

Health Without Barrier: Improving Emotion Regulation through Psychoeducation in the Deaf Community

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Abstrak

Penyandang Tuli merupakan kelompok dengan kebutuhan komunikasi yang unik dan sering menghadapi tantangan dalam memahami diri sendiri serta aspek psikologis mereka. Akses terhadap pengetahuan tentang regulasi emosi masih sangat terbatas bagi komunitas Tuli, terutama karena informasi kesehatan mental umumnya disampaikan secara verbal dan jarang melibatkan juru bahasa isyarat. Program pengabdian kepada masyarakat ini dirancang untuk menumbuhkan karakter positif dan mendukung kesehatan mental komunitas Tuli di Kota Makassar melalui kegiatan psikoedukasi. Kegiatan psikoedukasi ini dilaksanakan dengan menggunakan metode ceramah yang didukung media visual PowerPoint serta penggunaan Bahasa Isyarat untuk memastikan komunikasi yang aksesibel bagi peserta Tuli. Program ini dievaluasi menggunakan pre-test dan post-test digital yang disebarluaskan melalui Google Formulir. Analisis data dari 31 peserta menggunakan uji paired sample t-test menunjukkan hasil yang signifikan ($p = 0,000 < 0,05$), yang mengindikasikan adanya peningkatan pemahaman mengenai regulasi emosi setelah psikoedukasi diberikan.

Abstract

Deaf individuals are a group with unique communication needs who often face challenges in understanding themselves and their psychological aspects. Access to knowledge about emotion regulation remains very limited for the Deaf community, primarily because mental health information is generally delivered verbally and rarely involves sign language interpreters. This community service program was designed to foster positive character and support the mental health of the Deaf community in Makassar City through a psychoeducational activity. The psychoeducational activity was delivered through a lecture, supported by PowerPoint visuals and Sign Language to ensure accessible communication for Deaf participants. The program was evaluated using digital pre-tests and post-tests administered via Google Forms. Analysis of data from 31 participants using a paired-samples t-test showed a significant difference ($p = 0.000 < 0.05$), indicating an increase in understanding of emotion regulation following the psychoeducation.



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INTRODUCTION

Deaf people are a group of people with unique communication needs, who often face limitations in accessing information. In Indonesia, one of the organizations that houses the deaf community is the Indonesian Deaf Welfare Movement (GERKATIN), which functions as a forum for deaf individuals to develop themselves and fight for their rights in various fields of life, including education and religion. The focus of GERKATIN includes education, BISINDO (Indonesian Sign Language) development, public relations, health, arts & culture, labor, youth & sports, and womanhood (Albari & Putri, 2021). However, in the context of mental health, partners within GERKATIN still face significant challenges, particularly in understanding themselves and their psychological needs. In addition, information related to mental health is often delivered verbally and without the use of Sign Language Interpreters. This leads to limited access to mental health-related education that can accommodate deaf barriers, resulting in a lack of literacy.

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Psychological problems often encountered in the deaf community are largely related to emotional management. Hearing limitations that deaf individuals have often cause difficulties in expressing emotions and thus have an impact on the ability to manage emotions. This condition shows that deaf individuals experience obstacles to reducing negative emotions and tend to use maladaptive strategies (Du *et al.*, 2024). Difficulty managing emotions are shown in the form of being easily offended by small things, not understanding how to express emotions appropriately, and often harboring negative feelings. The accumulation of negative emotions such as withdrawal, suspicion and irritability triggers anger as a form of emotional release (Riahta *et al.*, 2015). The inability to regulate emotions in the long run can trigger the emergence of the existence of more serious emotional mental health disorders, such as anxiety, depression, and other forms of disorders (Ardhiani, *et al.*, 2020).

Therefore, the ability to manage emotional responses is essential for mental health. Mental health plays an important role in determining the quality of social relationships, generating a sense of caring, and accepting differences in opinion (Mustika *et al.*, 2024). Good emotion regulation helps individuals maintain, enhance or reduce the emotions they feel. Individuals who successfully regulate their emotions show self-control, careful, adaptable, have a positive outlook and sensitive to the feelings of others (Riahta *et al.*, 2015). For that reason, emotion regulation skills are crucial for deaf individuals in order to adjust better in social situations and maintain mental well-being.

METHOD

Psychoeducational activities are delivered to the Deaf Community using the lecture method and visual learning in PowerPoint. This lecture method is the delivery of material directly using verbal or oral communication, adapted to the language context (Hidayati, 2022). This learning process is designed to be adaptive and inclusive by adjusting to the communication needs of participants through the use of Sign Language. This approach not only ensures that deaf participants understand the material well, but also reflects a commitment to equal access to education.

This emotion regulation psychoeducation activity was evaluated using a questionnaire as a pre- and post-test. The questionnaire measures participants' understanding of emotions and how to regulate them. This is important as a benchmark for receiving the benefits of activities. The data obtained will be analyzed using a paired sample t-test. This aims to compare the mean value and proportion of the difference between two variables in one sample group (Muhid, 2019).

However, implementing the program proved challenging. One of the main obstacles is the uncertainty of the number of attendees, due to the busy schedules and diverse domiciles of participants, who are spread across various locations. Additionally, there are differences in the capacity to access technology, particularly among older deaf individuals. Difficulties in accessing online forms were more common among elderly participants, necessitating additional assistance during the process.



Figure 1. Emotion Regulation Psychoeducation Presentation.



Figure 2. Completing the Emotion Regulation Psychoeducation Post-Test.

