questionnaire (dichotomous choice) which was arranged in a structured manner yang containing questions that respondents must fill out. Hypothesis testing is done with correlation techniques to find the relationship between two variables. In this study used chi-square analysis.

RESULTS

Bivariate analysis

Characteristic of family support: From the distribution of family support by age, the highest family support

results in adulthood were 38 respondents (63.3%) where in the good category there are 7 people (11.7%) and 10 less categories (16.7%) with a significance value of 0.373 (>0.05) which means there is a relationship between age and family support (Table 1).

From the distribution of family support according to education, the highest family support results at the high school level were 41 respondents (68.3%) where in the good category there are 12 people (20%) and 29 less categories (48.3%) with significance test results of 0.977 (>0.05) which means there is a relationship between family support to the respondent's education.

From the distribution of family support by occupation, the highest family support results were 31 respondents (51.7%) where in the good category there are 12 people (20%) and 19 less categories (31.7%). Based on the results of the study found the most respondents were not working as many as 31 people (51.7%) with a significance value of 0.313 (>0.05) which means there is a connection between family support for one's work.

The Concept of self against: From the distribution of self-concept by age, the highest self-concept results in adulthood were 38 respondents (63.3%) where in the good category there were 17 people (28.3%) and 21 less categories (35%) with a significance value of 0.067 (>0.05) which

means there is a relationship between self-concept and age. The distribution of family support according to education, the highest family support results at the high school level were 41 respondents (68.3%) where in the good category there are 20 people (33.3%) and 21 less categories (35%) with a significance score of 0.673 (>0.05) which means Education is significant to one's concept of self.

From the distribution of family support by occupation, the highest family support results were 31 respondents (51.7%) where in the good category there are 16 people (26.7%) and 15 less categories (25%) with a significance value of 0.362 (>0.05) which means there is a relationship between self-concept and work.

Based on the research conducted can be known the most results are on the Concept of Self less with support from the family of less as many as 23 people (38.3%), The concept of self-patients is good but the support from the family is less than 19 people (31.7%) [7-10]. Leprosy patients whose concept of themselves is lacking with good family support as many as 10 people (16.7%), the concept of self-patients is good and support from the family is good numbering 8 people (13.3%). Furthermore, based on the results of the analysis Fisher Exact Test obtained a probability value (p -value) of 0.956. The test decision is rejected because of p -value > 0.05 ($0.956 > 0.05$). Fisher Exact Test analysis concluded that "there is a relationship between family support and the concept of self-leper in the Working Area of Puskesmas Elly Uyo".

DISCUSSION

Family support for lepers

The results showed that the support of the family showed that most of the 42 respondents were less than 42 respondents (70%). The low level of family support in supporting lepers can be caused by several factors such as education, culture, economy. Family information support to lepers is shown in family behavior to provide information about the treatment of lepers. Such information includes the treatment system, the treatment process, and the effects of treatment. Research shows that family support for the patient's treatment system is low. This condition is caused by a lack of family knowledge of the leper's treatment system [11].

The low economic level of the community causes the ability of the community to meet the needs of life as well as the fulfillment of medical services for family members is also low. Family support is a process that occurs throughout life, the nature and type of support varies at each stage of the life cycle. Family support for family members is influenced by the family's ability to meet the needs of family members.

The results of the researcher interviews with several respondents showed that forms of family support are

Table 1: Univariate analysis.

Age	Frequency	% (Percentage)
adolescent	17	28.3
adult	38	63.3
Elderly	5	8.3
sum	60	100
Education	Frequency	% (Percentage)
Junior	13	21.7
Sma	41	68.3
Not in school	6	10
sum	60	100
Work	Frequency	% (Percentage)
Civil Servants	10	16.7
private	19	31.7
Not Working	31	51.7
sum	60	100
Family Support	Frequency	% (Percentage)
good	18	30
less	42	70
sum	60	100
Self Concept	Frequency	% (Percentage)
good	27	45
less	33	55
sum	60	100

Table 2: Family support relationship to self-concept.

Family Support	Self - Concept				Total	
	Good		Less			
	Freq	%	Freq	%	Freq	%
good	8	13.3	10	16.7	18	30
less	19	31.7	23	38.3	42	70
Total	27	45	33	55	60	100
p-value = 0.956						

limited to the daily needs of patients, where the family always strives to meet the needs of the patient's daily life such as eating, drinking, and shelter. However, because the family's economic factors are not able to meet the medical needs required by lepers, this is because lepers tend to close themselves to the family, and there are even families who isolate lepers by placing them in separate residences from other family members [12].

Self-concept of leprosy

The results showed the concept of leprosy was mostly less that of 33 respondents (55%). The concept of leprosy is less caused by several factors, including education and culture of lepers. The low level of education causes lepers in Adipura region to be less able to understand about the process of leprosy treatment. Their ignorance causes them to feel hopeless to recover and weakens the leprosy of the leprosy treatment process.

Another factor is the cultural factor, where most of the people of Ardipura Village consider leprosy to be a disease caused by god's curse, a disease due to heredity or because of use. Public perception of leprosy sufferers indirectly also affects the perception of the sufferer to himself. They feel that they are despised and condemned by their Lord, and are useless because they have physical disabilities. Another impact of leprosy due to the culture that arises in the community is that people are afraid of contracting leprosy suffered by leprosy patients, so that people tend to reject lepers, isolate, be forced to hide, expelled from school or work, do not get a job, and even rejected the results of their production [13].

Family support relationship with the concept of leprosy

This study aims to find out the relationship of family support with the concept of self in lepers in the working area of Puskesmas Elly Uyo. Testing the existence of a research hypothesis using the Fisher Exact Test. Based on the results of fisher exact test analysis with p-value 0.956 (<0.05) it can be concluded that the research hypothesis is that there is a relationship between family support and the concept of self-leper in the work area of puskesmas is significantly proven, where the better the family support, the better the concept of leprosy patients (Table 2).

Family as a social unit that is interconnected or interaction and influence each other. As a bond or unity, there are family functions in it for its members. The function of the family to its members is, among others, the function of health care, namely the family provides nursing care to family members and one of them is to do support in the concept of self.

Another study was conducted on "the relationship between family support and social functioning in post-treatment schizophrenia patients in hospitals [14]". This study shows that there is a very significant association of family support with the social functioning of schizophrenic patients. Research shows that the better families support the better the social functioning of schizophrenic patients.

SUMMARY

1. Family support in lepers in the working area of Puskesmas Elly Uyo is mostly lacking.
2. The concept of self in lepers in the working area of Puskesmas Elly Uyo is mostly lacking.
3. There is a family support relationship with the concept of self in lepers in the working area of Puskesmas Elly Uyo, where the better the family support, the better the concept of leprosy patients.

SUGGESTIONS

1. For Leprosy Patients, the results of research can be used and studied as a means of forming the correct self-concept for lepers and the positive aspects they have.
2. Share the results of research to be used as information and input material in order to increase knowledge about the prevention of leprosy transmission.
3. For Nurses to continue to do their job properly and provide appropriate nursing care and pay attention to the patient's condition through nursing services performed from simple to complex.
4. For Educational Institutions To develop nursing science in the field of literature and to increase the knowledge of readers about the influence of health

education on sufferers and families on the handling of prevention of leprosy transmission in the Working Area of Puskesmas Elly Uyo.

5. For Researchers to gain insight and knowledge in health education in carrying out the research process related to the prevention of leprosy transmission.
6. For Further Researchers it is expected to be more prepared in the process of data retrieval and collection so that researchers can be implemented better.

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