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FAMILY EMOTIONAL SUPPORT IN EFFORTS TO IMPROVE SELF-ESTEEM OF THLASSEMIA PATIENTS IN ADOLESCENT

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ABSTRACT

The incidence of early marriage in Muaro Jambi Regency has increased. No studies have been done on the distribution pattern and the relationship between education level and early marriage in Muaro Jambi Regency. This study aimed to identify the hotspots and low spots of early marriage, and the relationship between low education level with early marriage in Muaro Jambi regency in 2021. Global and Local Analysis Moran Index is used in this study to map hotspots and low spots for early marriage. Spatial regression is used to determine the relationship between education level and cases of early marriage. This study used an ecological study approach with the unit of analysis of 155 villages in Muaro Jambi Regency. Data on early marriage was obtained from the Mauro Jambi Regency Health and Family Planning Agency (BKKBN) report. The percentage of early marriage in Muaro Jambi Regency is 22.49%. This study found a positive autocorrelation of early marriage in 14 villages that fall into the hotspots area and 11 villages that fall into the low spots area. Using the SAR model, this study also found a relationship between education level and early marriage in Muaro Jambi Regency.

Keywords: emotional self-esteem; support; thalassemia

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INTRODUCTION

Thalassemia is one of the genetic blood disorders that is suffered by many people in the world. Thalassemia is caused by impaired synthesis of hemoglobin in red blood cells, which is characterized by decreased or absent synthesis of one of the , and or other globin chains that make up the normal structure of the main hemoglobin molecule in adults (Rujito, 2021). According to the Indonesian Thalassemia Foundation-Association of Parents of Thalassemia Patients (YTI-POPTI) in 2018, thalassemia sufferers in Indonesia were recorded at around 9,000 patients and increased to 10,973 cases in June 2021. Based on data from the Central Java Provincial Health Office (2019), the prevalence of thalassemia in Central Java Province is 0.02%. Meanwhile, according to Chintya & Niken Satuti Nur Handayani (2021) the prevalence of thalassemia in the Solo Raya area is 3.08.

Definitive treatment that completely cures thalassemia has not been found. The treatment of thalassemia, especially thalassemia major, is to carry out regular blood transfusions.

Although blood transfusions are a life-saving therapy for thalassemia patients, continuous transfusions for thalassemia patients can cause a buildup or accumulation of iron in the body, especially in the liver, heart and endocrine organs. Iron deposits in the basal layer of the epidermis and around the sweat glands can cause skin hyperpigmentation. The skin appears brownish bronze or grayish in color (Rafika, Marwoto, & Hayati, 2019).

Thalassemia also has a psychological impact on sufferers. Research result (Sartika & Allenidekania, 2020) found psychosocial problems in adolescents with thalassemia. Psychosocial problems are caused by body image disturbances that are experienced so that they feel insecure so that they limit association with peers. Research result (Yanitawati, Mardhiyah, & Widianti, 2017) also found the existence of sick behavior in the psychosocial aspects of adolescents with thalassemia, namely 68.8% had high anxiety, as many as 69.8% had a high resistance to illness and 54.2% had a high sense of anger. This result strengthened the findings (Maghfiroh, Okatiranti, & ESitorus, 2014) that 43.9% have a low assessment of their self-esteem.

Self-esteem is a person's assessment of himself. This assessment can reflect an individual's attitude of acceptance or rejection of oneself. In addition, self-esteem also reflects how much confidence the individual has. Individuals who have low self-esteem, it can have an impact on the onset of depression (Behdani F, Badiee Z, Hebrani P, Moharreri F, Badiee AH, Hajivosugh N, 2015) showed that 80% of children with thalassemia major had at least one psychiatric disorder. The most common psychiatric disorder experienced by children with thalassemia major is depression. There are around 26.7% of thalassemia major adolescents who experience depression.

Therefore, thalassemia adolescents need an environment that can support the formation of self-confidence, so that simultaneously with high self-confidence, high self-esteem will also appear in adolescents. This is in line with research (Sancahya & Susilawati, 2014) which concludes that there is a significant relationship between family social support and late adolescent self-esteem in the city of Denpasar. Likewise with the results of research (Mulyani, Rahayu, & Gunawan, 2019) which states that family support is related to self-esteem of adolescents with thalassemia at the thalassemia polyclinic of Ciamis Hospital. So this study aims to analyze family emotional support for the self-esteem of adolescents with thalassemia.

METHOD

The research was conducted using a correlational study design with a cross sectional time approach. The population in this study were all adolescent thalassemia patients at RSUP Dr. Soeradji Tirtonegoro Klaten who was recorded to be actively undergoing routine blood transfusions, as many as 30 people. Samples were taken using the total sampling technique. Collecting data using a questionnaire that has been tested for validity and reliability. Questionnaires were used to measure individual characteristics, family emotional support and self-esteem of adolescents with thalassemia, this questionnaire has passed the validity and reliability tests. Data analysis using Pearson product moment test with 95% confidence level.

