

INTISARI

PENGARUH *FAMILY-BASED DIABETES SELF-MANAGEMENT EDUCATION* (DSME) TERHADAP *SELF-MANAGEMENT PASIEN DM TIPE 2* DAN *CAREGIVER SELF-EFFICACY*

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Latar Belakang: Diabetes melitus dapat menyebabkan berbagai komplikasi, sehingga dibutuhkan perawatan berkelanjutan dan edukasi *self-management* pada penderita DM. *Self-management* tidak hanya dalam individu saja, tetapi dalam konteks keluarga, sehingga anggota keluarga yang merawat (*caregiver*) juga perlu memiliki *self-efficacy* dalam mendukung *self-management* pasien. Upaya yang dapat meningkatkan *self-management* dan *self-efficacy* adalah program *Diabetes Self Management Education* (DSME).

Tujuan: Penelitian ini bertujuan untuk mengetahui pengaruh *family-based DSME* terhadap *self-management* pasien DM tipe 2 dan *caregiver self-efficacy*.

Metode: Penelitian ini adalah quasi eksperimen dengan rancangan *non randomized control group pre test - post test design*. Sebanyak 48 pasien DM dan 48 *caregiver* menjadi sampel penelitian yang diambil menggunakan teknik *consecutive sampling*. Kriteria inklusi pasien adalah didiagnosis DM tipe 2, usia ≥ 18 tahun, bersedia menjadi responden dan berdomisili di wilayah kerja Puskesmas Gunungsari atau Penimbung; Kriteria inklusi *caregiver* adalah perawat pasien DM yang utama, usia ≥ 18 tahun, bersedia menjadi responden dan dapat membaca. Alat ukur yang digunakan yaitu kuesioner *The Summary of Diabetes Self-Care Activities: Indonesian version* (SDSCA-I) untuk mengukur *self-management* pasien dan *The Family Self-Efficacy* (FSE) untuk mengukur *caregiver self-efficacy*. Perbedaan data sebelum dengan sesudah intervensi pada setiap kelompok diuji menggunakan uji *Paired t-test*, perbedaan data antar kelompok diuji menggunakan uji *Independent sample t-test* dan korelasi antara variabel diuji menggunakan *Pearson test*.

Hasil: Perbedaan sebelum dengan sesudah intervensi pada kelompok intervensi didapatkan nilai $p=0,001$, $d=0,50$ pada *self-management* dan $p=0,000$, $d=1,71$ pada *self-efficacy*. Perbedaan antara kelompok intervensi dengan kelompok kontrol didapatkan nilai $p=0,020$, $d=0,13$ pada *self-management* dan $p=0,000$, $d=0,35$ pada *self-efficacy*. Korelasi antara *caregiver self-efficacy* dengan *self-management* pasien didapatkan nilai $p=0,000$.

Kesimpulan: Terdapat pengaruh *family based DSME* terhadap peningkatan *self-management* pasien DM tipe 2 dan *caregiver self-efficacy* serta ada korelasi antara *caregiver self-efficacy* dengan *self-management* pasien DM.

Kata kunci: DM tipe 2, *Family based DSME*, *Self-efficacy*, *Self-management*.

ABSTRACT

THE EFFECT OF FAMILY-BASED DIABETES SELF-MANAGEMENT EDUCATION (DSME) ON SELF-MANAGEMENT OF TYPE 2 DM PATIENTS AND CAREGIVER SELF-EFFICACY

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Background: Diabetes mellitus (DM) can cause various complications, hence it requires continuous care and self-management education for patients with DM. Self-management is not only for individuals, but is conducted in a family context. Therefore, families also need to have self-efficacy in supporting self-management for the patients. The Diabetes Self-Management Education (DSME) program is an effort to improve the self-management and self-efficacy.

Purpose: This study aimed to determine the effect of family based DSME on self-management of patients with type 2 DM and caregiver self-efficacy.

Methods: This quasi-experimental study used a non-randomized control group pre-test – post-test design. A total of 48 DM patients and 48 caregiver members were enrolled as the study samples using consecutive sampling technique. The inclusion criteria for patients were: diagnosed with type 2 diabetes mellitus, age > 18 years, willing to be a respondent and domiciled in the working area of the Gunungsari or Penimbung Health Center. Meanwhile, the inclusion criteria for caregiver were: the primary DM patient care providers, age > 18 years, willing to be respondents and able to read. The measuring instruments used were the demographic data questionnaire, The Summary of Diabetes Self-Care Activities: Indonesian version (SDSCA-I) questionnaire to measure patient self-management and the Family Self-Efficacy (FSE) questionnaire to measure caregiver self-efficacy. The difference in data before and after the intervention in each group was tested using Paired t-tests, while data differences between groups were tested using the Independent sample t-tests and correlation between variables using the Pearson test.

Results: The difference before and after the intervention in the intervention group based on the paired *t*-test showed *p* value = 0.001, *d* = 0.50 for self-management and *p* = 0.000, *d* = 1.71 for self-efficacy. The difference between the intervention group and the control group based on the Independent sample *t*-test obtained *p* value = 0.020, *d* = 0.76 for self-management and *p* = 0.000, *d* = 1.88 for self-efficacy.

Conclusion: There is a beneficial effect of family-based DSME on improving self-management of patients with type 2 DM and caregiver self-efficacy.

Keywords: DM type 2, Family based DSME, Self-efficacy, Self-management