Narima Ing Pandum (NIP) Group Intervention: An Effort to Decrease Depression through Local Wisdom on Murder Case Inmates

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Abstract: The inmates (WBP) with murder case in class I penitentiary of Semarang generally get depression. This leads to this study with narima ing pandum (NIP) intervention. The treatment employed local wisdom approach to accommodate individual values that the inmates believe. This study aims to prove empirically the effect of narima ing pandum (NIP) intervention on murder case inmates' depression. To investigate the level of depression before and after the training, scale Beck Depression Inventory (BDI) was employed. The materials given in this training are opening, opening the WBP's insights, managing attitudes, let's be thankful, let's be patient, let's narima, and identifying the purpose of life. The intervention employed an experimental method with pretest-posttest control group design. The participants were 12 WBP murder cases who were grouped into experimental groups and control groups. The results of the analysis showed that NIP group intervention can decrease the depression score more in the experimental group than the control group. The results of this study can be used by the Prison as alternative solution in overcoming the psychological problems of WBP and in addition to the study of indigenous research in dealing with the impact of crime.

1 INTRODUCTION

Based on the law of the Republic of Indonesia Number 12 of 1995 article 1, that the convicted person serving a criminal sentence will lose his/her right of freedom. Losing freedom for a person can lower one's prestige and dignity as well as self-esteem and may become a severe stressor on a particular individual.

Based on the dictionary of law written by (Widagdo, 2012) inmates or prisoners (WBP) are defined as those who are undergoing a crime or sentence in a prison. A person who is imprisoned means that he has been proven to have committed a violation of law, which of course is disliked and opposed by the community. Prisoners / WBPs also refer to those who have been convicted by a court / law and must be punished or sanctioned which will then be placed in a building called a detention house, prison or correctional institution (Harsono, 2005). According to the Codes of Criminal Procedure (KUHP), a prisoner / WBP is someone who is convicted based on a court decision that has obtained permanent legal force, while the convicts undergo a sentence and lost their independence within a certain time and are placed in prison. The term 'inmate' is identical with people who are negative and full of mistakes, so that to eliminate the impression, it is termed the Correctional Citizens (WBP) to be more human and not to have a negative impression.

The study, conducted between 2003 and 2009 in Florida, stated that the main problem in prison is depression by 25%. WBP is indicated to have severe depression, while 30% is indicated to have mild to moderate depression (Gussack, 2009). The study conducted by (Fazel, S., Danesh, 2002) stated that of 10,529 detainees, there were 7,631 male detainees who were diagnosed with severe depression. While the World Health Organization (WHO) has also conducted surveys in 12 countries covering 22,790 inmates and found in each month the prevalence of psychosis in WBP men 3.7% and WBP women 4%, major depression in men's WBP by 10% and women by 12% (WHO, 2008). While the study conducted
at the prison of women in Semarang City on 14 WBP women found the fear, sadness, tense, confused, disappointed, embarrassed, often crying, like daydreaming, aloof, insomnia, feeling desperate, headache, abdominal pain and body aches (Noorsifa, 2013). This study which was conducted in Class I Semarang showed that from 24 WBP there were 4 (16.7%) who did not experience psychological problems (normal), while those with mild depression were 3 people or 12.5%, moderate depression was 5 or 20, 8% and WBP who experienced severe depression as many as 12 people or 50%. This indicates that the majority of the WBP is depressed.

People who are not able to adapt to social norms and habits applied in certain environments may experience psychological conflicts and, if it is long and continuous, they will become chronic (Casmini, 2011). WBP also often experience psychological problems as described above so that the provision of interventions to overcome the problems of psychological conflict should be given to the depressed WBP so that they are able to live the rest of the sentence with better psychological conditions. It will be very helpful for WBP who are depressed including WBP murder case.

The main symptoms experienced by people who experience depression include reduced concentration and attention; lack of self-esteem and self-esteem, the notion of guilt and uselessness, a gloomy and pessimistic outlook for the future, an idea or an act of self-harm or suicide, sleep disturbance and a diminished appetite (Maslim, 2013).

(Beck, 1985) defines depression as a disorder that is not only affective, but can also appear in certain forms. The forms are: a. Specific mood changes such as sadness, self-feel and apathy; b. Negative self-concept is followed by blame and self-reproach; c. Regressive and self-condemning desires, the desire to avoid and hide or the desire to die; d. Vegetative changes such as anorexia, insomnia, and loss of appetite; e. Changes in activity levels such as retardation or agitation.

According to the diagnostic and statistical manual of 5th ed. Mental disorders (American Psychiatric Association, 2013), when a person is stated to have depression, he or she should have 5 or more symptoms for 2 weeks or more, where one of the symptoms should include mood reduction or loss of interest or pleasure in some or all activities and should be there all day or almost every day. Other symptoms include changes in appetite (increased or decreased), weight gain (gain or loss of 5% in 1 month), or changes in sleep patterns (insomnia / hypersomnia), anxiety or inaction, fatigue or loss of energy, feelings of worthlessness or guilt excessive, difficult in thinking and concentration, slow in making decisions, recurring thoughts of suicide or death with or without a suicide plan.

