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Implementation of “Positive Affirmation Therapy” in Depression Patients with Low Self Esteem Problems

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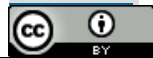
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ABSTRACT

Low self-esteem can be caused by health problems, which are linked to poor interpersonal relationships and an increased risk of depression. Low self-esteem is accompanied by negative feelings which are the root cause of loss of self-confidence and represent weak self-esteem. The aim of this research is to find out how positive affirmation therapy is implemented to reduce levels of depression and improve low self-esteem. The type of research is descriptive in the form of a case study to explore the implementation of positive affirmation therapy in depressed patients with low self-esteem problems in the Ariodilah Public Health Center area of Palembang and the research subjects to be studied are 3 patients, namely depressed patients with low self-esteem problems. The results of the study showed that positive affirmation therapy in depressed patients with low self-esteem problems showed a decrease in depression levels and an increase in low self-esteem

INTRODUCTION

D Mental disorders are still a serious problem in the world today. Approximately 450 million people worldwide were diagnosed with mental disorders in 2013, and at least 1 in 4 people worldwide have mental health problems. WHO (2016) estimates that there are around 35 million people suffering from depression, 60 million people suffering from bipolar disorder, 21 million people suffering from schizophrenia, and 47.5 million people suffering from dementia¹. Depression is defined as a mood disorder characterized by feelings of sadness that persist for a long time and persist. -soluble which can impact a person's health and social interactions. Depression is a common mental disorder characterized by persistent feelings of sadness and loss of interest in activities, accompanied by the inability to carry out daily activities for at least two weeks².

According to WHO, around 322 million people suffer from depression, which is 4.4% of the world's population, and almost half of the people are at risk of suffering from depression³. According to Pieter and Namora in 2012, Southeast Asia had the largest rate of depression at 86.94 (27%) and the Western Pacific region at 27%, including China and India with 322 billion people. According to WHO (2017), with a prevalence of depression of (3.7%), Indonesia itself ranks fifth. In Indonesia itself, the incidence of depression at the age of 15 years and over shows that as many as (6.1%) experience depression⁴.

Based on Basic Health Research (Riskesdas) from the Indonesian Ministry of Health in 2018, it shows that the prevalence of emotional disorders in the population aged 15 years and over increased from 6% in 2013 to 9.8% in 2018. In 2018 it was 6.1% of people who suffer from depression⁵. The incidence of depression in Indonesia is 706,689 people, the province with the highest prevalence of depression is West Java, with 130,528 people, East Java with 111,879 people, Central Java with 95,461 people, and North Sumatra with 36,147 people. The prevalence of depression is 55.8% in PLWHA in North Sumatra, with rates of mild depression 25.6%, moderate depression 11.6%, severe depression 4.7%, and very severe depression 14%. Major depression was most commonly seen in people aged 20 to 39 years (83.3%). Therefore, a person can experience changes to depression and changes in daily habits⁶.

According to Dirgayunita (2016), there are signs and symptoms of depression in low self-esteem, namely physical symptoms, psychological symptoms and social symptoms. Physical Symptoms: Difficulty sleeping, sleeping too much, decreased activity, problems with food or overeating, headaches, stomach ache, sometimes the hands and feet feel heavy, weak, tired and lethargic, Difficult to focus. Psychological Symptoms: Feelings of sadness, fear, feelings of hopelessness, feelings of guilt, low self-esteem, restlessness and sensitivity, intention to end life or commit suicide, sensitivity/feelings, loss of trust. Social Symptoms: Reduced daily activities and interests, lack of desire to achieve anything, loss of hope for life, and thoughts of suicide and interpersonal, social, and work functioning are almost always affected by these changes⁷.

