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Empowerment Of Orphanage Caregivers With The Interpersonal Human Caring (IHC) Model To Improve Adolescent Psychological Needs

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ABSTRACT The caregiver is responsible for the psychological needs of adolescents. The purpose of this community service activity is to empower caregivers to fulfill the psychological integrity of adolescents by applying the Interpersonal Human Caring (IHC) model. This method of implementing community service activities is through identifying fulfillment of needs before and after empowerment, carrying out health education activities, identifying the role of caregivers before empowerment, the empowerment process, identifying roles after the empowerment process and identifying the psychological needs of adolescents after the empowerment process. This activity was carried out at the Khadijah 1 Orphanage, Khadijah 2 Orphanage, Aisyiah Orphanage, Mahbubiyah Orphanage, and Al Ikhlas Al Khoiriyah Orphanage. The number of teenagers is 60 people and the number of caregivers is 25 people. The results that have been achieved are an increase in the fulfillment of psychological needs in adolescents and an increase in the role of caregivers in meeting the psychological needs of adolescents. One of the recommended suggestions is the need for provision of caregivers by the Surabaya City Social Service so that they can care for adolescents by applying the Interpersonal Human Caring model so that the psychological needs of adolescents in orphanages throughout the city of Surabaya can be met.

INDEX TERMS Empowerment, caregiver, need, psychology, adolescent, Orphanage

1. INTRODUCTION

Life in an orphanage with limited facilities requires children to develop according to the situation [1]. The survey results stated that the number of orphans in Indonesia is 3.2 million with the largest number in East Nusa Tenggara and Papua. The number of orphans for the East Java region is 157,621 children and they are accommodated in 8000 orphanages (Nur A., and Prihastuti, 2014). This large number will be an asset to the Indonesian nation if it is given good care in accordance with its development.

The fact that in the Orphanage, the orientation of fulfilling the needs of the children living in the Orphanage, including the adolescent group, is physical needs. This can be seen in the donations given by donors in the form of money and nine basic necessities (Sembako). This condition does not support the psychological needs of the residents of the Orphanage [2].

Adolescents with rapid growth have an impact on their attitudes, behaviour, health and personality. The development of the personality of adolescent groups has a special meaning,

because adolescents are not a child but also not an adult, so they need special attention, especially to their psychological needs (Rr. Lita H. Wulandari & Fasti Rola, 2006).

Fulfilling psychological needs is as important as fulfilling physiological needs. When psychological needs are not met, it results in a sense of dissatisfaction, frustration, and inhibition of growth and development of positive attitudes towards society and themselves, so that they feel meaningless in life. Conversely, when these needs are well met, it can create personal balance, and create a sense of joy, harmony and become a productive person for their own interests and the interests of others[3]. Caring behaviour of orphanage administrators in caring for adolescents in meeting psychological needs is influenced by the attitudes, motivation and commitment of administrators [4][5]. Communication between caregivers and adolescents affects the comfort between the two. Two-way interaction is needed to convey opinions, vent and so on.

Khadijah 1, Khadijah 2, Aisyiah, Al Ikhlas Al Khoiriyah and Al Mahbubiyah Orphanages based on the results of the study obtained sufficient fulfillment of psychological needs. Caregivers' knowledge about fulfilling psychological needs is also lacking. Therefore, these 5 (Five) Orphanages need to carry out caregiver empowerment interventions to improve the fulfillment of psychological needs of adolescents living in Orphanages [6].

II. METHOD

The design of the implementation of Community Service (PKM) uses empowerment interventions for teenage caregivers at Orphanages. The targets are caregivers of Orphanages in the South Surabaya area with a total of 5 (Five), namely the Orphanages used as a place for implementing this community service activity are Khadijah Orphanage 1, Khadijah Orphanage 2, Aisyiah Orphanage, Mahbubiyah Orphanage, and Al-Ikhlas Al-Khoriyah Orphanage. The number of caregivers is 25 people and the number of adolescents is 60 people. The technique of implementing the activity begins with measuring the fulfillment of psychological needs in adolescents at the Orphanage before the activity is carried out, using an instrument with 40 Likert scale closed questions. The instrument was prepared by the researcher based on Murray's theory of psychogenic needs. The next activity provides health education to caregivers. Then identify the role of caregivers in meeting the psychological needs of adolescents at the Orphanage before the empowerment process. Then the process of empowering caregivers by applying the Interpersonal Human Caring model. The stages carried out during the empowerment process are 1) brainstorming with caregivers and adolescents regarding the psychological needs of adolescents and the problems that occur 2) identifying the facilities and infrastructure of the Orphanage with caregivers and adolescents, 3) monitoring interpersonal communication techniques and caring behavior in caregivers, 4) discussion of the implementation of the IHC model and the obstacles faced by adolescents and caregivers. After the empowerment process, the role of caregivers in meeting the psychological needs of adolescents at the Orphanage was identified after the empowerment process. The analysis used is descriptive analysis.

