

THE EFFECT OF HEALTH EDUCATION IN HOMECARE SERVICES ON THE INDEPENDENCE OF DAILY ACTIVITIES OF MIDDLE STROKE PATIENTS IN KEC. KOLANG 2021

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ABSTRACT

Health education is one form of nursing intervention that can be carried out in nursing services. Home care is a form of nursing service in the community.. This study aims to determine the effect of health education in the implementation of home care on the independence of daily activities for patients with mild stroke in Kec.Kolang. The research design used in this study was a pre-experimental method with one group pretest-posttest design, namely research using one group of subjects, measurements were carried out before and after giving treatment to the subject with a sample of 10 people. The daily activity independence score after health education showed an increasing trend. Respondents belonging to the independent category experienced an increase from 3 people (30%) at the pre-test to 8 people (80%) at the post-test with the strength of the influence $p=0.016$. Respondents belonging to the "know" category experienced an increase from 6 people (60%) in the pre-test to 9 people (90%), from the test statistical test results showed that there was an effect of health education on the independence of daily activities where the strength of the effect was obtained with a value of $p=0.004$, Attitude (affective) independence score of Daily Activities after health education showed an increasing trend. Respondents who were included in the "responding" category experienced an increase from 3 people (30%) in the pre-test to 8 people (80%) from the results of statistical tests that showed an influence on attitudes (affective) in terms of daily activities of mild stroke sufferers in Indonesia. Where the strength of the influence is obtained with a value of $p=0.010$. Respondents belonging to the "doing" category experienced an increase from 2 people (20%) in the pre-test to 6 people (60%), from the results of the test statistic that there was a positive influence on actions/practices (psychomotor) in terms of daily activities. Researchers suggest that health education be carried out to increase the independence of daily activities of stroke sufferers.

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1. Introduction

Health education is one form of nursing intervention that can be carried out in nursing services. Home care is a form of nursing service in the community. Home care aims to improve, maintain, restore health/maximize independence and minimize disability due to disease/stroke. This study aims to determine the effect of health education in the implementation of home care on the independence of daily activities for patients with mild stroke in Kec.Kolang.

The research design used in this study was a pre-experimental method with one group pretest-posttest design, namely research using one group of subjects, measurements were carried out before and after giving treatment to the subject with a sample of 10 people. This research uses non-probability sampling with purposive sampling method.

The daily activity independence score after health education showed an increasing trend. Respondents belonging to the independent category experienced an increase from 3 people (30%) at the pre-test to 8 people (80%) at the post-test with the strength of the influence $p=0.016$. Respondents belonging to the "know" category experienced an increase from 6 people (60%) in the pre-test to 9 people (90%), from the test statistical test results showed that there was an effect of health education on the independence of daily activities where the strength of the effect was obtained with a value of $p=0.004$, Attitude (affective) independence score of Daily Activities after health education showed an increasing trend.

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Researchers can conclude that there are differences in the independence of daily activities of stroke patients before and after providing health education in the implementation of home care. Health education in the implementation of home care has a positive effect on the independence of daily activities for patients with mild stroke in Kolang District, Kolang Regency.

Researchers suggest that health education be carried out to increase the independence of daily activities of stroke sufferers. In Indonesia, stroke is the third deadliest disease after heart and cancer. In fact, according to a 2004 survey, stroke is the number 1 killer in government hospitals throughout Indonesia. It is estimated that there 500,000 people who have a stroke. Of these, one third can recover, another third have mild to moderate functional impairment and the remaining third have severe functional disorders that require the patient to be constantly in bed, the main impact of a stroke is loss of independence that occurs in 30% of people. safe. (Nur Irfan.2008:5-6).

In 2007, data collection from 28 hospitals in Indonesia found that the average age of stroke patients was 58.8 years, 38.8% of them were 65 years old and 12.9% occurred at a young or productive age, namely under the age of 18. 45 years. The number of stroke sufferers tends to increase every year, not only affects the elderly population, but also experienced by those who are young and productive. Currently, Indonesia is listed as a country with the largest number of stroke sufferers in Asia. Economically, the incidence of stroke has a negative impact due to disability because stroke will have an impact on decreasing productivity and economic capacity of the community and nation. (Yuliana M and Imelda W.2010:2)

The results of research by Rini and Alin (2008) on post-stroke patients stated that they needed a home care service program carried out by a home care agency because the family was unable to carry out post-stroke care and rehabilitation independently at home as well as due to limited time. As for Megawati's research (2004) on patients who are following home care at the hospital, they agree that there is home care at a lower cost (Akhmadi. 2009:3) From the description above, the researcher is interested in conducting research with the title The effect of health education in the implementation of home care on the independence of daily activities for patients with mild stroke in Kec.Kolang.

2. Research Methods

2.1 Research Type and Design

The research design used in this study was a pre-experimental method with a pretest-posttest design in patients with mild stroke, namely this study was carried out by giving a pretest (initial observation) before being given an intervention. After this intervention was given then a posttest was carried out. The difference between the two measurement results is considered as a treatment effect. (Saryono. 2008: 74).

2.2 Population And Sampel

The sample used in this study was part of the population or respondents who suffered from mild stroke in the Marioriaawa District, Soppeng Regency. This study involved 10 respondents.

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2.3 Analysis Techniques

The sampling technique used is purposive sampling technique by applying inclusion and exclusion criteria. The research instrument used a questionnaire.

3. Result And Discussion

The results of the observations showed that the score of independence in daily activities after health education showed an increasing trend. Respondents belonging to the independent category experienced an increase from 3 people (30%) in the pre-test to 8 people (80%). From the results of statistical tests, it shows that there is an effect of health education on independence in daily activities, where the strength of the effect is obtained with a value of $p = 0.016$.

In the results of observational research, independence of daily activities can be increased by introducing mild stroke sufferers about their condition, regarding knowledge of their condition and abilities through health education which then takes them into consideration in carrying out their daily activities.

This shows that the independence of daily activities increases after the health education. This is in accordance with the opinion. Notoatmojo (2003) which states that health education can influence and or invite other people, both individuals, groups and communities to carry out healthy behavior. Operationally, it is an activity to provide knowledge, attitudes and practices of the community in maintaining and improving their own health. Health education can act as a disability limitation, because of the lack of public understanding and awareness about health and disease, people often do not continue their treatment to completion.

From the results of health education for stroke patients with the aim of increasing independence in their daily activities, the researchers found 2 respondents whose achievement of the level of independence in their daily activities was not perfect. This is because the disease process reduces the level of memory and communication skills.

This agrees with Harsono (2000) which states that stroke can cause damage to the part of the brain responsible for memory, learning, and awareness as well as reduce the ability to make plans, understand meaning, learn new tasks, or engage in complex mental activities. And according to Paisal (2008) which states at least one in four stroke patients has a language disorder, involving the ability to speak, write, and understand spoken and spoken language.written. This is due to injury to the brain's language-control center (Broca's area) which can interfere with oral communication.

4. Conclusion

There is an effect on the independence of daily activities of patients with mild stroke before and after the provision of health education in home care services in Kec.Kolang.

The independence of daily activities of patients with mild stroke increased after health education in home care services in Kolang District, Kolang Regency.

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