

Self-Concept of BPJS Ketenagakerjaan Participants in the Employment Injury Security Return to Work Program for Amputees Due to Work Accidents in Pekanbaru

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Abstract

Amputation stands as one of the most devastating outcomes of workplace injuries, resulting not only in permanent physical disability but also profound psychological and social repercussions. These injuries drastically alter an individual's life, impacting their ability to work, engage in social activities, and maintain their daily routines. The ILO estimates that approximately 2.78 million workers die each year from occupational accidents and work-related diseases. A portion of these accidents result in amputations. In Indonesia, BPJS Ketenagakerjaan records a substantial number of occupational accidents annually. A percentage of these incidents lead to amputations. Beyond the physical and immediate psychological trauma, amputation significantly impacts an individual's self-concept, which is the perception and understanding they have of themselves. Self-concept plays a crucial role in how individuals confront challenges, especially when dealing with conditions that affect their identity and body function. This study aims to explore the self-concept of BPJS Ketenagakerjaan Participants in the Return to Work Employment Injury Security (JKK RTW) who have experienced amputations due to work accidents in Pekanbaru, Indonesia, from physical, psychological, and social perspectives, using George Herbert Mead's Symbolic Interaction Theory. This qualitative research employs a phenomenological approach. The subjects included six BPJS Ketenagakerjaan participants in Pekanbaru who had amputations due to work accidents, were within the workforce age range (18-55 years), and had returned to work after undergoing the JKK RTW program. Data was collected through in-depth interviews, observation, and documentation. Data analysis involved data reduction, structured presentation, and conclusion drawing, with source triangulation for validity. The findings revealed that the physical self-concept involved disability, abnormality, work adjustment, and phantom pain post-amputation. Psychologically, participants faced mental health issues, anticipatory anxiety, confidence in their abilities, and self-identity and acceptance. Socially, they experienced social discrimination but also received social support. These insights underline the importance of self-concept in navigating the challenges faced by individuals with disabilities in the workforce.

Keywords: amputation, BPJS Ketenagakerjaan, return to work, self-concept, work accident

INTRODUCTION

Occupational accidents, particularly amputations, represent severe and life-altering events, profoundly impacting individuals' physical, psychological, and social well-being (McGiffin, 2020). Despite the goal of employment for financial security, as exemplified by FO's dream job turned tragic, workplace risks are pervasive. FO, an informant in this study, illustrates how a hard-

won dream job can change in an instant. At the age of 23, FO landed his dream job as a quality control analyst at a state-owned palm oil mill. However, nine months later, an unexpected work accident drastically changed his life. His right leg was crushed when he fell into a factory machine, leading to an amputation up to his groin (Scutt & Scutt, 2020).

Work accidents are unwanted and unexpected events, which can cause losses to both people and property. Law No. 1 of 1970 on Occupational Safety defines an occupational accident as an unexpected and unwanted event that disrupts the regulated process of an activity and can cause loss of both human and property. One of the most severe impacts of workplace accidents is amputation, the last medical measure taken when an organ is beyond repair or jeopardizes the safety of the body as a whole. Partial loss of movement due to work accidents, as expressed by Rapani (Rachmat et al., 2023), results in the inability of individuals to carry out daily activities and work. Comparing RTW programs across several European and North American countries demonstrates that Successful RTW programs emphasize a multidisciplinary approach, involving healthcare professionals, psychologists, and social workers; Active involvement of employers in the RTW process, including workplace and task adjustments, increases the likelihood of successful reintegration. Furthermore, a study by Shaw et al. (2016) highlights the importance of patient-centered approaches in RTW programs, considering individual preferences and needs.

Work accidents are a serious problem in Indonesia. According to data from the Ministry of Manpower of the Republic of Indonesia, there were 370,747 cases of work accidents in Indonesia in 2023 and as many as 29,119 work accidents occurred in Riau Province. Quoting data from BPJS Ketenagakerjaan, in 2023 there were 347,855 cases of work accidents with beneficiaries of the Return to Work Employment Injury Security (JKK RTW) as many as 1,838 participants and 1,675 of them or 90.89% had returned to work.

Amputation not only impacts physical capabilities, but also one's identity and self-concept. Social stigma, feelings of loss, and decreased self-confidence are challenges that must be faced. Self-concept, which is how individuals perceive and value themselves, becomes an important factor in the recovery process and quality of life post-amputation. This assertion is strongly supported by a body of research that consistently highlights the intricate interplay between physical disability, psychological well-being, and social adaptation. For instance, Murray and Fox (2017), in their study on body image and psychosocial adjustment following amputation, emphasized the substantial impact of amputation on an individual's perception of their body and the subsequent challenges in navigating social stigma and feelings of loss. Their work underscores how the physical transformation resulting from amputation directly affects one's sense of self and their interaction with the social environment. Furthermore, Livneh and Antonak (2017), in their comprehensive review of psychosocial adaptation to chronic illness and disability, provided a foundational framework for understanding the psychological mechanisms involved in adapting to disability. They highlighted the pivotal role of self-concept and self-confidence in this adaptation process, illustrating how individuals' perceptions of their abilities and worth significantly influence their ability to cope with their new circumstances (Allobaney et al., 2022).

IP, another informant in this study, described how amputation shook her self-concept. She felt unprepared to face the reality of being disabled, feeling empty, confused and blaming herself. IP also had difficulty accepting her physical condition and felt afraid to interact with others. These self-concept issues are often at the root of the various psychological problems faced by people with disabilities after work accidents. Feelings of loss, decreased self-confidence, and changes in social status can trigger mental health disorders such as depression and anxiety. Therefore, it is important to understand how self-concept affects the recovery and adaptation process of people with disabilities after amputation (Behera & Dash, 2021).

William Dean Brooks defines self-concept as "Those physical, social and psychological perceptions of ourselves that we have derived from experiences and interactions with others" (Safira & Afriani, 2021). William Dean Brooks' definition of self-concept is used as a benchmark for understanding self-concept and the basis for this research.

This research focuses on BPJS Ketenagakerjaan participants of the Return to Work Employment Injury Security (JKK RTW) who experienced amputation due to work accidents, because the pre-research showed significant changes in self-concept. Workers who originally had high work enthusiasm, good physical appearance, established socio-economic status, and bright dreams, suddenly faced the reality of limb amputation. They were also faced with the demands of continuing to work and provide for their families.