One effort to make the WBP s have a balanced psychological condition is to undergo a routine of work taught in prisons according to their interests, so that they are expected to have a mental readiness and a clear plan when they are free to return to the community. The prison authorities have also made every effort to provide various interventions to address their psychological problems in order to be able to live the rest of the sentence with good psychological condition. The therapy which had been done in prisons class I Kota Semarang was conducted not only individually through counseling but also in groups such as art therapy, laughter therapy, hypnotherapy and so forth. Apart from the prisons, various therapies have been conducted by many researchers in prisons and techniques used to overcome depression problems also vary. Local wisdom approach was used to handle the psychological problems of WBP where this intervention has never been done especially in I class prison of Semarang City. The therapy used in this study is Narima Ing Pandum (NIP). NIP is defined as accepting what God has given to mankind with a sincere attitude without rejection (Murtisari, 2013). People who have NIP attitudes will receive / narima every condition or something that happens to them and with spiritual-psychological awareness without feeling disappointed (disappointed in the future after something happens) (Murtisari, 2013).

NIP group training facilitates depressed WBPs to be able to accept their condition with several techniques / methods i.e. lectures, discussions, meditation / relaxation, video playback, practice, reading inspirational stories, assignments, games / icebreaking. The NIP group training had 7 sessions: (1) opening, (2) opening insight of the inmates, (3) Managing Attitude, (4) Let's be grateful, (5) Let's be patient, (6) Let's narima, and (7) Identification of life goals. With these various activities, WBP were expected to be able to decrease depression score on negative aspect toward their selves, as well as performance aspect and somatic aspect.

The purpose of this study is to prove empirically the effect of narima ing pandum (NIP) treatment on depression in the murder case inmates. One of the theoretical benefits in this study is expected to contribute to the field of clinical psychology about the psychological conditions faced by the WBP. Practically, they are able to assist the WBP to gain insight on the effort to reduce the depression faced
due to the crime that is being undertaken, to provide additional knowledge and discourse on alternative therapy based on local wisdom to overcome psychological problems to improve the quality of human life, encouraging other studies, especially indigenous research to provide more in-depth study results to address the impact of such crimes. The hypothesis in this study is "There is a decrease in depression in the experimental group between before and after NIP intervention" and "There is a difference in depression in the group receiving NIP intervention with groups not receiving NIP intervention at posttest, where the depression of the group who received NIP training is lower than the depression of the group who does not get NIP intervention when having posttest”.

2 METHOD

The dependent variable on this study is depression. Depression is defined as one of the mental disorders characterized by the emergence of primary symptoms of depressive affects, negative attitudes toward self and decreased performance caused by the loss of beloved objects (loss of freedom, loss of independence, loss of relationship with the opposite sex, loss of good service and so on) characterized by changes in emotion, motivation, function and behavior as well as cognitive. This depression can be measured using the scale of BDI (Beck Depression Inventory) that has been adapted into Indonesian language, consisting of 21 items that reveal 21 symptoms of depression. Total score ranges from 0 to 63. The higher the score obtained indicates the higher the depressed level of a person. The independent variable in this study is the NIP group training, i.e. a form of NIP group training given to the WBP with murder case held in three meetings, where each meeting consists of two to three sessions, while the duration of each session is about 30 minutes - 180 minutes. This NIP group training used Javanese cultural approach that uses the values of patience, thankful and narima as the basis for formulating the training. This NIP group training was adapted and modified from the NIP training program module compiled by (Prasetyo, 2014) and (Zulyet, 2014). The method used was sharing, discussing, assigning / filling worksheets, watching videos, analyzing cases, games (ice breaking) and meditation.

The design of this study was pretest and posttest control group design, which consisted of a randomly selected group of experiments and control groups. The assignment of each sample to the research groups was conducted using random assignment. This random sampling does not contain bias meaning that none of the members has a greater chance of being selected compared to the other members (Latipun, 2006). Random assignment in this research was done by using lottery. Each of these groups would be subject to pretest and posttest. The participants of this study were WBP registered in the prison Class I Semarang City with certain characteristics and must have a murder case without considering the murder category. The data was analyzed through quantitative analysis using Wilcoxon signed rank, and Mann Whitney-U test with SPSS for microsoft windows version 16, and qualitative analysis. The criteria were (1) WBP men who have been a murderer (2) Javanese (Javanese and live in Java) (3) experienced moderate to severe depression. (4) Non-recidivist and (5) Walking the punishment process at least 1 year. The number of participants in this study was 12 people, 6 people were admitted into the experimental group and 6 were assigned to the control group.

3 FINDINGS AND DISCUSSION

The condition when the pretest was conducted showed that the test on the participants of the experimental group resulted 6 people (100% of participants) had a level of severe depression, while the participants of the control group (6 people) also had the same depression (100%). At the posttest of the experimental group participants, among 6 participants was known that 1 person (16.7%) had mild depression, 3 people (50%) had moderate depression levels and 2 people (33.3%) had severe depression. In the control group participants, there were 6 people (100% of participants) in the category of severe depression. While at the follow-up phase, the 6 participants of the experimental group were found that 4 of them (66.7%) had moderate depression levels while the rest (33.3%) had severe depression levels. Meanwhile, there were 6 people of the control group (100% of participants) in the category of severe depression.

