

EXECUTIVE SUMMARY**THE EFFECT OF PSYCHOEDUCATION ON KNOWLEDGE, INTENTION, AND SICK ROLE BEHAVIOUR IN PATIENT WITH CATARACT BASED ON AJZEN'S THEORY OF PLANNED BEHAVIOUR****By: Siswoyo**

Cataracts, according to WHO, is the main cause of blindness in the world. One possible cause is due to the lack of community awareness about the importance of eyes health. The wrong belief and stigma of community make the number of cataract is more difficult to be descended. People have more confidence in irrational alternative treatment rather than medical treatment. The beliefs that cataracts can be treated with eye drops or with a particular prayer/spell is still adhere strongly in community. Moreover, hearing the term of cataract surgery causes patient feel anxious and scared. In fact, cataract surgery is not as scary as one might imagine and cataract can only be cured with surgery. These wrong beliefs must be corrected. The behaviour of patient with cataract in order to seek cataract treatment is known as the sick role behaviour for patients with cataracts. Psychoeducation in this study was carried out to improve sick role behaviours in patients with cataract based on Ajzen's Theory of Planned Behaviour (TPB). The main purpose of this study was to identify the effect of psychoeducation on sick role behaviours in cataract patients based on Ajzen's theory of planned behaviour.

This research used quasi experiment pre and post test control group design. The population in this study was all patients with cataract in the area of Kencong Health Center, Kencong village, Jember. The sampling technique used simple random sampling and obtained 10 subjects in treatment group and 10 subjects in control group. Independent variable was psychoeducation and dependent variable were knowledge, intention, and sick role behaviour of patient with cataract in response to indications of cataract, sick role behaviour in monitoring internal conditions due to cataract, sick role behaviour in taking corrective action and utilizes various sources of medical care, and sick role behaviour in patients with cataracts. Data were analyzed using a computer software.

The results of this study showed that: 1) there was significant influence of psychoeducation on knowledge of patients with cataract, 2) there was significant influence of psychoeducation on intention of patients with cataract, 3) there was significant influence of psychoeducation on sick role behaviour of patient with cataract in response to indications of cataracts, 4) there was significant influence of psychoeducation on sick role behaviour of patient with cataract in monitoring internal conditions due to cataract, 5) there was significant influence of psychoeducation on sick role behaviour of patient with cataract in taking corrective action and utilize various sources of medical care, and 6) There was significant influence of psychoeducation on sick role behaviour in patients with cataracts.

Psychoeducation which was conducted in this study is the answer to the problem of patients that were excavated in the early session of psychoeducation activities. Then, a very informative booklet was created by using simple language that could be understood easily. At the end of the session psychoeducation activities, researcher invited patients who had never carried out cataract surgery with the expectation that the respondents could obtained information as much as possible and could be able to change the wrong stigma about cataract surgery. The delivery of psychoeducation filled with discussions was expected to increase the knowledge of patient with cataract thereby it could increase the intention to run the expected sick role behaviour in patients with cataracts.

The recommendation that can be submitted in accordance with the results of this study are: 1) the results of this study can be continued as a form of intervention in the management of the sick role behaviour in patients with cataracts. 2) knowledge of nurses needs to be improved through education and training to be able to improve the knowledge and skills of nurses in caring for patients with cataracts, and 3) more research needs to be done to indicate the psychological impact of cataract treatment for patients and their families to develop the other interventions.