RESULT AND DISCUSSION

Demographically, the participants were more dominantly female with a total of 21 respondents and 10 men. The age of respondents ranged from 14 years to 46 years. The most respondents were in the age range of 14-19 years with a total of 13 people and the least in the age range of 31-46 years with a total of 7 people. The professions of the respondents varied, such as students, housewives, and entrepreneurs. Two respondents specifically mentioned working as tailors.

Pre-test and post-test data used 5 multiple-choice questions on emotion regulation. The results of this score were analyzed using the Paired Sample T test, to see the difference in participants' understanding before and after receiving psychoeducation. If the Sig. (2-tailed) <0.05, it can be concluded that there is a significant difference in understanding of emotional regulation. The following presents the results of the Paired Sample T test analysis using SPSS v.27:

Table 1. Paired Sample Statistics

	Mean	N	Std. Deviation	Std. Error Mean
Pre-test	4,90	31	2,300	,413
Post-test	7,42	31	2,433	,437

Table 2. Paired Sample Test

	Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval	t	df	Sig. (2-tailed)
Pre-test - Post-test	-2,516	3,097	0,556	-3,652 – -1,380	-4,523	30	0,000

Based on the above tables 1 and 2, it is known that the Sig. value is 0.000 <0.05 that indicates there is a significant difference between the pre-test and post-test results. This difference is also shown from the mean value, where the mean value of the pre-test is 4.90, while the post-test increases to 7.42. This proves that there is an increase in understanding in regulating emotions in participants. This analysis is reinforced by the research shows the intervention that emotion regulation has a positive effect on mental health, especially improving subjective well-being in deaf individuals in Binjai City (Mirza *et al.*, 2021). This is also aligned with research that emphasized emotional regulation is an important element in individual psychological and social adjustment. Mentally healthy individuals can function optimally and adapt in the face of problems (Annisa, 2023).

Individuals with a high emotional regulation strategy also tend to experience fewer interpersonal conflicts and are capable of establishing more positive social relationships. In addition, the ability of individuals to manage feelings, physiological responses, mindsets and express emotions appropriately in the environment will make it easier for them to solve the problems they encounter (Nafisah *et al.*, 2021). Thus, emotion regulation is key for deaf individuals in maintaining mental health, establishing healthy social relationships and increasing adaptive abilities in everyday life. Through this community-based psychoeducational initiative, participants from the deaf community showed significant gains in their understanding

of emotional regulation, as reflected in the pre-test and post-test assessments. The psychoeducation was conducted using visual aids and sign language, enabling the material to be conveyed optimally as a learning tool (Yasin & Mohamad, 2024). This effectiveness reflects the success of an adaptive approach that prioritizes the suitability of methods to the needs of the deaf community.

Effective emotional regulation enables individuals from the deaf community to more accurately recognize, understand, and identify their own emotions. DHH or deaf and hard-of-hearing individuals exhibit higher rates of mental health problems than their hearing peers (Brown & Cornes, 2015). Individuals with good emotion regulation skills tend to have more positive emotional experiences compared to others (Isaacowitz, 2022). Based on several previous studies, the long-term benefits gained by the deaf community are increased psychological calmness, reduced interpersonal conflict, and better communication. The deaf community or individuals with deafness problems are associated with various problems (Lederberg *et al.*, 2019) such as problems related to emotional, psychological, as well as communication (Ashori & Jalil-Abkenar, 2021). DHH juga seringkali kali mendapati permasalahan sosial seperti kesulitan manage emosi, menentukan tujuan positif, mengapresiasi persepsi orang lain, dan kesulitan menjaga hubungan positif dengan orang lain. The problems experienced can affect the quality of life of DHH individuals (Tsimplida *et al.*, 2018). On the other hand, training related to emotion regulation or emotional intelligence can improve skills that are important to prevent inappropriate expression of emotions (Gross, 2015).

Psychoeducation activities carried out showed high enthusiasm and active involvement from participants during the intervention process. Participants' understanding of emotional regulation in the deaf community improved along with their test scores. These results indicate that interactive approaches have a positive impact on participation in the deaf community. Emotion regulation training provides promise and new avenues for understanding ways that individuals can not only survive, but also learn to thrive in the face of emotional challenges (Cohen & Ochsner, 2018). This program not only improves the deaf community's understanding of emotional regulation. Specifically, this intervention also provides experience in expressing emotions well and increases the deaf community's understanding of how to convey emotions visually. This experience supports deaf individuals in becoming more active and able to apply this in social and community settings.

Intervention consisted of several obstacles in pre and during psychoeducation. In pre-psychoeducation, the research team encountered difficulties during the process of agreeing on a cooperation statement with partners because they used an intermediary for coordination. In addition, the pre- and post-results were not communicated in advance due to the need to catch up with other deaf community activities. The implementation of psychoeducation also faced obstacles in locations that were not conducive, as psychoeducation activities took place simultaneously with other activities. In addition, the administration of tests was also hampered because the deaf individuals were quite old, making it difficult for them to access the QR code, and the committee team needed to be intensively involved in the test completion process. The main obstacle was, of course, communication, which needed to be facilitated together with BISINDO. Thus, this intervention adds empirical evidence that adaptive psychoeducation approaches are relevant to communities with communication barriers

CONCLUSION

According to the results of the pre-test and post-test, there was a significant increase in participants' understanding of emotion regulation after participating in the psychoeducation activities. The pre-test mean score of 4.90 increased to 7.42 in the post-test, indicating a substantial increase in understanding. This confirms that the psychoeducation program has successfully increased participants' knowledge and activity is effective in supporting the strengthening of the mental health of the deaf awareness, particularly in managing and regulating emotions more adaptively. Thus, this community through an inclusive and needs-based approach.

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