There were 20 mental disorders with low self-esteem problems in 2016 with a percentage of 35.08%, in 2017 there were 25 people with a percentage of 43.85%, and in 2018 there were 12 people with a percentage of 21.05%. There were 57 cases of poor self-esteem overall in the last three years (2016-2018), accounting for 99.98% of all cases. According to Wandono (2017) low self-esteem can be caused by health problems, which are associated with poor interpersonal relationships and an increased risk of depression. As a result, low self-esteem is accompanied by negative feelings which are the root cause of loss of self-confidence and self-esteem and describe weak self-esteem⁸. Low self-esteem according to Rahayu et al. (2019) is a type of self-criticism in which a person evaluates themselves negatively and believes that they will fail. A person with low self-esteem is very vulnerable to pressure in their environment. Cognitive symptoms include distorted thinking and confusion. Affectively, patients experience feelings of inferiority, fear and shame. Behaviorally, the patient displays passivity and unresponsiveness. They also lose initiative and have difficulty making decisions¹⁰.

According to Mayliyan & Budiarto (2022), the average score for depression, anxiety and stress before being given positive affirmation intervention was depression 9.38, anxiety 11.26 and stress 12.47. Meanwhile, after being given positive affirmation intervention, the average score for depression, anxiety and stress levels decreased to depression 9.00, anxiety 11.00 and stress 9.00.10 As in previous

research by Zebua et al. (2022) shows that positive affirmation therapy can be applied to reduce levels of adolescent depression¹¹. Research conducted by Ardika et al. (2021) shows that positive affirmation therapy is effective in improving the quality of life and preventing a decline in the health of patients who have low self-esteem. This shows that there is a correlation between affirmation therapy and changes in the individual and the patient's health level. The implementation of positive affirmation therapy aims to reduce levels of depression and increase low self-esteem in depressed patients with low self-esteem problems¹².

METHODS

This research uses a descriptive writing method in the form of a case study through the implementation of positive affirmation therapy in depressed patients with low self-esteem problems in the Ariodillah Palembang Community Health Center area. This case study design aims to describe the implementation of positive affirmation therapy in depressed patients with low self-esteem problems which was carried out for 7 days from March 18 2023 to March 25 2023. This descriptive study involved 3 patients with the inclusion criteria of depressed patients with self-esteem problems. Low Self, patient willing to be a case study subject, cooperative patient, female and male patient, outpatient in the Ariodillah Palembang Community Health Center area, patient with mild depression scale and moderate depression based on the DASS 42 (Depression Anxiety and Stress Scale) questionnaire), patients aged 20-30 years. The data collection process was carried out using interviews, direct observation and the DASS 42 Questionnaire. Interviews were carried out with patients who were determined using a purposive sampling technique, namely 3 patients. Data analysis has been carried out by providing a comprehensive description of the case data studied from the results of interviews and observations by directly observing the patient's behavior. The instruments used in this scientific paper are an assessment sheet, DASS (Depression Anxiety and Stress Scale), and a before and after evaluation sheet to see the level of depression and low self-esteem problems experienced by the three patients.

Before starting the research, this research protocol was approved by the Health Research Ethics Committee of the Health Polytechnic of the Ministry of Health in Palembang with the statement of Passing the Ethical Review with No: 0081/KEPK/Adm2/II/2023. And has been permitted by the Head of the National Unity and Politics Agency of Palembang City with No. 070/0516/BAN.KBP/2023 and Head of the Health Service with No.800.2/1138/DINKES/2023. The three patients also received an informed consent explanation before the start of the study regarding their involvement in the research.

RESULTS AND DISCUSSION

Patient 1

The first patient was named Ms. Y, 21 years old, female, highest school education, unmarried status, Muslim religion, Ms. Y is an outpatient at the Ariodillah Palembang health center, the patient's address is Jl. Ariodillah No. 4219, RT 031/RW 011, Subdistrict 20 Ilir III, South Sumatra. In late 2022, Ms. Y often cries and often feels sad because his lover left him, then he prefers to be alone in his room and doesn't want to come out. The patient was finally taken to the Ariodillah Palembang health center for outpatient treatment.

