

# **Penyusunan Instrumen Penilaian Iklim Humanis Lingkungan Pembelajaran klinis untuk Pengembangan Humanisme dalam Pendidikan Kedokteran = Development of Instrument to Evaluate Humanistic Climate in Clinical Learning Environment to Cultivate Humanism in Medicine**

Rita Mustika, author

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## **Abstrak**

Pengembangan humanisme sebagai inti profesionalisme diperlukan karena dokter profesional masa kini dituntut melakukan pelayanan berpusat pada pasien dan mengesampingkan kepentingan pribadi. Pengembangan humanisme dipengaruhi persepsi mahasiswa terhadap lingkungan pembelajaran terutama di klinik. Meskipun demikian, belum ada instrumen untuk menilai hal tersebut. Tujuan penelitian ini adalah menyusun instrumen penilaian iklim humanis lingkungan pembelajaran klinis.

Penelitian ini menggunakan desain sequential exploratory mixed method dan dilakukan di Rumah Sakit dr. Cipto Mangunkusumo (RSCM) pada bulan Januari – Desember 2019. Penelitian dilakukan dalam empat tahap yaitu penyusunan instrumen, uji coba, penyusunan model iklim humanis lingkungan pembelajaran klinis dan implementasi. Tahapan penyusunan instrumen dimulai dengan sintesis konsep iklim humanis lingkungan pembelajaran klinis melalui telaah pustaka, focus group discussion dan wawancara mendalam. Dari penyusunan tersebut diperoleh konsep yang dijadikan rujukan draf instrumen Humanistic Climate Measure (H-CliM) yang terdiri atas 89 butir pertanyaan; 7 domain. Tahap kedua, dilakukan uji coba H-CliM bersama instrumen untuk menilai kompetensi humanisme Integrity Compassion Altruism Respect Empathy (ICARE). Kedua instrumen terbukti valid ( $r > 0,3$ ) dan reliabel (-cronbach  $> 0,7$ ). Dilakukan analisis faktor untuk memvalidasi konstruk dan menghasilkan instrumen H-CliM final (46 butir pertanyaan; 4 domain) serta ICARE final (15 butir pertanyaan; 2 domain). Analisis receiver operating characteristic (ROC) menghasilkan titik potong 184,5 artinya, skor H-CliM 184,5 tergolong humanis. Analisis regresi logistik menghasilkan model iklim humanis yang 62% dapat menjelaskan variasi iklim humanis ( $R^2 = 0,62$ ). Model tersebut adalah:

$$\text{Logit P (iklim humanis)} = 0,782 \text{ (rotasi klinis non-bedah)} + 0,048 \text{ (kurikulum formal dan informal terkait humanisme)} - 0,213 \text{ (hidden curriculum)} + 0,036 \text{ (relasi dan fasilitas yang mendukung humanisme)} + 0,044 \text{ (pengembangan kepribadian dan profesionalisme)} + 0,409 \text{ (perempuan)} + e.$$

Penelitian ini berhasil mengembangkan instrumen penilaian iklim humanis yang valid dan reliabel yaitu instrumen H-CliM (-Cronbach = 0,86). Lingkungan pembelajaran non-bedah 2 kali lebih humanis dibanding bedah ( $p = 0,0001$ ). Persepsi terhadap iklim humanis lingkungan pembelajaran klinis berkorelasi lemah dengan capaian kompetensi humanisme.

.....The development of humanism as the core of professionalism is crucial, seeing that professional doctors today are expected to carry through patient-centered services and put aside their personal interests. In clinical setting, cultivating humanism is highly influenced by students' perceptions on clinical learning

climate, therefore, it is necessary to assess that perception. However, to date there is no instrument to assess clinical learning climate. The purpose of this study is to develop an instrument to assess humanistic learning climate.

This study utilizes a sequential exploratory mixed method design and is conducted at the Cipto Mangunkusumo hospital (RSCM) in January - December 2019. The research was conducted in four stages, which are the preparation of instruments, trials, development of humanistic climate models of clinical learning environments and implementation of the instrument. The stages of instrument preparation begin with the synthesis of concept of the humanistic clinical learning climate through literature review, focus group discussions and in-depth interviews. Afterward, the concept that was obtained utilized as a reference for drafting instrument of Humanistic Climate Measure (H-CliM) consisting of 89 questions; 7 domains. The second stage, an H-CliM trial was carried out along with instruments to assess the competence of the Integrity Compassion Altruism Respect Empathy (ICARE).

Both instruments proved to be valid ( $r > 0.3$ ) and reliable (-Cronbach  $> 0.7$ ). Factor analysis was carried out to validate the construct and produce the final H-CliM instrument (46 questions; 4 domains) and the final ICARE (15 questions; 2 domains). Receiver operating characteristic (ROC) analysis resulted in cut-off point of 184.5, which means that the H-CliM score 184.5 was classified as humanistic climate. Humanistic climate models obtained from the logistic regression analysis could explain 62% of variation of humanistic climate ( $R^2 = 0,62$ ). The model is:

$$\text{Logit P (humanistic climate)} = 0.782 \text{ (non-surgical clinical rotation)} + 0.048 \text{ (formal and informal curriculum related to humanism)} - 0.213 \text{ (hidden curriculum)} + 0.036 \text{ (relationship and facilities that support humanism)} + 0.044 \text{ (personality development and professionalism)} + 0.409 \text{ (female)} + e.$$

This research succeeded in developing a valid and reliable humanistic climate assessment instrument, the H-CliM instrument (-Cronbach = 0,86). Compare with surgical rotation, the non-surgical learning environment is twice more humanistic ( $p = 0.0001$ ). Perceptions of the humanistic climate of the clinical learning environment are weakly correlated with the achievement of humanism competencies.