

PERBEDAAN *CARING* FISIK, *CARING* EMOSIONAL, DAN *CARING* SPIRITUAL OLEH *CAREGIVER* PADA INDIVIDU DISABILITAS INTELEKTUAL DI INSTITUSI DAN KOMUNITAS

ABSTRAK

Latar Belakang: Masalah kesehatan pada individu dengan disabilitas intelektual (DI) membutuhkan *caring* lebih banyak baik dari segi pendampingan, pendidikan maupun pengawasan. Umumnya individu DI tinggal di institusi dan komunitas yang didampingi oleh *caregiver* formal maupun informal, sehingga keberadaan *caregiver* sangat penting bagi individu dengan DI dalam memberikan *caring* fisik, *caring* emosional dan *caring* spiritual. Khususnya peningkatan *caring* spiritual dan *caring* emosional yang menjadi domain baru dalam mendampingi individu dengan DI.

Tujuan: Untuk melihat perbedaan *caring* fisik, *caring* emosional dan *caring* spiritual oleh *caregiver* pada individu dengan DI di institusi dan di komunitas.

Metode: Penelitian ini menggunakan observasional analitik dengan pendekatan *cross-sectional*. Observasi dan pemberian kuesioner (*assisted delivery questionnaire*) dilakukan pada 88 *caregiver* yang terdiri dari 32 *caregiver* di institusi dan 56 *caregiver* di 9 komunitas binaan BBRISBG wilayah Jawa Tengah.

Hasil: Analisa data menggunakan uji Mann-Whitney menunjukkan terdapat perbedaan *caring* fisik di institusi secara signifikan lebih baik ($Mdn_{institusi} = 54,55$) dibandingkan di komunitas ($Mdn_{komunitas} = 42,42$; $p=0,001$) dan *caring* spiritual di institusi secara signifikan lebih baik ($Mdn_{institusi} = 56,87$) dibandingkan di komunitas ($Mdn_{komunitas} = 46,25$; $p=0,001$). *Caring* emosional di institusi tidak berbeda secara signifikan di komunitas ($Mdn_{institusi} = 48,28$) dibandingkan di komunitas ($Mdn_{komunitas} = 47,84$; $p=0,815$).

Kesimpulan: Penerapan *caring* menunjukkan adanya variasi, *caring* fisik dan *caring* spiritual oleh *caregiver* pada individu dengan DI lebih memadai di institusi dibandingkan di komunitas, sedangkan *caring* emosional kurang memadai baik di institusi maupun komunitas. Peningkatan kualitas *caring* di komunitas, konselor genetik perlu memberikan edukasi untuk orang tua dengan DI mengenai *caring* fisik, spiritual dan utamanya pada *caring* emosional.

Kata Kunci: *Caring*, *Caring* Fisik, *Caring* Emosional, *Caring* Spiritual, *Caregiver*, Institusi dan Komunitas

**THE DIFFERENCE OF PHYSICAL, EMOTIONAL AND SPIRITUAL
CARING BY CAREGIVER ON PEOPLE WITH INTELLECTUAL
DISABILITY IN INSTITUTION AND COMMUNITY.**

ABSTRACT

Background: Individual with intellectual disability (ID) needs more caring to handle health problems, especially; accompaniment, education and surveillance. Generally, individuals with ID live in institutions and communities are accompanied by formal or informal caregiver, thus the caregiver existence for people with ID is important in providing physical, emotional, and spiritual caring. Especially, the improvement of spiritual and emotional caring become new domain in accompaniment individuals with ID.

Aim: To observe the difference between physical, emotional, and spiritual caring by caregiver to individuals with ID in institution and community.

Methods: This was analytical-observational study with cross-sectional approach. Observation was done and assisted delivery questionnaire were performed to 88 caregivers, which consisted of 32 institutional caregiver and 56 caregiver from 9 communities under BBRSBG guidance Jawa Tengah.

Results: Data analysis using Mann-Whitney U test showed significantly difference in physical caring in institution was better ($Mdn_{institution} = 54.55$) than in community caring ($Mdn_{community} = 42.42$; $p=0.001$) and significantly difference in spiritual caring in institution was better ($Mdn_{institution} = 56.87$) than in community ($Mdn_{community} = 46.25$; $p=0.001$). There was no significant difference in emotional caring between institution ($Mdn_{institution} = 48.28$) than community ($Mdn_{community} = 47.84$; $p=0.815$).

Conclusion: The implementation of caring varies between each aspect. Physical and spiritual caring were provided better in the institution, compared to individuals with ID in community. Whereas, emotional caring was less adequate or sufficient, both in the institution and community. To improve the quality of caring in community, genetic counselor need to educate parents of individuals with ID regarding physical, spiritual and particularly emotional caring.

Keywords: Caring, Physical caring, Emotional Caring, Spiritual Caring, Caregiver, Institution and Community