On the first day when conducting the assessment on March 18 2023, the patient was a little cooperative, eye contact (-), the patient was more silent, the patient became sadder and did not want to talk, the patient looked irritable, the patient looked down and embarrassed, the patient looked a little less comfortable, the patient does not smile and is easily lethargic. The patient's mother said that while at college the patient felt sad about being abandoned by the man she liked. she felt that she was inappropriate, not beautiful, and useless. The patient's mother said the patient felt embarrassed when leaving the house. The patient said the most important person in his life was his mother. The results of the DASS 42 questionnaire were moderate depression. Ms. Y is normal, the patient seems a little cooperative when interacting with the nurse, the patient looks indifferent when spoken to, there is less eye contact, the patient's voice sounds soft and slow.

During outpatient treatment at the Ariodillah Palembang community health center, the patient received pharmacological therapy in the form of Risperidone 2 mg, Clozapine, Trihexphenidyl HCL

2 mg, Sandrepil 25 mg. The first patient's Nursing Diagnosis is Low Self-Esteem, Social Isolation, Ineffective individual coping.

Patient 2

The second patient is named Mr. E, 26 years old, male, highest school education, unmarried status, Muslim religion, Mr. E is an outpatient at Ariodillah Palembang Community Health Center, the patient's address is Jl. Dwikora II, No. 1159 RT 018/RW 007, Kec. Ilir Timur 1, South Sumatra. Previously in 2020 Mr. E likes to be scolded by his father and older sister. so he often daydreams, doesn't want to talk to anyone, and likes to be alone in the kitchen. In 2021 the patient recovered, then in 2023 the patient relapsed. And finally the patient was taken back to the Ariodillah Palembang health center for outpatient treatment.

On the first day during the assessment, March 18 2023, the patient was a little cooperative, eye contact (-), the patient looked confused and afraid, tense, did not want to talk, the patient looked down and embarrassed, the patient looked a little uncomfortable, the patient looked confused, and a little lethargic and when the assessment was not finished the patient immediately ran away to the kitchen. The patient is uncooperative, the patient looks down and embarrassed, the patient looks a bit uncomfortable, the patient looks confused when asked questions, looks sad and daydreams a lot. The patient experienced mental disorders in 2020, the patient underwent treatment at the community health center but it was not successful. The patient's mother said she had experienced something like being scolded at work by her boss. He does not feel happy at home or at work, he feels that he is useless. The patient's mother said the patient felt embarrassed when leaving the house.

During outpatient treatment at the Ariodillah Palembang community health center, the patient received pharmacological therapy in the form of Risperidone 1mg, Chlorphenamine Meleate 4 mg, Trihexphenidyl HCL 2 mg, Sandrepil 25 mg. The second patient's Nursing Diagnosis is Low Self-Esteem, Social Isolation, Ineffective individual coping.

Patient 3

The third patient is named Mr. N, 30 years old, male, junior high school education, unmarried status, Muslim religion, Mr. N is an outpatient at Ariodillah Palembang Health Center, the patient's address is Jl.

Seroja Mess Sriwijaya No. 1017/4157 RT 017/RW 007, Kelurahan 20 Ilir III. In 2010 Previously Mr. While at school, N used to be bullied by his classmates. So he likes to feel sad, daydreams, and likes to be alone in his room. And in 2015 the patient recovered, and in November 2022, the patient relapsed again because he was still being bullied by his co-workers. So that in 2023 the patient finally received outpatient treatment at the Ariodillah Palembang Community Health Center.

On the first day during the assessment, March 18 2023, the patient was uncooperative, the patient looked down and embarrassed, the patient looked a little uncomfortable, the patient looked confused when asked questions, looked sad and daydreamed a lot. The patient had experienced mental disorders in 2010, the patient had undergone treatment at the community health center but it was not successful, the patient's mother said that when he was at school and work the patient was often bullied by his colleagues and friends. He felt he was unworthy and useless. The patient's mother said the patient felt embarrassed when mingling with people. The patient said he had a history of hypertension.

During outpatient treatment at the Ariodillah Palembang community health center, the patient received pharmacological therapy in the form of Amlodhipine 10 mg, Cepezet 100, Trihexphenidyl HCL 2 mg, Haloperidol 5 mh, Sandrepil 25 mg. The third patient's Nursing Diagnosis is Low Self-Esteem, Social Isolation, Ineffective individual coping.

