



PROCEEDING

The 1st Udayana International Nursing Conference "Global Health : Nursing's Perspective"

Bali, Indonesia

November 6-8, 2015



Partnership :





THE 1st UDAYANA INTERNATIONAL NURSING CONFERENCE GLOBAL HEALTH : NURSING'S PERSPECTIVE

SPEAKERS

NOVEMBER 6–8 2015

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THE 1st UDAYANA
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CALL FOR PAPERS :

ORAL PRESENTATION
POSTER SESSION



IMPORTANT DATES

SUBMISSION
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31 AUGUST 2015

EARLY BIRD
REGISTRATION
DEADLINE
20 SEPTEMBER
2015

LATE
REGISTRATION

30 OCTOBER
2015 — ON SITE

ACCEPTANCE
NOTIFICATIONS
DEADLINE

30 SEPTEMBER
2015

REGISTRATION

DOMESTIC (IDR)	EARLY	LATE
NURSE	850.000	1.100.000
NURSING STUDENT	750.000	1.000.000
OTHER	850.000	1.100.000

INTERNATIONAL (USD)	EARLY	LATE
NURSE	120	150
NURSING STUDENT	85	120
OTHER	120	150



THE 1ST UDAYANA
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CONFERENCE PROGRAMME

FRIDAY NOVEMBER 6 th , 2015	
07.00 – 08.30	Registration
08.30 – 09.00	Opening Ceremony
09.00 – 09.30	Art Performance
09.30 – 09.45	Break
09.45 – 10.15	Keynote 1: The Global Challenges for Chronic Illness Care (Prof. Dr. dr. Ketut Suastika, Sp.PD-KEMD)
10.15 – 10.45	Keynote 2: Nurse's Contribution In Global Health Challenges (Professor Sandra V. Dunn, RN, PhD, FRCNA)
10.45 – 11.15	Keynote 3: The Role of Nurses In Breast Cancer Care As Part Of Global Nursing Challenges (Professor Marilynne N. Kirshbaum, RGN, PhD, FHEA)
11.15 – 11.45	Discussion
11.45 – 12.10	Sponsor Presentation
12.10 – 14.00	Lunch + Poster Presentation
14.00 – 15.30	Paper Presentation
15.30 – 16.00	Break
16.00 – 17.30	Paper Presentation
17.30 – 20.00	Welcome Dinner
20.00 – Finish	Free Time

SATURDAY NOVEMBER 7 th , 2015	
07.30 – 08.00	Registration
08.00 – 08.30	Opening
08.30 – 09.00	Keynote 4: Global Health and Nutrition in Nursing Care (Professor Naomi M. Kajiwara, PhD)
09.00 – 09.30	Keynote 5: Globalization and Evidence Based Practice: The Importance of Context (Dr. Rick Wiechula)
09.30 – 10.00	Discussion
10.00 – 10.20	Sponsor Presentation
10.20 – 10.40	Break
10.40 – 11.10	Keynote 6: WHO Contribution For Enhancing Quality of Nursing Care in Global Health (Dr. Hartiah Haroen)
11.10 – 11.40	Keynote 7: Nursing Challenges in Global Health Issue: Diversity and Dynamic In Action (Assoc. Professor Pranceed Songwathana, PhD., RN)
11.40 – 12.10	Discussion
12.10 – 12.30	Technical Meeting Day-3
12.30 – 13.30	Lunch + Poster Presentation
13.30 – 15.00	Paper Presentation
15.00 – 15.15	Break
15.15 – 16.45	Paper Presentation
16.45 – finish	Free Time

SUNDAY NOVEMBER 8 th , 2015	
07.30 – 08.00	Registration
08.00 – 08.10	Opening
08.10 – 08.40	Keynote 8: The Influence of Nursing Regulation On Global Health Care (Prof. Achir Yani S. Hamid, MN, DN.Sc)
08.40 – 09.10	Keynote 9: Perspective of Disaster Nursing As Global Issues And As Japan Initiative (Assoc. Professor Sakiko Kanbara, RN., PHN., PhD)
09.10 – 09.30	Discussion
09.30 – 09.40	Door prize
09.40 – 10.10	Closing Ceremony
10.10 – 10.30	Break + Distribution of Certificates
10.30 – 11.00	Preparing for City Tour
11.00 – 18.00	City Tour



**THE 1st UDAYANA INTERNATIONAL NURSING CONFERENCE
GLOBAL HEALTH: NURSING'S PERSPECTIVE**

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September 1, 2015

ABSTRACT ACCEPTANCE LETTER

This is a confirmation that the abstract entitled below has been accepted for Oral Presentation at the 1st Udayana International Nursing Conference 2015.

