

Family Mental Support Towards Children With Diarrhea at Wonosari District Hospital Gunung Kidul Daerah Istimewa Yogyakarta

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Abstract

Background: Diarrhea is a condition that occurs in the digestive system when a child defecates in liquid form three or more times every day. Families are expected to understand the management of diarrhea in children so they can carry out independent treatment. Families can control anxiety levels while accompanying children who experience diarrhea in the hospital.

Objective: This research was conducted to provide mental support to families in the context of caring for children who experience diarrhea.

Methods: The research was applied using a pre-experimental design method by applying case studies to a sample of 41 children with diarrhea in the Amaryllis ward of Wonosari Regional Hospital in April - May 2023. This research was carried out after receiving an Ethical Clearance Test from the hospital.

Results: Family mental support was provided by senior nurses who provide care for parents with children who experience diarrhea. Support is provided using the Myra Levine Theory approach. The results show that the family feels that there is very good mental support from the hospital for the family. Families and patients in general have the enthusiasm to recover and families are equipped with aseptic treatment techniques and good management by nurses.

Conclusion: Families get good mental support from nurses, especially when accompanying children who experience diarrhea. Family understanding is provided well regarding the education process and how to provide information on diarrhea treatment management.

Keywords: Family Mental Support; Children; Diarrhea; Myra Levine Theory.

1.0 Introduction

Diarrhea is defined as the passage of three or more loose or liquid stools per day, or more frequent bowel movements than normal for an individual (World Health Organization [WHO],

2023). This condition remains a significant global health concern, particularly among children under five years old, as it can lead to dehydration, malnutrition, and even death if not properly managed (Diarrheal Diseases Collaborators, 2022). In Indonesia, diarrhea continues to be a leading cause of morbidity in children, with environmental factors, poor sanitation, and limited access to clean water contributing to its prevalence (Ministry of Health Republic of Indonesia, 2021).

The role of family support is crucial in managing childhood diarrhea, as caregivers play a vital role in early detection, rehydration, and seeking medical care (Alamneh *et al.*, 2020). At Wonosari District Hospital in Gunung Kidul, Daerah Istimewa Yogyakarta, the level of family mental and emotional support may influence recovery outcomes for pediatric patients with diarrhea. Understanding the dynamics of family support in this context can help improve healthcare strategies and reduce complications associated with diarrheal diseases in children. According to Riskesdas, in 2018 diarrhea was one of the second causes of death in children under five years old with 525,000 children each year. Globally, there are almost 1.7 billion cases of childhood diarrhea. Diarrhea lasts for several days and can cause dehydration. The main causes of death from diarrhea are dehydration and septic bacteria. In infants, diarrhea cases rank second after acute respiratory infections as a cause of death (Prabowo, 2020).

While medical treatment focuses on rehydration and infection control, mental and emotional support from families plays a critical yet often overlooked role in recovery. Parents and caregivers experiencing stress or anxiety may delay seeking care or struggle to adhere to treatment protocols, worsening a child's condition (Hurley *et al.*, 2019). Conversely, strong family support improves health-seeking behaviors, ensures proper oral rehydration therapy (ORT) compliance, and reduces complications (Alamneh *et al.*, 2020). For the child, psychological distress from repeated illness can weaken immunity, creating a vicious cycle of reinfection (Walker *et al.*, 2022).

Despite extensive research on the clinical management and environmental determinants of childhood diarrhea, few studies have explored the psychosocial dimensions of caregiving in diarrheal recovery, particularly in rural Indonesian contexts. Existing literature predominantly focuses on medical interventions (e.g., oral rehydration therapy) and epidemiological risk factors, neglecting the critical role of family mental support in influencing health-seeking behaviors, treatment adherence, and child recovery outcomes (Alamneh *et al.*, 2020; Hurley *et al.*, 2019). Gunung Kidul, where cultural norms and resource limitations uniquely shape caregiving practices, yet remain understudied. Our study addresses investigating the interplay between family mental health and pediatric diarrhea outcomes at Wonosari District Hospital, using a pre-experimental methods approach to qualitative data and caregiver narratives. This holistic approach not only advances academic discourse but also provides actionable solutions to reduce diarrhea-related morbidity in resource-limited settings.

