

Social Support for Coping Mechanism in Diabetic Ulcer Patients: A Cross Sectional Study

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Abstract

Background: Diabetic ulcers are complications that often occur in patients with Diabetes Mellitus and will have an impact on the sufferer's physical, psychological, social and economic. One thing that is really needed by patients to help heal is social support from their surroundings. **Objective:** to examine the relationship of social support with coping mechanisms in ulcer patients. **Method:** using an analytical survey with a cross-sectional study, the sampling method used is purposive sampling of 116 respondents. The instruments used in this study were the Coping Scale Questionnaire (CSQ) to measure coping mechanisms and the Multidimensional Scale of Perceived Social Support to measure social support. **Result and Discussion:** The results of this study were found in the coping mechanism and social support variables, the majority had adaptive coping and high social support as many as 79 respondents (68.1%). It can be concluded from 79 respondents with high support, there are 61 respondents (77.2%) with adaptive coping mechanisms and of 37 respondents with low social support, 19 respondents (51.4%) with maladaptive coping mechanisms. Hypothesis test results obtained P value = $0.004 < 0.05$. **Conclusions:** there is a significant relationship between social support and coping mechanisms in diabetic ulcer patients.

Keywords : Coping Mechanisms; Social Support; Diabetic Ulcer;

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Introduction

Diabetic ulcers are a common complication in patients with Diabetes Mellitus (DM) caused by poor glucose control (Soelistijo et al., 2019). The length of the wound healing process in patients with diabetes mellitus can increase the risk of wound complications which will have an impact on the duration of wound healing. These complications include infection (including cellulitis, abscess and osteomyelitis), gangrene and septicemia (Rosyid, 2018).

Diabetic ulcers can also have a physical, psychological, social and economic impact on the sufferer. Physical impacts on diabetic ulcers that occur in the form of foot deformities, pain, foot infections can even have the potential for amputation, while psychological problems that arise can range from anxiety disorders to depression, this can arise due to ulcer healing experienced by sufferers for years. The incidence of diabetic ulcers reaches up to 25% in people with this condition. Diabetic ulcers are a major public health problem because of their adverse impact on physical, psychosocial functioning, increased risk of diabetic wound recurrence, amputation, and death (Priscilla and LeMone, 2017).

Healing of diabetic ulcers is influenced by medication adherence, treatment, Psychological Response and Coping Mechanisms to the sick condition. In DM clients with complications in the form of diabetic ulcers can change the client's response to the pain. Responses can arise due to stressors, namely changes in health, loss of function, and an incomplete state in the body so that healthy coping is needed. Coping mechanism is one way to adapt to stress (Saam and Wahyuni, 2014).

In accordance with (Folkman, 1984) in (Townsend and Morgan, 2018) how a person copes with a stressful situation depends on his view of the situation. The concept of coping is very important because all patients experience stress due to their illness, so it is very necessary to have the ability to cope and the ability to cope with stress which is an important determinant of human well-being. According to Lazarus and Folkman in (Cooper and Quick, 2017) there are several factors that can influence coping mechanisms including physical health, problem solving skills, positive beliefs or views, social support, social skills and income/materials.

The research he conducted (Husna, 2012) related to coping mechanisms in type II DM patients with diabetic gangrene showed that the description of the coping mechanisms in type II DM patients with diabetic gangrene was in the adaptive category of 84.4%. Meanwhile, based on the sub-variables, the coping mechanisms can be categorized as follows: attacking coping mechanisms, withdrawing coping mechanisms, compromising coping mechanisms, compensatory coping mechanisms, and denial coping mechanisms in the adaptive category.

This study aims to examine the relationship of social support with coping mechanisms in diabetic ulcer patients. The benefits of this research can provide knowledge about social support and coping mechanisms to patients, families and nurses in hospitals

Method

This research is a quantitative survey analytic study with cross-sectional. In this study using purposive sampling, the researcher determines the sample by setting certain criteria determined by the researcher (Cresswel, 2013). Respondents who met the inclusion criteria were 116 people. The study was conducted for 10 days at Tgk Chik Ditiro Hospital, Pidie Regency. Coping mechanism variables were measured using the Coping Scale Questionnaire (CSQ) and Social Support Variables were measured using the Multidimensional Scale of Perceived Social Support (MSPSS). Validity and reliability of the measuring instrument have been carried out with Cronbach's alpha value for CSQ 0.817 and for MSPSS 0.805. Data analysis with chi square test to measure the relationship between variables.

Research Result

The results of the study, the following are the characteristics of respondents based on age, gender and level of education in diabetic ulcer patients.

