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SPIRITUAL EMOTIONAL FREEDOM TECHNIQUE AS A PROMOTIVE AND PREVENTIVE EFFORT IN PALLIATIVE CARE FOR PEOPLE WITH DIABETES MELLITUS

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ABSTRACT

Diabetes mellitus is a progressive disease that requires long treatment and large costs with various complications that can affect the physical, psychological and spiritual so promotive and preventive efforts are needed for palliative care that can improve the quality of life for people with diabetes mellitus. The purpose of this activity is to train health cadres and the community in increasing knowledge and how to carry out treatment with the Spiritual Emotional Freedom Technique as a promotive and preventive effort in palliative care for people with DM. The method used in this community service activity is to provide training and education on health services. This activity was carried out from April-May 2022 and was attended by 15 health cadres and 50 residents in RW 05, Wonokromo Village, Surabaya. The results show that the activity has achieved success according to the success indicators that have been set, namely 15 health cadres were successfully recruited; average attendance was 100%, participants participated enthusiastically, knowledge of cadres after training and residents after counseling increased significantly.

Keywords: *Diabetes Mellitus; Palliative Care; Spiritual Emotional Freedom Technique.*

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INTRODUCTION

Diabetes Mellitus (DM) is a progressive disease with many complications which require long treatment and large costs. Patients with progressive disease not only experience various physical problems such as pain, shortness of breath, weight loss, impaired activity, but also experience psychosocial and spiritual disorders that will affect the quality of life of patients and their families. In addition, the needs of patients who have disease at an advanced stage are not only on the fulfillment or treatment of physical symptoms, but also need support for psychological, social, and spiritual needs known as palliative care (Kalra et al., 2018; Sari et al., 2021; Wee, 2004).

DM disease Indonesia is ranked 5th in the world for the prevalence of type 2 DM (DMT2) patients. The highest incidence of DMT2 cases in Indonesia is in East Java Province and the number of DMT2 sufferers continues to increase every year (Badan Penelitian dan Pengembangan & Kementerian Kesehatan RI., 2018; Kusnanto, 2016). The results of the analysis of the situation in the field with partners, revealed that it was in RW 05 Wonokromo Village, it is recorded that from the data of the Elderly Posyandu alone, there are 35 residents who have been diagnosed with DM and cannot take care of themselves in meeting their physical, psychological and spiritual needs. The health service program also had to stop due to the pandemic situation and the lack of health education activities provided to both cadres and residents. There are also many people who do not know how to do promotive and preventive efforts in palliative care for people with DM, this will have a bad impact

on the health condition and quality of life of people with DM.

Spiritual emotional freedom technique (SEFT) is a therapy that can be used in palliative care which can reduce pain, reduce anxiety levels, stress so that it can improve the quality of life of sufferers and families who experience Diabetes Mellitus (DM) (Bettencourt-Silva et al., 2019; Gottlieb & Bergen, 2010; Sari et al., 2021). So that the service team contributes to holding the Community Partnership Program (PKM) as an effort to maintain public health by training for health cadres and educating residents, especially for those suffering from diabetes mellitus with spiritual emotional freedom technique (SEFT) as a promotive and preventive effort in independent palliative care at home. for people with DM so that health status is maintained well.

OBJECTIVES

General Purpose

This activity is expected to increase knowledge and understanding of Spiritual Emotional Freedom Technique (SEFT) as a promotive and preventive effort in palliative care for people with DM.

Special Purpose

After carrying out community service activities, it is hoped that health cadres and citizens can afford;

1. Improve understanding of diabetes mellitus, palliative care and Spiritual Emotional Freedom Technique (SEFT) that can be used in self-care and family care for people with diabetes mellitus.
2. Understand the procedure for implementing Spiritual Emotional Freedom Technique (SEFT) therapy as

one of the independent palliative treatments at home.

PLAN OF ACTION

Strategy Plan

The method used in this community service activity is a participatory educational approach which is held from April to May 2022 at Balai RW 05, Wonokromo Village, Wonokromo sub-district, Surabaya, with a target of 15 health cadres and all residents.

The implementation of community service activities has been systematically planned with stages from pre-activity, activity implementation stage and evaluation stage of activities that have been carried out. The pre-activities stage of the service team carried out: 1) strategic meetings for service implementation which involved structural management of RW 05 Wonokromo Surabaya Village and cadres to discuss the strategy and planning of community service programs that were carried out, site surveys, preparation of facilities and infrastructure for activities. 2) The implementation of the activity was carried out for the first time, namely the recruitment of cadres of 15 representative health cadres in each RT who were willing to become volunteers. Furthermore, training activities were carried out for 2 days with a total of 30 hours of lessons (theory, demonstration, simulation) with activities carried out at Balai RW 05, Wonokromo Village, Surabaya. Materials include: DM disease (definition, etiology, signs and symptoms, complications), DM self-management (definition, goals, principles, standards for implementing diabetes self-management), palliative care, SEFT exercises. 3) After the cadre training activities, it will be continued with the implementation of educational activities for

residents regarding the spiritual emotional freedom technique (SEFT) as a promotive and preventive effort in palliative care for DM sufferers which is the output of cadre training.

Indicators of the success of the implementation of activities include: 1) the success of recruitment of health cadres as measured by the number of cadres trained, at least 1 person per RT. 2) the success of the training was measured by the average attendance of participants during the 20 JPL training, motivation and increased knowledge value after attending the training. 3) the implementation of educational activities for residents regarding the spiritual emotional freedom technique (SEFT) as a promotive and preventive effort in palliative care for DM sufferers and free health checks.

