



## **ACEH CULTURAL HERITAGE BASED ON CANTENGAN TRADITIONAL MEDICINE: AN EDUCATIONAL APPROACH TO ELEMENTARY SCHOOL STUDENTS**

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### **ABSTRACT**

This research uses a descriptive qualitative method with a case study research model. Through the Tridharma service activity, researchers explain the phenomena that occur in society today, especially people who have compromised foot health. An ingrown toenail is a condition where the nail at the edge grows into the skin, causing the skin and underlying tissue to become inflamed. Ingrown toenails can occur on the nails of the hands and feet, but most often occur on the big toes. This research provides a real solution to educate elementary school students in recognizing and understanding traditional medicine that is effective and effective in dealing with this disease. Based on the fact that people still do not understand the meaning of traditional medicines inherited from the ancestors of the Indonesian people. In essence, all plants have their own benefits and functions. Students are given an understanding of how to make and use it to care for toenails to prevent ingrown toenails.

**Keywords:** *Cultural, Traditional, Cantengan*

### **INTRODUCTION**

Acehnese culture is very abundant and there are many ancestral customs that can be used as knowledge today. Traditional medicine, which not many people understand, especially society 5.0 people, can only rely on chemical medicines obtained from pharmacies (Firman, 2020). The dominant view of

society is to make medicines traditional medicine is very complicated and takes a long time, so it will take time to process traditional medicine (Orang et al., 2015). Students need to be given this education so that culture is not eroded by a culture that wants to have medicines practically and quickly (Olsson, 2020). Making medicine for ticks takes a long time, but the results can be used for a long time (Jennifer & Saptutyningasih, 2015).

Elementary students need education about introducing Acehnese culture. Traditional medicine provides extraordinary insight for students (Marharjono, 2020). From several materials used and the procedures for making them. Students gain knowledge through direct education and practice how to make natural ingredients into traditional medicines.

Acehnese culture is a rich and complex cultural heritage that has existed since the archipelago era. Because of its strategic location and being a trade route, many cultures from traders who stopped by also had an influence on Acehnese culture, including Arab, Indian/Gujarati culture, and a small part of Chinese culture (Anwar, 2020). This influence can be seen mostly in the spices used in cooking, cooking forms, and even traditional clothing (Rizqa et al., n.d.).

The use of various types of plants as medicinal ingredients has had a long history in various ethnicities in Indonesia for generations (Nasrudin, 2019). The use of plants as medicinal ingredients relies on the content of bioactive compounds produced by plant cells in the secondary metabolite biosynthesis pathway system (Setiawan & Kurniawan, 2017). Traditional medicines are medicines that are prepared simply based on ancestral recipes that have become local customs, beliefs or habits that have been passed down from generation to generation. Traditional community knowledge about the properties and uses of medicinal plants can provide valuable information in selecting and obtaining raw materials for medicinal plants. So far, information about the type of traditional medicinal plant most widely used as medicine is ginger.

One of the benefits of plants that can be used as traditional medicine is cloves, betel leaves, lemongrass leaves, cinnamon and ginger. This plant is known in traditional medicine and was used by the ancestors of the Indonesian people as traditional medicine. For example, a disease that often occurs in society is ingrown toenail. An ingrown toenail is the growth of one side of the nail or the tip of the nail into the flesh in the nail area. This condition is characterized by pain, swelling and redness in the area of the nail that has an ingrown toenail. Ingrown toenails most often occur on the big toe. An ingrown toe on the big toe can make the big toe feel painful, swollen and red. To overcome this, you can carry out simple treatments at home. However, it should be noted that this treatment is recommended for cases of mild toe ingrown toenails that have not yet developed into an infection.

Ingrown toenails that do not improve, become infected, frequently recur, or are experienced by people with certain diseases, such as diabetes, require treatment from a doctor. This condition should not be treated independently, because it could risk causing complications.

## **METHODS**

This research uses descriptive qualitative methods with case study and action research models. Case Study is a qualitative research approach used to understand an issue or problem using a case (Creswell, 2007: 73). What is meant by case here can be an event, process, activity, program, or one or several people. Action Research is a research method used to test, develop, discover and create new actions, so that if these actions are implemented in work, the work implementation process will be easier, faster, and the results will be more abundant and of higher quality.

This research was carried out at the Geu Gajah Aceh Besar Elementary School. This activity is to educate students on making ingrown toenail medicine using natural plant and spice ingredients. This research will be developed after finding and following up on activities. The research results will be described in detail according to the circumstances and phenomena that occurred.

