

## INTISARI

**Latar Belakang:** Skizofrenia menyebabkan kerusakan fungsi normal dan sosial penderitanya dan membuat penderitanya kesulitan menunjukkan respon koping terhadap masalah yang dihadapi. Perawat sebagai tenaga kesehatan profesional berperan dalam memberikan asuhan keperawatan untuk menangani dampak tersebut. Diagnosis keperawatan sebagai salah satu komponen asuhan keperawatan terdiri dari batasan karakteristik yang merupakan penentu keakuratan diagnosis keperawatan yang ditegakkan. Terkait dengan hal tersebut, perawat perlu mengidentifikasi batasan karakteristik diagnosis keperawatan Ketidakefektifan Koping pada penderita skizofrenia agar asuhan keperawatan yang diberikan sesuai dengan masalah penderita.

**Tujuan:** Mengetahui gambaran batasan karakteristik diagnosis keperawatan NANDA-I: Ketidakefektifan Koping pada penderita skizofrenia di wilayah kerja Puskesmas Jetis 2 Bantul

**Metode:** Penelitian ini adalah penelitian survei deskriptif pada 39 orang. Pemilihan responden menggunakan teknik *purposive sampling*. Pengumpulan data dilakukan dengan mewawancarai responden menggunakan panduan pengkajian. Analisis penelitian menggunakan analisis deskriptif.

**Hasil:** Terdapat 28 dari 39 responden yang memiliki batasan karakteristik diagnosis keperawatan Ketidakefektifan Koping dengan rincian: Kurang akses dukungan sosial sebanyak 14 orang (50%), Keletihan 12 orang (42,86%), Kurang perilaku berfokus pada pencapaian tujuan 10 orang (35,71%), Perubahan pola tidur, Ketidakmampuan memenuhi harapan peran, Kurang resolusi masalah, Kurang kemampuan menyelesaikan masalah 9 orang (32,14%), Kesulitan mengorganisasi informasi, Ketidakmampuan memperhatikan informasi, Sering sakit 8 orang (28,57%), Ketidakmampuan meminta bantuan 7 orang (25%), Perubahan konsentrasi, Perubahan pola komunikasi, Perilaku destruktif terhadap diri sendiri 6 orang (21,43%), Ketidakmampuan memenuhi kebutuhan dasar, Perilaku *risk-taking* 5 orang (17,86%), Penyalahgunaan zat, Ketidakefektifan strategi koping, Ketidakmampuan menghadapi situasi 4 orang (14,29%) dan Perilaku destruktif terhadap orang lain tidak dimiliki sama sekali (0%).

**Kesimpulan:** Kurang akses dukungan sosial merupakan batasan karakteristik yang paling banyak pada responden dan yang paling sedikit yaitu Perilaku destruktif terhadap orang lain.

**Kata Kunci:** batasan karakteristik ketidakefektifan koping, diagnosis keperawatan NANDA-I, skizofrenia

## ABSTRACT

**Background:** Schizophrenia causes damage to normal and social function of patients and make sufferers have difficulty showing a coping responses to their encountered problems. Nurses as health professionals play a role in providing nursing care to deal with these impacts. The nursing diagnosis as one of the components of nursing care consists of the defining characteristics which is the determinant of the accuracy of the established nursing diagnosis. Related to that, nurses need to identify the defining characteristics of nursing diagnosis Ineffective Coping in schizophrenia patients so the nursing care which are given is appropriate with patient problems.

**Objective:** Knowing an overview defining characteristics of nursing diagnoses NANDA-I: Ineffective coping in patients with schizophrenia in Primary Health Care Jetis 2 Bantul

**Method:** This research is a descriptive survey in 39 people. Respondent selection using purposive sampling technique. Data collection was done by interviewing respondents using assessment guide. This research using a descriptive analysis.

**Result:** Only 28 of the 39 respondents who have defining characteristics of nursing diagnosis Ineffective Coping with details: Insufficient access of social support is 14 people (50%), fatigue is 12 people (42,86%), insufficient goal-directed behavior is 10 people (35,71%), alteration in sleep pattern, inability to meet role expectation, insufficient problem resolution, insufficient problem-solving skill is 9 people (32,14%), difficulty organizing information, inability to attend to information, frequent illness is 8 people (28,57%), inability to ask help is 7 people (25%), change in communication pattern, alteration in concentration, destructive behavior toward self is 6 people (21,43%), risk-taking behavior, inability to meet basic needs is 5 people (17,86%), substance abuse, inability to deal with a situation, ineffective coping strategies is 4 people (14,29%), and destructive behavior toward other is not owned at all (0%).

**Conclusion:** Insufficient access of social support is the most frequent and Destructive behaviour toward other is the most infrequent defining characteristic in people with schizophrenia

**Keyword:** defining charactersitic ineffective coping, nursing diagnosis NANDA-I, schizophrenia