The JKK RTW program, which aims to help participants return to productivity, focuses not only on the physical and medical aspects, but also on restoring self-concept. Amputations often create a new label, "disabled" or "stumped," which affects behavior and social interactions. This change in self-concept, compounded by physical, psychological and social limitations, and social interactions that affect self-perspective, hinders their return to their original social and work environment (Brunet et al., 2018).

This phenomenon occurs in various cities in Indonesia, including Pekanbaru, which is known as a civilized city and economic center in Sumatra, Indonesia. This research focuses on examining the self-concept of BPJS Ketenagakerjaan Participants in the Return to Work (RTW) Employment Injury Security who Experience Amputation Due to Work Accidents in Pekanbaru from a physical, psychological and social perspective using George Herbert Mead's Symbolic Interaction Theory.

RESEARCH METHODS

This research explores the self-concept of participants in the Return to Work Employment Injury Security who experience amputation due to work accidents using a qualitative-phenomenological method. Phenomenology, as a method, allows for the in-depth examination of participants' subjective experiences, providing rich insights into their perceptions, feelings, and interpretations. This research was conducted in Pekanbaru City with participants of the Return to Work Employment Injury Security (JKK RTW) at the BPJS Ketenagakerjaan Office Pekanbaru City Branch with the office address on Jalan Tengku Zainal Abidin No 26, Sekip Village, Lima Puluh District Pekanbaru City, Indonesia. This research was conducted by researchers within a period of 24 months, starting from February 2023 to January 2025. The implementation starts from

the preparation stage, the pre-research stage and the stage of presenting the research results. The research subjects in this study were Participants of the Return to Work Employment Injury Security (JKK RTW) BPJS Ketenagakerjaan Pekanbaru City Branch who experienced amputation of the extremities (arms and / or legs) due to work accidents, had completed the JKK RTW BPJS Ketenagakerjaan Program and had returned to work. Selection of research subjects with purposive sampling. Researchers adjust research subjects with criteria: Participants of the BPJS Ketenagakerjaan Return to Work (JKK RTW) Program in Pekanbaru, Experiencing amputation of the extremities due to work accidents, Being in the labor age range (18 to 55 years), Has returned to work after undergoing the Return to Work (JKK RTW) Work Employment Injury Security. Based on the criteria that have been made, researchers found 6 informants who were used as sources. This sample size was determined based on the principle of data saturation. Data saturation, in this context, refers to the point at which no new themes or insights emerged from the interviews. This number is in accordance with the level of saturation of the research results. Semi-structured interviews were conducted with each informant, allowing for flexibility while ensuring that key areas of inquiry were addressed. The interview guide covered topics such as the experience of the work accident, the impact of amputation on physical, psychological, and social well-being, participation in the RTW program, and the reconstruction of self-concept (Carlsson et al., 2019). Interviews were audio-recorded to ensure accuracy, with informed consent obtained from all participants. To enhance the validity and trustworthiness of the findings, data from interviews were triangulated with data from observational notes and relevant documents, such as medical records and program materials. The phenomenological analysis was complemented by a review of relevant literature and theoretical frameworks, such as George Herbert Mead's Symbolic Interactionism. The object of research in this study is the self-concept of Participants of the Work Accident Return to Work Guarantee Program (JKK RTW) BPJS Ketenagakerjaan Pekanbaru City Branch who have amputations due to work accidents from a physical, psychological and social perspective.

Table 1. The informants in this study consisted of

Initial Informant	Age	Gender	Type of Disability	Chronology of Work Accident
MY	51	Male	Left leg amputation	Pinched by washing roll machine
SY	51	Male	Left leg amputation	Squeezed by the screw machine
IP	24	Male	Left Arm Amputation	Snagged by drilling machine
SM	48	Male	Left Foot Amputation	Entangled in pontoon ropes
EI	38	Male	Right Arm Amputation	Pinched by elevator machine

Initial Informant	Age	Gender	Type of Disability	Chronology of Work Accident
FO	26	Female	Right Leg Amputation	Clamped by conveyor machine

Researchers approached the research subjects, namely when the research subjects were undergoing therapy and control of prosthetic legs or hands at the hospital, visiting the research subjects' homes, inviting research subjects to lunch or dinner, and conducting periodic communication via telephone or whats app. When recording interviews with informants, the researcher did so secretly without the informant knowing because the researcher was worried that information would be hidden or not disclosed if the researcher admitted that the researcher was conducting research. This was also done to maintain the objectivity of the research results.

RESULT AND DISCUSSION

The data obtained by the researchers is associated with George Herbert Mead's Symbolic Interaction Theory, which consists of mind, self and society. Mead's symbolic interaction theory is an important perspective in understanding how meaning is created and negotiated through social interaction by emphasizing the role of symbols, mind, self and society in shaping individuals and social interactions. The following research results will be discussed further.

Physical self-concept of BPJS Ketenagakerjaan participants in the Return to Work (RTW) Employment Injury Security who have amputations due to work accidents in Pekanbaru.

Self-concept is defined as a person's beliefs, views or assessments of themselves. Self-concept includes abilities, self-character, attitudes, life goals, needs and self-appearance and even self-appearance is so influential in the formation of self-concept. Marsh, 1996 (Dreiskämper et al., 2022) explains the physical self-concept, namely the individual's perception of the physique obtained from the environment, including how the individual perceives the ability of his body as well as the appearance of his body.

Based on the results of research that has been conducted by researchers through interviews with informants, the physical self-concept is obtained as follows:

Table 2. Physical Self-Concept Categorization Results

No.	Informant	Physical self-concept of BPJS Ketenagakerjaan participants in the Return to Work (RTW) Employment Injury Security who have amputations due to work accidents in Pekanbaru.			
		Flawed self	Abnormal self	Adjustment to work	<i>Phantom Pain</i>
1	MY	✓	✓	✓	✓
2	SY	✓	✓	✓	✓
3	IP	✓	✓	✓	✓
4	SM	✓	✓	✓	✓
5	EI	-	✓	✓	✓

No.	Informant	Physical self-concept of BPJS Ketenagakerjaan participants in the Return to Work (RTW) Employment Injury Security who have amputations due to work accidents in Pekanbaru.			
		Flawed self	Abnormal self	Adjustment to work	Phantom Pain
6	FO	✓	✓	✓	✓

This research explores the physical self-concept of BPJS Ketenagakerjaan participants in the Return to Work (RTW) Employment Injury Security who experienced amputation in Pekanbaru, based on Mead's Symbolic Interaction Theory. The concepts of "I" and "Me" became the main analytical framework. "I" represents the spontaneous and impulsive aspects, appearing when informants adapt to new post-amputation conditions. "Me," as the social aspect, reflects the internalization of society's attitudes and expectations, formed through the role-taking process. From the perspective of physical self-concept, researchers found the following categorization:

Flawed Self

Accidents that occur to workers that cause workers to experience amputation of one of their arms or legs cause workers to experience disability in one of their limbs. Workers who were originally born with a perfect physique must face the harsh reality that they are in a physical condition that is no longer perfect due to amputation after experiencing a work accident. Based on the physical self-concept, the following are the results of an interview with one of MY informants who sees himself as a disabled self after amputation due to a work accident (Adler et al., 2021).