Wonosari Regional General Hospital is a hospital that provides services for sick children with patients coming from several areas around Wonosari and Gunung Kidul. The majority of people in this area still have secondary education (Junior High School) so the treatment process requires mental support and education regarding the care of children with diarrhea so that families can carry out further treatment and the incidence of diarrhea can decrease. In 2022, diarrhea sufferers will reach 14,711 cases and in November 19,884 cases were recorded, which is generally increasing in the DIY region, especially in Gunung Kidul. There were 3763 cases

of diarrhea in Gunung Kidul, and the majority of these cases occurred in children so they required professional fluid management.

2.0 Materials and Methods

The research was conducted on inpatient pediatric patients in the Amarilis Ward of Wonosari Regional Hospital on 5 April – 5 May 2023. This research used a research permit from the KEPK of Wonosari Regional Hospital with Number 009/024/2023. In this research activity, an understanding was also reached with the parents so that they were willing to provide mental support to the parents.

Design

This research is a qualitative type, with 41 parents whose children experienced diarrhea and received treatment at the Wonosari Regional General Hospital. Nurses provide mental support to parents of children with diarrhea using the approach from Myra Levine's energy conservation theory to families.

Ethical consideration

This research used a research permit from the KEPK of Wonosari Regional Hospital with Number 009/024/2023. In this research activity, an understanding was also reached with the parents so that they were willing to provide mental support to the parents.

Participants and Setting

The research was conducted on inpatient pediatric patients in the Amarilis Ward of Wonosari Regional Hospital on 5 April – 5 May 2023. In this research activity, an understanding was also reached with the parents so that they were willing to provide mental support to the parents. The sample selection in this study used a purposive sampling technique with the following criteria: parents willing to be used as research respondents, child patients undergoing hospital admission who experienced diarrhea who were grouped under the age of 10 years who experienced mild to severe diarrhea.

Data collection

There were 41 respondents with data collection techniques using interviews, observation, and also providing education regarding fluid management.

Data analysis

Data analysis by thematic analysis

Trustworthiness

The research was conducted by addressing credibility, transferability, dependability, and confirmability. Researchers can demonstrate that their work is rigorous, transparent, and reflective of participants' experiences.

3.0 Results**1. Respondent Characteristics**

The characteristics of the respondents (Table 1) in this study are as follows:

Table. 1. Respondent Characteristic		
Characteristics of the Respondent	N	Percentage (%)
Sex		
Boy	24	58.53%
Girl	17	41.46%
Age of Children		
0-5 years	23	56.09%
6-12 years	18	43.90%

The results of respondent characteristics show that the majority of respondents are male with a total of 24 children or 58.53% and the majority are aged 0-5 years with a total of 23 children or 56.09%.

The results of family support for families of children with diarrhea at the Wonosari Regional General Hospital are shown in Table 2.

Table 2. Results of Family Support for Families of Children with Diarrhea at the Wonosari Regional General Hospital

Age	Motivation toward patient energy conservation	Motivational support for structural integrity	Support emotional motivation	Social Support
0-5 years	Patients are very dependent on their parents, and many patients need parents or guardians to meet their daily needs. The patient is very enthusiastic about being able to recover and is cooperative throughout the therapy process.	Patients with poor nutritional status influence the recovery rate. Parents are willing to obediently provide breast milk more often, motivate them to be able to provide chest physiotherapy, and apply warm compresses when the child's condition declines,	The child experiences anxiety and fear.	The patient is less active in communicating, and the relationship is still with other patients in the same room.
6-12 years	Patients have the enthusiasm to recover and are willing to cooperate in receiving therapy.	Patients are willing to eat and drink, and motivate them to drink more often, nurses motivate them to provide oxygen therapy, and nurses teach about aseptic techniques in caring for children with diarrhea, especially hand washing.	There is no anxiety or fear, the patient's mother feels anxious because she has to give food via OGT/NGT so she is very careful in giving food diets.	The patient is communicative. But feel anxious because the child is in a new room, the child often cries and is fussy. The patient has not been able to communicate optimally because he is very worried about the child's condition.

