

Role Play Therapy to Improve Socialization Ability in Social Isolation Patients in Danasari Health Center Area, Tegal Regency

Ramadhan Putra Satria^{a*}, Syahvena Restika Putri^a

^a Nursing Study Program of Bhamada University Slawi

Corresponding Author: satria2604@gmail.com

ARTICLE INFORMATION

Article history

Received (1 June 2024)

Revised (15 September 2024)

Accepted (12 October 2024)

Keywords

Role play, social isolation

ABSTRACT

Introduction: Social isolation is a condition when a person experiences decreased social functioning due to negative thoughts, unpleasant experiences that threaten them. Patients who experience social isolation will have difficulty interacting, show behavior that does not want to interact with others, prefer to stay silent, and avoid other people. So it is necessary to use role-playing training techniques to improve the ability to socialize. This study aims to implement role-playing therapy to improve socialization skills in social isolation patients. The design used by researchers is a descriptive case study. **Conclusion:** The case study subjects in this study were 2 patients who experienced social isolation disorder by applying role-playing therapy for 3 days. Data obtained from interviews, observations, documentation and presented in narrative form. **Results:** The results of the application of therapy for 3 days increased the ability to socialize. Namely in patient 1 before therapy the results were 55 points with Yes (3) No (3) after therapy became 85 points with Yes (5) No (1). While in patient 2 the ability to socialize before therapy the results were 35 points with Yes (2) No (4) after therapy to 70 points with Yes (4) No (2). **Conclusion:** Patients with social isolation disorders are given the application of role-playing therapy, namely 1 time a day for 45 minutes to improve socialization skills in social isolation patients

Introduction

Health is considered a basic need for everyone. So keep in mind that health is not only related to physical health but there is also mental health. Mental disorders are changes and disturbances in mental functions that cause suffering to individuals and obstacles in performing social roles (Keliat, 2016). Because mental health is more difficult to observe, it is unfortunate that society, including those working in the health sector, does not pay enough attention to this issue. A person may experience mental illness if they face problems or difficulties when performing social roles. One of these very serious problems is called social isolation disorder, which is a very common psychiatric problem in society. In psychiatric nursing, social isolation disorder is a condition when a person experiences a decrease in social functioning. Someone who experiences social isolation is decreased or completely unable to interact with others (Yosep and Sutini, 2014). Patients who experience social isolation will have difficulty interacting and show passive behavior that does not want to interact with others, prefer to stay silent, and avoid other people.

Social isolation can cause side effects such as withdrawal, narcissism or anger, doing unexpected or impulsive things, hallucinations, and lack of self-care. Social isolation can also



This is an Open Access article
Distributed under the terms of the
[Creative Commons Attribution 4.0 International License](https://creativecommons.org/licenses/by/4.0/).

cause a person to be unable to socialize with others, and there are obstacles in communicating effectively, especially to express and confirm the positive and negative feelings they experience (Purwanto, 2015). To accept or reject irrational requests from others and to understand barriers in interpersonal relationships (El Malky M, Atia and Alam, 2016). Almost everyone can experience social isolation, but at a young age it is usually due to lack of confidence or inability to accept their own shortcomings, but individuals aged 60 years and over are more prone to social isolation. Elderly people who experience social isolation due to depression, the depression in question is due to physical and mental changes (Ichsan and Alpia, 2024).

The *World Health Organization* (2022) reports that there are 24 million people worldwide who suffer from schizophrenia. Meanwhile, in Indonesia itself, based on the results of the Basic Health Research in 2018, the prevalence of households with schizophrenia patients reached 6.7 per 1,000 households. This means that in 1,000 households in Indonesia, there are 6.7 families caring for schizophrenia patients (Kemenkes, 2018). Some people argue that social isolation disorder is when a person has decreased or even unable to interact with others. They also state that the behavioral impact of clients with social isolation disorder often goes unnoticed because it is not truly disruptive. If not addressed immediately, it will have a negative impact on the quality of human life (Fuad, 2019). If social isolation clients are not treated properly, other mental health problems can arise, such as the risk of hallucinatory sensory perception disorders and the risk of violent behavior. As a result of not getting the right treatment, their condition can get worse and even decide to commit suicide.

