

INTISARI

Latar Belakang: Populasi lansia di Indonesia meningkat dan memasuki fase *ageing population*, memicu masalah kesehatan, termasuk kesepian. Terutama lansia yang tinggal di panti werdha seringkali mengalami kesepian. Terapi tertawa sebagai intervensi non-farmakologis berpotensi dapat mengatasi masalah ini, namun bukti keberhasilannya di Indonesia masih terbatas.

Tujuan Penelitian: Penelitian ini bertujuan untuk menganalisis pengaruh pemberian terapi tertawa terhadap tingkat kesepian lansia di BPSTW.

Metode: Penelitian ini berupa *quasi-experimental* dengan *pre-test post-test control group design*. Sejumlah 35 lansia di BPSTW Budi Luhur dibagi menjadi kelompok intervensi (n=17) dan kelompok kontrol (n=18). Terapi dilakukan sebanyak empat kali dalam dua minggu. Tingkat kesepian diukur menggunakan *UCLA Loneliness scale version 3* sebelum dan setelah intervensi. Data dianalisis menggunakan uji *paired t-test* dan *effect size*.

Hasil: Kelompok eksperimen (10 perempuan, 7 laki-laki) dan kelompok kontrol (8 perempuan, 10 laki-laki) berusia minimal 60 tahun memiliki rentang skor kesepian 35-43 dalam kategori kesepian rendah. Kelompok intervensi terjadi penurunan skor kesepian (*mean delta* = -3,76; $p=0,000$), sementara kelompok kontrol tidak mengalami perubahan signifikan (*mean delta* = +0,22; $p=0,361$). Perbedaan skor *post-test* antara kedua kelompok juga signifikan ($p=0,000$). Intervensi yang diberikan terbukti mempengaruhi tingkat kesepian. Keberhasilan intervensi ini juga ditunjukkan dengan 10 dari 17 lansia di kelompok eksperimen mengalami penurunan tingkat kesepian menjadi tidak kesepian.

Kesimpulan: Terapi tertawa terbukti dapat menurunkan skor dan tingkat kesepian pada lansia yang tinggal di BPSTW Budi Luhur. Terapi ini dapat menjadi intervensi keperawatan gerontik sederhana dan diimplementasikan sebagai program rutin panti.

Kata kunci: intervensi non-farmakologis, kesepian, lansia, panti werdha, terapi tertawa

ABSTRACT

Background: Indonesia's elderly population is increasing and has entered an ageing population phase, triggering various health issues, including loneliness. Elderly individuals residing in nursing homes, in particular, often experience loneliness. Laughter therapy, as a non-pharmacological intervention, has the potential to address this issue; however, evidence of its effectiveness in Indonesia remains limited.

Objective: This study aimed to analyze the effect of laughter therapy on the loneliness levels of the elderly in a Nursing Home (BPSTW).

Method: This study used a quasi-experimental design with a pre-test and post-test control group. A total of 35 elderly residents at BPSTW Budi Luhur were divided into an intervention group (n=17) and a control group (n=18). The therapy was administered four times over two weeks. The loneliness level was measured using the UCLA Loneliness Scale Version 3 before and after the intervention. Data were analyzed using a paired t-test and effect size calculation.

Result: Participants in the experimental group (10 females, 7 males) and the control group (8 females, 10 males), with a minimum age of 60 years, had a baseline loneliness score range of 35-43, categorized as low loneliness. The intervention group showed a decrease in loneliness scores (mean delta = -3.76; p=0.000), while the control group showed no significant change (mean delta = +0.22; p=0.361). The difference in post-test scores between the two groups was also significant (p=0.000). The analysis showed that the intervention significantly affected loneliness levels. The success of the intervention was further demonstrated by 10 out of 17 elderly in the experimental group experiencing a reduction in their loneliness level to 'not lonely'.

Conclusion: Laughter therapy was proven to reduce the scores and levels of loneliness among the elderly residing at BPSTW Budi Luhur. This therapy can be a simple gerontic nursing intervention and be implemented as a routine nursing home program.

Keywords: non-pharmacological intervention, loneliness, elderly, nursing home, laughter therapy