

## Pengembangan model peningkatan kemandirian pasien stroke untuk pengelolaan faktor risiko kekambuhan = The development of stroke self care model for stroke recurrent risk factors management

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### Abstrak

Penelitian ini bertujuan untuk mengembangkan dan menguji pengaruh model peningkatan kemandirian pasien stroke untuk pengelolaan faktor risiko kekambuhan terhadap pengetahuan, self-efficacy dan kemandirian. Penelitian dilakukan melalui dua tahap, yaitu tahap 1 berupa penelitian deskriptif kualitatif dan pengembangan model, serta tahap 2 berupa penelitian kuasi dengan pre-post test control design. Metode sampling yang digunakan adalah purposif sampling. Pada penelitian tahap 1, didapat 8 orang partisipan sedangkan pada tahap 2 didapat sebanyak 32 orang (kelompok kontrol) dan 35 orang (kelompok perlakuan). Pengambilan data pada tahap 1 dilakukan dengan wawancara mendalam, adapun pada tahap 2, data diambil 3 kali, yaitu pre test, post test pada akhir bulan 1 dan post test pada akhir bulan 2. Analisa data dilakukan dengan metode dari Giorgi (tahap 1) serta uji Friedman dan Wilcoxon (tahap 2).

Hasil penelitian pada tahap 1 didapat 4 tema yang mendukung keberhasilan pasien mengelola faktor risiko kekambuhannya dan tersusun model peningkatan kemandirian pasien stroke. Pada tahap 2 didapat peningkatan nilai mean pada variabel pengetahuan ( $x^2 = 31,087$ ;  $p=0,000$ ) dan kemandirian ( $x^2 = 24,569$ ;  $p=0,000$ ). Tidak terjadi peningkatan mean pada variabel self-efficacy ( $x^2 = 4,947$ ;  $p=0,84$ ). Kesimpulan, model peningkatan kemandirian terbukti efektif untuk meningkatkan kemandirian dan pengetahuan pasien stroke. Model ini dapat direkomendasikan untuk diaplikasikan pada perawatan pasien stroke di poliklinik.

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The purpose of this study were to develop the Stroke self-care model for stroke recurrent risk factor management and to examine the effect of the model on on knowledge, self-efficacy and self-care for stroke recurrent risk factor management. There were two phase on this research. The first phase was phase to develop Stroke self-care model for stroke recurrent risk factors management and modules through study literature and a qualitative research. The second phase was a quasi experiment with pre-post test control design. Eight participant were involved in the first phase, while in second phase there were 32 respondents in control group and 35 respondents in intervention group whom recruited by purposive sampling. Data in first pahse were colected using in-depth interview, and in second phase, data were collected at three points: pre test; one month and two month after intervention. Data in first phase were analyzed with Giorgi methode; and in the second phase using Friedman, and Wilcoxon test.

The results in fist phase identified four themes that contribute to success story stroke patient in a manage stroke risk factors. In second phase, data showed the significant increase of patients? knowledge mean ( $x^2 = 31,087$ ;  $p=0,000$ ) and self-care mean ( $x^2 = 24,569$ ;  $p=0,000$ ) after 1 dan 2 month after intervention. There was no increase in patients? self-efficacy mean ( $x^2 = 4,947$ ;  $p=0,84$ ). In conclusion, stroke self-care model for stroke recurrent risk factor management is effective to increase stroke patients? knowledge and self-care. This research recomend that, this model can be applied in nursing care for stroke patient in outpatient

clinic.