The purpose of this study is that researchers want to know if there are changes in social interactions in patients with social isolation by looking for role playing. Larasati said in her research, role playing in patients with social isolation can increase interest in other people to interact such as getting acquainted, smiling and greeting (Larasati, 2020).

Methods

The research design was to use a case study to determine whether there were changes in social interaction in patients with social isolation disorders in the Danasari Health Center area of Tegal Regency. Data processing was carried out since the research took place in the field, observing and providing nursing interventions until all the necessary data were collected. The population taken was patients who experienced social isolation mental disorders in the Danasari puskesmas area of Tegal Regency with the number of respondents as many as two patients with purposive sampling technique.

The inclusion criteria taken by researchers were patients aged more than 25 years, experiencing social isolation mental disorders, willing to become respondents and not experiencing physical health problems. The exclusion criteria are clients who refuse to be respondents, and experience mental disorders other than social isolation. The assessment instrument used is an observation sheet to assess the development of social activities. The



analysis technique uses data that is interpreted from the researcher's analysis and then compares it with existing theory to get a suitable intervention in this study.

Results

Table 1. Respondent I's Intervention Process

Meeting	Destination	Response	Progress
June 20, 2024, 10:45 a.m. WIB	Assessment, building a trusting relationship, time contract and implementing implementation strategy I, namely how to get acquainted.	Mrs. L said she felt awkward when interacting with others, did not have close friends, and was often alone.	Mrs. L appeared to avoid conversation, lacked eye contact, appeared restless, lazy, lackluster, spoke weakly and in a low tone, was often alone, and spoke lightly.
June 21, 2024 09.00 am	Evaluate SP I (how to get along with 1 person) and practice SP II (how to talk while doing daily activities)	Mrs. L said she had started to feel a little more confident, and was happy to be taught how to get acquainted.	Mrs. L appears to have occasional eye contact, looks difficult and hesitant with people who meet for the first time, is still shy when going to talk.
June 22, 2024 09.00 am	Evaluate SP II (talking while doing daily activities), practice SP III (talking while doing new daily activities).	Mrs. L said she was happy to be taught how to talk, was no longer shy and did not feel lonely, and wanted to recover quickly.	Mrs. L was cooperative, there was occasional hesitation, and there was eye contact.

The condition of research subject I before the intervention showed response namely feeling awkward when interacting with other people, saying they don't have close friends, and saying they are more often alone. The level of social isolation obtained a total score of 55 points with Yes (3) and No (3) which is very poor based on the social isolation observation sheet.

Table 2: Respondent 2's Intervention Process

Meeting	Destination	Response	Progress
June 20, 2024 10.45 am	Assessment, build trusting relationship, time contract, implement SP I (how to meet 1 person) and train	Mr. A said he felt shy when interacting with others. A response was also obtained	Mr. A appeared to have his head down, lacked eye contact, looked agitated, spoke softly and in a slurred voice, appeared insecure about himself, and spoke only as needed.



June 21, 2024 09.00 am	Evaluation of SP I how to meet with 1 person.	Mr. A said he is in a better mood now and is trying to be a little confident	Mr. A seemed to be speaking softly, and there was occasional eye contact, seemed hesitant when demonstrating therapy.
June 22, 2024 09.00 am WIB	Evaluate SP I (how to get along with 1 person) and practice SP II (how to talk while doing daily activities).	Mr. A said she was happy to be taught how to get acquainted, and wanted to recover quickly	Mr. A seemed occasionally hesitant, awkward and confused

The condition of research subject II before the intervention showed a response, namely feeling shy when interacting with others. The level of social isolation obtained a total value of 35 points with Yes (2) and No (4) it is very less based on the social isolation observation sheet.