Title : The Effect of Eye Exercises to Myopia Eye Visus Value In SMAN 1 Unggulan North Indralaya

Author (s) : Antarini Idriansari, Fridon Hariando Midun Pasaribu, Sigit Purwanto

This abstract will be published in the conference proceeding. Please send your manuscript appropriate with the guideline to inc.udayana@gmail.com before September 30, 2015. Please find the attached guideline in this email.

We would like to remind you that presenting author should register to the conference. Please kindly do the payment for the conference as soon as possible. After do the payment, please send the transfer receipt through fax or this email address. And please fill the registration form and send back to us.

Thank you for your participation and if you have further questions, please feel free to contact us.

Warm Regards,

Ns. Putu Oka Yuli Nurhesti, M.Kep
Chairman Committee



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The article should be written in English on two column form layout which is outlined as follow:

1. Title Page

This includes: 1) the title of the manuscript in the center of article; 2) full name of author(s) without academic and professional credentials; 3) institutional affiliation(s); 4) corresponding author postal and e-mail addresses

2. Abstract

The main body abstract should use maximum 300 words. It should consist of background, aim, method, result, conclusion, and keywords. Abstract type 10 point Times New Roman font and single-spaced.

3. Manuscript

- a. Introduction: It consists of background, problem statement, and research purpose
- b. Methods: It consists of research design, place and time of research, population and sample, data measurement, data analysis method
- c. Result: The results may be reported on texts or graphics. Please provide some introduction for the information presented on table or images.
- d. Discussion: It consists of discussion on the research result. Please compare it with the result of other researches and explain the implications in nursing science
- e. Conclusion
- f. Acknowledgments (if any): Briefly acknowledge research funders, and any research participants
- g. Reference: It consists of all references used to write the manuscript. Reference and citation use bracketed citation (name, year). American Psychological Association applies in writing the article.

4. The layout of article is to be written in A4 paper with margin at least 2.5 for each using Microsoft Word, 12 point Times New Roman font and 1.5 spaced. The maximum number of page is 20. Each page is numbered starting from title until the last page of the article.

32. Correlation Of Nutritional Adequacy To The Quality Of Life On Hemodialysis Patients In Hospital Dr. Achmad Mochtar Bukittinggi <i>Dewy Haryanty Parman, Krisna Yetti, Masfuri</i>	45
33. The Effect Of Eye Exercises To Myopia Eye Visus Value In Sman 1 Unggulan North Indralaya <i>Antarini Idriansari, Fridon Hariando Midun Pasaribu, Sigit Purwanto</i>	46
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THE EFFECT OF EYE EXERCISES TO MYOPIA EYE VISUS VALUE IN SMAN 1 UNGGULAN NORTH INDRALAYA

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Abstract

World Health Organization (WHO) declares that visus or visual acuity decrease is still a problem and cause of world blindness. There are 1.5 million children in the world suffer from blindness. Every year around half from its amount will be blind. The purpose of this research is to investigate the effect of eye exercises to myopia eye visus value in SMA N 1 north Indralaya. The research design is pre eksperimental design with pre test and post test group. The technique of collecting data in this research used total sampling method got from 20 respondents. The research is conducted by giving intervention in form of eye exercises during 2 weeks. The average of the respondent myopia eye visus value before the eye exercises measured with Snellen chart is right eye 0,34 and left eye 0,31. After the eye exercises the average value increased to 0,45 for right eye and 0,42 for left eye. In wilcoxon test, visus value of right and left eye was found significantly difference in before and after eye exercises. P value right eye visus is 0,005 and p value left eye visus is 0,003. There are significant effect between eye exercises with myopia eye refraction value that can be seen from eye visus increase after doing the eye exercises.