"Never imagined before you had an accident like this, your leg was finally cut off after 28 operations, the bone was not connected. Just cut it off. You have given up. You can't work. Your legs are gone, you can't walk. You use a walking stick again. Even at home, you crawl around doing homework" (Interview with MY on July 25, 2023).

The fourth informant, EI, expressed a different view. With a firm and loud tone of voice EI stated that:

"I was taken away by hand, I was still perfect mom, humans are created perfect by Allah Swt. I remember when it happened around 10am, 10pm after coming out of the operating room and realizing I had to be determined to live to raise my children. Even though I don't have my hand I still feel perfect, nothing is hampered, just slower." (Interview EI on May 26, 2024).

Based on the results of interviews obtained by researchers, five informants consider themselves disabled. They see that they are physically incomplete as when they were born, while informant EI considers himself to only have delays and limitations. The work accident that caused them to experience physical disabilities such as the loss of the left leg below the knee, the loss of the left arm below the elbow, the loss of the right arm above the elbow and the loss of the right leg above the knee caused them to consider themselves different from other people who have complete limbs. In Mead's Symbolic Interaction Theory, the "Me" context is influenced by negative stigmas

and stereotypes about disability that exist in society. Five informants internalized society's view that they were disabled. This is also in line with the results of Rahmawati's research (2022) which explains that there are stereotypes in society that still view people with disabilities as weak, making them marginalized in social life. The marginalization of people with disabilities inhibits free interaction between people with disabilities and the community, which in turn results in low participation of people with disabilities in community forums.

Abnormal Self:

The work accident they experienced caused them to lose one of their limbs so that the informants had to reluctantly accept this difference. The informants admitted that they were in an abnormal position, there were various disabilities that they experienced so that the informants had to depend on other people in their daily activities, even individual glasses saw this abnormality would have an impact on other things such as feeling useless. This is as expressed by the following informant:

"After the incident, when I left the house, I wore a mask and sweater and put my arms in my shirt pockets, as if my arms were complete because I didn't want to be the center of attention and I didn't want other people to stare at my face" (Interview IP on July 25, 2023).

"Even though I don't have a hand, I still feel perfect, nothing is hampered, just slower with one hand. I can still do my normal activities. If I say that I am hampered, I am violating Allah" (Interview EI on May 26, 2024).

"My passion is working in the field, in practice, my soul is in the field, not in the office. With the condition of my leg that is disabled like this, it is impossible to return to the field, ma'am" (FO interview on July 25, 2023).

In the abnormal self-categorization, researchers found that all informants felt abnormal and unattractive because they thought they were different from other people. All six informants internalized society's view that they were not normal. The six informants admit that they are in an abnormal position, even the various inhibitions they experience appear so that the informants have to depend on living with others in their daily activities, even individual glasses see this abnormality will have an impact on other things such as feeling useless, the findings are also confirmed by Rahmawati (2022) who says that the abnormality experienced by individuals often comes from within such as lack of self-confidence that interferes with the willingness to develop. Based on the results of this study, it appears that "I" will continue to adapt to the conditions that exist after amputation and find ways to continue to be able to carry out activities as usual. "I" and "Me" can work together to build a positive self-concept by using "I" to challenge negative stereotypes and "Me" to build a strong social identity as an empowered person with a disability.

Self-Adjustment to Work:

Workers who experience amputation of their extremities due to work accidents are faced with the fact that they have lost one of their limbs, either a hand or a foot, which directly affects a person's physical abilities, limiting range of motion, strength, balance and coordination. In the Return to Work BPJS Ketenagakerjaan Employment Injury Security, doctors assess the physical and functional capacity of workers to return to the workplace after an amputation. Workers can return to the same job or to a different job. As experienced by the following informant:

"I got a prosthetic arm after joining the RTW Program, so I feel confident going out, I don't look like I don't have a hand. The prosthetic arm is also very useful for using a motorcycle, so I can go to work and go home by myself on a motorcycle, and now I have even bought my own car, and can drive myself. I also received computer training from the RTW Program, so I can easily adapt to my new job, especially when in QC inputting goods using programs. At RTW, I also learned communication skills, so I can communicate more fluently with my boss, have meetings with my boss, maybe thanks to this, I was also able to rise to my current position" (IP interview dated July 25, 2023).

"Alhamdulillah, I got a prosthetic arm mom, so I can't see my butt at work or at a wedding mom. I also received job training, learned to use a computer, learned to speak, learned to communicate well with subordinates, coworkers and superiors. I feel that I am better after participating in the JKK RTW Program" (Interview EI on May 26, 2024).

"Alhamdulillah, I got a prosthetic leg from BPJS Ketenagakerjaan, ma'am. At first I thought I would use a cane for the rest of my life mom. I didn't expect to be included in the JKK RTW Program and be able to get a prosthetic leg. I can also return to work Mrs. Latri. No matter how difficult it is, I have a lot of determination when it comes to my career. I consider my career as flexing mom, even though my condition is disabled I still have a job, in a state company again mom. So other people don't underestimate me anymore, ma'am. That's what can raise my spirits again, ma'am. Even though because of my condition, I returned to work not in the field, but in the office" (FO interview dated July 25, 2023).