RESULTS

Based on the univariate analysis, it was obtained that the mean age of the respondents was 16.13 ± 3.38 years. Based on the frequency distribution, 60% of respondents are female and the majority of respondents have upper secondary education. The results of measuring family emotional support obtained an average score of 22.5 where 86.7% of respondents were

included in receiving high emotional support from the family. While the average self-esteem score is 17.2 where 93.3% of respondents are included in the category of having high self-esteem.

		Table 1.				
	Average		(n-20)			
Average Age of Respondents (n=30)						
	Min	Max	Mean	SD		
Umur	11	21	16,13	3,38		
		Table 2				
Dis	tribution of Respond	dents by Gender an	nd Education (n =	30)		
Chara	acteristics	t	f	%		
Gender						
Man		1	2	40		
Woman		1	8	60		
Education						
SD		6	5	20		
Junior high school		-	7	23,3		
High school		1	5	50		
PT		~	2	6,7		

Table 3

Results of Univariate Analysis of Research Variables					
Variable	f	%			
Family Emotional Support					
Low	4	13.3			
Height	26	86.7			
Pride					
Low	2	6.7			
Height	28	93,3			

Analysis of family emotional support with self-esteem in adolescents with thalassemia Furthermore, the results of the analysis of family emotional support with self-esteem of adolescents with thalassemia using the Pearson product moment correlation test are presented in the following table: Table 4

Family Emotional Support Analysis with Self-Esteem of Adolescents with Thalassemia							
Variabel	n	p _{value}	r _{hitung}				
Family Emotional Support	30	0.00	0.646				
Pride	30						

Based on the results of the analysis presented in table 4, it can be concluded that family emotional support is correlated with self-esteem of adolescents with thalassemia.

DISCUSSION

The results of data analysis concluded that family emotional support is correlated with selfesteem of adolescents with thalassemia, this can mean that families who are able to provide high emotional support will increase self-esteem of adolescents with thalassemia. Thalassemia is a disease that requires lifelong treatment. Patients with thalassemia need to undergo repeated blood transfusions to increase the lack of blood cells. Repeated and continuous blood transfusions can lead to iron buildup which can lead to complications and changes in physical appearance. This change in physical appearance causes the patient's appearance to be different from peers, thus making the sufferer experience a decrease in self-esteem and withdraw from the social environment (Sartika & Allenidekania, 2020) in his literature study concluded that physical restrictions on adolescents with thalassemia can cause anxiety, decreased self-esteem, and even depression so that it can have an impact on decreasing the quality of life of thalassemia major adolescents.

The results of the study found 6.7% of respondents had low self-esteem, this indicates that there are still low respondents to themselves. This condition is understandable because thalassemia sufferers have a different physical appearance from others so that it will increase shame and low self-esteem. Shame and low self-esteem if it continues will make people with thalassemia feel a burden to the family and can blame themselves. This finding is in line with the research results (Anjarwati & Hurriyati, 2020) where in his research there were still 49.3% of respondents who had low self-acceptance. The results of this study are also in line with the findings (Archentari, Gasela, Nuriyyatiningrum, & Iskandarsyah, 2017) that there are still 23.5% of respondents with chronic kidney disease (CKD) who undergo hemodialysis have low self-esteem.

Thalassemia, like CKD, is a chronic disease that can have both physical and psychological effects on the sufferer. However, in this study it was found that 93.3% of respondents had high self-esteem, this means that the respondent has a positive view of himself and the respondent has been able to accept his condition. The results of this study are in line with research (Sancahya & Susilawati, 2014) which concluded that 40% of respondents had high self-esteem. Likewise research results (Thirafi, 2016) shows that even though the patient has quite severe thalassemia, the subject still has high psychological well-being. Hurlock (Anjarwati & Hurriyati, 2020) self-acceptance is the ability to accept one's strengths and weaknesses. A person who has good self-acceptance will not feel inferior or ashamed of his lack of self. In this study, one of the evidences that respondents have high self-esteem is that most of the respondents are still enthusiastic about continuing their education. This can be seen from the education level of the respondents where the majority had high school and tertiary education.

The increased self-esteem of adolescents with thalassemia is also due to the support from the family, especially emotional support. Providing family emotional support to adolescents with thalassemia can be done by understanding and accepting the patient's condition, being willing to be a place to express complaints and provide motivation. Family has a very important role in forming a person's self-esteem. Teenagers who get good family support will feel more valued and cared for, this will make teenagers have high self-esteem so that they will form a positive self-concept. Self-concept in a person will be able to improve the quality of life. Study (Artamia, Rakhmawati, & Shalahuddin, 2019) found that the family provides high support in the treatment of thalassemia sufferers and (Amelia, Utami, & Roslita, 2022) concluded that there is a correlation between family support and quality of life for children with thalassemia.

CONCLUSION

Based on the results of research and discussion, it can be concluded that family emotional support has an important role in the self-esteem of adolescents with thalassemia. The higher the emotional support provided by the family, the higher the self-esteem of adolescents with thalassemia will be.

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