Evaluation methods for activities include: 1) evaluating the recruitment of health cadres by looking at the suitability of the number of cadres participating in the training for each RW of 15 cadres. 2) evaluation of training by reviewing the average attendance of participants for two days with a minimum of 90% attendance, motivation and knowledge level of cadres after training. 3) evaluation of the implementation of educational activities for residents by looking at the increase in residents' knowledge after the activity and the results of health checks.

Implementation

The implementation of service activities in its first implementation is to coordinate the implementation of activities, prepare the infrastructure needed to carry out activities and carry out activities according to the planned time. The implementation of this community service has received approval from Universitas

Nahdlatul Ulama Surabaya with letter of assignment number 603/UNUSA-LPPM/Adm-E/IV/2022.

Setting

This community service activity will be held from April to May 2022 at Balai RW 05, Wonokrono District, Surabaya, East Java, Indonesia. The activity was carried out in that place because there were facilities and infrastructure to support the activity (large room, LCD, laptop) and the location was easily accessible by cadres and residents.

Target

The target of this community service activity is 15 health cadres and all residents of RW 05, Wonokromo Village, Wonokromo District, Surabaya.

RESULTS AND DISCUSSION

Community service activities with the theme "spiritual emotional freedom technique (SEFT) as a promotive and preventive effort in independent palliative care at home for people with DM" were carried out in April-May 2022 in the RW 05 area, Wonokromo Village, Wonokromo District, Surabaya. The training activity was carried out for 2 days with 20 JPL (1 hour lesson with a time of ± 45 minutes) regarding the spiritual emotional freedom technique (SEFT) as a promotive and preventive effort in palliative care for DM patients with the training target of 15 health cadres. The training was held at Balai RW 05, Wonokromo Village, Wonokromo District, Surabaya, where the training resource persons had backgrounds in internal medicine specialists and medical surgical nursing lecturers.

The average attendance of the training participants is 99%, and the minimum

attendance target has been determined and there has been an increase in the knowledge of health cadres, increasing from almost entirely (89%) sufficient knowledge to almost all (90%) good knowledge. All training participants participated in the entire training series with enthusiasm, because they were supported by good training management and professional resource persons. This is in accordance with the statement (Chaghari et al., 2017) which states that the success of the training is primarily determined by the management of the training.



Figure 1. Training Activities.

After the implementation of the health cadre training, the next stage of activity is to disseminate information to residents about the spiritual emotional freedom technique (SEFT) as a promotive and preventive effort in palliative care for DM patients, which in its implementation involves health cadres who have attended training serving as material companions and trainers as well as health checks. for free.



Figure 2. Socialization to Citizens.



Figure 3. Free Health Checkup.

The activities carried out were greeted enthusiastically by health cadres and residents with the participation of 65 residents who took part. The characteristics of the training participants and residents who participated in the socialization are described in table 1.

Based on table 1, it can be seen that almost half of the participants who participated in community service activities (40%) were aged 46-55 years which were included in the category of early elderly and the interview results showed that the average resident suffered from diabetes mellitus both without complications and accompanied by complications.

Table 1. Characteristics of Cadres and Citizens.

Variable	Respondent n (65)	
	f	%
Age		
Late adulthood (36-45 years)	15	23,07
Early seniors (46-55 years)	30	46,15
Late seniors (56-65 years)	20	30,78
Level of education		
Elementary Education	15	23,07
Secondary Education	35	53,86
Higher Education	15	23,07
Status Pekerjaan		
Working	27	41,53
Not working	38	58,47

This is in line with the results of research from Faisal S. Hutapea, Mieke A.H.N. Kembuan (2016) who stated that aged around 45-65 years with a history of diabetes mellitus often had complications, especially those that attacked the peripheral tissue system (diabetic neuropathy). This is because with increasing age, there is a process of degeneration and damage to nerve cells, both involving large nerve cells and small nerve fibers which will cause neuropathy and other complications that require palliative care to improve the quality of life of patients (Dunning, 2020; Faisal S. Hutapea, Mieke A.H.N. Kembuan, 2016).

The outreach activities that were carried out on teaching how to teach the spiritual emotional freedom technique (SEFT) as a promotive and preventive effort in palliative care for DM sufferers achieved success as shown in table 2.

Table 2. Results of pre-test and post-test.

Knowledge	Category	n	p (%)
Pre-Test	Less	35	70
	Enough	12	24
	Good	3	6
Post-Test	Less	7	14
	Enough	13	26
	Good	30	60

Table 2 showed that there was an increase in people's knowledge about the material that has been explained, it was found that before socialization the level of knowledge of the residents was in the less category (70%) and after being given an explanation through counseling activities, the level of knowledge increased to most (60%) in good knowledge. The increased knowledge of the participants, the participants themselves were very satisfied and thanked that they had received very useful material that was very useful in promotive and preventive efforts in palliative care for DM patients for themselves or for the families of DM sufferers so that they could maintain their health status properly. This is supported by a statement from Van den Broucke (2020) that the more knowledge or understanding of a person's health status, the better the way he looks at the concept of health and illness. The success of an activity that is carried out cannot be separated from the material delivered according to the needs of the target so that the message to be conveyed can be received and welcomed.

CONCLUSION

Community service activities that have been carried out have achieved program achievement indicators which include training, implementation of health education to residents regarding the spiritual emotional freedom technique

(SEFT) as a promotive and preventive effort in palliative care for DM sufferers which will be beneficial for sufferers and their families with DM so that they can perform palliative care at home independently and health checks. It is hoped that the elderly posyandu cadres or administrators after the completion of the program will continue to accompany people with diabetes mellitus, so that science and technology for residents can be carried out sustainably and consistently by partners so that not only during activities.

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