III. IMPLEMENTATION

The implementation of community service activities begins with applying for permission to the Surabaya City Social Service and each designated orphanage. Measuring the fulfillment of psychological needs in adolescents in Orphanages before the activity is carried out, using the instruments used in the research applied in this community service. Providing health education to caregivers is carried out through online and off line. The methods used were lectures, questions and answers and discussions. The implementation time is 90 minutes. Next is to identify the role of caregivers, as in

FIGURE 4, in meeting the psychological needs of adolescents at the Orphanage before the empowerment process[7]. Followed by empowering caregivers by applying the Interpersonal Human Caring model, in the form of:

- 1) Brainstorming with caregivers and adolescents regarding adolescents' psychological needs and problems that occur
- 2) Identifying the facilities and infrastructure of the Orphanage with caregivers and adolescents
- 3) Monitoring interpersonal communication techniques and caring behaviour of caregivers
- 4) Discussing the implementation of the IHC model and the obstacles faced by adolescents and caregivers.

Followed by identifying the role of caregivers in meeting the psychological needs of adolescents at the Orphanage before the empowerment process (Role measurement instrument attached). And at the end of the activity, in FIGURE 7 monitoring the fulfillment of psychological needs in adolescents after the mentoring process[8].

The implementation of community service activities is carried out in groups of caregivers of Orphanages in the South Surabaya Region. The activity location map is as follows in FIGURE 1:

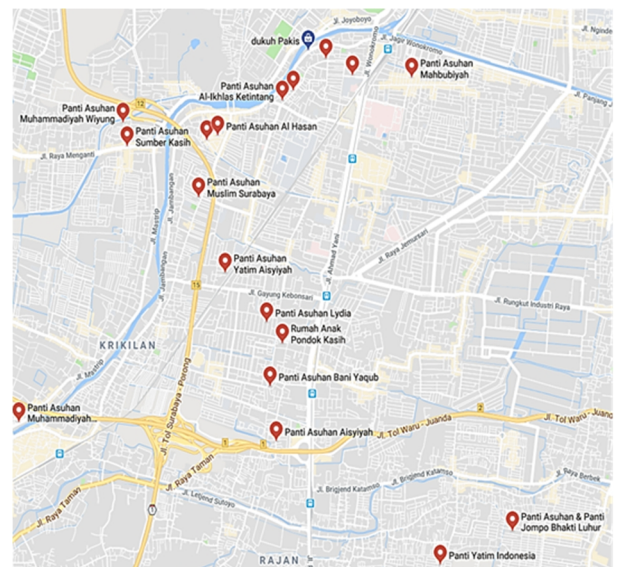


Figure 1. Map of the location of community service activities

All orphanages are managed by foundations. The buildings are permanent. The facilities and infrastructure at the Orphanage are the living room, management room, bedrooms and bathrooms. Each room averages 3-4 people. All teenagers living in the Orphanage attend public and private junior and senior high schools near the Orphanage. The Orphanage sources its operational funds from regular and incidental donors. All food, drink, clothing and housing needs of the teenagers are met by the Orphanage in accordance with available funds. None of the adolescents are employed. The management of the Orphanage has not collaborated with the local Puskesmas for health coaching and no one has a

counsellor. This community service activity is divided into 5 stages, namely:

- 1) Measuring the fulfilment of psychological needs in adolescents
- 2) Provide health education to caregivers
- 3) Identifying the role of caregivers before the empowerment process
- 4) Empowering caregivers by applying the Interpersonal Human Caring model
- 5) Identifying the role of caregivers after the empowerment process
- 6) Identifying the fulfilment of adolescents' psychological needs after the caregiver empowerment process.

Health education is conducted through online (online) as in [FIGURE 2](#) and offline (offline) as in [FIGURE 1](#). Online health education was carried out at Khadijah Orphanage 1, Khadijah Orphanage 2, Aisyiah Orphanage and Al-Ikhlash Al-Khoiriyah. While offline was carried out at the Al Mahbubiyah Orphanage in Surabaya.

The health education material provided by the team is arranged in a handbook that is easily understood by caregivers. The materials provided include adolescent psychological needs, influencing factors and interpersonal communication. The learning methods applied were lectures, questions and answers, and discussions as the [FIGURES 4, 5, 6 and 8](#). The time used was 90 minutes. Participants were enthusiastic in listening and asking questions.