From the results of the interviews, it is known that the six informants experienced work adjustment after work accident amputation. In the midst of the stereotype of society considering that individuals who experience amputation are people who have limitations in activities, it turns out that in the view of informants who experience amputation, they recognize that with physical conditions that may not be normal but they have other skills so that they become a selling point in the world of work, indeed the position given to informants before amputation and after amputation will experience changes. This is because the company considers the ability of informants who are not as free as before the amputation, such as one of the informants FO who used to be an analyst at the Crude Palm Oil (CPO) factory and after the amputation he was placed as an administrative

clerk. The process of switching jobs also made informants experience adjustments to their jobs because they were different from their previous positions. Therefore, informants, in addition to self-acceptance, also need social support. This is in line with what is said by the research of Lestari et al. (2016) which states that in the process of adjusting to post-amputation work, social support plays an important role. Social support is a real action taken by others, which makes individuals feel comfortable and get attention from both family, relatives, colleagues, and community groups.

This post-injury work adjustment involves an interaction between "I" and "Me". The "I" needs to adapt to new tasks and a different way of working while the "Me" needs to adjust to a new role as a worker with a disability. Support from the company, coworkers, supervisors and family can help reinforce a positive "Me" and facilitate the post-extremity amputation work adjustment process.

Phantom pain post-amputation:

Major limb amputations often result in persistent post-amputation pain that continues to significantly affect the patient's well-being. The term pantomime pain was first coined by American neurologist Silas Weir Mitchell in 1871. Mitchell described that "thousands of spirit limbs haunt good soldiers now and then and torment them". Based on the results of interviews conducted by researchers, post-amputation informants not only feel "lacking" visibly but all informants also feel pain from body parts that are no longer there and even feel that the missing body parts are still there. Phantom Pain that researchers get from the recognition of informants as follows:

"In the past, 1-2 months after amputation, the missing hand was still felt. I used to feel my hand every day. That's why I try to keep busy so that I have activities. The doctor also said that over time the pain will disappear. When it hurts or itches I just give eucalyptus oil. If the pain is extraordinary, then I take pain medication mom. The pain appears when I'm tired and have a lot on my mind. Now it doesn't feel like it's gone, I never feel pain anymore" (Interview EI dated May 26, 2024).

"If today it's not there anymore, ma'am, there used to be just after surgery but now the pain is no longer felt" (Interview SY dated July 24, 2023).

All six informants said that there was an urge within themselves to move the amputated organ, usually we drink with our right hand, now when we want to take the glass we direct the hand to find that it is no longer there. The brain also needs to adjust to the work orders of organs in each individual after amputation, and this causes pain. In fact, according to informants' confessions, researchers found that phantom pain is not only related to the physical, but also psychologically. Every time the informant felt tired, stressed, and depressed, there was pain in the amputation. Based on the researcher's findings, the period of time phantom pain lasts within the individual depends on the individual's level of anxiety over the amputation he experienced. Of the six informants, the researcher found that SM was the fastest to accept herself again after the

amputation she experienced so that she also did not linger feeling phantom pain as an effect of the amputation she experienced. In the context of Mead's Symbolic Interaction, phantom pain can be seen as an interaction between "I" and "Me". "I" feels the pain while "Me" tries to understand and manage the pain based on the experience and knowledge gained by the informant from other colleagues who have experienced similar things in the Return to Work (RTW) community.

Role-taking Process:

The role-taking process in RTW participants' physical self-concept involves three stages:

- 1) Initial Stage: Adjustment to the new role as a disabled person, role internalization, and interaction with fellow RTW participants. "Me" reflects the reality of the new amputee body.
- 2) Rehabilitation Stage: Adaptation to new tools and work environment. "Me" integrates the tool into the self-image.
- 3) Return to Work Stage: Integration into productive roles, interaction with co-workers, and internalization of identity as an empowered worker. RTW programs facilitate this process.

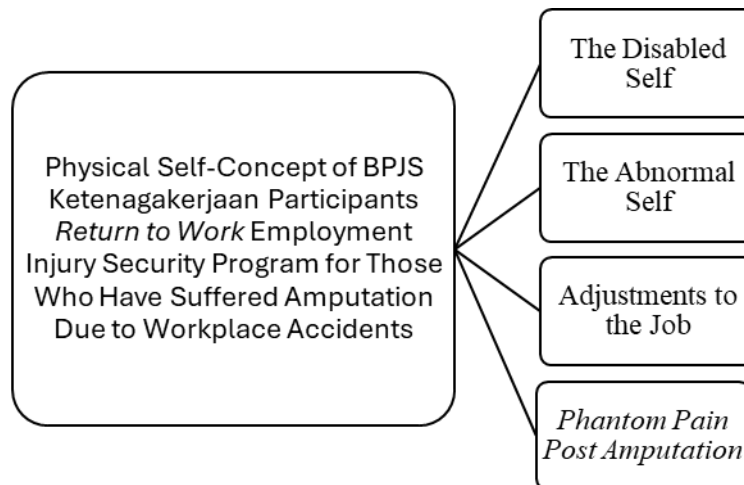


Figure 1. Physical self-concept of BPJS Ketenagakerjaan Participants of the Return to Work (RTW) Employment Injury Security who have amputations due to work accidents in Pekanbaru.

Psychological self-concept of BPJS Ketenagakerjaan participants in the Return to Work (RTW) Employment Injury Security who have amputations due to work accidents in Pekanbaru.

At the point of psychological self-concept, it focuses on the point of self (mind) from Mead's Symbolic Interaction Theory. Mead defines mind as the ability to use symbols that have the same social meaning. Mind emerges in a social process only when the process as a whole enters into or is present in the experience of each individual involved in the process. When this happens, an individual becomes self-conscious and has a mind, he becomes aware of his relationship with the process as a whole and with other individuals who participate in it with him (Purnomo & Indarti, 2023).

"Mind" enables individuals to take on the role of others (role-taking) or the ability to symbolically place oneself in the imaginations of others in order to understand their perspectives and to anticipate their actions. Through 'mind', individuals can reflect on themselves and develop an understanding of their identity.