Implementation

The implementation of positive affirmation therapy was carried out on Ms. Y, Mr. E and Mr. N on March 18 2023 to March 25 2023 from 13.00 to 17.00 WIB, a 15-30 minute safe treatment was carried out at each patient's home. When the positive affirmation intervention was carried out, the patient was still confused and did not understand on the first day and appeared cooperative and followed the researcher's orders when carrying out therapy. Comparison of the implementation of positive affirmations in the three patients appeared to be equally cooperative and able to follow orders from the researcher.

Evaluation

The implementation of positive affirmation therapy aims to provide feelings of comfort, reduce distress, anxiety, calm and tension. This can be seen from the condition of the three patients who already understand the problems they are experiencing and already know one of the techniques that can be used to reduce depression with low self-esteem problems, namely positive affirmation therapy. The three patients were also able to overcome the low self-esteem they experienced and were willing to carry out positive affirmation interventions independently or accompanied by researchers. Based on the results of the DASS 42 questionnaire as well as before and after observation sheets to see the level of depression with low self-esteem problems experienced by the three patients, namely mild and moderate levels of depression. Then, after carrying out the positive affirmation intervention for 5 days, the results showed that the three patients experienced a decrease in their level of depression and their self-esteem increased.

Researchers have carried out nursing implementation for depressed patients with low self-esteem problems in Ms. Y, Mr. E, and Mr. N in the Ariodillah Palembang Community Health Center area. Researchers have implemented positive affirmation therapy which was carried out from March 18 2023 to March 25 2023 on three managed patients, namely Ms. Y, Mr. E, and Mr. N with low self-esteem problems. This case study was carried out for 7 days. Before researchers implement positive affirmation therapy, researchers need to build a relationship of mutual trust (BHSP) with the three patients in order to gain the trust of the patients. The first thing the researcher did was introduce himself, then the nurse asked the patient to introduce himself to the researcher and state his full name or nickname. Then explain the nurse's goals to the patient and explain the benefits and technical procedures that will be carried out. Next, the researcher approached the patient by inviting him to communicate or conduct an in-depth study. Building a relationship of mutual trust is important in caring for depressed patients so that there is a sense of trust between the patient and the nurse. Once trust is established, the patient will be open to creating feelings and problems they face. This research states that by applying therapeutic communication it plays an important role in the healing and patient care

process which aims to build a relationship of mutual trust between the patient and the nurse. When researchers conduct interviews, nurses often use a mutual trust approach, considering that the patient is their family, so that the patient feels comfortable and easily understands the information and actions provided by the nurse¹³.

In patient 1 (Ms. with other people, the patient feels that he is useless, and the patient appears irritable. In patient 2 (Mr. confusion, and lethargy. In patient 3 (Mr. and lethargic when asked questions.

On the first day, March 18 2023, the nurse built a relationship of mutual trust (BHSP) with the patient. Researchers use therapeutic communication when communicating with patients. Results Ms. Y with moderate depression, the patient was willing to talk but was helped by his biological mother, during the interaction and communication at the first meeting the patient did not respond well, the patient's eye contact was poor, the patient looked lost in thought and looked down, the patient looked sad, the patient looked down and embarrassed, the patient looks a bit uncomfortable and lethargic, the patient does not smile and does not want to interact with other people, the patient feels that he is useless, and the patient seems irritable so that the nurse carries out BHSP (building a relationship of mutual trust), the nurse can provide a sense of calm, comfort and safe for patients in order to create a relationship of trust so that it can help patients express their feelings. After carrying out the BHSP, Ms. Y is normal, the patient seems a little cooperative when interacting with the nurse,

The patient looks indifferent when spoken to, there is poor eye contact, the patient's voice sounds soft and slow, the patient wants to contract for another time.