Table 1. Description of Statistics in Diabetic Ulcer Patients

Variabel	n	%
Age		
36 - 45 years	26	22,4
46 - 60 years	81	69,8
> 60 years	9	7,8
Sex		
Male	81	69,8
Female	35	30,2
Education		
Low	7	6,0
Intermediate	72	62,1
High	37	31,9
Coping Mechanism		
Adaptive	79	68,1
Maladaptive	37	31,9
Social Support		
High	79	68,1
Low	37	31,9

In table 1, it can be seen that the data on the characteristics of respondents in the age variable of the majority in the range of 46-60 years were 81 respondents (69.8), in the gender variable the majority results were obtained with male sex as many as 81 respondents (69.8), on the education variable, the majority results with secondary education levels as many as 72 respondents (62.1), on the coping mechanism variable the majority results with respondents having adaptive coping mechanisms as many as

79 respondents (68.1), and on the social support variable the majority results with high social support as many as 79 respondents (68,1).

Tabel 2. Relationship of Social Support with Coping Mechanisms in Diabetic Ulcer

Social Support	Coping Mechanism			<i>p</i>
	Adaptive	Maladaptive	Total	
High	61 (77,2%)	18 (22,8%)	79 (100%)	0,004
Low	18 (48,6%)	19 (51,4%)	37 (100%)	
Total	79 (68,1%)	37 (31,9%)	116 (100%)	

The results of the study in table.2 illustrate that of the 116 diabetic ulcer patients, as many as 79 patients (68.1%) had high social support mechanisms. Furthermore, Table 2 can be concluded from 79 respondents with high support, there are 61 respondents (77.2%) with adaptive coping mechanisms and from 37 respondents with low social support, 19 respondents (51.4%) with coping mechanisms maladaptive. Hypothesis test results obtained P value = 0.004 <0.05

Discussion

Hypothesis test results obtained P value = 0.004 <0.05 so H_0 is rejected and it can be concluded that there is a significant relationship between social support and coping mechanisms in diabetic ulcer patients. The results of this study indicate that most patients with high social support have adaptive coping mechanisms.

Based on research (Rahmi and Fitriani, 2021) said that the social support felt by the family is different, this is influenced by the factors that give and receive social support, namely the area of residence. When caring, families tend to use coping strategies that focus on emotions. The coping that appears in the family is the dominant coping, depending on the problems faced at that time. Social support has an important role in the use of coping strategies. Therefore, social support has a relationship with coping mechanisms. Furthermore (Pompeo et al., 2016) conducted a study on coping strategies used by families in caring for patients with mental disorders. The results of this study indicate that family members of someone with mental disorders use social support, problem solving and positive reassessment to care for their sick family members. The coping strategy most often used by family members is to provide social support.

According to (Sarafino and Smith, 2012) in (Rokhimah, 2016) social support is the degree of support given to individuals, especially when needed by people who have close emotional relationships with that person, social support can refer to comfort, concern, self-esteem or any forms of assistance that individuals receive from other people or groups. Social support is an interpersonal transaction that includes positive affection, affirmation, and assistance based on other opinions. Social support generally

describes the role or influence that can be caused by other meaningful people such as family, friends, relatives, and co-workers.

Coping mechanism is a way or method carried out by each individual to overcome and control problems experienced and viewed as obstacles, challenges that are painful, and threats that are detrimental to the individual. In other words, coping is a process that must be passed by individuals in resolving stressful situations (Delamater et al., 2019).

The results of research conducted by (Wills et al., 2018) on multiethnic adolescents, it was found that there is a negative correlation between parental social support and substance use. According to (Wijaya and Pratitis, 2016) parental assistance and support given to their children will make individuals have self-confidence and create positive feelings that are felt. Positive feelings can lead to positive thoughts as well and this can make individuals to avoid using illegal drugs.

Based on the discussion above, it can be assumed that social support is a description of various expressions of supportive behavior (support) to an individual that is received by the individual concerned from people who are quite meaningful in his life. Individuals who receive social support from meaningful people have a positive level of coping mechanisms. Social support from other individuals is useful for showing affection, care, and appreciation. Individuals who receive social support from other individuals will feel themselves loved, valued, valued, and part of their social environment.

Conclusion

In particular, the results of this study can be concluded that in the coping mechanism variable, the majority results with respondents having adaptive coping mechanisms as many as 79 respondents (68.1), and on the social support variable, the majority results with high social support as many as 79 respondents (68.1).). Hypothesis test results obtained P value = 0.004 < 0.05 so H_0 is rejected and it can be concluded that there is a significant relationship between social support and coping mechanisms in diabetic ulcer patients. The results of this study indicate that most patients with high social support have adaptive coping mechanisms.

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