Case Study: The Implementation Of Dhikr Therapy in Diabetic Foot Wound Patients with Low Self-Acceptance in Lampung Wound Care

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ABSTRACT

Self-acceptance is the ability of individuals to accept shortcomings and mistakes, destructive shame and extreme anxiety. Patients who can accept themselves are able to accept all shortcomings and circumstances that are not in accordance with their ideal ideals, and feel satisfied with the situation and accept what it is. This study aims to determine and analyze nursing care in diabetic foot wound patients with low self-acceptance before and after using dhikr therapy. The research design used is an applied research design or applied research. The subjects of this study were 2 respondents with diabetic foot wounds and had low self-acceptance according to the results of USAQ questionnaire measurements. The results showed that respondent 1 with a score of 84 with a low self-acceptance category became 94 with moderate self-acceptance and respondent 2 with a score of 88 with a low self-acceptance category became 97 with moderate self-acceptance. Dhikr therapy intervention performed for 3 days in the morning and evening for 5-10 minutes proved effective in reducing the level of low self-acceptance because the benefits of dhikr therapy are in line with aspects that can affect self-acceptance. It is hoped that nurses can use this dhikr therapy to increase self-acceptance in patients with diabetic foot wounds.

Keywords: Diabetic Foot Wounds, Self Acceptance, Dhikr Therapy

INTRODUCTION

Diabetic ulcer is a chronic complication of diabetes mellitus, usually occurring on the foot, associated with neuropathy and peripheral arterial disease in patients with diabetes mellitus. Diabetic ulcers are defined as ulcerations or open wounds on the lower extremities of patients with DM, usually below the ankle, which may involve part or all of the skin and are associated with neuropathy and peripheral arterial disease. Diabetic ulcers are open wounds on the surface of the skin that can be associated with local tissue death and can develop into infections caused by aerobic and anaerobic bacteria (Desnita et al, 2023).

Approximately 18.6 million people worldwide develop diabetic foot ulcers each year, including 1.6 million in the United States. These ulcers precede 80% of lower extremity amputations in people diagnosed with diabetes and are associated with an increased risk of mortality. Neurological, vascular and biomechanical factors contribute to the development of diabetic foot ulcers. Approximately 50% to 60% of ulcers become infected, and approximately 20% of moderate to severe infections lead to lower extremity amputation. The mortality rate within 5 years for patients with diabetic foot ulcers is approximately 30% and exceeds 70% for patients with major amputation. The mortality rate for people with diabetic foot ulcers is 231 deaths per 1000 person-years, compared with 182 deaths per 1000 person-years for people with diabetes without foot ulcers (Armstrong et al., 2002).

The population of diabetic ulcers or diabetic foot wounds in Indonesia is 15% with a mortality rate of 32.5%, amputation rate of 23.5%, and the percentage of the number of DM patients treated in hospitals is 80%. Therefore, control efforts such as diabetic foot exercises are needed to prevent diabetic foot ulcer complications (Safutri et al., 2023). Health problems that result in loss of bodily function, decreased activity tolerance, and difficulty coping with chronic conditions such as diabetic ulcers can lead to disturbances in an individual's self-concept, particularly self-esteem, which can lead to feelings of guilt or blame, low self-acceptance, and solitary behavior (Setiorini Hermin, 2019).

Poor self-acceptance is usually caused because the patient does not have confidence in his ability to deal with the problem of feeling worthless and useless to others, and consequently the patient will also have difficulty in making adjustments to his sick condition. This will be

manifested in the patient's difficulty in adhering to taking medication, performing check-ups and medical tests in monitoring his health condition (Wulansari, 2023).

One of the efforts that can be made for patients with poor self-acceptance in a non-pharmacological way is the use of dhikr therapy, which can be used for relaxation that provides peace and tranquility. Dhikr helps individuals to develop a positive perception of themselves, namely the belief that any stressor can be properly faced with the help of Allah, healing the soul and various diseases. Dhikr can help individuals generate self-confidence, strength, feelings of security, peace and happiness. Dhikr therapy is able to increase self-acceptance, not rejecting oneself when one has shortcomings, and having the confidence to love oneself (Fimansyah et al, 2019). Based on the above background, the authors are interested in caring for diabetic foot wound patients with low self-acceptance through the application of dhikr therapy at Lampung Wound Care.

METHOD

This research design uses applied research or is called applied research. Applied research is conducted to improve or modify the process of a system or program by applying existing theories. In this study, the researcher intends to find out and analyze the low self-acceptance among diabetic foot wound patients with dhikr therapy at Lampung Wound Care.

The subjects of this study were patients with diabetes who had diabetic foot wounds or diabetic ulcers with low self-acceptance, based on the results of the inclusion criteria of 2 respondents. The inclusion criteria involved in this study are patients with diabetes with diabetic foot wounds, patients are Muslim, patients with low self-acceptance, patients with diabetes with diabetes with diabetic foot wounds are willing to become respondents.