Keywords: eye exercises, visus value, myopia

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THE EFFECT OF EYE EXERCISES TO MYOPIA EYE VISUS SCORE IN SMAN 1 UNGGULAN NORTH INDRALAYA

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Abstract

World Health Organization (WHO) declares that visus or visual acuity decrease is still a problem and cause of world blindness. There are 1.5 million children in the world suffer from blindness. Every year around half from its amount will be blind. The purpose of this research is to investigate the effect of eye exercises to myopia eye visus score in SMA N 1 north Indralaya. The research design is pre eksperimental design with pre test and post test group. The technique of collecting data in this research used total sampling method (20 respondents). The research is conducted by giving intervention in form of eye exercises during 2 weeks. The average of the respondent myopia eye visus score before the eye exercises measured with Snellen chart is right eye 0,34 and left eye 0,31. After the eye exercises the average value increased to 0,45 for right eye and 0,42 for left eye. In wilcoxon test, visus score of right and left eye was found significantly difference in before and after eye exercises. Pvalue right eye visus was 0,005 and p value left eye visus was 0,003. There were significant effect between eye exercises with myopia eye refraction value that can be seen from eye visus increase after doing the eye exercises.

Keywords: eye exercises, visus score, myopia

INTRODUCTION

Vision is the sharpness or clarity of vision, a special form in which depends on the sharpness of focus on the retina and interpretation in brain. Decreasing of visual acuity is reflected in a variety of abnormalities or changes in the visual cortex's cells. These changes manifests as a loss of binocular vision and depth perception (Ilyas, 2004).

World Health Organization (WHO) declared a decrease in visual acuity or visual acuity is still a problem and the cause blindness of many people in the world. There are 1.5 million children in the world suffer from blindness. Every year about half of this amount would be blind (almost one child every minute). Children who are almost blind, approximately 60% die within a year. Asian children aged 0 to 15 years amounted to 1.2 billion and an estimated 1.08 million children are experiencing blindness (Hutahuruk, 2007).

In 30 September 1999, the World Health Organization made a draft of global commitment of Vision 2020 that was called "The Right to Sight" to encourage prevention of certain vision problems and blindness. Eye exercises is an alternative method today to address a variety of eye disorders. This exercises can be practiced by anyone who wants to treat their eyes, from the age of children to the elderly, men and women.

METHOD

This research used pre experimental design with pre test and post test group. Population of this research were all students of class X and XI in SMA N 1 North Indralaya which have decreased

vision myopia eye totaling 52 students and the samples size were 20 respondents (based on inclusion criteria). The research is conducted by giving intervention eye exercises during 2 weeks with once per day for seven minutes.

RESULT

1. Univariate Analysis

Table 1

Mean of Visus Score before Eye Exercise (n=20)

Visus	Mean	SD	Med	Min	Max	95% CI	
						LB	UB
Right	0.34	0.22	0.25	0.10	0.80	0.24	0.45
Left	0.31	0.20	0.20	0.12	0.67	0.22	0.40

Table 2

Mean of Visus Score after Eye Exercise (n=20)

Visus	Mean	SD	Med	Min	Max	95% CI	
						LB	UB
Right	0.45	0.31	0.40	0.10	1.33	0.30	0.59
Left	0.42	0.25	0.45	0.12	1.00	0.30	0.54

2. Bivariate Analysis

Table 3

Mean Differences of Right Visus Score between Before and After Eye Exercise

Right Visus	Mean	SD	Pvalue
Before	0.34	0.22	0.005
After	0.45	0.31	

Table 4

Mean Differences of Left Visus Score between Before and After Eye Exercise

Left Visus	Mean	SD	Pvalue
Before	0.31	0.20	0.003
After	0.42	0.25	

DISCUSSION

Visus Score Before Eye Exercise

Value vision right eye and left eye are not the same on the respondent due to the different vision monocular. Visual development both right and left eyes (binocular) coincided with increased vision monocular. Both nerve of the right eye and the left will be joined provide binocular vision. Approximately 70% of cells in the cortex cells striata is binocular. The cells are associated with the nerves in the brain that produce a single binocular visions and stereopsis (three-dimensional vision) (Gunawan, 2007). The binocular vision was determined by monocular

vision, therefore, visual acuity value of right eye higher than left eye and conversely right eye vision lower than left eye vision on respondent in this research.

