

INTISARI

Salah satu peran kader kesehatan adalah mendampingi masyarakat yang menderita penyakit kusta di Kecamatan Tombariri. Akan tetapi pengetahuan sikap dan tindakannya terkait penyakit tersebut masih kurang memadai. Oleh sebab itu penelitian ini ditujukan untuk meningkatkan pengetahuan, sikap dan tindakan kader kesehatan terkait penyakit kusta. Jenis penelitian kuasi-eksperimental dengan rancangan *time series pretest–Post-Test with control group*. Jumlah responden 70 orang yang dibagi menjadi kelompok intervensi dan kelompok kontrol, dengan teknik *purposive sampling*. Kriteria inklusi meliputi kader kesehatan yang bekerjasama dengan puskesmas, berusia 20–60 tahun, mampu membaca dan menulis, bersedia mengikuti seluruh rangkaian penelitian. Kriteria eksklusi adalah kader yang pernah mengikuti edukasi kusta sebelumnya. Materi berupa booklet dan alat peraga obat. CBIA dilakukan dengan membagi peserta menjadi kelompok kecil yang didampingi fasilitator. Peserta membaca dan mempelajari booklet kusta, mendiskusikan permasalahan, kegiatan diakhiri dengan rangkuman untuk meningkatkan pemahaman responden. Pengukuran dilakukan pada *Pre-Test*, *Post-Test I* (segera sesudah intervensi), *Post-Test II* (1 bulan setelah *Post-Test I*), dan *Post-Test III* (2 bulan setelah *Post-Test II*). Analisis data menggunakan uji *Mann Whitney U* dan *Wilcoxon Signed Rank Test*. Hasil penelitian menunjukkan bahwa pada kelompok intervensi terjadi peningkatan nilai rata-rata aspek pengetahuan, yaitu dari 7,56 menjadi 8,24 meningkat 8,99% perbedaan signifikan antara *Pre-Test* dan *Post-Test I* ($p=0,001$), *Post-Test II* ($p=0,017$), *Post-Test III* ($p=0,000$), pada aspek sikap dari 31,47 menjadi 33,53 meningkat 6,55% perbedaan signifikan antara *Pre-Test* dan *Post-Test I* ($p=0,000$), *Post-Test II* ($p=0,000$), dan *Post-Test III* ($p=0,001$), pada aspek tindakan dari 31,01 menjadi 32,61 meningkat 5,16% perbedaan signifikan antara *Pre-Test* dan *Post-Test I* ($p=0,000$), *Post-Test II* ($p=0,000$), dan *Post-Test III* ($p=0,057$). Sebaliknya, kelompok kontrol tidak terjadi peningkatan yang konsisten pada ketiga aspek tersebut. Hasil perbandingan sebelum dan sesudah intervensi terdapat perbedaan signifikan pada seluruh aspek ($p<0,05$). Dari hasil analisis dapat disimpulkan bahwa Pengetahuan, Sikap dan Tindakan Kader Kesehatan terkait penyakit Kusta dapat meningkat dengan metode CBIA.

Kata Kunci : Kusta, Kader Kesehatan, CBIA

ABSTRACT

One of the roles of community health volunteers is to assist people affected by leprosy in Tombariri District. However, their knowledge, attitudes, and practices regarding the disease remain inadequate. Therefore, this study aimed to improve the knowledge, attitudes, and practices of community health volunteers related to leprosy. This study employed a quasi-experimental design using a time-series pretest–posttest with control group approach. A total of 70 respondents were recruited and divided into intervention and control groups using purposive sampling. The inclusion criteria were community health volunteers who collaborated with primary health care centers, were aged 20–60 years, were able to read and write, and were willing to participate in the entire study. The exclusion criterion was previous participation in leprosy education programs. The educational materials consisted of a booklet and drug demonstration aids. The Community-Based Interactive Approach (CBIA) was implemented by dividing participants into small groups facilitated by trained facilitators. Participants read and studied the leprosy booklet, discussed related issues, and concluded the session with a summary to enhance their understanding. Measurements were conducted at Pre-Test, Post-Test I (immediately after the intervention), Post-Test II (one month after Post-Test I), and Post-Test III (two months after Post-Test II). Data were analyzed using the Mann–Whitney U test and the Wilcoxon Signed-Rank Test. The results showed that in the intervention group, the mean knowledge score increased from 7.56 to 8.24 (8.99% increase), with significant differences between Pre-Test and Post-Test I ($p=0.001$), Post-Test II ($p=0.017$), and Post-Test III ($p=0.000$). The mean attitude score increased from 31.47 to 33.53 (6.55% increase), with significant differences between Pre-Test and Post-Test I ($p=0.000$), Post-Test II ($p=0.000$), and Post-Test III ($p=0.001$). The mean practice score increased from 31.01 to 32.61 (5.16% increase), with significant differences between Pre-Test and Post-Test I ($p=0.000$), Post-Test II ($p=0.000$), and Post-Test III ($p=0.057$). In contrast, the control group did not show a consistent improvement in all three aspects. Comparison of scores before and after the intervention demonstrated significant differences in all aspects ($p<0.05$).

Based on the results, it can be concluded that the CBIA method is effective in improving the knowledge, attitudes, and practices of community health volunteers regarding leprosy.

Keywords: Leprosy, Community Health Volunteers, CBIA