The instrument used is an observation instrument in the form of Standard Operating Procedures (SOP) for Dhikr, besides the questionnaire used for self-acceptance is the Unconditional Self-Acceptance Questionnaire (USAQ) which consists of 21 questions. The results of measuring the level of self-acceptance using USAQ questionnaire before Dhikir therapy can be seen in Table 1 and the results after Dhikir therapy intervention can be seen in Table 2.

RESULTS

This application was carried out on 2 third trimester pregnant women. As for the description of the two subjects of application which obtained during the study are as follows:

Table 1 Self-Acceptance Scores Before Dhikr Therapy (n=2)

Self-Acceptance				
No	Subject	Score	Category	
1	Mrs. L	84	Low Self-Acceptance	
2	Mrs. N	88	Low Self-Acceptance	
Average		86		

Based on the table above, it can be seen that the results of the measurements before dhikr therapy with a low level of self-acceptance using the Unconditional Self-Acceptance Questionnaire (USAQ) were on the first respondent with a low self-acceptance level score of 84, and the second respondent with a low self-acceptance level score of 88.

Table 2 Self-Acceptance Scores After Dhikr Therapy (n=2)

Self-Acceptance				
No	Subject	Score	Category	
1	Mrs. L	94	Low Self-Acceptance	
2	Mrs. N	97	Low Self-Acceptance	
Average		95		

After the dhikr therapy on the fifth day, the self-acceptance score increased from before, namely the first respondent Mrs. L with a moderate self-acceptance score of 94 and the second respondent with a moderate level of self-acceptance of 97.

DISCUSSION

From the results of the research, the two respondents who experienced low self-acceptance before dhikr therapy had an average score of 86, both respondents experienced low self-acceptance with the characteristics of negative thinking, difficulty concentrating, difficulty sleeping, sensitive to other people's criticism, feeling insecure, and feeling jealous of what other people have. From these characteristics in accordance with the characteristics of low self-acceptance based on (Sovitriana, 2023).

A person's ability to accept himself has different levels, this happens because this ability has several factors that can affect a person's self-acceptance, including age factors, factors from the educational background taken, and social support factors (Wardhani kusuma arum, 2018).

The ages of the respondents in this study were 55 and 68, so they could be categorized as adults and old age or elderly. the elderly are synonymous with physical changes that can cause disturbances and limitations in bodily functions that will be clearly visible, such as white hair, toothless teeth, and skin that begins to wrinkle. Physical changes in the elderly will have an impact on their psychosocial life (Ajisuksmo & Permatasari, 2021). in line with the researcher's research that Mrs. L experienced a low self-acceptance score of 84 and Mrs. N got a score of 8.

Education is also one of the factors that can affect a person's self-acceptance. Individuals who have a higher level of awareness will have a fairly good level of awareness of the circumstances that the individual has and immediately look for efforts that can be made in order to overcome the circumstances that are happening in his life (Islami & Ansyah, 2020). Self-acceptance will be better if there is social support from the surrounding environment, and family, in line with the situation of the respondents in this study that the family is very supportive of recovery and also always strengthens the respondents to remain enthusiastic in living well.

According to Hurlock (1994) in Merlin (2022) states that the nature of self-confidence is that individuals who have good self-confidence and accept criticism from others individuals who have a good psychological state will be open and willing to accept criticism from others are aspects that can affect a person's self-acceptance. At the time of the research, the respondent said that he lacked confidence in his current condition, the respondent said that he had difficulty accepting negative input about himself, the client also said that when he received criticism he felt worse than other people, the respondent said that when he failed at something he felt worse than other people. Self-confidence and the ability to accept criticism from others also affect aspects of self-acceptance, so when these aspects are disturbed, low self-acceptance occurs. So self-confidence and the ability to accept criticism from others are very influential on the level of self-acceptance.

It was found that after the dhikr therapy the two respondents experienced a change in score according to the post-test, namely with a score of Mrs. L = 94 with an increase in score at point 5 Making a big mistake may be disappointing, but it doesn't change feelings about myself as a whole from a score of 2 to a score of 5, point 10 I feel the value of myself is very dependent on how I compare myself with others from a score of 5 to a score of 6, point 12 when I receive negative feedback, I find it hard to accept what people say about me from a score of 1 to a score of 3, point 17 I still feel valuable when others blame me from a score of 5 to a score of 6, point 18 I avoid comparing myself with others to decide whether I am valuable or not from a score of 2 to a score of 3, and on point 19 when I am criticized, I feel worse compared to others from a score of 2 to a score of 3.

Mrs. N scored 97 with an increase in score on item 5 Making a big mistake may be disappointing, but it doesn't change how I feel about myself overall from score 3 to score 5, item 12 When I receive negative feedback, I find it difficult to accept what people say about me from score 1 to score 3, item 19 When I am criticized, I feel worse than others from score 2 to score 5, and item no. 21 When I fail at something, I feel worse than others from score 3 to score 5. Based on these scores, the respondent experienced an increase in the level of low self-acceptance to a moderate level of self-acceptance because she had a score of 94 - 115. Based on these scores, the respondent experienced an increase in the level of low self-acceptance to a moderate level of self-acceptance because she had a score of 94 - 115.