Visus Score After Eye Exercise

After the eye exercises the average value increased to 0,45 for right eye and 0,42 for left eye. In wilcoxon test, visus score of right and left eye was found significantly difference in before and after eye exercises. P value of right eye visus was 0,005 and left eye visus was 0,003.

This study assumes an increase in visual acuity value of the eye is affected by eye exercises that have been carried out for 2 weeks on a regular basis by respondent. Eye visual acuity or visual acuity is the ability of the visual system to distinguish various forms. Optimal vision can only be achieved if there is a visual neural pathways are intact, the structure of a healthy eye and the right eye refractive capabilities (Anderson, 2007).

Differences of Visus Score between Before and After Eye Exercise

Impaired vision requires examination to determine the cause of eye disorders resulting decline in visual acuity. Visual acuity in each eye should be noted that provide eye complaints. To know one's visual acuity can be done with the Snellen chart. For the magnitude of the eye's ability to distinguish shapes and details of objects is determined by the ability to see the smallest objects that can still be seen at a certain distance (Ilyas, 2009).

Examination of visual acuity is determined by looking at the ability to read the letters of various sizes in the standard range for the card. Test results expressed with fractional numbers such as 20/20 for normal vision. In this case, the eyes can see the letters at a distance of 20 feet, which should be seen in the distance. Normal visual acuity on average varied between 6/4 to 6/6 (or 20/15 or 20/20 feet) (Ilyas, 2009).

Results of this study was consistent with studies conducted by Vandana J Rathod et al (2011) on "The Effect of Exercise on Myopia Eye" which states that the eye exercises have a significant effect on myopia. Vandana et al (2011) concluded that eye exercises are very effective for improving visual acuity value of the eye in patients with myopia. Respondents in Vandana's study involving 30 people consisting of 15 in the experimental group and 15 control group. As well as with the results of Kyle Rector et al (2013) on "Eyes Yoga: An Exergame Using Depth Cameras for Blind & Low Vision Exercise" which states that there is the influence of yoga to increase eye vision. Research Kyle adopted the movements of eye exercises in yoga.

Improved vision eye after eye exercises in this research due to the increase in the strength of the eye muscles obtained from eye exercises for two weeks of implementation. Kuswandari and Hamida (2007) stated that to get better vision, coordination of eye muscles, both eye right and left, is needed.

Eyeball muscles consist of six muscles, namely: the inferior oblique muscle, the superior oblique muscle, the inferior rectus muscle, the lateral rectus muscle, medial rectus muscle, the superior rectus muscle. Movements of eye exercises will increase the strength of six eye muscles above. Eye movement requires combination movement of right eye and left eye muscles. When eye

looks toward the top right, it requires cooperation between right superior rectus muscle and left inferior oblique muscle. Looking to the right requires cooperation between lateral rectus muscle and medial rectus muscle. Look towards the bottom right needs cooperation between right inferior rectus muscle and left superior oblique muscle. To see the bottom left, coordination between right superior oblique muscle and left inferior rectus muscle is needed. To see the left, we need coordination between right medial rectus muscle and left lateral rectus muscle. When eye looks toward the top left, it requires cooperation between muscles of the inferior oblique right eye and the left superior rectus. Eye muscles will become stronger to eight times than normal eye muscles so that while reading or the like, eyes only require the power to see objects as well as when eye in a state of relax (Battenberg & Rigney, 2010).

CONCLUSION

1. Mean of right visus score before eye exercise was 0,34 and left visus score was 0,31.
2. Mean of right visus score after eye exercise was 0,45 and left visus score was 0,42.
3. Visus score of right and left eye was found significantly difference in before and after eye exercises. P value of right eye visus was 0,005 and left eye visus was 0,003.

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