Table 3. Psychological Self-Concept Categorization Results

No.	Informant	Psychological Self-Concept of BPJS Ketenagakerjaan participants in the Return to Work (RTW) Employment Injury Security who experienced amputation due to work accidents in Pekanbaru.			
		Mental Health Disorders	Anticipatory Anxiety	Believe in Yourself	Identity and Self-Acceptance Process
1	MY	✓	✓	✓	✓
2	SY	✓	✓	✓	✓
3	IP	✓	✓	✓	✓
4	SM	✓	✓	✓	✓
5	EI	✓	✓	✓	✓
6	FO	✓	✓	✓	✓

Mental Health Disorders:

Mental health is an integral part of general health and well-being and a basic human right. A person with good mental health is better able to connect, function, cope and thrive, enabling them to cope with life's stresses, function well and contribute to society. An extremity amputation caused by a workplace accident is a traumatic experience that has a significant impact on a person's mental health. After undergoing amputation of the extremity due to a work accident, the informant not only experienced physical but also psychological disorders. Based on the informant's confession, the following information was obtained:

"At first I thought that after the amputation I would feel relieved mom because the pain was gone. Turns out I was wrong, there were still effects that I felt after the anesthetic wore off. I have nightmares, hallucinations and always cry in the middle of the night because I have to fight phantom pain. Moreover, I had 5 surgeries mom, the pain was unbearable. I went into a stage of depression ma'am and even tried to commit suicide 3 times because I had given up on life and the pain I was enduring. I went to the psychiatrist Mrs. Latri, insomnia, I couldn't sleep, I could stay up to 3 days fresh and not sleep until my heart hurt. The psychiatrist said I was bipolar manic severe depression because I got to suicide things, I felt tired of life, no one understood me. Sometimes I'm lazy to take the medicine mom, there's a lot of medicine and it causes my body to get fat and swollen. But I can't stop taking the medicine mom. If I stop, my emotions will no longer be stable" (FO interview dated July 25, 2023).

"I was desperate mom, a bit down at first, sad because I didn't think this leg was cut off before. In the beginning, I thought that my leg could be reattached" (Interview with SM on June 27, 2024).

All informants experienced post-amputation mental health disorders, including rejection, stress, and depression. This finding is in line with the research of Rosca et al. (2021), which showed emotional disturbances and diverse responses in post-amputee individuals. The process of self-acceptance involves a crisis phase, where informants attempt to balance anger and sincerity.

Anticipatory Anxiety

At the onset of amputation, all informants experienced anxiety about how they viewed the future. This is commonly known as anticipatory anxiety. Anticipatory anxiety is a condition of increased anxiety due to thinking about a future event or situation. It is normal to worry about things that will happen in the future. However, if the anxiety is excessive and even involves high feelings of anxiety, it can be referred to as anticipatory anxiety (Nabila, et al; 2023). Anticipatory anxiety can arise when a person imagines or anticipates a situation where the informant feels uncomfortable with future events due to their disability. From interviews with informants obtained:

"After the incident I was empty mom, confused about what happened. I blamed myself. Amputation destroyed my hopes. Can't I work again in this condition? I also imagined my condition ma'am, there is no one who can accept me in this condition ma'am, even though I now have a boyfriend ma'am, it is not certain that I will marry him and he will accept me" (IP interview dated July 25, 2023) .

"After my accident, my mom was afraid that I wouldn't find a partner, and I closed myself off, didn't want to date because my boyfriend at the time slowly left me after seeing my terrible condition when I was hospitalized after the amputation, mom. My concern now is still lack of confidence mom, lack of confidence in my partner to accept my disability. I'm insecure mom, I'm disabled, I have no legs and my body is swollen mom. If there is a man who wants me, I'm afraid he just wants to live with me, I'm also afraid that when he gets married he will no longer love me. I'm also afraid that his family won't accept me with this disability because marriage combines two big families. That's why sometimes I express my fear by getting angry at my mother and the men who approach me." (FO interview dated July 25, 2023)

"When the incident happened, I thought of my children, my children are still in college, they still need money. I was afraid that I would not be able to work anymore because my children still need money." (Interview with SM on June 27, 2024)

"When the incident happened, I didn't think about my wife and children, they still need me." (SY interview on July 25, 2023)

Researchers saw that informants who already had children and wives felt the fear of not being able to provide for them and empower themselves. Unmarried informants, such as FO and IP, face problems related to mates. They assumed that the amputation would prevent them from finding a partner who would accept their incomplete body condition and limitations in daily activities, as well as concerns about building a household. In addition, they also thought about the careers they had built. These were factors in the psychological distress experienced by the informants after amputation. Amputation experienced by the six informants also had an impact on the sexuality of one of the informants. This was experienced by MY, which began with concerns about sexual intercourse as a result of the work accident. Apart from resulting in the amputation of the left leg below the knee, the accident also hit MY's genitals, thus disrupting the function of his sexual reproductive organs. Based on MY's confession, after the amputation he was no longer with his wife, and this was one of the reasons. The informant's experience has been discussed in the research of Verschuren et al. (2023), which explains that post-amputation sexual changes occur in individuals who experience amputation. Communication with a partner is very helpful in overcoming these changes, even very important to do, especially during the recovery period.

Confidence in Ability:

Amputations experienced by informants make them have lower self-confidence than they have complete limbs. The change in self-confidence that occurs within them is not only due to the incompleteness of their limbs but the response of the people around them affects the formation of their self-confidence. The researcher's view of this is that it is normal that every person experiencing change will require adjustment, even in reality not only their voices are not heard but also their existence is often not considered. According to the informants' confessions, they really try to overcome their sense of self-doubt, each of them has a strategy for themselves such as they start trying to accept themselves. According to informants, this is the first step to building self-confidence. This was expressed by the following informant:

"I plan to ride my own motorcycle when I get my legs" (Interview SY on July 25, 2023)

"Keep up the good work mom, the children at home need money" (SM interview on June 27, 2024)

"It takes mental steel ma'am to return to work, if you have a cracker mentality, you will kill yourself ma'am. After the RTW process, I am more confident mom. Now I'm normal when talking to great people, not awkward and not inferior. I can also fish and grow my own vegetables, sometimes the neighbors don't believe it's me. The important thing now is that I

take advantage of being healthy before I get sick and spacious before I get narrow."
(Interview EI on May 26, 2024) .

In the psychic self-concept categorization of confidence in ability, all six informants are confident in their ability to work again after a work accident. Informants try to rebuild self-confidence through self-acceptance, focus on strengths, and social support. Physical changes and environmental responses affect self-confidence.

Identity and Self-Acceptance:

Self-acceptance is an important process after amputation. It involves accepting the physical changes and adjusting to a new identity. The process of self-acceptance can be difficult and requires time and support from family, friends, groups or health professionals. In the study, this support was also provided by the BPJS Ketenagakerjaan Return to Work Employment Injury Security, as expressed by the following informant:

"When I was recently cut off, there was a little bit of resentment. At night I thought, there are many people out there who don't have legs, so we tried it. Well, it turns out that it's also good to wear legs. It's like normal, normal. Now it's more comfortable to wear legs. Through the RTW program, I've received psychological training, including trauma therapy, so that when I see the legs, slowly forgotten what happened before. At first, my faith faltered; I felt resentment towards God, questioning why my leg was taken from me at such this age. Now, things are different. I'm back to working normally, and every morning" (Interview with MY on July 25, 2023).

