PENGEMBANGAN MODEL RESILIENSI SEBAGAI UPAYA
MENINGKATKAN KETANGGUHAN PERAWAT
DI RUMAH SAKIT SUMATERA BARAT

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ABSTRAK

**PENGEMBANGAN MODEL RESILIENSI SEBAGAI UPAYA
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Banyak ditemukan kesulitan perawat dalam beradaptasi dengan proses dinamis dari sistem layanan yang dihadapinya. Hal ini diakibatkan hambatan personal seperti rendahnya tingkat resiliensi perawat. Resiliensi bertujuan untuk melindungi perawat terhadap stres terkait pekerjaan serta merupakan komponen penting untuk kesehatan mental, fisik dan kesejahteraan perawat. Penelitian ini dilakukan di empat rumah sakit di Sumatera Barat dan sebelumnya telah lolos kaji etik dengan Nomor: I.B.02.02/5.7/483/2021. Tujuan dari penelitian ini adalah mengembangkan model resiliensi sebagai upaya meningkatkan ketangguhan perawat di Rumah Sakit Sumatera Barat.

Pengembangan model resiliensi perawat dengan menggunakan pendekatan metode ADDIE (*Analysis, Design, Development, Implementation, Evaluation*). Pada tahap a*nalysis,* penelitian dilakukan secara *mix-methods*, dengan desain penelitian *eksplanatori sekuensial*. Pada penelitian kualitatif dilakukan wawancara mendalam dengan jumlah partisipan sebanyak 23 perawat sedangkan pada penelitian kuantitatif jumlah sampel sebanyak 221 perawat. Pengumpulan data kuantitatif menggunakan kuesioner. Pada tahap *design,* menyusun *blue print* model resiliensi perawat. Tahap d*evelopment*, adalah mengembangkan model resiliensi perawat. Tahap i*mplementation,* yaitu mengimplementasikan model resiliensi yang sudah dikembangkan dengan pendekatan penelitian *quasi eksperimen dengan pre and post test control group design*. Jumlah sampel 60 perawat, 30 perawat di kelompok intervensi dan 30 perawat di kelompok kontrol. Analisa bivariat pada tahap implementasi menggunakan uji *Independent t-test* untuk menjelaskan perbedaan antara kelompok intervensi dengan kelompok kontrol setelah pelatihan. Pada tahap *evaluation* melakukan evalusi pada semua tahapan untuk mengetahui kekurangan pada setiap tahapan dan langsung melakukan perbaikan.

Hasil penelitian tersusunnya model resiliensi yang diwujudkan dalam modul pelatihan peningkatan resiliensi perawat: pencegahan distres psikologis dan b*urnout* di tempat kerja. Hasil analisa data pada tahap implementasi menunjukkan peningkatan resiliensi perawat beserta dimensi resiliensi yaitu: kompetensi personal, keyakinan terhadap insting, penerimaan positif, kontrol diri, dan spiritualitas pada kelompok intervensi setelah diberikan perlakuan berupa pelatihan dengan $p < 0,05$. Hasil *eta squared* didapatkan nilai 0,56, yang artinya perlakuan memiliki efek yang besar terhadap resiliensi atau ketangguhan perawat pada kelompok intervensi dibandingkan kelompok kontrol. Diharapkan pada layanan kesehatan terutama di rumah sakit pelatihan dan pengembangan model resiliensi perlu diagendakan agar dapat meningkatkan profesionalisme perawat dalam mengelola tantangan, permasalahan dan solusi di lingkungan kerja serta dalam pemberian asuhan terhadap klien.

Kata Kunci: *Burnout*, Distres Psikologis, Resiliensi, Spiritualitas.

ABSTRACT

DEVELOPMENT OF RESILIENCE MODEL AS AN EFFORT TO INCREASE NURSE RESILIENCE IN WEST SUMATERA HOSPITAL

Many nurses find difficulties in adapting to the dynamic process of the service system they experience. This is due to personal barriers such as the low level of nurse resilience. Resilience aims to protect nurses against work-related stress, and is an important component for the mental and physical well-being of nurses. This research was conducted in four hospitals in West Sumatra and has since passed the ethical review which numbered: I.B.02.02/5.7/483/2021. The purpose of this study is to develop a model of resilience as an effort to increase the resilience of nurses at the West Sumatra Hospital.

The development of nurses resilience model used the ADDIE method approach (Analysis, Design, Development, Implementation, Evaluation). At the analysis stage, the research was carried out in a mix-methods manner, with a sequential explanatory research design. In qualitative research, in-depth interviews were conducted with 23 nurses as participants, while in quantitative research 221 nurses were used as samples. Quantitative data was collected using questionnaire. At the design stage, a blueprint for a nurse resilience model was compiled. At the development stage, a nurse resilience model was developed. The implementation stage was done by implementing the resilience model that had been developed with a quasi-experimental research approach, with pre and post test control group design. The number of samples was 60, 30 nurses in the intervention group and 30 nurses in the control group. The bivariate analysis at the implementation stage was conducted by using the Independent t-test to explain the differences between the intervention group and the control group after training. At the evaluation stage, all previous stages were evaluated to find out the deficiencies at each stage and to immediately make improvements.

The results of the research are the formulation of a resilience model that is realized in the training module to increase nurses resilience: prevention of psychological distress and burnout in the workplace. The results of data analysis at the implementation stage showed an increase in nurse resilience along with the dimensions of resilience, namely: personal competence, belief in instinct, positive acceptance, self-control, and spirituality in the intervention group after being given treatment in the form of training with $p < 0.05$. The results of eta squared obtained a value of 0.56, which means that the treatment has a larger effect on the resilience or toughness of nurses in the intervention group compared to the control group. It is hoped that in healthcare services, especially in hospitals, training and development of resilience models can be scheduled in order to improve the professionalism of nurses in managing challenges, problems, and finding solutions in the work environment, as well as in providing care to clients.

Keywords: Burnout, Psychological Distress, Resilience, Spirituality.