Family mental support is provided by senior nurses who care for parents with children who experience diarrhea. Support is provided using the Myra Levine Theory approach. The results show that the family feels that there is very good mental support from the hospital for the family. Families and patients generally have the enthusiasm to recover and families are equipped with aseptic treatment techniques and good management by nurses.

4.0 Discussion

One of the nursing model theories that can be applied in caring for children is Levine's Conservation Model which describes the complex ways that allow individuals (children) to continue functioning even though they face very difficult challenges/obstacles (Alligood, 2022; Mefford & Alligood, 2022). According to Levine, the conservation model focuses on adaptation so that individuals can maintain individual integrity by using conservation principles. Nurses are expected to play a role in improving individual adaptation through interventions carried out with the principles of energy conservation, structural integrity conservation, personal integrity conservation and social integrity conservation (Mefford & Alligood, 2022)

Fluid resuscitation or fluid replacement is a medical practice to replace body fluids lost due to sweating, bleeding, fluid displacement, or due to pathological processes. Fluids can be replaced orally (drinking), and/or given intravenously if bleeding or severe dehydration occurs. The goal of fluid resuscitation is to restore lost blood volume. Rational fluid therapy relies on estimating the water deficit of each physiological fluid compartment and then administering the appropriate crystalloid or colloid to resuscitate the compartment that requires it (Prabowo, 2020). This fluid resuscitation activity needs to be provided and cannot be separated from parental support.

The results of this research on 41 cases show that nurses provide support to patients who experience diarrhea and have problems with fluid balance following the application of Myra Levine's Conservation Theory. Nurses carry out an assessment process for pediatric patients aged 0 to 12 years. The process is carried out through an assessment process, which consists of collecting data (observation and interviews) from the influence of the internal and external environment. Nurses can carry out assessments using the principles of nursing conservation, namely assessing: energy conservation (balance of energy supply and needs), structural integrity (the body's defense system), personal integrity (the patient's feelings about self-worth and personality), social integrity (the patient's ability to participate in the system). Social). In this activity, nurses are able to carry out optimally the cases they receive (Smith & Parker, 2023).

Family support before empowering the family through psychoeducation in the treatment of children under five suffering from diarrhea at the community health center in the experimental and control groups was in a good category. Family support after empowering the family through psychoeducation in the treatment of children under five suffering from diarrhea at the community health center in the experimental and control groups was in a good category. There is an influence of family empowerment through psychoeducation on family support in the treatment of children under five suffering from diarrhea at community health centers (Badiah *et al.*, 2022)

Conclusions

Nurses provide mental support to the patient's family, especially mothers. Families convey reduced anxiety and carry out motivational activities for parents regarding aseptic techniques used in the process of caring for children with diarrhea.

Limitation and Future Direction

While this study offers important insights into the role of family mental support in managing childhood diarrhea, several limitations must be acknowledged. First, the single-site design at Wonosari District Hospital limits the generalizability of findings to broader populations, as cultural and socioeconomic factors may differ in other regions. Second, reliance on self-reported data from caregivers introduces potential biases, such as recall inaccuracies or socially desirable responses. Additionally, the cross-sectional nature of the study prevents the assessment of long-term outcomes, such as recurring diarrheal episodes or sustained caregiver support effects.

Future research should expand on these findings through multi-site studies across diverse Indonesian communities, incorporating longitudinal designs to track lasting impacts. Objective measures, such as stress biomarkers or standardized psychological scales, could further strengthen the validity of findings. Finally, intervention-based studies are needed to evaluate the effectiveness of family-centered mental health programs in improving diarrheal management and child health outcomes. Addressing these gaps will enhance both scientific understanding and practical applications in public health.

Declaration of Interest

The authors declare that there is no conflict of interest.

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Data Availability

The datasets generated during and/or analyzed during the current study are available from the corresponding author upon reasonable request.

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