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# The influence of community empowerment based on theory of planned behavior towards the knowledge and attitude of mothers with tuberculosis

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#### **ABSTRACT**

Healing Tuberculosis takes quite a long time. Therefore, the role of family and community in caring for sufferers is significant. The research aims to empower the community through a behavioral belief factor approach, namely behavioral control in the Theory of Planned Behavior model, to increase the self-efficacy of the target, namely mothers suffering from Tuberculosis, through increasing the knowledge and attitudes of mothers suffering from Tuberculosis. This research is quasi-experimental. This research was conducted in Pantai Labu Village, Deli Serdang Regency. This research experiment: Health promotion of Tuberculosis by Tuberculosis Ambassadors. Tuberculosis Ambassadors are mothers who have recovered from Tuberculosis and are trained to become agents of Change. The measuring instrument is a questionnaire. Sample Category: Mothers Suffering from Pulmonary Tuberculosis (n=50). Data analysis using the Paired T-test if the data is usually distributed and if the data is not normally distributed, the Wilcoxon test is used. The results show commitment from health cadres as Pulmonary Tuberculosis Ambassadors in Pantai Labu Village. There was an increase in the knowledge and attitudes of mothers with pulmonary Tuberculosis regarding pulmonary Tuberculosis (p-value < 0.05). Tuberculosis Ambassadors are effective as providers of health promotion.

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## INTRODUCTION

The family is the smallest unit of society, consisting of the head of the family and other family members who gather and live in a household. If one or more family members have health problems, it will affect other family members and the families around them. One disease often found in families is pulmonary Tuberculosis, and its cure requires care and attention from other family members. (Misfallah, 2020; Nazi'at & Nadatien, 2022). Healing Tuberculosis takes a long

time. Therefore, the role of the family in caring for sufferers is significant. The less-than-optimal role of the family in providing care and preventing transmission of Tuberculosis disease often impacts other family members(Juliana & Gabriel, 2021; Paneo & Nursasi, 2019). Tuberculosis sufferers can transmit the disease to family members and people around them. As a result, the number of Tuberculosis sufferers tends to increase(Ramayanti et al., 2022; Yanti, 2021).

Beban has the highest Tuberculosis globally, after India, China and South Africa. The estimated prevalence of Tuberculosis cases is 600,000, and the estimated incidence is 450,000 new cases per year, with the number of deaths reaching 65,000 people per year(World Health Organization, 2012). A report from the Directorate General of PP & shows the 2011 Tuberculosis Case Detection Rate (CDR) as much as possible at 82.2%, with a total of 194,780 new cases, and coverage of sufferers declared cured at 80.4% and complete treatment at 6.3%, with a success rate (SR) of 86.7%(KemenKes, 2012). In the Pantai Labu Village area, Deli Serdang Regency, 189 mothers were suffering from Tuberculosis in 2019, and in 2020 there were 189 people.

Various efforts to control Tuberculosis have been explored and promoted by WHO. Various complementary and innovative activities that empower national or international sources have also been implemented. For example, collaborative control of Tuberculosis and HIV, patient management strategies, drug resistance, control of marginalized and vulnerable groups, increasing access to quality and availability of medicines, expanding quality care services, empowering communities and families through social mobilization, health education, and other methods. An effective way to carry out Tuberculosis treatment in the community and increase sufferers' independence in care activities (Ogbuabor & Onwujekwe, 2019)(Organization, 2013).

Self-efficacy is a cognitive process related to an individual's comfort in doing something. It influences motivation, thought processes, emotional conditions and the social environment that shows a specific habit (Meagher, 2020). High self-efficacy can improve MDR- Tuberculosis treatment, while low self-efficacy will result in treatment failure (Sukartini et al., 2019). Everyone can have high self-efficacy if no significant obstacles are overcome, so the task is straightforward. This can happen because there are supporting factors that can increase motivation. People have strong confidence in their business even though something seems challenging, for example, Tuberculosis (Lee & List, 2021; Shipherd, 2019).

The family is a source of social support because mutual trust is created in family relationships. Individuals as family members will make the family a collection of hopes, a place to tell stories, ask questions, and express complaints when the individual is experiencing problems (Desviana et al., 2021; Diharja et al., 2022). Family empowerment is a process or effort to increase families' knowledge, awareness and willingness to maintain and improve health status (Audilla et al., 2022; Burke et al., 2020; Notoatmodjo, 2007; Pathony, 2019).

Increasing knowledge and awareness about ways to maintain and improve health is the beginning of health empowerment, which in turn creates the will to carry out health actions so that families can take action to behave healthily. Through family empowerment, which is a persuasion effort, it is hoped that families will take action to maintain and improve their health. The resulting changes or actions to maintain and improve health are based on knowledge and awareness through the learning process. This behavior is expected to last long and persist because it is based on awareness. This research is only an increase in knowledge and awareness about how to maintain and improve health, which is the beginning of community empowerment that can strive to live healthily for themselves, their families and the environment.

The connection with the Theory of planned behavior (TPB) explains the behavior that occurs in individuals because they intend to behave(Nurbaeti et al., 2019; Nuryanti et al., 2023). The belief relationship variable influences health behavior intentions. These variables are grouped into three, namely personal (attitude, personality, traits, values, emotions and intelligence), social (age, gender, education, race, ethnicity, income and religion), information (experience, knowledge and media exposure)(Ateş, 2020; Huang et al., 2020). Researchers determine that the Theory of

Planned Behavior has advantages over other behavioral theories. The Theory of Planned Behavior is a behavioral theory that can recognize the form of a person's belief, regarding control over something that will happen from the results of behavior (Ajzen 1991).