## **RESULTS AND DISCUSSION**

### **1. Result.**

This research provides a solution that using traditional medicine can be done to treat ingrown toenails using natural ingredients or through simple medical procedures. Using natural ingredients that are antiseptic, anti-inflammatory and anti-bacterial is the best choice for treating ingrown toenails with mild symptoms such as swelling and pain. An ingrown toenail is the growth of one side of the nail or the tip of the nail into the flesh in the nail area. This condition is characterized by pain, swelling and redness in the area of the nail that has an ingrown toenail. Ingrown toenails most often occur on the big toe. Can be seen in the following image:



**Figure 1.** Ingrown toenail disease.

If the ingrown toenail is mild and does not cause infection, there are various ways to treat the ingrown toenail at home. Efforts made by researchers to overcome this problem, researchers provide education about making ingrown toenail medicine whose ingredients are from plants and spices.

In this research, the researcher was assisted by several colleagues in this activity. The basic ingredients for making traditional medicine for ingrown toenails are:

| <i>Material</i>  |                        | <i>Ways of making</i>  |
|--|------------------------|--|
| 1. Lemongrass.<br>2. Ginger.<br>3. Cinnamon.<br>4. Clove.<br>5. Betel. | a. Alu<br>b. Mill Rock | 1. Materials are washed clean.<br>2. Add the ingredients one by one.<br>3. Grind in a pestle.<br>4. and continued in the stone mill<br>So that it is smoother and can be shaped. |



**Figure 2.** Material Washing Process



**Figure 3.** Material Pounding Process



**Figure 4.** Material Grinding Process



**Figure 5.** Drug Formation Process



**Figure 6.** Drug Drying Process

## 2. Discussion

Avoiding ingrown toenails and maintaining good foot hygiene will increase the risk of getting ingrown toes. However, that is not the only cause. There are several other things that can also cause ingrown toes, including:

1. Cutting nails not straight or too short.
2. Wearing shoes or socks that are too narrow
3. Injury to the toenails, for example due to tripping, being hit or hit by a heavy object

4. Curved or wavy nail shape

5. Suffering from a fungal infection of the nails which causes the big toenail to thicken.

This traditional medicine is a medicine that was used by our ancestors to treat ingrown toenails. This disease will become infected if the sufferer does not receive treatment quickly. The first step is to soak your feet in vinegar water. Through this action you will be able to reduce the pain and soreness of the wound. During an ingrown toenail, wear shoes and socks that are the right size so that the big toe is not pressured. If necessary, wear sandals for a while until the ingrown toenail is completely healed. To reduce pain due to ingrown toenails.

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## **COPING MECHANISM TOWARDS CAREGIVER ADAPTATION ABILITY IN CARING FOR CLIENTS WITH SCHIZOPHRENIA IN ACEH: A CROSS-SECTIONAL STUDY**

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### **ABSTRACT**

Caregivers who care for schizophrenic clients are at risk of experiencing psychological problems, one of which is high levels of stress, so good adaptation skills are needed. This study aims to determine the effect of threat coping on caregivers' adaptability in caring for schizophrenic clients in Aceh using a *cross sectional study* approach. The sampling technique used a multistage random sampling technique with a sample size of 180 respondents. Data collection uses instruments, namely demographic data which includes age, gender, marital status, education, employment, relationship with clients, and income. The next instruments are the *Coping Scale* and *Occupational Adaptation Questionnaire of Family Caregiver (QAQC)* to assess coping mechanisms on caregiver adaptation abilities. . The results showed that the majority of caregivers were women (97.8%), aged between 46 and 55 years (71.7%), marital status was widower (66.1%), the relationship between caregiver and patient was mother (69, 4%), basic income education (72.2%) and below the provincial minimum wage (83.3%). Bivariate tests showed that there was a relationship between coping mechanisms ( $p=0.024$ ) and caregivers' adaptability in caring for schizophrenic clients ( $p=0.000$ ). It can be concluded that coping mechanisms can influence caregivers' adaptability in caring for schizophrenic clients. It is recommended that the attention of Community Health Centers, especially Aceh, can provide important information in caring for schizophrenic clients to their caregivers.

**Keywords:** *Caregiver, Adaptability, Schizophrenia, Coping Mechanisms.*

## **INTRODUCTION**

Schizophrenia is a serious mental disorder that attacks 20 million people worldwide which is characterized by deviations in thinking, perception, emotions, language, self-perception and behavior such as hallucinations (hearing, seeing or feeling things that are not there) and delusions. (wrong beliefs are still maintained even though they do not match reality) (WHO, 2019). The World Health Organization (WHO, 2022), states that around 24 million people or 1 in 300 people (0.32%) worldwide suffer from schizophrenia.

