

INTISARI

Pasien dengan gangguan jiwa (PDGJ) memerlukan perawatan berkesinambungan dengan obat. Akan tetapi, apoteker memiliki hambatan dalam melakukan pelayanan kefarmasian terhadap pasien dengan gangguan jiwa. Tujuan penelitian ini adalah mengidentifikasi masalah apoteker komunitas dalam melakukan pelayanan kefarmasian pada PDGJ, merancang model intervensi pelatihan kesehatan jiwa dan mengevaluasi efektivitas model intervensi pelatihan kesehatan jiwa apoteker komunitas.

Penelitian ini mempunyai desain *mixed method explanatory sequential design* yang terdiri dari tiga tahap. Tahap pertama menggunakan desain *mix-method* dan *Systematic Review*, responden penelitian adalah apoteker yang bekerja di sektor komunitas yaitu apotek, klinik dan puskesmas. Tahap kedua dilakukan pengembangan model intervensi peningkatan kesehatan jiwa apoteker komunitas berdasarkan hasil studi tahap pertama kemudian di-*review* ahli. Tahap ketiga merupakan penelitian *quasi experimental pretest-posttest* dengan kontrol untuk mengukur efektivitas pelatihan kesehatan jiwa dengan responden apoteker komunitas yang bekerja di Provinsi D.I. Yogyakarta. Responden penelitian tahap ke tiga dipilih berdasarkan *convenience sampling* sebanyak 120 orang. Data penelitian tahap pertama dianalisis secara univariat dengan analisis deskriptif, perhitungan RIWF (*relative importance weight factor*) dan analisis tematik. Data tahap ke dua dianalisis secara kualitatif dan analisis tahap ke tiga menggunakan uji ANCOVA dan skill komunikasi apoteker diukur menggunakan uji deskriptif.

Hasil penelitian menemukan bahwa Apoteker komunitas memiliki persepsi dan stigma yang masuk dalam kategori sedang terhadap PDGJ. Hambatan terbesar yang dihadapi oleh apoteker di Indonesia adalah kurangnya pelatihan kesehatan jiwa. Model intervensi berupa pelatihan kesehatan jiwa depresi-anxiety selama 520 menit secara luring, yang terdiri dari sesi edukasi farmakoterapi depresi-anxiety oleh psikiater, sesi komunikasi dan konseling obat disertai pemutaran video dan modul panduan konseling obat pada PDGJ oleh apoteker klinis Rumah Sakit Jiwa, sesi ketiga adalah sesi pemaparan pengalaman depresi dan masa penyembuhan oleh *peer-level presenter* seorang apoteker magister farmasi klinis. Sesi terakhir merupakan *role-play* konseling obat oleh responden terhadap pasien simulasi depresi. Hasil menunjukkan bahwa pelatihan kesehatan jiwa dengan pretest sebagai faktor perancu dapat efektif meningkatkan literasi depresi ($p=0.000$; $\eta^2p= 0.247$), literasi anxiety ($p=0,000$; $\eta^2p=0.129$), efikasi diri ($p=0.000$; $\eta^2p=0.183$) dan menurunkan stigma ($p=0.000$; $\eta^2p=1.49$) terhadap PDGJ, akan tetapi skill komunikasi apoteker masih dalam kategori sedang.

Penelitian ini menghasilkan model pelatihan depresi dan *anxiety* untuk apoteker komunitas dan membuktikan bahwa pelatihan tersebut dapat meningkatkan efikasi diri, literasi depresi dan *anxiety* serta menurunkan stigma apoteker komunitas terhadap PDGJ yang dapat direkomendasikan kepada Kementerian Kesehatan RI sebagai *continuing education* untuk apoteker komunitas.

Kata kunci: apoteker komunitas, kesehatan jiwa, pasien dengan gangguan jiwa, pelayanan kefarmasian

ABSTRACT

Patients with mental disorders (PDGJ) require continuous treatment with medication. However, pharmacists have obstacles in providing pharmaceutical services to patients with mental disorders. This research aims to identify the problems of community pharmacists in providing pharmaceutical services to patients with mental disorders, design an intervention model, and evaluate the effectiveness of the intervention model to the community pharmacists.

This research has a mixed-method explanatory sequential design which consists of three stages. The first stage was to conduct a systematic review study and use a mixed method to build a theory of the problems faced by community pharmacists in providing pharmaceutical services to PDGJ and to collect needs assessments for community pharmacists. The research respondents were pharmacists who worked in the community sector. The second stage was to develop an intervention model to improve the skills of community pharmacists based on the results of the first stage study, and the third stage was a quasi-experimental pretest-posttest study with control to measure the effectiveness of mental health training with community pharmacist respondents working in D.I. Province. Yogyakarta. Respondents were selected based on convenience sampling of 120 people. The first stage of research data was analyzed univariately with descriptive analysis, RIWF (relative importance weight factor) calculations, and thematic analysis. The second stage data was analyzed descriptively and the third stage analysis used the ANCOVA test.

The results found that training related to mental health was the biggest obstacle for community pharmacists in providing pharmaceutical services to patients with mental disorder. The intervention model is in the form of 520 minutes of offline depression-anxiety mental health training, consisting of an educational session on depression-anxiety pharmacotherapy by a psychiatrist, a communication and drug counseling session accompanied by a video screening and a drug counseling guide module to patients with mental disorder by a clinical pharmacist. The third session is a session explaining the experience of depression and the recovery period by a peer-level presenter, a master pharmacist in clinical pharmacy. The final session was a drug counseling role-play by respondents for simulated depression patients.

Result shows that mental health training is effective in increasing depression literacy ($p=0.000$; $\eta^2p=0.247$), anxiety literacy ($p=0.000$; $\eta^2p=0.129$), self-efficacy ($p=0.000$; $\eta^2p=0.183$) and reducing stigma ($p=0.000$; $\eta^2p=0.149$) towards depression patients. However, communication skills in pharmacists are still in the moderate category. This research concludes that mental health training can increase self-efficacy, depression, and anxiety literacy and reduce stigma towards patients with depression.

This study developed a depression and anxiety training model for community pharmacists and demonstrated that the training could improve self-efficacy, depression and anxiety literacy, and reduce the stigma of community pharmacists towards PDGJ. The findings can be recommended to the Indonesian Ministry of Health as a continuing education initiative for community pharmacists.

Keywords: community pharmacists, mental health, psychiatry patients, pharmaceutical service