

ABSTRAK

Latar Belakang: Temuan kejadian kusta, *case detection rate* (CDR) di Kabupaten Cilacap sebanyak 1,6. Hal ini dikarenakan hambatan dalam pengelolaan kusta di lapangan, yaitu belum adanya tim pengelolaan kusta, edukasi kusta yang belum masif terhadap kader kesehatan, serta kurangnya pemberdayaan kader dalam pengelolaan kusta. Sehingga perlu adanya pemberdayaan kader dengan memberikan program edukasi. Cara edukasi bagi kader kesehatan dapat dilakukan dengan metode edukasi *blended learning* (BL) dan *self directed learning* (SDL).

Tujuan: Mengetahui perbandingan pengaruh metode edukasi BL dan SDL terhadap pengetahuan dan sikap kader kesehatan dalam pengelolaan penyakit kusta.

Metode: Penelitian ini menggunakan pendekatan *quasi eksperimental comparative study* pada dua kelompok. Penelitian dilakukan di wilayah kerja Puskesmas Majenang II dan Puskesmas Wanareja I. Populasi dalam penelitian ini adalah seluruh kader kesehatan di kedua wilayah tersebut dengan total sampel 69 orang. Evaluasi pengetahuan dan sikap dilakukan dua kali (*pre-test* dan *pos-test*) dengan menggunakan kuesioner. Analisis statistik yang digunakan adalah analisis univariat dan bivariat yang diolah dengan perangkat lunak SPSS versi 20.

Hasil: Terdapat perbedaan bermakna ($p < 0,001$) pada rerata peningkatan skor pengetahuan kelompok BL dengan kelompok SDL ($6,40 \pm 1,30$ dan $7,68 \pm 1,11$). Terdapat perbedaan bermakna ($p = 0,008$) pada rerata skor sikap kelompok BL dan kelompok SDL ($10,6 \pm 7,42$ dan $15,2 \pm 6,32$). Pengaruh edukasi metode BL dibandingkan dengan metode SDL menunjukkan efek yang kuat ($d = 1,03$) terhadap peningkatan pengetahuan dan efek yang sedang terhadap peningkatan sikap ($d = 0,66$). Peningkatan pengetahuan berhubungan dengan peningkatan sikap kader kesehatan mengenai pengelolaan kusta pada kedua kelompok ($r = 0,463$; $p = 0,00$).

Kesimpulan: Metode edukasi dengan *blended learning* dan *self directed learning* dapat meningkatkan pengetahuan dan sikap kader kesehatan mengenai pengelolaan kusta. Sehingga kedua metode tersebut dapat diaplikasikan dalam edukasi kesehatan bagi kader kesehatan.

Kata Kunci: *blended learning*, *self directed learning*, pengelolaan kusta, pengetahuan, sikap, kader

ABSTRACT

Background: Cilacap Regency as one of the area with new leprosy case detection rate (CDR) 1,6 incidences. This high number is caused by several problems in management of leprosy, such as there is no program for active finding case, there is still a negative attitude towards leprosy patients from the community, the absence of a team for the leprosy management, lack of leprosy education and empowerment for health cadres. To overcome the problems, it required a reachable educational methods for health cadres. Blended learning and self-directed learning are methods that can be used as health education.

Objective: To compare the difference in the effect of blended learning and self-directed learning on the knowledge and attitudes of health cadres in the management of leprosy.

Method: Design of the study was quasi-experimental comparative with two groups. The research conducted in working area of Puskesmas Majenang II and Puskesmas Wanareja I. The population in this study were all health cadres in both areas with 69 total sampling. Evaluation of knowledge and attitudes was carried out twice (pre-test and post-test) using questionnaire. Statistical analysis are univariate and bivariate processed with SPSS version 20.

Result: There was a significant difference ($p < 0.001$) in the mean increase in knowledge scores between the BL group and the SDL group (6.40 ± 1.30 and 5.29 ± 1.11). There was a significant difference ($p = 0.008$) in the mean score for the attitude of the BL group and the SDL group (10.6 ± 7.42 and 15.2 ± 6.32). The effect of BL education method compared to SDL has greater effect on increasing knowledge ($d = 1.03$) and moderate effect on improving attitudes ($d = 0.66$). Both group have correlation on increasing knowledge to improving the attitude of health cadres regarding leprosy management ($r = 0,463$; $p = 0,00$).

Conclusion: The educational method using blended learning and self-directed learning can increase the knowledge and attitudes of health cadres regarding the management of leprosy. So that the two methods can be applied in health education for health cadres.

Keywords: blended learning, self-directed learning, leprosy management, knowledge, attitudes, cadres