The results of research conducted by researchers regarding the application of role-playing therapy to improve socialization skills in social isolation patients conducted on June 20 - June 22, 2024 with 2 respondents each 3 meeting for 45 minutes using the instrument of the socialization ability questionnaire sheet (social behavior) and social isolation observation sheet in the Danasari Health Center Region who experienced social isolation disorder. Before the role-playing therapy was carried out, the level of ability to socialize was very poor.

In this study, the results obtained with patient 1 (Mrs. L) and patient 2 (Mr. A) data showed that both had a history of reluctance to socialize. This is in line with the opinion of Yosep. I and Sutini. T, (2014) states that social isolation patients have decreased or are completely unable to interact with others. In addition, during the assessment of patient 1 (Mrs. L) said she felt awkward when interacting with others, said she did not have close friends, this was also felt by patient 2 (Mr. A), namely feeling shy when interacting with others. This is in accordance with the theory of (Saswati and Sutinah, 2018) which states that social isolation disorder is a condition where a person has a behavior of not wanting to communicate with others, preferring to stay silent, avoiding other people, and ignoring daily activities so that a therapy program needs to be given.

Discussion

Based on the results of research conducted by (Nengah, Wayan and Ekayanti, 2015) explained that role- playing social skills can overcome problems in interacting, especially in social isolation disorders, where this research was conducted with 16 respondents who had been treated with therapy with results that showed an increase in socializing. The results showed that the treatment group was entirely categorized as capable, as many as 8 people (100%), while in the control group most of them were categorized as unable, namely 7 people (88%) and partially capable, namely 1 person (12%). So it can be concluded that there is an



effect of role-playing social skills training on improving the ability to socialize in social isolation patients.

One intervention that can be applied to social isolation patients is to use role-playing therapy. Role-playing therapy has an impact on being able to change the socialization ability of individuals, this is influenced by the research approach in building close relationships with respondents. So that therapeutic exercises can help clients who experience social isolation and low self-esteem (Wakid, 2013 in Nengah et al., 2015). Role play, researchers play the role of the patients they meet, thus exploring their attitudes and feelings (Hodges BD, 2008 in Rønning & Bjørkly, 2019).

There are several differences between the research conducted by researchers and the research of Nengah, I., et al. (2015), namely in the type of research using Quasy experiment with pre-posttest design with control group design, while researchers use descriptive qualitative research with case study design. In addition, in previous studies the number of research samples was 16 people, while here the researchers used a sample of 2 people. Then the application of role-playing therapy in previous studies was carried out for 15 days, while here the researchers applied role-playing therapy for 3 days. The application of role-playing therapy to improve the ability to socialize which was carried out for 3 days in both patients concluded that the therapy had an effect in improving socialization skills in social isolation patients because by looking at the description of the measurement results the patient experienced an increase in socializing.

In carrying out role-playing therapy actions, it should be in accordance with standard operating procedures so that the expected goals can be achieved and avoid unwanted things. This research was conducted in accordance with the Standard Operating Procedures in off Dwi Candra the first step in the pre-interaction stage is to make a time contract, explore yourself (feelings, expectations, and anxiety), prepare tools, wash your hands, then the orientation stage is to give therapeutic greetings, introduce yourself and ask the patient's name, make a contract (time, place, topic), convey the objectives and steps of action, maintain confidentiality, as for the work stage in the form of giving instructions to patients on how to play roles, researchers model how to apply role-playing therapy, motivate patient involvement, encourage patients to carry out the instructions taught, give praise to patients, and finally the termination stage in the form of conducting subjective and objective evaluations, conducting follow-up plans: include in the activity schedule, make future contracts (time, place, topic), end the action in a good way, wash hands and documentation (Candra, 2021).

Conclusion

The application of role-playing therapy is a non-pharmacological technique that uses an intense approach. The use of role-playing therapy in improving socialization skills in social isolation patients is a study that was developed from previous studies and can show that role-



playing therapy can improve socialization skills. The purpose of role-playing therapy is to dramatize and express one's behavior, expressions, and gestures in social relations between humans so that it can overcome problems in social isolation patients.