Based on the research conducted, it can be concluded that the self-acceptance of the respondents after dhikr therapy has increased with an average value of 95. By doing dhikr, you will find it easy to understand things, avoid various kinds of heart diseases, help individuals generate self-confidence, strength, feelings of security, be able to increase self-acceptance, and have the confidence to love yourself. Self-acceptance in the respondents in this study after dhikr therapy experienced significant changes in a more positive and increased direction. Evidenced by the results of the study obtained by the two respondents from low self-acceptance to moderate self-acceptance. Low self-acceptance will show unstable emotional behavior, difficulty concentrating, negative thinking, difficulty sleeping, sensitivity to criticism and feelings of envy, After doing Dhikr therapy, the respondent feels moved and can think positively about what has happened to him, when reciting the phrase of the Dhikr phrase in the form of (Alhamdulillah 33x, Subhanallah 33x, Allahu Akbar 33x,

Lailahaillaalah 33x) at the end can cause a feeling of calm and seem to surrender to fate with the destiny that has been outlined.

According to Merlin (2022), one of the factors that can affect self-acceptance is realistic hope, which is an expectation that can be achieved so that it can provide its own satisfaction. This is consistent with the research that researchers conducted that dhikr therapy on the phrase alhamdulilah, which means that always be grateful, and be grateful for God's favor in any situation. the respondent also stated that he began to accept the situation he was experiencing and could be grateful for what was suffered, then from this it can create respondents have realistic expectations.

Dhikr therapy can provide peace of mind so that the sufferers do not feel anxious, worried, and fearful. In this case, dhikr can have a positive effect on the psychological condition of the clients, because through dhikr the heart feels peaceful. Dhikr therapy that has been carried out will reach the stage where the ability to assess reality has recovered and self-understanding is good Kamila et al, (2020). in accordance with the results of research conducted by researchers that respondents stated that they were able to think positively, began to be able to accept negative input about themselves, began to be able to accept failure in certain things and be grateful for things that were destined for them and felt calmer about their condition.

According to Firmansyah (2019), dhikr is a way for a person to be able to accept and release negative emotions such as depression, anger, guilt, shame due to injustice, and improve interpersonal relationships with various problem situations. In addition, dhikr can also bring a person to various new understandings, self-acceptance, so that the pain caused by the events experienced is reduced or no longer felt. The research states that dhikr therapy has an impact on self-acceptance as evidenced by the level of low to moderate self-acceptance. By understanding and accepting the conditions experienced by being grateful and getting closer to God and being more positive and optimistic about oneself. The respondent's condition at the time after the dhikr therapy was performed, the respondent felt more confident, began to be able to accept negative input from others, the respondent said he had started not comparing himself with others to determine the value that was in him and the respondent could think positively. Therefore, the benefits arising from this dhikr are in line with the aspects that can affect self-acceptance, namely as follows: self-confidence and self-esteem, accepting criticism from others, being honest with oneself, feeling comfortable with oneself, if these aspects arise

in the respondent, it can increase the respondent's self-acceptance (Hurlock 1994 in (Merlin, 2022).

According to Permatasari & Gamayanti, (2019), there are other things that can make the subject more self-accepting, namely spiritual aspects. In line with the research conducted by the researchers, the spiritual aspect of dhikr has brought benefits to the respondents, namely that the respondents began to accept what they were experiencing, began to think positively about what they were facing, and began to be able to accept the criticism given by others.

According to Partini et al, (2023) stated in his journal that gratitude and patience are preindicators for a person's self-acceptance, that gratitude and patience have a role for self-acceptance, the role of gratitude is more dominant in influencing a person's self-acceptance. This research is consistent with dhikr therapy, which is one of the implementations of the oral dimension of gratitude, dhikr can increase a person's gratitude, some studies also say that dhikr can also improve mental health and reduce stress (Wasudin et al., 2022). In accordance with the results of the research conducted by researchers that two respondents who had been given dhikr therapy experienced an increase in self-acceptance, namely from low self-acceptance to moderate self-acceptance. After conducting research on the effect of applying dhikr therapy on patients with diabetic foot wounds with low self-acceptance problems at the Lampung Wound Care Center. After the application of dhikr therapy, there was an increase in low self-acceptance to moderate self-acceptance. This is consistent with the research conducted by Ardhanariswari Arindha, (2021) the effect of dhikr therapy on self-acceptance in patients with diabetes mellitus in Waru village, Kebakkramat Karanganyar, which states that there is an effect of dhikr therapy on a person's level of self-acceptance.

CONCLUSION

Based on the results of dhikr therapy research on diabetic foot wound patients with low self-acceptance problems at Lampung Wound Care, it states that dhikr therapy can increase a person's self-acceptance as evidenced by the average score before therapy which is 89, then after dhikr therapy the two respondents were re-measured for the level of self-acceptance in the form of a post-test and obtained an average of 95. then from these results an increase from low self-acceptance to moderate self-acceptance is obtained.

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