

Uji validitas dan reliabilitas kuesioner child oral health impact profile short form 19 cohip sf 19 versi Bahasa Indonesia = An Indonesian version of child oral health impact profile short form 19 cohip sf 19 assessing validity and reliability

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Abstrak

Tujuan: Reliabilitas dan validitas kuesioner COHIP-SF 19 versi Bahasa Indonesia.

Metode: Dibuat berdasarkan pedoman proses adaptasi cross-cultural. Penelitian dilakukan pada 548 anak usia 12 - 15 tahun dari enam SMP Negeri di Jakarta yang dipilih secara acak. Tes psikometrik mencakup konsistensi internal, reliabilitas test-retest, validitas diskriminan, dan validitas konvergen.

Hasil: Mean usia subjek penelitian adalah 13,3 tahun (SD 0,9) dan 54% subjek penelitian merupakan perempuan. Mean COHIP-SF 19 adalah 57,8 (SD 8,8) dan mediannya adalah 58 (rentang 27 - 75).

Konsistensi internal dan reliabilitas test-retest COHIP-SF 19 sangat baik dengan nilai Chronbach's alpha 0,83 dan intra-class correlation coefficient (ICC) 0,81. Anak-anak dengan decay aktif, PUFA positif, rongga mulut tidak bersih, atau gingivitis memiliki skor COHIP-SF 19 yang lebih rendah secara signifikan ($P = 0,030$). Korelasi antara skor COHIP-SF 19 dan masing-masing domain, dengan tingkat keparahan klinis dan penilaian diri terhadap kesehatan umum atau kesehatan rongga mulut setelah disesuaikan dengan usia, jenis kelamin, dan sekolah sangat rendah hingga rendah ($r_s = 0,04 - 0,27$, $P = 0,028$).

Kesimpulan: COHIP-SF 19 versi Bahasa Indonesia berhasil dibuat untuk digunakan sebagai instrumen OHRQoL pada anak-anak usia sekolah di Indonesia. Konsistensi internal, reliabilitas test-retest, validitas diskriminan, dan validitas konvergen COHIP-SF 19 versi Bahasa Indonesia sudah dibuktikan.

.....Objectives: Assessing reliability and validity of COHIP-SF 19 Indonesian version.

Methods: Developed according to the guidelines for the cross-cultural adaptation process. The instrument was tested among 548 children age 12 – 15 years old, from randomly selected six junior high school in Jakarta. The psychometric test include internal consistency, test-retest reliability, discriminant validity, and convergent validity.

Results: Mean age of the participants was 13,3 years (SD 0,9) and 54% of the participants were girls. The mean score was 57,8 (SD 8,8) and the median was 58 (range 27-75). The internal consistency and test-retest reliability was excellent with Chronbach's alpha 0,83 and intra-class correlation coefficient (ICC) 0,81.

Children with active decay, positive PUFA, not clean oral cavity, or gingivitis had significantly lower scores ($P = 0,030$). Correlation between COHIP-SF 19 score, subscale scores and clinical severity as well as self-rated general or oral health were very low to low ($r_s = 0,04 - 0,27$, $P = 0,028$), after adjustment for children's age, gender, and school.

Conclusion: The Indonesian version of COHIP-SF 19 was successfully developed to be used as an OHRQoL instrument for Indonesian school-age children. The internal consistency, test-retest reliability, discriminant validity, and convergent validity of COHIP-SF 19 Indonesian version were confirmed.