Results Mr. E with moderate depression, the patient was willing to talk but was helped by his biological mother, during the first interaction and communication meeting the patient did not respond well, eye contact was lacking, the patient looked daydreaming, the patient looked sad and did not want to interact, the patient looked down and embarrassed, a little tense, the patient looks a bit uncomfortable, the patient feels inappropriate, the patient looks confused and lethargic so the nurse carries out BHSP (building a relationship of mutual trust), the nurse can provide a sense of calm, comfort and security to the patient in order to create a trusting relationship so

that can help patients express their feelings. However, when the assessment was not finished, the patient immediately ran away to the kitchen. However, the nurse invited Mr. E is for BHSP back. After carrying out the BHSP Mr. E felt that he was normal, the patient seemed a little cooperative when interacting with the nurse, the patient looked embarrassed and a little tense when spoken to, a little uncomfortable, there was less eye contact, the patient's voice sounded soft and slow, he was still confused, and the patient wanted to contract for another time.

Results Mr. N with mild depression, the patient was willing to talk but was helped by his biological mother, during the interaction and communication at the first meeting the patient did not respond well, eye contact was lacking, the patient looked daydreaming, the patient looked sad, the patient looked down and embarrassed, the patient looked somewhat uncomfortable, the patient feels that he is useless, the patient looks confused and lethargic when asked questions. so that nurses carry out BHSP (building relationships of mutual trust), nurses can provide a feeling of calm, comfort and security to patients in order to create a relationship of trust so that they can help patients express their feelings. After carrying out the BHSP Mr. N felt that he was normal, the patient seemed a little cooperative when interacting with the nurse, the patient looked down, embarrassed when spoken to, lacked eye contact and looked confused, the patient's voice sounded soft and slow and a little tense, the patient looked uncomfortable, the patient wanted a time contract furthermore. Of the three patients, Ms. Y, Mr. E, Mr. In his daily life, N rarely leaves the house and chats with his family and this influences the adaptation process and being able to communicate well between fellow patients and their families so they get to know each other. This is in line with this research which states that therapeutic communication by building trusting relationships (BHSP) can help patients clarify and reduce the burden of feelings and thoughts.

On the second day, March 19 2023, researchers conducted an assessment and found that the three patients had the same reason for seeking treatment at the Ariodillah Palembang Community Health Center, namely wanting to recover so they could make their families happy, often getting it by being continuously sad, daydreaming, not wanting to talk, and feel himself inadequate and useless. In patient

Ms. Y, Mr. E, and Mr. N received information that the patient had been receiving outpatient treatment at the Ariodillah Palembang Health Center for a long time, but the patient Mr. N, he stated that he had been treated at Ernaldi Bahar Hospital. There are several factors that can cause patients to experience depression, namely not wanting to take medication, often being constantly sad and daydreaming, rarely communicating, and often being buried in their hearts and easily insecure.

In the results of Ms. Y with moderate depression, the patient was willing to talk but was helped again by his biological mother, during the interaction and communication meeting between the two patients still did not respond well, the patient's eye contact seemed lacking, the patient was still daydreaming and looking down, the patient was a little sad, the patient was still looking down and embarrassed, the patient is still a bit uncomfortable and lethargic, the patient doesn't smile and doesn't want to interact with other people and the patient is still a little irritable so the nurse does BHSP (building a relationship of mutual trust) again, the nurse can provide a feeling of calm, comfort and safety to the patient. patients to create a relationship of trust so that they can help patients express their feelings. After carrying out the BHSP, Ms. Y is still normal, the patient seems a little cooperative when interacting with the nurse, the patient still looks indifferent when spoken to, eye contact is still lacking, the patient's voice sounds soft and slow, the patient wants to contract for another time.

On the results Mr. E with moderate depression, the patient is willing to talk but is helped again by his biological mother, during the interaction and communication meeting the two patients still don't respond well, eye contact is still lacking, the patient still looks daydreaming, the patient is still a little sad and doesn't want to interact , the patient still looks down and is embarrassed, a little tense, the patient looks a little uncomfortable, the patient still looks confused, and a little lethargic so the nurse carries out BHSP (building a relationship of mutual trust), the nurse can provide a feeling of calm, comfort and security to the patient in order to create a trusting relationship so that it can help the patient express his feelings . After carrying out the BHSP Mr. E felt that he was still normal, the patient was a little cooperative when interacting with the nurse, the patient still looked a little shy, tense when spoken to,

still a little uncomfortable, still confused, and the patient wanted a contract at a later date.

