

Analisis Faktor Kognator pada Pasien Diabetes Melitus Tipe 2 yang Mengalami Hambatan Kontrol Berat Badan = Analysis Cognator Factors in Barriers to Weight Controls Among Overweight and Obesity People with Type II Diabetes

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Abstrak

Hambatan kontrol berat badan dan hiperlipidemia menjadi masalah yang sulit diselesaikan oleh pasien diabetes melitus tipe 2 (DMT2). Hal ini dapat dipengaruhi oleh berbagai faktor yaitu fungsi fisiologis dan kognator. Studi *cross sectional* ini bertujuan untuk mengidentifikasi hubungan faktor kognator yaitu konsep diri dengan hambatan kontrol berat badan pada pasien DMT2. Sebanyak 72 orang pasien DMT2 dengan rerata indeks massa tubuh 27.3 kg/m^2 direkrut dari Pusat Layanan Diabetes Terpadu dari sebuah rumah sakit tersier Jakarta. Konsep diri yang terdiri atas persepsi, evaluasi diri, dan *self resilience* dinilai melalui kuesioner *health belief models*, *illness identity*, dan *Health Hardiness Inventory (HHI)*. Sedangkan hambatan kontrol berat badan yaitu hambatan motivasi dinilai melalui kuesioner *The TREATment MOTivation and Readiness (TRE-MORE) test* dan hambatan perilaku dinilai melalui kuesioner *Barriers to Healthy Eating Scale (BHE scale)*. Hasil penelitian ini menunjukkan terdapat hubungan yang signifikan evaluasi diri dengan hambatan perilaku dalam kontrol berat badan, terdapat hubungan yang signifikan *self resilience* dengan hambatan motivasi, tidak ada hubungan persepsi dengan hambatan motivasi dan perilaku dalam kontrol berat badan, dan tidak ada hubungan *self resilience* dengan hambatan perilaku dalam kontrol berat badan.

.....*Challenges in controlling body weight and hyperlipidemia pose significant problems for patients with Type 2 diabetes mellitus (T2DM). These issues may be influenced by various factors, including physiological and cognitive functions. This cross-sectional study aims to identify the relationship between cognitive factors, specifically self-concept, and barriers to weight control management in T2DM patients. A total of 72 T2DM patients with a mean body mass index of 27.3 kg/m^2 were recruited from a Comprehensive Diabetes Center at a tertiary hospital in Jakarta. Self-concept, encompassing perception, self-evaluation, and self-resilience, was assessed using the Health Belief Models questionnaire, Illness Identity questionnaire, and Health Hardiness Inventory (HHI). Barriers to weight control, including motivational barriers, were evaluated using the TREATment MOTivation and Readiness (TRE-MORE) test, while behavioral barriers were assessed using the Barriers to Healthy Eating Scale (BHE scale). The findings indicated a significant relationship between self-evaluation and behavioral barriers in weight control, either between self resilience and motivational barriers in weight control. However, no significant relationships were found between perception and motivational or behavioral barriers in weight control, nor between self-resilience and behavioral barriers in weight control.*