

ABSTRACT

THE APPLICATION OF HEALTH ACTION PROCESS APPROACH ON BEHAVIOR OF TYPE 2 DIABETES MELLITUS CONTROL AT THE HAJI GENERAL HOSPITAL IN SURABAYA

There is an increasing trend in the number of visits and the diagnosis of type 2 diabetes mellitus without complications at the age of 40-59 years in the Internal Medicine Poly Outpatient Installation Hajj Hospital Surabaya during the period 2015-2018. This increase is one indicator that the handling and control of Diabetes mellitus is not optimal in the community. A concept is needed that can motivate individuals to apply the type 2 diabetes mellitus control behavior. This study aims to analyze the factors that influence the control behavior of type 2 diabetes mellitus based on the concept of Health Action Process Approach (HAPA).

A total of 120 respondents were uncomplicated type 2 diabetes mellitus patients who came to the Internal Medicine Poly Surabaya Hajj Hospital. This type of research is a cross sectional design. Primary data includes knowledge, risk perception, outcome expectancies, action self-efficacy, behavioral intention, planning, maintenance-self efficacy, recovery self-efficacy, and actions collected through a self-administered questionnaire. Analysis of influences between variables with Path Analysis with AMOS software.

The results showed that in the motivational phase, knowledge of type 2 diabetes mellitus did not significantly influence risk perception ($p = 0.163$), and risk perception did not significantly influence behavioral intention ($p = 0.35$). The outcome expectancies ($p < 0.001$) and action self-efficacy ($p < 0.001$) significantly influence behavioral intention. In the volitional phase, behavioral intention ($p < 0.001$) and maintenance self-efficacy ($p < 0.001$) significantly influence planning. Only recovery self-efficacy ($p = 0.03$) had an effect on the control behavior of type 2 diabetes mellitus. Maintenance self-efficacy and planning did not affect the control behavior of type 2 diabetes mellitus.

The conclusion of this study is that the Surabaya Haji General Hospital needs to provide communication, information and education about the benefits of the type 2 diabetes mellitus control measures that are carried out in synergy between the hospital health promoter (PKRS) and diabetes mellitus health educator, as well as nutritionists. Promotional efforts in the form of diabetes gymnastics, an educational program in the form of homecare to motivate patients and families of patients at home. Training on skills in controlling type 2 diabetes mellitus for patients who have succeeded in controlling their disease as educators and peer-support for other patients in the "PANDU" program to increase individual self-confidence (action self efficacy) and hope for positive results (outcome self efficacy) in making efforts to control type 2 diabetes mellitus.

Keywords: Behavior, Control, Type 2 Diabetes Mellitus, HAPA

ABSTRAK

APLIKASI HEALTH ACTION PROCESS APPROACH PADA PERILAKU PENGENDALIAN DIABETES MELITUS TIPE 2 DI RUMAH SAKIT UMUM HAJI SURABAYA

Terdapat tren kenaikan jumlah kunjungan dan diagnosa penderita Diabetes melitus tipe 2 tanpa komplikasi pada usia 40-59 tahun di Poli Penyakit Dalam Instalasi Rawat Jalan RSU Haji Surabaya selama kurun waktu 2015-2018. Peningkatan tersebut menjadi salah satu indikator bahwa penanganan dan pengendalian Diabetes melitus belum optimal di masyarakat. Diperlukan suatu konsep yang dapat memotivasi individu dalam menerapkan perilaku pengendalian Diabetes melitus tipe 2. Penelitian ini bertujuan untuk menganalisis faktor yang mempengaruhi perilaku pengendalian Diabetes melitus tipe 2 berbasis konsep Health Action Process Approach (HAPA).

Sebanyak 120 responden merupakan pasien Diabetes melitus tipe 2 tanpa komplikasi yang datang ke Poli Penyakit Dalam RSU Haji Surabaya. Jenis penelitian dengan desain *cross sectional*. Data primer meliputi pengetahuan, *risk perception*, *outcome expectancies*, *action self-efficacy*, *behavioral intention*, *planning*, *maintenance-self efficacy*, *recovery self-efficacy*, dan *action* yang dikumpulkan melalui *self-administered questionnaire*. Analisis pengaruh antar variabel dengan analisis jalur (*Path Analysis*) dengan software AMOS.

Hasil penelitian menunjukkan pada fase motivasional, pengetahuan tentang Diabetes melitus tipe 2 tidak berpengaruh secara signifikan terhadap *risk perception* ($p=0,163$), dan *risk perception* tidak berpengaruh secara signifikan terhadap *behavioral intention* ($p=0,35$). *Outcome expectancies* ($p<0,001$) dan *action self-efficacy* ($p<0,001$) berpengaruh secara signifikan terhadap *behavioral intention*. Pada fase volitional, *behavioral intention* ($p<0,001$) dan *maintenance self-efficacy* ($p<0,001$) berpengaruh secara signifikan terhadap *planning*. Hanya *recovery self-efficacy* ($p=0,03$) yang berpengaruh terhadap perilaku pengendalian Diabetes melitus tipe 2. *Maintenance self-efficacy* dan *planning* tidak mempengaruhi perilaku pengendalian Diabetes melitus tipe 2.

Kesimpulan penelitian ini adalah Rumah Sakit Umum Haji Surabaya perlu memberikan komunikasi, informasi dan edukasi tentang manfaat dari tindakan pengendalian Diabetes melitus tipe 2 yang dilakukan secara sinergi antara promotor kesehatan RS (PKRS) dan *health educator* diabetes melitus, serta nutrisisionis. Digalakkannya upaya promotif berupa senam diabetes, program edukasi dalam bentuk *homecare* untuk memotivasi pasien dan keluarga pasien di rumah. Pelatihan mengenai keterampilan melakukan tindakan pengendalian Diabetes melitus tipe 2 terhadap pasien yang sudah berhasil dalam mengendalikan penyakitnya sebagai edukator dan *peer-support* (dukungan sebaya) bagi pasien lainnya dalam program “PANDU” untuk meningkatkan keyakinan individu (*action self efficacy*) dan harapan hasil yang positif (*outcome self efficacy*) dalam melakukan upaya pengendalian Diabetes melitus tipe 2.

Kata Kunci : Perilaku, Pengendalian, Diabetes melitus tipe 2, HAPA