

**EFEKTIVITAS MODEL INTERVENSI
DIABETES DISTRESS MANAGEMENT “ASSESS” BERBASIS TELEHEALTH
TERHADAP KUALITAS HIDUP PENDERITA DIABETES MELITUS Tipe 2**
Kajian pada parameter JCS, DDS-17 dan SDSCA pada penderita DM Tipe 2

ABSTRAK

Latar Belakang: Upaya mempertahankan kualitas hidup penderita DM tipe 2 agar selalu optimal selama perawatan medis sangat dipengaruhi oleh aspek psikologis yang sangat rentan mengalami *diabetes distress*, karena ketidakmampuan beradaptasi terhadap penyakitnya. Untuk mencapai kualitas hidup penderita DM Tipe 2 yang optimal, diperlukan kerjasama pelayanan terpadu antara perawat dan penderita DM Tipe 2. Edukasi yang terus menerus sangat diperlukan melalui pengembangan metode edukasi konvensional berbasis *telehealth* untuk mengendalikan disfungsi metabolismik sehingga komplikasi kronik tidak terjadi.

Tujuan: Membuktikan intervensi *DDM* “ASSESS” berbasis *telehealth* lebih efektif meningkatkan kualitas hidup dibandingkan *DSME* pada penderita DM tipe 2.

Metode: Desain penelitian *mixed method* terdiri dari 3 tahap yaitu, tahap pertama studi kualitatif, tahap kedua merupakan studi pengembangan *DDM* berbasis *telehealth*. Penelitian tahap tiga adalah studi *quasi-experimental* dengan *pre test and post test with control group design* untuk menguji efektivitas *DDM* “ASSESS” berbasis *telehealth* terhadap kualitas hidup pada penderita DM tipe 2 di 6 Puskesmas Kabupaten Semarang dengan jumlah responden 70 partisipan.

Hasil: Hasil Tahap I, ditemukan 4 tema antara lain: 1) pemahaman tentang DM, 2) respons setelah didiagnosis menderita DM dikaitkan dengan sumber *diabetes distress*, 3) upaya untuk mengatasi hambatan dikaitkan dengan *coping skill*; serta 4) harapan penderita DM dikaitkan dengan sumber coping. Hasil tahap II ditemukan strategi pengembangan *DDM* berbasis *telehealth* terdiri dari “ASSESS” yang merupakan akronim dari *AWARENESS* (SADARI), SELIDIKI, SANJUNG, SELEKSI, SOKONG dan SANDING. Hasil tahap III diperoleh hasil bahwa skor *JCS* kelompok intervensi lebih tinggi dibandingkan dengan kelompok kontrol. (29 vs 16 ($p<0,05$)). Nilai *DDS-17* kelompok intervensi mengalami penurunan skor *diabetes distress* lebih tinggi dibandingkan dengan kelompok intervensi, (-22,31 vs -14,42 ($p<0,001$)). Nilai skor *SDSCA* pada kelompok intervensi mengalami peningkatan skor *SDSCA* lebih tinggi dibandingkan dengan kelompok intervensi dengan perbedaan rerata skor masing masing 36,86 vs 2,26 ($p<0,05$).

Simpulan: Intervensi *DDM* “ASSESS” berbasis *telehealth* terbukti a) meningkatkan skor mekanisme coping (*JCS*), b) menurunkan skor *diabetes distress* (*DDS-17*), c) meningkatkan skor *diabetes self-care activities* (*SDSCA*) dibandingkan intervensi *DSME* pada penderita DM tipe 2.

Kata Kunci: *DDM, Telehealth, Diabetes Distress, Mekanisme Koping, Diabetes Self-Care Activities*

EFFECTIVENESS OF "ASSESS" DIABETES DISTRESS MANAGEMENT BASED ON TELEHEALTH INTERVENTION MODEL ON QUALITY OF LIFE TYPE II DIABETES MELLITUS PATIENTS

Study of JCS, DDS-17 and SDSCA parameters in Type II DM patients

ABSTRACT

Background: Efforts to maintain optimal quality of life for type 2 DM (T2DM) patients during medical treatment are greatly influenced by psychological aspects. To achieve optimal quality of life for T2DM patients, integrated collaboration between nurses and T2DM patients was needed. Education models was needed to control metabolic dysfunction to prevent chronic complications. DM patients were very vulnerable to experiencing diabetes distress due to their inability to adapt to their disease. Based on this idea, an effective educational assistance method was needed to maintain T2DM patient compliance with the service program. Conventional education methods need to be developed with new methods based on telehealth.

Objective: To prove that the intervention "ASSESS" DDM based on telehealth was more effective in improving quality of life than DSME in T2DM patients.

Method: The mixed method research design consists of 3 stages, namely, the first stage is a qualitative study, the second stage is a telehealth-based DDM development study. Meanwhile, stage three is a quasi-experimental study with pre test and post test with control group design to test the effectiveness of "ASSESS" DDM intervention based on telehealth of quality of life in T2DM patients in 6 Semarang District Health Centers with a total of 70 participants as respondents.

Results: Phase I results, 4 themes were found, including: 1) understanding about DM, 2) responses associated with sources of diabetes distress, 3) efforts to overcome obstacles associated with coping skills; and 4) DM patient expectations regarding coping resources. The results of phase II found that the development of intervention DDM based telehealth consisted of "ASSESS", namely AWARENESS (SADARI), SELIDIKI (INVESTIGATE), SANJUNG (PRAISE), SELEKSI (SELECTION), SOKONG (SUPPORT) and SANDING (COMPANION). The results of phase III showed that the JCS score of the intervention group was higher compared to the control group. (29 vs 16 ($p<0.05$). Meanwhile, the DDS-17 score for the intervention group experienced a higher reduction in diabetes distress scores compared to the intervention group, (- 22.31 vs -14.42 ($p<0.001$)). SDSCA score The intervention group experienced a higher increase in SDSCA scores compared to the intervention group with a difference in mean scores of 36.86 vs 2.26 respectively ($p<0.05$).

Conclusion: The "ASSESS" DDM intervention based on telehealth was proven to a). increase coping mechanism scores (JCS), b). reduce diabetes distress scores (DDS-17), c). increase diabetes self-care activities (SDSCA) scores compared to DSME interventions in T2DM patients

Keywords: DDM, Telehealth, Diabetes Distress, Coping Mechanisms, diabetes self-care activities