Figure 2. Providing health education offline

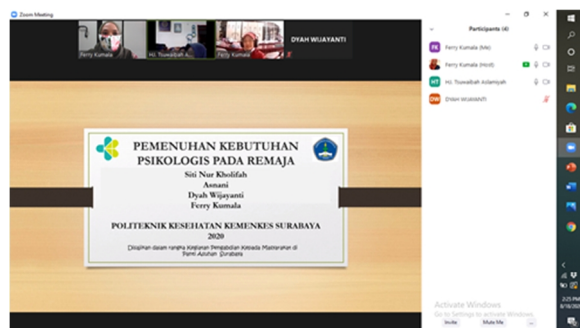


Figure 3. Providing health education online



Figure 4. Identifying the role of caregivers



Figure 5. Discussion with caregivers about psychological needs in adolescents



Figure 6. Discussion with adolescents about psychological needs



Figure 7. Monitoring the facilities and infrastructure of the orphanage and the implementation of interpersonal communication and caring

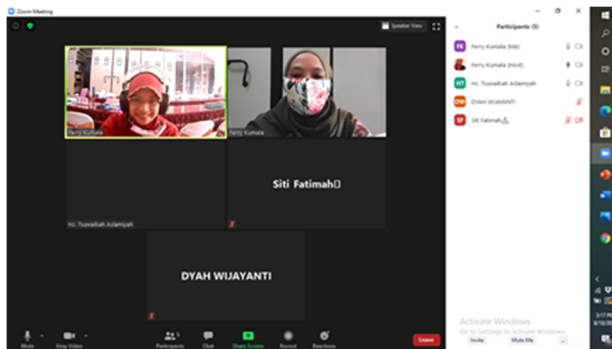


Figure 8. Discussion on the implementation of the IHC (Interpersonal Human Caring) model via online



Figure 9. Discussion on the implementation of the IHC (Interpersonal Human Caring) model via offline

IV. RESULT AND DISCUSSION

A. FULFILMENT OF PSYCHOLOGICAL NEEDS IN ADOLESCENTS IN ORPHANAGES

Data on the fulfillment of psychological needs of adolescents before the implementation of empowerment are as follows:

. Data TABLE 1 and TABLE 2 show an increase in the percentage of fulfillment of psychological needs in adolescents.

The application of the interpersonal human caring-based group nursing intervention model affects the psychological needs of adolescents in orphanages as in FIGURE 9 [9]. The psychological needs of adolescents refer to Murray's theory which is adjusted to the psychological development of adolescents, consisting of the need for achievement, need for affiliation, need for autonomy, need for counteraction (improving the situation), need for defense, the need of deference, the need of order, and need of understanding. These psychological needs are in accordance with the results of research from Dierendonck, D.V., (2008) which explains that the 6 (six) psychological well-being are autonomy, environmental mastery, personal growth, positive relationships with others, life goals, and self-acceptance.

Achievement needs have increased. Learning achievement is influenced by internal factors such as the health of vision, hearing, and other organ health and psychological factors such

as intelligence, talent, interest, attitude, and motivation of adolescents. External factors that influence family, school, and community conditions.

Affiliation needs to increase. Teenagers want to socialize with peers both directly and through social media[10]. The results of Greca's research. A.L, Preinstein, and Fetter. P. (2001) that adolescents need to gather with peers to avoid risk factors for health behavior. Adolescents in orphanages need to be involved in youth community organization activities such as Karang Taruna, Remaja Masjid and so on so that their personality development is better[11]. TABLE 1 explains that the fulfillment of adolescent psychological needs is mostly in the good category, namely the need for autonomy and improving the situation. While more than half of the moderate category is in the need for self-defense. From the details of psychological needs in the data above, the largest percentage of fulfillment of psychological needs in the poor category is the need for achievement. TABLE 2 explains that the fulfillment of adolescent psychological needs is mostly in the good category. From the data on psychological needs in adolescents, the largest percentage of fulfillment of psychological needs in the category of less is the need for achievement. Adolescent autonomy needs to be increased after the empowerment process. Autonomy needs are the need of adolescents to be free to choose the actions that will be taken. Dario D. et al (2008) state that autonomy is an indicator of psychological well-being in adolescents. Kimberly, Nikos, Richard, Ryan (2011) explain that autonomy support affects need satisfaction. Sheldon K, and Bettencourt, B.A., (2002) personal autonomy is a predictor of psychological satisfaction for adolescents. The need to improve the situation in adolescents increases. Positive relationships with friends reinforce the feeling that they are of value to others and to each other. Caregivers need to know the interests of adolescents, their friends, and their strengths and weaknesses so that they can identify problems that may arise[6]. The need of Defendants (Self-defence) in this study is defending oneself against attacks, criticism, and reproach. There are still adolescents who are lacking in fulfilling self-defense needs. Adolescents stated that not all were able to express their opinions freely even though their complaints had been listened to by caregivers. The psychological need for respect has increased. Adolescents already give greetings, do not speak louder and are reluctant towards caregivers/administrators of the Orphanage[12][13]. Respect in the way they act, speak, and treat other people's belongings is a form of respect for others. A balance of humility and self-esteem results in honorable actions, without disempowering attitudes. Need of Order to organize things, maintain cleanliness, and orderliness most teenagers are used to. Factors that influence orderly/disciplined behavior come from the school environment and the environment. In the home or family environment or orphanage, such as lack of attention, a disorder due to unclear rules, quarrels, ignorance, pressure and

business with their own affairs, these conditions cause order cannot be realized[14][15].

