

Asuhan keperawatan pada klien risiko perilaku kekerasan dengan Acceptance Commitment Therapy (ACT) dan Family Psychoeducation (FPE) = Nursing management on clients with aggressive behaviour through Acceptance Commitment Therapy (ACT) and Family Psychoeducation (FPE)

Andi Buanasari, author

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Abstrak

Perilaku kekerasan merupakan perilaku yang sering ditemui pada klien dengan skizofrenia yang mengakibatkan klien dapat mencederai diri sendiri, orang lain dan lingkungannya serta menjadi penyebab rehospitalisasi. Tindakan keperawatan ners, dan Acceptance Commitment Therapy ACT diberikan pada klien dengan tujuan untuk menurunkan tanda gejala risiko perilaku kekerasan, meningkatkan kemampuan klien mengontrol emosi, menerima masalahnya dan berkomitmen, sedangkan Family Psychoeducation FPE diberikan dengan tujuan meningkatkan kemampuan keluarga dalam merawat klien. Tindakan keperawatan diberikan kepada 5 klien risiko perilaku kekerasan dengan menggunakan pendekatan model stres adaptasi stuart. Hasil yang didapatkan adalah terjadi penurunan tanda gejala risiko perilaku kekerasan pada aspek kognitif, afektif, fisiologis, perilaku dan sosial, terjadi peningkatan kemampuan klien dalam mengontrol emosi, menerima masalahnya, dan berkomitmen, serta kemampuan keluarga dalam merawat. Hasil penanganan kasus ini merekomendasikan pentingnya pelaksanaan tindakan keperawatan ners sendiri terhadap klien dan keluarga serta menggunakan sistem rujukan jika tindakan keperawatan ners tidak mampu mengatasi masalah klien. Penelitian lebih lanjut juga diperlukan dengan kelompok kontrol dan follow-up berkelanjutan untuk melihat sejauh mana komitmen klien terhadap terapi.

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Aggressive behavior is frequently occurred in clients with schizophrenia that resulted clients injured themselves, others and the environment and caused rehospitalization. Nursing intervention Therapy As Usual TAU, and Acceptance Commitment Therapy ACT were delivered in order to reduce signs of violent behavior, improve clients ability to control anger, to accept the problems and commit to the therapy, while Family Psychoeducation FPE was given to improve the family's ability in caring for clients. TAU, ACT and FPE were given to 5 clients of risk of aggressive behavior by using the stuart stress adaptation model approach. The finding indicated decrease in signs of aggressive behavior on cognitive, affective, physiological, behavioral and social aspects, increasing client's ability to control anger, accept problems, and commit to the therapy, as well as family's ability in caring. The results of this case report recommends the importance of implementing nursing intervention TAU itself both on clients and the families and using a referral system to the specialist nurse if TAU are not able to solve client's problem. Further research is also required with continuous control group and follow up intervention to see how committed clients are to the therapy.