Results Mr. N with mild depression, the patient was willing to talk but was helped by his biological mother, during the interaction and communication at the first meeting the patient did not respond well, eye contact was lacking, the patient looked daydreaming, the patient looked sad, the patient looked down and embarrassed, the patient looked somewhat uncomfortable, the patient looked confused and lethargic when asked questions. so that nurses carry out BHSP (building relationships of mutual trust), nurses can provide a feeling of calm, comfort and security to patients in order to create a relationship of trust so that they can help patients express their feelings. After carrying out the BHSP Mr. N felt that he was normal, the patient was a little cooperative when interacting with the nurse, the patient still looked down, was still shy when spoken to, there was less eye contact and he still looked confused, the patient still looked uncomfortable, the patient wanted a contract at a later date.

From the results of the study, it was found that the three patients had the same nursing problem, namely low self-esteem, with Ms. Y received outpatient treatment at the Ariodillah Palembang Community Health Center with complaints at the end of 2022, Ms. Y often cries and often feels sad because his lover left him, then he prefers to be alone in his room and doesn't want to come out. While studying, the patient felt sad about being abandoned by the man he liked. She felt that she was inappropriate, not beautiful, and useless. Then to Mr. E received outpatient treatment at the Ariodillah Palembang Community Health Center for the reason that in 2020 Mr. E likes to be scolded by his father and older sister. so he often daydreams, doesn't want to talk to anyone, and likes to be alone in the kitchen. In 2021 the patient recovered, then in 2023 the patient relapsed. And finally the patient was taken back to the Ariodillah Palembang health center for outpatient treatment. Patients at work used to like being scolded by their bosses. He does not feel happy at home or at work, he feels that he is useless. Lastly to Mr. N with the reason that in 2010 Previously Mr. N While at school, N likes to be bullied by his classmates. So he likes to feel sad, daydreams, and likes to be alone in his room. And in 2015 the patient recovered, and in November 2022, the patient relapsed again because he was still being bullied by

his co-workers. He felt he was unworthy and useless. So that in 2023, the patient finally received outpatient treatment at the Ariodillah Palembang Community Health Center. The similarities in the symptoms of the three patients are that there is poor eye contact, the patient looks lost in thought and looks down, the patient looks sad, the patient looks down, the patient looks a bit uncomfortable and lethargic, the patient does not smile and does not want to interact with other people, the patient feels that he is useless, and the patient appears irritable which is objective data of Low Self-Esteem¹⁴.

The implementation was carried out on the third day, March 20 2023. The same implementation was carried out for three patients, namely carrying out nursing actions by applying positive affirmation therapy. Of the three patients, they were able to explain and identify ways to reduce depression and low self-esteem by changing thoughts, asking patients to make an agreement regarding negative thoughts to be replaced with more positive thoughts, namely by changing the patient's view that he thought he was not beauty is replaced with the patient's beautiful/handsome face, as well as changing the perception that the patient is useless by encouraging the patient to mention the abilities they have. The three patients were able to repeat the method of reducing depression and low self-esteem with positive affirmation therapy, the patient's voice sounded clear but soft and there was eye contact.

During the therapy explanation, the researcher taught positive affirmation therapy in the form of writing and listening, by writing positive affirmation therapy, to Ms. Y was able to rewrite positive affirmation therapy with the words "I want to get well quickly, make my parents and family happy and I will take the medicine." And help the patient stick it in a place they like, such as in the room. to Mr. E was able to rewrite the positive affirmation therapy with the words "I want to get well quickly, and want to work again." And help the patient stick it in a place they like, such as in the living room. to Mr. N is able to write returned positive affirmation therapy with the words "I want to get well soon, and make my mother and father happy and want to work again." And help the patient stick it in a place they like, such as in the living room. of the three patients, Mrs. Y, Mr. E, and Mr. N by doing positive affirmation writing therapy is very useful, he wants to learn again about positive affirmation therapy exercises, is a

little calmer and more comfortable after knowing how to get rid of sad feelings and the patient is willing to contract for the next meeting.