Riskesdas data (2018) shows that the prevalence of household members suffering from schizophrenia is recorded at 282,654 people in Indonesia, where the highest cases of schizophrenia are in the Bali region, namely 11.1 per million, Yogyakarta Special Region around 10.4 per million, West Nusa Tenggara around 9.6 per mile, West Sumatra 9.1 per mile, South Sulawesi around 8.8 per mile and the Aceh region is ranked sixth in cases of schizophrenia, namely 8.7 per mile. Meanwhile, schizophrenia based on residence shows that more schizophrenia cases are experienced by individuals who live in rural areas, namely 7.0 per mile compared to individuals who live in urban areas, namely 6.4 per mile. Furthermore, Aceh Province Riskesdas Data (2018) shows that the prevalence of household members with the mental disorder Schizophrenia was recorded in Aceh at 11,061 people, where the highest cases of schizophrenia were in North Aceh Regency, namely 1,274 people, Pidie, namely 934 people. , Bireun namely 905 people, East Aceh 826 people. population and Aceh Besar Regency is ranked fifth in people with schizophrenia mental disorders, namely 823 people with schizophrenia.

Aceh Besar Regency itself has 23 sub-districts and 604 villages out of a total of 289 sub-districts and 6,497 villages throughout Aceh Province. In 2017, the population in this region was around 384,618 people (out of the total population of Aceh Province which was 4,486,570 people) consisting of 197,005 men and 187,613 women. The largest population is in Darul Imarah District, namely 51,017 people consisting of 25,924 men and 25,093 women spread across 32 villages.

Data from the Aceh Besar District Health Service (2021) shows that the highest number of people suffering from severe mental disorders (ODGJ) who receive health services are in the Kuta Baro District area, namely 193 people, 108 people in Suka Makmur District, 100 people in Seulimum District. Jantho City as many as 99 people, Krueng Barona Jaya District as many as 79 people, Want Jaya District as many as 77 people, Simpang Tiga District as many as 76 people and Darul Imarah District as many as 73 people.

The results of interviews with six Community Health Center nurses in the Aceh area stated that the high rate of schizophrenia was caused by family indifference in caring for clients with schizophrenia, lack of family knowledge in caring for clients with schizophrenia, non-compliance in taking medication

and inadequate care provided by the family while the client was in hospital. home so that it is very easy for clients to relapse. Apart from that, caregivers feel that caring for clients with schizophrenia is a disgrace for their families, so that clients are left without optimal care, the high level of public stigma towards families with schizophrenia and the burden and stress felt by caregivers also have an impact on the psychological condition and mental health of the caregiver.

The client's recovery cannot be separated from the family's role as Caregiver where the Caregiver is someone who lives with the client for 6 months or 1 year who is fully responsible for family members who experience mental disorders starting from preparing food, clothing, medicine, accompanying the client during treatment to health service facilities (Heru, 2021). Caregiver is a job that is not easy where individuals are required to be able to adapt to various conditions that they have never experienced before, such as high levels of stress experienced by the individual themselves, stigma received in the environment where they live, work that is starting to be disrupted and costs that are not the family has to spend a small amount on treatment for schizophrenia sufferers (Afriyeni, 2020).

Caregivers need adaptation to care for schizophrenia patients. Adaptability itself is the process of adapting or changing oneself according to environmental conditions. This is influenced by the individual's way of dealing with various perceived problems, dealing with various changes and situations that affect the individual's own psychology, such as stress and burdens felt (Afriansyah, 2019).

The coping mechanisms felt by caregivers are closely related to the caregiver's inability to adapt to new situations and poor coping mechanisms so that caregivers appear burdened by the presence of family members who experience mental disorders.

This is confirmed by research conducted by Fitriani, (2020) regarding the influence of coping strategies on stress levels in informal caregivers who care for schizophrenia sufferers in the outpatient clinic of the Dr. Soeharto Heerdjan mental hospital, West Jakarta, saying that the coping strategy used by caregivers is coping that adaptive such as support from friends and family, relaxing oneself and drawing closer to Allah SWT.

In line with the opinion expressed by Afriyeni, (2020) being a caregiver in caring for clients with mental disorders is not easy, caregivers are required to be able to adapt to various conditions, such as the high stress experienced by the caregiver themselves, then the stigma received in the environment where they live. , work is starting to be disrupted and families have to pay a lot of money for treatment of schizophrenia sufferers.

Apart from the above phenomena, researchers see that mental health problems are becoming a very serious problem because the number of mental disorders in the world is increasing every year. This has a big impact on the adaptability of families or caregivers in caring for family members who

experience mental disorders. One of the studies on factors related to the adaptability of caregivers in caring for clients with schizophrenia is still very little done in Indonesia so researchers are interested in researching this one further. factors related to caregiver adaptability, namely coping mechanisms in caring for clients with schizophrenia in Aceh Besar District.