Table 1.

Frequency Distribution of Fulfilment of Psychological Needs of Adolescents in Orphanages Before and after the Empowerment Process

No.	Indicator	Category						Total	
		Good		Fair		Less			
		n	%	n	%	n	%	N	%
1.	<i>Need of achievement</i>	36	55,38	23	35,38	6	9,24	65	100
2.	<i>Need of Affiliation</i>	36	55,38	26	40	3	4,62	65	100
3.	<i>Need of Autonomy</i>	53	81,54	12	18,46	0	0	65	100
4.	<i>Need of Counteraction</i>	50	76,92	14	21,54	1	1,54	65	100
5.	<i>Need of Defendants</i>	27	41,54	35	53,85	3	4,61	65	100
6.	<i>Need of Deference</i>	38	58,46	27	41,54	0	0	65	100
7.	<i>Need of Order</i>	44	67,69	19	29,23	2	3,08	65	100
8.	<i>Need of Understanding</i>	45	69,23	18	27,69	2	3,08	65	100

Table 2:

Frequency Distribution of Fulfilment of Psychological Needs of Adolescents in Orphanages after the Empowerment Process

Frequency Distribution of Fulfillment of Psychological Needs of Adolescents in Orphanages after the Empowerment Process									
No.	Indicator	Category						Total	
		Good		Fair		Less			
		n	%	N	%	n	%	N	%
1.	<i>Need of achievement</i>	50	76,92	9	13,85	6	9,24	65	100
2.	<i>Need of Affiliation</i>	61	93,86	4	61,54	0	0	65	100
3.	<i>Need of Autonomy</i>	57	87,69	8	12.31	0	0	65	100
4.	<i>Need of Counteraction</i>	58	8923	7	10,77	0	0	65	100
5.	<i>Need of Defendants</i>	54	83,08	8	12.31	3	4,61	65	100
6.	<i>Need of Deference</i>	61	93,86	4	6,15	0	0	65	100
7.	<i>Need of Order</i>	60	92,31	5	7,69	0	0	65	100
8.	<i>Need of Understanding</i>	56	86,15	9	13.85	0	0	65	100

The need of Understanding has increased. This understanding is an advanced condition of adolescents' knowledge about various things in the Orphanage[16]. This understanding is needed so that adolescents have a high self-acceptance of the existence of their Orphanage[17]. This self-acceptance will support the fulfilment of psychological needs that have an impact on the formation of a strong personality to live life and achieve goals[18][19].

B. THE ROLE OF CAREGIVERS IN FULFILLING PSYCHOLOGICAL NEEDS IN ADOLESCENTS

The role of caregivers in meeting the psychological needs of adolescents before and after the empowerment process is as follows:

Table 3.

Frequency Distribution of Caregivers' Roles Before and After Empowerment

Caregiver Role	Empowerment Process	
	Before	After
Good	10 (40%)	24 (96%)
Fair	15 (60%)	0 (0%)
Less	0 (0%)	1 (4%)
Total	25 (100%)	25 (100%)

TABLE 3 shows an increase in the role of caregivers to meet the psychological needs of adolescents at the Orphanage.

The results of community service activities show that the application of the interpersonal human caring model to orphanage caregivers can increase their role in fulfilling the psychological needs of adolescents in orphanages[20][21]. Interpersonal human caring behaviour includes interpersonal communication, group health education, caring actions, and actions to increase self-confidence. Interpersonal communication is communication involving two or more people. The interpersonal communication in question is communication between adolescents and administrators/caregivers[22]. The results of discussions with caregivers found that caregivers often find it difficult to understand the problems that occur in adolescents and it is difficult to communicate in depth[23]. Caregivers have never had an understanding of adolescent development. The Social Service needs to facilitate the provision of materials on physical and psychological development in adolescents for administrators or caregivers[24][25]. Good knowledge will affect carers' attitudes towards adolescents. Nurses need to provide examples of effective interpersonal communication to adolescents. This nursing intervention is very important because the success of caregivers in communication will

have a developmental impact on the personality of adolescents.

IV. CONCLUSION

Empowerment of Orphanage caregivers by applying the Interpersonal Human Caring (IHC) model can improve the fulfillment of psychological needs in adolescents. Recommendations from the results of this community

service activity are that the Surabaya City Social Service as an institution responsible for fostering Orphanages should pay attention to the psychological needs of adolescents by providing training to caregivers to apply the IHC model in caring for adolescents in Orphanages.

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