On the fourth day, March 22 2023, nursing implementation was carried out again for three patients, namely asking again about positive affirmation therapy and asking the patient to explain again. In addition, patients are told that they will discuss ways to reduce depression or feelings of sadness. The patient is willing to carry out positive affirmation therapy in the form of listening, which takes around 10-15 minutes. The patient sits with them relaxed or relaxed and asks the patient to close their eyes then take a deep breath and exhale slowly. Then start positive affirmation therapy in the form of listening. During the procedure, of the three patients Ms. Y, Mr. E, and Mr. N by carrying out positive affirmation therapy in the form of listening is very useful, being able to listen again to positive affirmation therapy, the patient looks calm and comfortable, the patient is a little appreciative and moved, the patient's anxiety has begun to decrease, the patient seems cooperative, the three patients are willing to agree to the next meeting.

On the fifth day, March 23 2023, the same implementation was carried out for three patients, namely positive affirmation therapy. At this stage, the three patients can explain and identify ways to reduce depression and low self-esteem by changing thoughts, asking the patient to make an agreement regarding negative thoughts to be replaced with more positive thoughts, namely by changing the patient's view. Those who think they are not beautiful are replaced with the patient's beautiful/handsome face, as well as changing the opinion that the patient is useless by encouraging the patient to mention the abilities they have. The three patients were able to repeat the method of reducing depression and low self-esteem with positive affirmation therapy, the patient's voice sounded clear but soft and there was eye contact.

During the therapy explanation, the researcher taught positive affirmation therapy in the form of writing and listening, by writing positive affirmation therapy, to Ms. Y was able to rewrite positive affirmation therapy with the words "I want to get well quickly, be healthy, start a beauty business, make my parents and family happy, want to go to a quiet place, take my medicine regularly." And help the patient stick it in a place they like, such as in the

room. to Mr. E was able to rewrite positive affirmation therapy with the words "I want to get well quickly, want to work again, want to make my parents happy, always take medicine, and keep praying." And help the patient stick it in a place they like, such as in the living room. to Mr. N was able to rewrite positive affirmation therapy with the words "I want to recover quickly, and make my mother and father happy, become a successful person, always be filial to my parents, and want to work again." And help the patient stick it in a place they like, such as in the living room. Of the three patients, Ms. Y, Mr. E, and Mr. N by doing positive affirmation writing therapy is very beneficial, the patient seems cooperative and he wants to learn more about positive affirmation therapy exercises, he is a little calmer and more comfortable after knowing how to get rid of sad feelings and the patient is willing to contract for the next meeting. This is in accordance with this research which states that a noisy atmosphere, tension and discomfort affect the effectiveness of communication. Tension makes it difficult for someone to speak in this situation, making information not conveyed well¹⁵.

On the sixth day, March 24 2023, the same implementation was carried out on three patients, namely asking again about positive affirmation therapy and asking the patient to explain again. In addition, patients are told that they will discuss ways to reduce depression or feelings of sadness. The patient is willing to carry out positive affirmation therapy in the form of listening, which takes around 10-15 minutes. The patient sits together relaxed or relaxed and asks the patient to close his eyes then take a deep breath and exhale slowly. Then start positive affirmation therapy in the form of listening. During the procedure, of the three patients Ms. Y, Mr. E, and Mr. N by carrying out positive affirmation therapy in the form of listening is very useful, being able to listen again to positive affirmation therapy, the patient looks calm and comfortable, the patient is a little appreciative and moved, the patient's anxiety has begun to decrease, the patient seems cooperative, the three patients are willing to agree to the next meeting.