"Now I just feel the words of people when I first had an accident, who said patience, there is wisdom. In the past, what is this, patience, they didn't feel what I felt, they just said to be patient. Now I really feel what is called patience, what is called there is wisdom in every incident. That there is a secret of Allah in every incident. The wisdom is that now I can be close to my mom. If it wasn't for the accident, I would have been away from my mom forever. I also met a life partner who was willing to accept my handicapped condition, it turned out that he was my classmate at college, I wouldn't have thought that we would be together. It turns out that there is only Allah's way, mom." (FO interview dated July 25, 2023)

All informants accepted a new identity as a person with a disability through a gradual process of self-acceptance, as described by Agustina and Valentina (2023). "Mind" is used to reflect on trauma, rebuild confidence, and integrate the amputation experience into the life narrative.

"Mind" plays an important role in post-amputation psychological adaptation. Informants used "mind" to reflect on the trauma, envision the future, and rebuild self-confidence. Positive "inner conversation" helps informants understand the meaning of amputation and build a meaningful life.

Overall, this study shows the complexity of post-amputation psychic self-concept, which is influenced by trauma, anxiety, and the process of self-acceptance. "Mind" became an important tool for informants to adapt and rebuild a meaningful life.

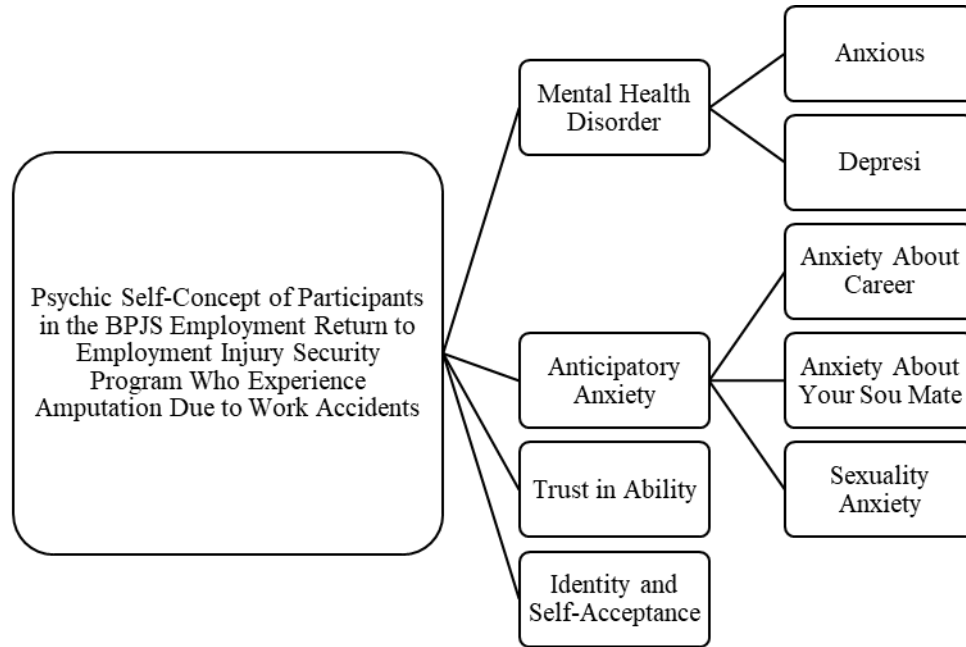


Figure 2. Psychological self-concept of BPJS Ketenagakerjaan Participants of the Return to Work (RTW) Employment Injury Security who have amputations due to work accidents in Pekanbaru

Social self-concept of BPJS Ketenagakerjaan Participants of the Return to Work (RTW) Employment Injury Security who have amputations due to work accidents in Pekanbaru.

Social self-concept is how a person views and assesses himself in the context of social interactions and his role in society. Social self-concept is an important aspect of a person's self-identity that is influenced by social interactions and individual experiences in society. Social self-concept is influenced by social interaction, social feedback, social comparison, culture and societal values.

Table 4. Social Self-Concept Categorization Results

No.	Informant	Social self-concept of BPJS Ketenagakerjaan participants in the Return to Work (RTW) Employment Injury Security who have amputations due to work accidents in Pekanbaru.	
		Social-Discrimination	Social Support
1	MY	✓	✓
2	SY	✓	✓

No.	Informant	Social self-concept of BPJS Ketenagakerjaan participants in the Return to Work (RTW) Employment Injury Security who have amputations due to work accidents in Pekanbaru.	
		Social-Discrimination	Social Support
3	IP	✓	✓
4	SM	✓	✓
5	EI	✓	✓
6	FO	✓	✓

The social self-concept is based on the concept of "society" from Mead's Symbolic Interaction Theory. "Society" is understood as a network of social relationships that influence individuals through "particular others" and "generalized others".

Social Discrimination:

At this point, the researcher focuses on discussing the negative responses obtained by informants from their environment, both from the work environment and the living environment. This is focused on the discrimination obtained by informants both verbally and nonverbally. Social discrimination is the act of discriminating or treating a person or group unfairly based on certain characteristics such as race, religion, gender or disability. Social discrimination can take many forms, both directly and indirectly and can have a significant negative impact on individuals or groups who experience it. Social discrimination can undermine social self-concept and a negative social self-concept can exacerbate self-discrimination.

"When I was still using a cane, people saw everything mom, it was weird!" (Interview SY on July 25, 2023)

"I didn't dare to go out after the amputation mom. It tortured me so much, I accepted my own condition. But I didn't dare to go out to meet people because I felt that people were looking at me strangely. When I was the center of attention of others, I didn't dare, even though people didn't say anything to me." (IP interview dated July 25, 2023)

The results showed that the six informants experienced social discrimination, both in the work and living environment. Verbal and nonverbal discrimination, such as bullying and innuendo, had a negative impact on the informants' psyches. This finding is in line with research by Mulyani et al. (2022), which emphasizes that people with physical disabilities still face discrimination in various forms.

