Original Research Article

Effectiveness of counselling to increase the family of soul patients about drug compliance

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ABSTRACT

Background: According to WHO it is known that around 21 million people in the world are affected by schizophrenia and have psychiatric disorders. From the results of Riskesdas 2018 the prevalence of mental disorders in Indonesia is as much as 7%, and around 9.8% of the population experiences mental and emotional disorders. For the coverage of the treatment of people with mental disorders, data obtained by clients who went for treatment 48.9% for routine treatment and 51.1% for no routine treatment. The purpose of this research is to determine the effect of health promotion using counseling methods to increase the knowledge of mental patients’ families about taking medication in the Adult Outpatient Polyclinic at the RSJ Prof. Hb Saanin Padang.

Methods: This type of research is quasi-experimental (Quasi Experimental, Design uses One Group Pretest Posttest design model. This research was conducted at RSB Haan Saanin Padang. The population in this study was the families of mental patients who visited the Polyclinic as many as 649 people with the number of respondents as many as 87 people, the sampling technique was by accidental sampling Statistical tests using the Non-Parametric Test (Wilcoxon Test).

Results: Research results show that the mean range of Pre-Test knowledge is 8.48±1.982 and Posttest knowledge is 17.13±1.641, with a p value p=0,000 (p≤0.05).

Conclusions: Health promotion using counseling methods has a significant effect in increasing the family knowledge of mental patients about medication adherence.

Keywords: Counseling, Compliance with taking medication, Knowledge

INTRODUCTION

In RI Law No. 18 of 2014 Chapter I Article 3 on Mental Health, explained that mental health efforts aimed at ensuring everyone can achieve a good quality of life, enjoy a healthy mental life, free from fear, pressure and other disorders that can interfere with mental health.¹

According to WHO (2016) there are around 35 million people affected by depression, 60 million people affected by bipolar disorder, 21 million people affected by schizophrenia, and 47.5 million affected by dementia.

Some researchers report that the biggest mental disorder is schizophrenia.² From the results of the 2018 Riskesdas, there was an increase in the prevalence of mental disorders, from 1.7% in 2013 to 7% in 2018. The increase in mental disorders also experienced an increase in West Sumatra. In 2018 it can be seen that West Sumatra which was previously ranked 9th in 2013 rose to 7th place with the population prevalence of the most mental disorders.³ Mental disorders according to the American Psychiatric Association (APA) are syndromes or patterns of behavior that are clinically important, which occur in individuals and the syndrome is associated with distress or disability.
accompanied by a significantly increased risk for death, illness, disability, or loss of freedom.4

Schizophrenia is also a recurring chronic mental disorder. Recurrence is a recurrence of the client's disease condition. Recurrence can occur due to failure in the treatment process, get violent behavior, pressure, poverty, stigma, discrimination, lack of support from others, especially caregivers, and substance abuse (alcohol and drugs). But what most influences the recurrence rate is the failure of the treatment process for schizophrenic clients.3

From some research conducted in Indonesia proving that family support has a positive effect on healing patients of their illnesses. Large family support for the healing process of chronic diseases including schizophrenia. Family support can reduce 50% of patient recurrence.6

The family as a person who is close to the patient, must know the principle of five correct in taking medicine, that is the correct patient, the correct medicine, the correct dosage, the correct method and time of administration where compliance occurs when the rules of use in prescribed drugs and their administration in hospital followed correctly. This is very important especially in chronic diseases, including one of them is a mental illness.

The incidence of recurrence has increased if you do not have knowledge about schizophrenia, are not compliant in taking medication and do not have family support. Schizophrenia and Caregiver clients are considered less adherent to psychotic treatment as a major risk of recurrence.

The purpose of the research is to determine the effect of health promotion using counseling methods to increase the mental knowledge of patients about medication adherence.

METHODS

The research was conducted at the Adult Outpatient Polyclinic at Prof. Mental Hospital. Hb. Saanin Padang, and has been carried out from 27 to 30 July 2020. This study uses a quasi-experimental design using the One Group Pretest Posttest design model. That is before counseling is given first (pre-test) family knowledge about compliance taking medication then given treatment (counseling about medication adherence) and carried out another post test (family knowledge after being given counseling) to find out the family's knowledge about medication adherence.

Stages of the study began from the initial survey looking at data from a mental hospital about patients experiencing recurrence due to lack of family knowledge about medication adherence. Then the family is chosen as the respondent to be the research sample. The criteria for sample selection are the families of patients who were visiting during the study in the continuation of drug therapy at the Adult Hospitalization Outpatient Clinic. Saanin Padang and Criteria for Respondents who did not participate in one of the activities undertaken by researchers (pre-test, counseling and post-test). In order to avoid errors in interpreting data and to obtain valid data, the data collection was carried out by distributing questionnaires in the form of objective questions totaling 20 questions before and after counseling, questions about the knowledge of mental patients' families about medication, medication adherence and family support for clients in monitoring clients taking appropriate medication. Knowledge is measured using a Guutment Scale

Analysis of the research to be conducted is the Paired-Sample t-Test to see the effect of the intervention group before and after the health promotion is given using counseling methods with a 95% confidence level (α=0.05). After conducting research, the Paired Sample t-Test cannot be used because when data processing is performed, it shows that the data distribution is not normal so that the proper data analysis used is the Non-Parametric Test (Wilcoxon Test).