On the seventh day, March 25 2023, the same implementation was carried out on three patients, namely at this stage, the three patients were able to explain and identify ways to reduce depression and self-esteem by changing thoughts, asking patients to

make agreements related to thoughts. to change negative thoughts to more positive thoughts, namely by changing the patient's view that he is not beautiful, replacing it with the patient's beautiful/handsome face, and changing the opinion that the patient is useless by encouraging the patient to mention the abilities he has. The three patients were able to repeat the method of reducing depression and low self-esteem with positive affirmation therapy, the patient's voice sounded clear but soft and there was eye contact.

During the therapy explanation, the researcher taught positive affirmation therapy in the form of writing and listening, by writing positive affirmation therapy, to Ms. Y was able to rewrite positive affirmation therapy with the words "I want to get well quickly, be healthy, start a beauty business, make my parents and family happy, want to go to a quiet place, take my medicine regularly, meet up with friends." And help the patient stick it in a place they like, such as in the room. to Mr. E was able to rewrite positive affirmation therapy with the words "I want to get healthy quickly, want to work again, want to make my parents happy, always take medicine, keep praying, keep my family's good name, get a new job." And help the patient stick it in a place they like, such as in the living room. to Mr. N was able to rewrite positive affirmation therapy with the words "I want to recover quickly, and make my mother and father happy, become a successful person, always be filial to my parents, want to work again, always take medicine, be a good person." And help the patient stick it in a place they like, such as in the living room. of the three patients, Ms. Y, Mr. E, and Mr. N By doing positive affirmation therapy, writing is very beneficial, the patient seems cooperative and he wants to learn more about positive affirmation therapy exercises, he is a little calmer and more comfortable after knowing how to get rid of depression with low self-esteem problems with positive affirmation therapy in the form of writing. Apart from that, the patient is told that he will carry out positive affirmation therapy in the form of listening, which lasts around 10-15 minutes. The patient sits together relaxed or relaxed and asks the patient to close his eyes then take a deep breath and exhale slowly. Then start positive affirmation therapy in the form of listening.

After implementation from the first to the seventh day, Ms. Y, Mr. E, and Mr. N was asked to fill out the DASS 42 (Depression Anxiety and Stress Scale) questionnaire and Ms. Y's score was 20. Moderate depression, Mr. E is 20 Moderate depression, and in Mr. N is 13 Mild depression. Researchers carried out evaluations on the three patients and can be seen from the results of the pre and post checklist on Ms. Y, Mr. E, and Mr. N by carrying out positive affirmation therapy in the form of writing and listening, it shows that the patient experienced a decrease in the level of depression and an increase in low self-esteem, the three patients said that this therapy was very useful, the patient was able to write and listen again to positive affirmation therapy, the patient had started to smile, the patient looked calm and comfortable, the patient is a little appreciative and moved, the patient's anxiety has begun to decrease, the patient seems cooperative, the patient will take medication regularly and add it to the schedule, the patient wants to carry out positive affirmation therapy independently.

CONCLUSION

After the researcher implemented mental nursing on Ms. Y, Mr. E and Mr. N with depressed patients with low self-esteem problems in the Ariodillah Palembang Community Health Center area which was carried out from March 18 2023 to March 25 2023, the researchers were able to achieve specific objectives and draw the following conclusions: Implementation of positive affirmation therapy with low self-esteem problems in patients depression has been done on 3 patients, namely: Ms. Y, Mr. E and Mr. N, carried out for 7 days and carried out according to SOP. Do BHSP for 2 days, and carry out Positive Affirmation Therapy intervention for 5 days. Of the three patients, Ms. Y, Mr. E, and Mr. N can follow well, good communication and interaction. After positive affirmation therapy intervention, the three patients were able to do it independently. This therapy is effective for treating the problem of low self-esteem in depressed patients. The patient is willing to intervene independently, is able to overcome self-esteem by carrying out positive affirmation interventions independently. The three patients already knew and understood the

problem that they experience, and already know about one of the therapies that can be used for low self-esteem problems. It is hoped that patients can apply the implementation that has been taught by researchers. And the family can support and pay attention to the patient in the patient's treatment so that the patient does not relapse.

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