Social Support:

Despite experiencing discrimination, informants also received significant social support. Particular others, such as family, friends and the RTW community, provided personal and

contextual support. Generalized others, represented by the wider community and the RTW program, provided structured and systematic support. This social support helps informants rebuild their lives and reinforce a positive self-concept, as the following informants stated:

"My dear family encouraged me not to lose heart. Neighbors near my house came and gave me support when I was just out of the hospital. They encouraged me. When I was exercising my prosthetic leg, walking around the yard in shorts, my neighbors encouraged me. I was happy to have my RTW. If I didn't have that, how would I be. I'm also down, how can I work again if I don't have a prosthetic leg. I am happy with the RTW Program, it motivates my confidence." (SM interview on June 27, 2024)

"My parents and family are very supportive, directing me to plan a better future mom. The closest environment is very influential in building my motivation and self-confidence. The family that I meet every day is very supportive. I have my mother, siblings and friends who support me. I'm lucky because I have my mom and my brother. My brother has a rather strict upbringing, which is what strengthens my mentality, mom. I became closer to my family. The community is also a place for me to share, it turns out that I'm not alone in experiencing this, there are others who are worse. If I hadn't been included in the group I might have been confused, where would I go to ask about a condition like this, I couldn't go to the doctor, right mom. So I tried to ask other members in the RTW community how to deal with this condition. I was also touched by FO's story, it turns out that there are people who want to accept him in his condition, I imagine my condition too. The office environment and superiors are also very supportive for me to grow mom. I'm getting more enthusiastic at work. Working with gentlemen makes me more mature, the more I work, the more I meet new people, the more confident I am. My coworkers and boss never look at me physically. My boyfriend continues to support me and never leaves me. My friends, too, accompanied me from the beginning until I gained my confidence again. Until I can get to this stage, I am once again very grateful, ma'am." (IP interview dated July 25, 2023)

In the aspect of social self-concept, the six informants also received social support from their environment. Someone who has undergone amputation and currently bears the identity of a disability, of course, this crisis period really needs support from both the closest family and the surrounding community, this aims to help improve the quality of life of people with disabilities. The concept of "community" plays an important role in the social adaptation of post-amputation informants. Particular others provide emotional and practical support, while generalized others provide social guidance and expectations. The RTW program, as a representation of generalized others, helps informants return to work and participate in the community. The social support received by informants has a positive impact on them, both physically and psychologically. This is in line with research by Putra et al. (2022), which shows that social support increases the self-confidence and performance of people with disabilities. Overall, this study shows that the social

self-concept of post-amputation RTW participants is influenced by interactions with particular others and generalized others. Social discrimination is a challenge, but social support plays an important role in the adaptation and recovery process.

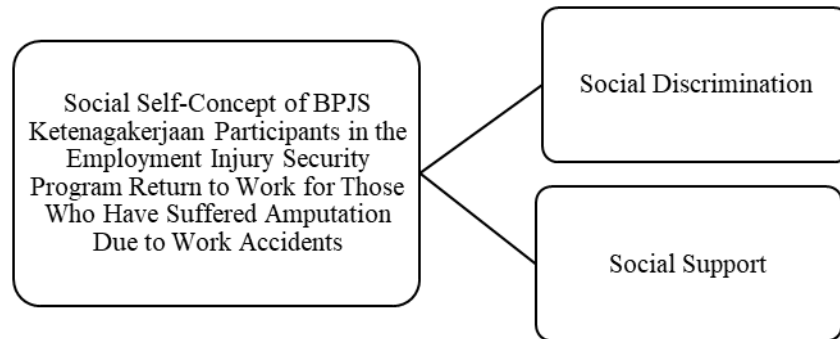


Figure 3. Social self-concept of BPJS Ketenagakerjaan Participants of the Return to Work (RTW) Employment Injury Security who have amputations due to work accidents in Pekanbaru

Based on the results of this study, researchers found a self-concept based on psychological, physical and social perspectives influenced by informants' social interactions. Physical, psychological and social perspectives are interconnected in shaping the meaning of self-concept through social interaction. The researcher draws conclusions from the results of interviews and discussions of informant data, then the self-concept model of BPJS Ketenagakerjaan participants in the Return to Work Accident Guarantee Program who experience amputation in Pekanbaru from a physical, psychological and social perspective is constructed as shown below.

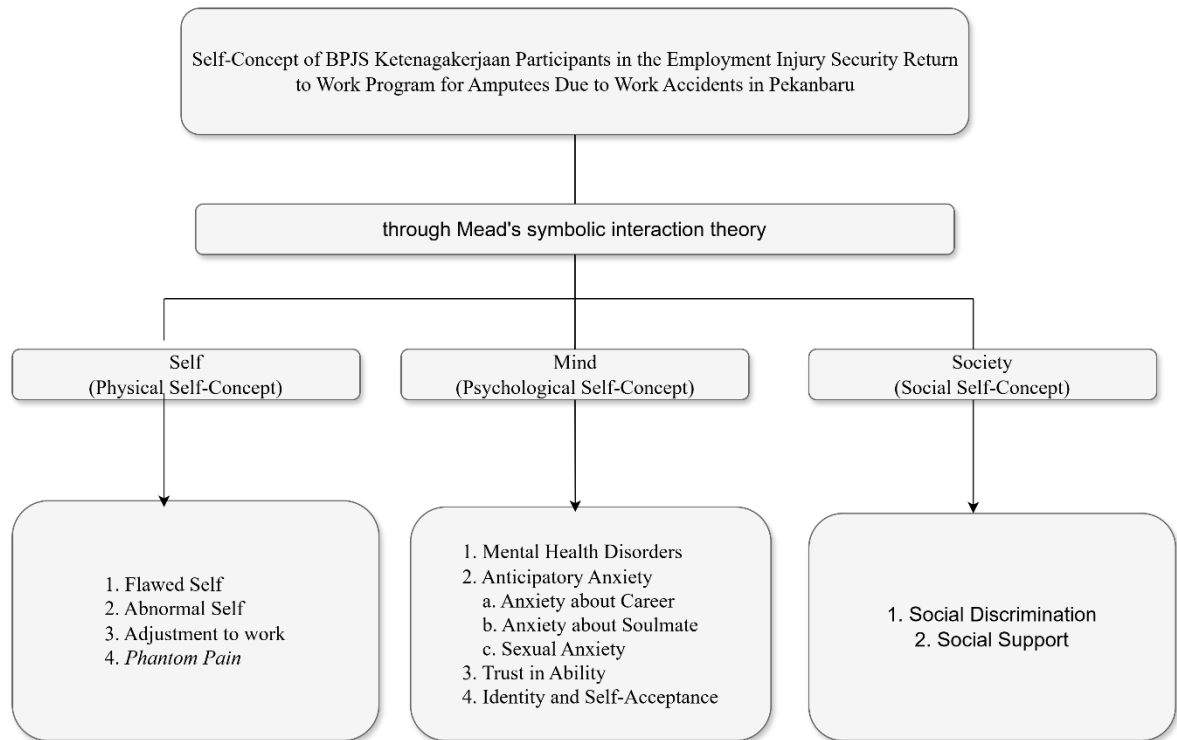


Figure 4. Self-concept of BPJS Ketenagakerjaan Participants of the Return to Work (RTW) Employment Injury Security who have amputations due to work accidents in Pekanbaru