The change of average depression scores in the experimental and control groups can be seen in Figure 1. It shows that there is a decrease in the change of depression score in the experimental group compared to the control group. The hypothesis was then tested using Mann Whitney-U analysis to determine the score difference of the experimental and the control group after the
intervention and using the Wilcoxon signed rank test to determine the difference of depression score before and after the intervention in the experimental group.

Figure 1: The Average Score of Depression on Experimental and Control Groups

Table 1: The Result of Mann-Whitney-U Test on Experimental and Control Groups

<table>
<thead>
<tr>
<th></th>
<th>Significance</th>
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<tbody>
<tr>
<td>Mann-Whitney U</td>
<td>.000</td>
</tr>
<tr>
<td>Wilcoxon W</td>
<td>21.000</td>
</tr>
<tr>
<td>Z</td>
<td>-2.913</td>
</tr>
<tr>
<td>Asymp. Sig. (2-tailed)</td>
<td>.004</td>
</tr>
<tr>
<td>Exact Sig. [2*(1-tailed Sig.)]</td>
<td>.002a</td>
</tr>
</tbody>
</table>

Table 1 shows that the value of $Z = -2.913$ with probability value (p) 0.002. It can be concluded that there was a significant decrease in depression of the experimental group who had been given NIP training compared to the control group who had not given NIP training. This means that the module used is effective to reduce depression in WBP who participated in NIP training.

Table 2: The Result of Wilcoxon T Test on Pretest-Posttest of Experimental Group

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<thead>
<tr>
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<th>Significance</th>
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<tbody>
<tr>
<td>Z</td>
<td>-2.207a</td>
</tr>
<tr>
<td>Asymp. Sig. (2-tailed)</td>
<td>.027</td>
</tr>
</tbody>
</table>

Based on table 2, it shows that the value of $Z = -2.207$ with a probability value (p) 0.027. It can be concluded that there was a significant decrease in depression in the experimental group before (pretest) and after (posttest) the treatment. This means, NIP training is effective in reducing depression of WBP with murder cases.

Table 3. The Result of Wilcoxon T Test on Posttest-Follow up of Experimental Group

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<thead>
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<th>Significance</th>
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<tbody>
<tr>
<td>Z</td>
<td>-2.226a</td>
</tr>
<tr>
<td>Asymp. Sig. (2-tailed)</td>
<td>.026</td>
</tr>
</tbody>
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Based on table 3, it shows that the value of $Z = -2.226$ with probability value (p) 0.026 (two-way test). It can be concluded that there was a significant increase of depression in the experimental group between after the posttest (with NIP training) and after 1 week of the treatment (follow up).

This means that the effect of the intervention is only temporary. Transient effects may be caused by weaknesses in the use of methods used to arrange NIP training modules which cause participants inaccessible to internalize the materials obtained during training so that the effect of NIP training cannot last long.

On average score results, the ability of all participants in each training session also shows an average of 2.5. This means that all participants were able to participate in the training process, but they were less able to provide positive feedback, identify problems from others, learn from other people's experiences and identify feelings, thoughts and behaviors. To maintain the sustainability of the WBP depression condition, NIP booklets were provided to serve as guidance on how to behave when the WBP experiences problems.

The statistical test analysis above concludes that the provision of NIP Training Group is effective / significant to reduce depression in WBP with murder case. This was shown from the significant differences in depression scores before and after the training in the experimental group, and there was significant difference between the experimental and the control groups in depression scores after the training. In the follow-up analysis, there was a significant increase in the depression scores of the experimental and control groups.

The hypothesis testing of the research proved that there was a decrease in depression in the experimental group before and after getting NIP Group training. In addition, the hypothesis test result also demonstrated that there was a difference in depression in the group receiving NIP Group training with groups not receiving NIP Group training at posttest, where group depression who received NIP Group training was lower than group...
depression who did not receive NIP Group training when posttest. From the hypothesis test, it also showed that NIP training significantly decreased depression in the inmates (WBP) with murder case in Class I Prison of Semarang City or in other words the hypothesis was approved.

4 CONCLUSIONS

This study can be concluded as follows. First, there is a significant difference in depression between the experimental and control groups. Second, NIP Group training is effective for reducing depression in WBP murder cases. Third, NIP training effectively reduces WBP depression with the following characteristics: (a) Having support / support from family outside of prison, (b) having intrinsic motivation to join NIP training i.e. strong willingness to change proven by timely presence in the training session (c) willing and taking the time and thought to participate in the process of each session in NIP training, (e) willing to read the training manual / training module of the participants thoroughly (f) WBPs who have severe depression. Fourth, the most effective method of NIP training is games through icebreaking, discussion, sharing and watching video, while the most effective material is sharing the WBP experience, getting acquainted with narima ing pandum, expressing the gratitude by making the speech maturnuwun, expressing patience by making mind alternatives toward problems encountered, expressing narima by making pangapunten speech and learning meditation.

REFERENCES


