

Pengembangan Sistem Skrining Gejala Kecemasan dan Depresi pada Ibu Hamil Berbasis Expert System dalam Pelayanan Antenatal = Development of Anxiety and Depression Symptoms Screening System in Pregnant Women Based on Expert System in Antenatal Care

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Abstrak

Secara global, termasuk di Indonesia, ibu hamil merupakan populasi rentan untuk mengalami gejala kecemasan dan depresi. Apabila kedua gejala tersebut tidak teridentifikasi dan ditata laksana selama kehamilan akan menimbulkan dampak terhadap kesehatan ibu seperti, depresi pascapersalinan, pre eklampsi, bahkan bunuh diri, dan kesehatan anak seperti, prematur dan berat badan lahir rendah. Oleh karena itu, skrining gejala kecemasan dan depresi pada ibu hamil sangat penting dilakukan. Indonesia telah memiliki kebijakan penilaian kesehatan jiwa dalam antenatal care (ANC) sejak Juli 2021. Indonesia juga sedang melakukan transformasi kesehatan digital untuk meningkatkan mutu pelayanan kesehatan. Namun, Indonesia belum memiliki instrumen dan protokol skrining gejala kecemasan dan depresi dalam pelayanan antenatal baik secara konvensional maupun pemanfaatan teknologi digital. Tujuan penelitian ini adalah mengembangkan sistem skrining gejala kecemasan dan depresi pada ibu hamil berbasis expert system dalam ANC. Penelitian ini terdiri dari tiga tahap. Tahap ke-1 menguji validitas dan reliabilitas instrumen Edinburgh Postnatal Depression Scale (EPDS) versi bahasa Indonesia pada 125 ibu hamil secara daring melalui penyebaran formulir Google. Tahap ke-2 menilai kemampuan skrining instrumen EPDS dibandingkan dengan instrumen MINI-International Neuropsychiatric Interview (MINI) sebagai gold standard pada 298 ibu hamil. Tahap ke-2 ini dilakukan di Kota Depok (Puskesmas Beji, Cipayung, Jati Jajar, dan Pancoran Mas). Penilaian MINI dilakukan secara daring oleh dua orang enumerator terlatih. Tahap ke-3 dilakukan pengembangan prototipe sistem skrining gejala kecemasan dan depresi berbasis expert system. Analisis statistik pada tahap 1 dengan berbagai jenis uji validitas dan reliabilitas. Tahap ke-2 dilakukan penilaian sensitivitas dan spesifisitas. Tahap ke-3 dilakukan evaluasi terhadap akurasi expert system dan fisibilitas prototipe. Penelitian ini menghasilkan instrumen EPDS versi bahasa Indonesia yang terbukti valid dan reliabel untuk digunakan pada populasi ibu hamil. Instrumen ini memiliki sensitivitas dan spesifisitas $> 90\%$ untuk skrining gejala kecemasan dan depresi kehamilan. Proporsi akurasi pada expert system $> 90\%$. Ibu hamil menyatakan prototipe ini mudah, waktu penilaian singkat, dan bermanfaat untuk digunakan. Prototipe berbasis expert system yang disebut BMoms, layak dan mampu laksana untuk skrining gejala kecemasan dan depresi pada ibu hamil dalam ANC. Oleh karena itu, prototipe BMoms dapat dikembangkan lebih lanjut menjadi aplikasi siap dan tepat guna sehingga menjadi solusi inovatif untuk skrining kesehatan jiwa pada ibu hamil.

.....Globally, including Indonesia, pregnant women are vulnerable population to experience symptoms of anxiety and depression. If these two symptoms are not identified and treated during pregnancy, it will have an impact on maternal and child health, such as suicide, pre-eclampsia, postpartum depression, premature, and low birth weight. Therefore, screening for symptoms of anxiety and depression in pregnant women is very important. However, Indonesia does not yet have instruments and protocols for screening symptoms of anxiety and depression in pregnant women in antenatal care (ANC) both conventionally and the use of

digital technology. In fact, Indonesia already has a mental health assessment policy in ANC since July, 2021 and is currently carrying out a digital health transformation to improve the quality of health services. This study aimed to develop a screening system for symptoms of anxiety and depression in pregnant women based on an expert system in ANC. The study consists of three stages. Phase 1 tested the validity and reliability of the Indonesian version of the Edinburgh Postnatal Depression Scale (EPDS) instrument on 125 pregnant women online through the dissemination of Google forms. Phase 2 assessed the screening ability of EPDS instrument compared to MINI-International Neuropsychiatric Interview (MINI) instrument as gold standard in 298 pregnant women. This 2nd phase was carried out in Depok City (Beji, Cipayung, Jati Jajar, and Pancoran Mas public health centre). The MINI assessment was carried out online by two trained enumerators. The 3rd stage was carried out by developing a prototype of an anxiety and depression symptom screening system based on expert system. Statistical analysis at stage 1 employed various types of validity and reliability tests. The 2nd stage was carried out to test sensitivity and specificity. The 3rd stage was evaluated on the accuracy of the expert system and the feasibility of the prototype. This study produced an Indonesian version of the EPDS instrument that was proven to be valid and reliable for use in the population of pregnant women. This instrument had a sensitivity and specificity of > 90% for screening for symptoms of pregnancy anxiety and depression. The proportion of accuracy in expert systems was > 90%. Pregnant women state that this prototype was easy, short assessment time, and useful to use. The prototype based on expert system called BMoms, was feasible and able to be carried out for screening symptoms of anxiety and depression in pregnant women in ANC. The BMoms prototype can be further developed into a ready and appropriate application so that it becomes an innovative solution for mental health screening in pregnant women.