CONCLUSION

Based on the data collection and discussion results presented, the researcher can conclude that there are three forms of self-concept among BPJS Ketenagakerjaan participants in the Return to Work (RTW) Employment Injury Security who have amputations due to work accidents in Pekanbaru, namely: first, the physical self-concept, where participants of the program form a disabled self, an abnormal self, an adjustment to work, and experience phantom pain after amputation. Second, the psychological self-concept, where participants experience mental health disorders, anticipatory anxiety, confidence in their abilities, as well as identity and self-acceptance processes. Third, the social self-concept, where participants experience social discrimination and receive social support. This study is expected to encourage further research on the self-concept of RTW participants, integrate workplace injury and inclusion materials into the education curriculum, provide information on the implementation of the BPJS Ketenagakerjaan Employment Injury Security, create an inclusive work culture and appropriate accommodations, rebuild post-amputation dreams and hopes, and explore the role of social support and psychosocial factors.

BIBLIOGRAPHY

Adler, J. M., Lakmazaheri, A., O'Brien, E., Palmer, A., Reid, M., & Tawes, E. (2021). Identity integration in people with acquired disabilities: A qualitative study. *Journal of Personality*, 89(1), 84–112.

- Allobaney, N. F., Eshah, N. F., Abujaber, A. A., & Nashwan, A. J. J. (2022). Professional self-concept and self-confidence for nurses dealing with COVID-19 patients. *Journal of Personalized Medicine*, 12(2), 134.
- Behera, P., & Dash, M. (2021). Life after lower limb amputation: A meta-aggregative systemic review of the effect of amputation on amputees. *Journal of Disability Studies*, 7(2), 90–96.
- Brunet, J., Wurz, A., & Shallwani, S. M. (2018). A scoping review of studies exploring physical activity among adolescents and young adults diagnosed with cancer. *Psycho-oncology*, 27(8), 1875–1888.
- Carlsson, I. K., Chemnitz, A., & Dahlin, L. B. (2019). Hand injuries and disorders during the life cycle; consequences, adaptation and therapeutic approach. In *Enhancing Healthcare and Rehabilitation: The Impact of Qualitative Research* (pp. 167–184). Taylor and Francis: CRC Press, New York.
- Cifu, D. X., & Lew, H. L. (2017). *Braddom's Rehabilitation Care: A Clinical Handbook E-Book*. Elsevier Health Sciences.
- Dreiskämper, D., Tietjens, M., & Schott, N. (2022). The physical self-concept across childhood: Measurement development and meaning for physical activity. *Psychology of Sport and Exercise*, 61, 102187. <https://doi.org/10.1016/j.psychsport.2022.102187>
- Fulton, C., Smith, K., Barr, C., & George, S. (2023). Sexuality and rehabilitation needs following traumatic motor vehicle injuries: Client and clinician perspectives. *The Allied Health Scholar*, 4(2).
- Main, C. J., Shaw, W. S., & Mitchell, J. (2016). Towards an approach to return to work interventions in musculoskeletal disorders. *Handbook of Return to Work: From Research to Practice*, 439–457.
- Marini, I. (2017). Theories of adjustment and adaptation to disability. *The Psychological and Social Impact of Illness and Disability*, 91–121.
- McGiffin, J. N. (2020). *Psychological adjustment to disability: heterogeneous trajectories of resilience and depression following physical impairment or amputation*. Columbia University.
- Purnomo, C. A., & Indarti, T. (2023). *Interaksi Simbolik dalam Novel Ayah dan Sirkus Pohon Karya Andrea Hirata (Kajian Interaksionisme Simbolik George Herbert Mead)*. Bapala.
- Rachmat, N., Anggriani, A. F., Hisyam, A., & Suprayogi, D. (2023). Tensile Strength of Coconut Coir Fiber Composite as an Alternative Material to Replace Fiberglass in Hard Socket. *Journal of Electronics, Electromedical Engineering, and Medical Informatics*, 5(2), 99–107.
- Rahmawati, H. K. (2022). Optimalisasi Bimbingan Karir Dalam Proses Pengembangan Diri Penyandang Disabilitas Di Forum Komunikasi Disabilitas Kudus. *Konseling Edukasi: Journal Of Guidance and Counseling*, 6(1), 55–74.

- Roşca, A. C., Baci, C. C., Burtăverde, V., & Mateizer, A. (2021). Psychological consequences in patients with amputation of a limb. An interpretative-phenomenological analysis. *Frontiers in Psychology*, 12, 537493.
- Safira, Z., & Afriani, A. L. (2021). Pengaruh Youtube Beauty Vlogger Suhay Salim Terhadap Perilaku Imitasi Siswi SMKN 20 Jakarta. *Jurnal Komunikasi, Masyarakat Dan Keamanan*, 3(2).
- Saket¹, M. H. (2016). A Cross-Sectional Design: Marital Satisfaction of Mather and Self-Esteem in Children. *The International Journal of Indian Psychology*, Volume 3, Issue 3, No. 7, 66.
- Scutt, J. A., & Scutt, J. A. (2020). Extremities: From the Tips of Her Fingers to the Tips of Her Toes. *Beauty, Women's Bodies and the Law: Performances in Plastic*, 249–296.
- Susanti, A. (2022). (Peer Review+ Similarity+ Document) *The Role of Tangguh Village in Overcoming the Covid-19 Disaster in Bondowoso Regency*.
- Wijaya, R. N., Nuran, M. E., Salsabila, M. R., Hartono, B., Natalie, H., Yuliawati, L., Meilianawati, T., Puspita, P. A., & Dorkas, M. A. (2023). *Psychopreneur Journal*.

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