

Gambaran Tingkat Kemampuan Pemenuhan Adl (*Activity Daily Living*) Pada Pasien Stroke Di Ruang Rawat Inap Aster Rsud Dr. Harjono Ponorogo

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ABSTRAK

Latar belakang: Stroke merupakan salah satu penyebab utama kematian dan disabilitas di dunia yang berakibat gangguan aliran darah ke otak yang menyebabkan kerusakan jaringan otak dan gangguan fungsi neurologis. Kondisi ini dapat menimbulkan berbagai gangguan, seperti kelemahan otot, gangguan sensasi, serta hemiparesis/hemiplegia, yang berdampak pada penurunan kemampuan *Activity Daily Living* (ADL). Akibatnya, pasien stroke sering mengalami ketergantungan dalam memenuhi kebutuhan sehari-hari seperti makan, mandi, berpakaian, dan mobilisasi. **Metode:** Penelitian ini menggunakan desain kuantitatif deskriptif dengan pendekatan *cross sectional*. Populasi penelitian adalah seluruh pasien stroke yang dirawat di ruang rawat inap Aster RSUD Dr. Harjono Ponorogo pada bulan April–Mei 2026. Sampel penelitian berjumlah 30 pasien stroke yang mengalami hemiparesis dan memenuhi kriteria inklusi. Teknik pengambilan sampel menggunakan *purposive sampling*. Data dikumpulkan melalui lembar observasi untuk menilai tingkat kemandirian *Activity Daily Living* (ADL) serta tingkat keparahan stroke menggunakan NIHSS. Analisis data dilakukan secara deskriptif melalui crosstabs. **Hasil:** Mayoritas responden berusia >60 tahun (83,33%), berjenis kelamin perempuan (53,33%), dan memiliki lama sakit <1 tahun (76,67%). Tingkat kemandirian *Activity Daily Living* (ADL) menunjukkan sebagian besar responden berada pada kategori ketergantungan sedang (73,3%) dan ketergantungan berat (26,7%). Pada analisis tabulasi silang, pada tingkat keparahan stroke, mayoritas responden dengan lama sakit <1 tahun berada pada kategori stroke ringan (66,67%). **Analisis:** Mayoritas responden lansia dengan lama sakit <1 tahun berada pada ketergantungan sedang hingga berat. Meskipun sebagian besar mengalami stroke ringan, kemandirian ADL belum optimal karena masih dalam fase pemulihan. Hal ini menunjukkan bahwa kemandirian tidak hanya dipengaruhi oleh keparahan stroke, tetapi juga usia dan proses rehabilitasi.

Kata Kunci: stroke, ADL, NIHSS

Description of Activity Daily Living (ADL) Independence Level in Stroke Patients in the Aster Inpatient Ward at RSUD Dr. Harjono Ponorogo

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ABSTRACT

Background: Stroke is one of the leading causes of death and disability worldwide, resulting in impaired blood flow to the brain, leading to brain tissue damage and impaired neurological function. This condition can cause various disorders, such as muscle weakness, impaired sensation, and hemiparesis/hemiplegia, which impact on the decline in *Activity Daily Living (ADL)* abilities. As a result, stroke patients often experience dependence in meeting daily needs such as eating, bathing, dressing, and mobilization. **Methods:** This study used a descriptive quantitative design with a *cross-sectional* approach. The study population was all stroke patients treated in the Aster inpatient ward of Dr. Harjono Ponorogo Regional General Hospital in April–May 2026. The study sample consisted of 30 stroke patients with hemiparesis and met the inclusion criteria. The sampling technique used *purposive sampling*. Data were collected through observation sheets to assess the level of independence in *Activity Daily Living (ADL)* and the severity of the stroke using the NIHSS. Data analysis was carried out descriptively through crosstabs. **Results:** The majority of respondents were aged >60 years (83.33%), female (53.33%), and had a duration of illness <1 year (76.67%). The level of *Activity Daily Living (ADL)* independence showed that most respondents were in the moderate dependence category (73.3%) and severe dependence (26.7%). In the cross-tabulation analysis, based on stroke severity, the majority of respondents with a duration of illness <1 year were in the mild stroke category (66.67%). **Analysis:** The majority of elderly respondents with a duration of illness <1 year were in moderate to severe dependence. Although most had mild strokes, ADL independence was not optimal because they were still in the recovery phase. This shows that independence is not only influenced by stroke severity, but also age and the rehabilitation process.

Keywords: stroke, ADL, NIHSS