

# Pengaruh edukasi kesehatan terstruktur terhadap pelaksanaan fungsi perawatan kesehatan dan perilaku pencegahan penularan TB paru pada keluarga di Kabupaten Bogor = The influence of structured health education toward the implementation of health care function and the prevention behavior of pulmonary tuberculosis transmission in family at Bogor Regency

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## Abstrak

TB Paru dinyatakan sebagai kedaruratan global bagi kemanusiaan oleh WHO. Keluarga yang tinggal serumah dengan klien TB Paru merupakan population atrisk. Penelitian ini menggunakan desain kuasi eksperimen pretest and posttest with control group, dan metode consecutive sampling. Intervensi edukasi kesehatan terstruktur meliputi pemberian materi TB Paru dan pencegahannya, fungsi perawatan kesehatan, dan penyusunan kegiatan harian yang diberikan selama 5 minggu, dengan besaran sampel 62 responden. Hasil penelitian menunjukkan bahwa karakteristik responden didominasi oleh perempuan 93,6, usia 18-40 tahun 64,5, tingkat pendidikan dasar 61,3, penghasilan keluarga dibawah UMK Bogor 74,2, dan lama pengobatan >6 bulan 48,4. Penelitian ini membuktikan adanya peningkatan yang bermakna pada pelaksanaan fungsi perawatan kesehatan keluarga p value 0,00 dan perilaku pencegahan penularan TB Paru p value 0,00 pengetahuan, p value 0,01 sikap, dan p value 0,00 keterampilan di kelompok intervensi. Edukasi kesehatan terstruktur terkait TB Paru dapat menjadi alternatif pilihan intervensi keperawatan untuk keluarga di komunitas.

.....Behavior of Pulmonary Tuberculosis Transmission in Family at Bogor Regency Pulmonary TB is stated as global emergency for humanity by WHO. Families who live at home with Pulmonary TB clients are population at risk. This study used quasi experimental pretest and posttest with control group design, and consecutive sampling method. Structured health education interventions included the presentation of materials on Pulmonary TB and its prevention, health care function and daily activities preparations. Intervention was given for 5 weeks with sample size 62 respondents.

The result of study showed that the characteristics of respondents were dominated by women 93.6, age 18-40 64.5, primary education level 61.3, low family income UMK Bogor regency 74.2, and treatment duration 6 months 48.4. This study proved significant increases in the implementation of family health care functions p value 0.00 and the prevention behavior of Pulmonary TB transmission p value 0,00 knowledge, p value 0,01 attitude, and p value 0,00 skill in intervention group. Structured health education related to Pulmonary TB could be an alternative choice of nursing intervention for families in the community.