Implementation carried out on Mrs. L and Mr. A for 3 days in the application of role-playing therapy is carried out when meeting with patients, namely once a day for 45 minutes. Before the provision of role-playing therapy, the researcher builds a trusting relationship with the patient. Furthermore, assess the patient's socialization skills with a questionnaire sheet (social behavior) first, then make observations of social isolation. After the application of role-playing therapy for 3 days, then reassess using the social isolation observation sheet to determine the improvement in socialization skills.

The application of role-playing therapy to improve the ability to socialize was carried out for 3 days in both patients. The first data obtained in patient 1 (Mrs. L) showed an increase, namely, first before therapy obtained a total value of 55 points with Yes (3) and No (3) then after therapy, namely with a total value of 85 points, in the form of Yes (5) and No (1) so that the results obtained that Mrs. L was in the successful category. Meanwhile, patient 2 (Mr. A) showed an increase, namely, before the therapy was obtained with a total score of 35 points, with Yes (2) and No (4) then after the therapy received a total score of 70 points, in the form of Yes (4) and No (2) so that the results obtained that Mr. A was in the moderately successful category. Mr. A is in the moderately successful category. However, therefore, the results of this study can be concluded that role-playing therapy has an effect in improving socialization skills in social isolation patients. The suggestion of this research is that it is expected to add insight into social isolation disorders through role-playing therapy for socialization skills.

Ethics approval and consent to participate

This study received ethical approval from the Research Ethics Committee of Bhamada University Slawi with number 018/Univ.Bhamada/KEP.EC/VI/2024.

Acknowledgments

Thank you to the respondents in the Danasari Health Center area of Tegal Regency, so that this research can be completed.

References

- Candra, D. (2021) *SOP Terapi Bermain*. EGC.
- Fuad, H. (2019) *Mengenal dan Merawat Pasien dengan Masalah Isolasi Sosial*.
- Ichsan, A. N. and Alpiah, D. N. (2024) 'Gangguan Kesehatan Mental Yang Terjadi Pada Lansia: Literatur Review', *Jurnal Ilmu Kesehatan*, 3, pp. 25–31. doi: 10.5455/mnj.v1i2.644.
- Keliat, B. A. (2016) *Model Keperawatan Profesional Jiwa*. EGC.
- Kemenkes, R. (2018) *Hasil Riset Kesehatan Dasar*.



This is an Open Access article
Distributed under the terms of the
[Creative Commons Attribution 4.0 International License](https://creativecommons.org/licenses/by/4.0/).

- Larasati, H. P. (2020) 'Penerapan Latihan Keterampilan Sosial: Bermain Peran Pada Pasien Skizofrenia dengan Masalah Keperawatan Isolasi Sosial Di Ruang Puri Mitra RSJ Menur Surabaya', *Jurnal Biosains Pascasarjana*, 22(2), p. 81. doi: 10.20473/jbp.v22i2.2020.81-86.
- El Malky M, Atia, M. and Alam, F. (2016) 'The effectiveness of social skill training on depressive symptoms, self-esteem and interpersonal difficulties among Schizophrenic patients', *International Journal of Advanced Nursing Studies*, 5(1), pp. 43–50.
- Nengah, I., Wayan, S. I. and Ekayanti, N. G. (2015) 'Bermain Peran Terhadap Peningkatan Kemampuan Bersosialisasi Pasien Skizofrenia'.
- Purwanto, T. (2015) *Buku Ajar Keperawatan Jiwa*.
- Saswati, N. and Sutinah, S. (2018) 'Pengaruh Terapi Aktivitas Kelompok Sosialisasi Terhadap Kemampuan Sosialisasi Klien Isolasi Sosial', *Jurnal Endurance*, 3(2), p. 292. doi: <https://doi.org/10.22216/jen.v3i2.2492>.
- Yosep, I. and Sutini, T. (2014) *Buku Ajar Keperawatan Jiwa*.