## **METHODS**

The design used in this research is a cross sectional study where each research respondent is observed only once, and the risk factors and effects measured are analyzed based on the circumstances and time of the study. The relationship between risk factors and effects and data collection is carried out on each variable simultaneously at the same time.

In this study, researchers analyzed the dependent variable, namely the caregiver's adaptability, then linked it to the independent variable, namely coping mechanisms. This research uses instruments, namely demographic data sheets, and the Coping Scale and Occupational Adaptation Questionnaire of Family Caregiver (QAQC) instruments.

Demographic data includes age, gender, marital status, education, employment, relationship with clients, and income. Data collection was carried out by distributing questionnaires and guided interviews. This study was approved by the local institutional ethics committee, and respondents signed informed consent and participated in the study voluntarily.

## **RESULTS AND DISCUSSION**

The research results obtained are as follows:

The average age of caregivers is in the age range 46-55 (71.7%), the caregiver's relationship with the client is mostly mother (69.4%), the most dominant gender is female (97.8%), caregiver's marital status is widows (66.1%), caregivers with basic education (72.2%), caregivers not working (81.1%) and caregivers earning less than the UMP (83.3%). For clearer results, the demographic data of respondents can be seen in table 1 below:

**Table.1** Frequency Distribution of Data on Characteristics of Caregiver Respondents for Schizophrenia Clients

| <i>No</i> | <i>Demographic Data</i>       | <i>Frequency</i> | <i>Persentage</i> |
|-----------|-------------------------------|------------------|-------------------|
| 1         | age                           |                  |                   |
|           | late teens (17-25 years)      | 1                | 0.6               |
|           | early adulthood (26-35 years) | 14               | 7.8               |
|           | late adulthood (36-45 years)  | 36               | 20                |
|           | early erderly (46-55 years)   | 129              | 71.7              |

|   |  |                           |                                    |
|---|--|---------------------------|------------------------------------|
| 2 | The <i>caregiver's</i> relationship with the clients<br>father<br>mother<br>wife<br>older brother<br>husband | 4<br>125<br>26<br>24<br>1 | 2.2<br>69.4<br>14.4<br>13.3<br>0.6 |
| 3 | Gender<br>Man<br><br>Woman   | 4<br>176                  | 2.2<br>97.8                        |
| 4 | Marital status<br>Not married yet<br><br>Marry<br><br>widow  | 6<br>55<br>119            | 3.3<br>30.6<br>66.1                |
| 5 | Level of education<br>Base<br><br>intermediate<br><br>Tall   | 130<br>41<br>9            | 72,2<br>22,8<br>5,0                |
| 6 | work<br>trader<br>farmer<br><br>civil servants<br><br>doesn't work   | 22<br>4<br>8<br>146       | 12.2<br>2.2<br>4.4<br>81.1         |
| 7 | Income in UMP<br>Below UMP<br><br>UMP  | 150<br>30                 | 83,3<br>16,7                       |

This research found that the age of 46-55 years is the dominant age for caregivers who care for schizophrenic clients. This is in line with previous research which shows that the age of most caregivers is early elderly between 46-55 years (Singkali et al, 2019). This is also in line with the explanation that almost 57.14% of caregivers who care for schizophrenic clients are over 55 years old (Dewi, 2018). The age between 46 and 55 years is an early age for the elderly, at this age caregivers have a stable emotional state so that it is easier to adapt to the environment and manage stress so that in this case it has an impact on caring for clients with schizophrenia.

The fact that most of the caregivers in this study were women. This is also in line with previous research where the dominant caregivers are women (Nafiah, 2019). The average monthly income of caregivers is below the provincial minimum wage. in line with previous research, most caregivers' income is below the provincial minimum wage (Nafiah, 2019). Then the

average education level of caregivers is basic education. This is in line with previous research, most of them have basic education (Nafiah, 2019). The largest caregiver is the client's mother with a percentage of 69.4% of 180 respondents. In line with previous research, most caregiver relationships with clients are with their mothers (Dewi, 2018).

Apart from demographic data, this study aims to measure the relationship between coping mechanisms and caregivers' adaptability in caring for schizophrenic clients using the Pearson product-moment test. The test results can be seen in table 2.

**Table 2.** Correlation of Coping Mechanisms with Caregiver Adaptation Ability

| <i>Independen variable</i> | <i>R</i> | <i>P</i> |
|----------------------------|----------|----------|
| Coping mechanisms          | -0.715   | 0.000    |
| Numbe rof respondent 180   |          |          |

Dependent Variable: *Caregiver Adaptation ability*

## CONCLUSION

Based on the research results and discussion, it can be concluded that there is an influence of coping mechanisms on caregivers' adaptability in caring for clients with schizophrenia in Aceh.

It is hoped that future researchers will be able to develop research with different designs by adding self-efficacy and self-esteem variables as research variables.

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