RESULTS

Table 1 shows that the average family knowledge of mental patients about medication adherence before counseling is 8.48 with a standard deviation of 1.982 and an error standard of 0.212, the statistical test results obtained p=0.000.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Std. Error</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre</td>
<td>8.48</td>
<td>1.982</td>
<td>0.212</td>
<td>87</td>
</tr>
</tbody>
</table>

Table 2: Average Value of Respondents Knowledge about Compliance with Taking Medication After Counseling in Adult Outpatient Polyclinic RSJ. Prof. HB. Saanin Padang.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Std. Error</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Post</td>
<td>17.13</td>
<td>1.641</td>
<td>0.176</td>
<td>87</td>
</tr>
</tbody>
</table>

Table 2 results of the study found that the average family knowledge of mental patients about adherence to taking medication after counseling is 17.13 with a standard deviation of 1.641 and an error standard of 0.176, the statistical test results obtained p=0.000. Table 3 shows the difference in the average value of respondents' knowledge (family of mental patients) before and after treatment with the counseling method, the average value obtained
before the treatment was 8.48±1.982 and increased after the treatment, namely 17.13±1.641.

Table 3: Difference in the Average Values of Respondents’ Knowledge about Compliance in Taking Medication before and After Conducting Counseling at the Polyclinic Adult Outpatient RSJ. Prof. HB. Saanin Padang.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Counseling Mean</th>
<th>SD</th>
<th>N</th>
<th>SE</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge Post - Test</td>
<td>17.13</td>
<td>1.641</td>
<td>0.176</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge Pre – Test</td>
<td>8.48</td>
<td>1.982</td>
<td>87</td>
<td>0.212</td>
<td>0.000</td>
</tr>
<tr>
<td>Difference</td>
<td>8.65</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Dependent test results of the T-Test sample shows the average difference between pre-test and post-test is 8.65 with the meaning of the word knowledge post-test is higher than the pre-test that is found that there is a meaningful difference between a person’s level of knowledge before and after getting counseling with a value of p=0.000 (p<0.05).

DISCUSSION

The effectiveness of increasing the knowledge of mental patients 'families about medication adherence Based on the results of the study found that an increase in the average value of respondents' knowledge after being given counseling. The average value before counseling was 8.48±1.641 and after giving counseling obtained an average knowledge of respondents as much as 17.13±1.641 and obtained a value of p=0.000 (p<0.05) it can be concluded that the average value of the post-test was more higher than the pre-test. From the results of the Non-Parametric Test using the Wilcoxon Test the average difference between the pre-test and post-test was 8.65, in this study it can be concluded that counseling has a very good effect on the level of respondents' knowledge about compliance with medication taken by the researcher.

This is in line with research conducted by Misnan (2014) on the effect of health education about drugs on medication adherence for psychiatric patients in Desa Banaran Kulon Progo Yogyakarta to 20 respondents showing data analysis using the Wilcoxon Man-Whitney test showing that health education about drugs has Significant influence to improve medication adherence in patients with mental disorders with p value 0.42 (p<0.5).7

Notoatmodjo, (2012) states that knowledge is the result of knowing, and this happens after someone senses a certain object. Sensing, hearing, smell, taste and touch. Most of human knowledge is obtained through the eyes and ears. Knowledge or cognitive domain is a very important domain to shape one's actions.8

From the analysis of the results of the comparison of the mean range between pre-test and post-test that has been done, the researcher believes that the increase in respondents’ knowledge occurs because counseling is conducted in a structured manner and uses lecture and question and answer techniques by fostering a relationship of trust between the respondent and the researcher. Before counseling is done, the researcher makes guidance on the implementation of counseling, in this guide the researcher compiles the objectives, materials, and timing of counselling.9-11

This is in accordance with the theory put forward by Notoatmodjo, 2010 that health promotion will succeed if the message (massage) to be conveyed to the communicant is arranged in a planned and structured, effective and efficient manner by selecting the right method.12

In addition, researchers also assume that the increase in respondent knowledge is also influenced by hospital programs and facilities and infrastructure provided by hospitals to provide health promotion both using monthly extension methods, as well as displaying health information related to mental health on the television monitor screen contained in the Adult Outpatient Polyclinic at Hb Saanin Hospital, Padang.

CONCLUSION

Effective counseling to increase the knowledge of mental patients' families about medication adherence.

ACKNOWLEDGEMENTS

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