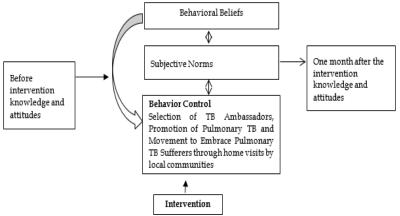
Behavioral beliefs, normative beliefs, and control beliefs determine intentions. Behavioral beliefs produce positive or negative behavior, normative beliefs produce subjective norms and control beliefs produce perceived behavioral control. Intention is a motivational factor that influences behavior. Intention consists of self-efficacy and internal motivation of the individual. Intention influences treatment compliance behavior in Tuberculosis patients (Bao et al., 2022; Parwati et al., 2021; Quraini, 2019).

Family support is included in control beliefs, which directly influence behavioral control. Controlled behavior can influence intentions or directly influence compliance with treatment for Tuberculosis sufferers. The occurrence of family support is supported by several primary factors (Background factors), including personal and social factors and information. Based on the chronology above, the author is interested in carrying out The Influence of Community Empowerment Based On Theory *Of Planned Behavior* Towards The Knowledge And Attitude Of Mothers With Tuberculosis.

## RESEARCH METHOD

This research is quasi-experimental. This research was conducted in Pantai Labu Village, Deli Serdang Regency. The intervention carried out as an experiment in this research was providing health promotion about Tuberculosis by Tuberculosis Ambassadors. Tuberculosis Ambassadors are mothers who have recovered from Tuberculosis. Before agents of Change promote health to Tuberculosis sufferers, Tuberculosis ambassadors are trained by researchers to become agents of Change. The socialization was conducted for 1 day starting from 8.30 – 12.00 WIB. The media used in this socialization were leaflets and media to provide information in the form of laptops, powerpoints, and projectors. The material provided was education about Tuberculosis, Behavioral Beliefs (Attitude), Normative beliefs (Subjective norms) and Control beliefs (Perceived behavioral control) in families, communities and the behavior of sufferers. Tuberculosis Ambassadors promote health through counseling in women's religious groups (perwiritan) and home visits. Before being given health promotion, the self-efficacy of Tuberculosis sufferers was measured.

Moreover, one month after the intervention, measurements were taken. The measuring instrument is a self-efficacy questionnaire, which was previously measured for the validity and reliability of the questionnaire with a Cronbach alpha of 0.784. The population in this study was all mothers suffering from pulmonary Tuberculosis, and the entire population was used as a sample (n=50). Data analysis using the Paird T-test.



**Figure 1.** Models involved in this research/research process

## RESULTS AND DISCUSSIONS

#### Result

#### Selection of Tuberculosis Ambassadors as agents of Change in society

Tuberculosis ambassadors are selected by first carrying out pulmonary Tuberculosis outreach by the Research team to PKK mothers and Health cadres. There were 15 participants in this socialization, namely PKK mothers and Health Cadres with mothers who have been declared cured of Tuberculosis. The socialization method used was a question-and-answer lecture, and at the end, a pulmonary Tuberculosis ambassador was selected. Five selected pulmonary Tuberculosis ambassadors who would transmit their knowledge and experience in preventing and undergoing Tuberculosis treatment to the surrounding environment, especially families suffering from Tuberculosis, were trained by researchers during the day. The training location was held at the village head's office. The media used in this training are leaflets and media providing information through laptops, PowerPoints and projectors. This Leaflet media is also a medium for Pulmonary Tuberculosis Ambassadors to provide education about Tuberculosis, Behavioral Beliefs (Attitude), Normative beliefs (Subjective norms) and Control beliefs (Perceived behavioral control) in the family, community and the sufferer's behavior. This Tuberculosis promotion intervention by Tuberculosis ambassadors aims to empower the community through a behavioral belief factor approach, namely behavioral control in the Theory of Planned Behavior model, to increase the selfefficacy of the target, namely mothers suffering from Tuberculosis, through increasing the knowledge and attitudes of mothers suffering from Tuberculosis. After carrying out a series of activities in outreach to PKK mothers and health cadres, two Pulmonary Tuberculosis Ambassadors were selected at the end of the activity. Pulmonary Tuberculosis Ambassadors who have been selected are given a sash as Pulmonary Tuberculosis Ambassadors at Labuan Beach, which the Village Head approves, the PKK Chairwoman and the Research Team, which in the end is a Pulmonary Tuberculosis Ambassador that promotes the prevention and control of Pulmonary Tuberculosis and a movement to embrace Pulmonary Tuberculosis sufferers in the Village environment. Pumpkin Beach.

## Home visits by Tuberculosis Ambassadors to Mothers Suffering from Pulmonary Tuberculosis

Home visit activities were conducted by Pulmonary Tuberculosis Ambassadors to mothers suffering from Pulmonary Tuberculosis, who were accompanied by a research team. Tuberculosis Ambassadors also carry out outreach on preventing pulmonary Tuberculosis at mothers' offices. Pulmonary Tuberculosis Ambassadors also made visits to the homes of mothers suffering from pulmonary Tuberculosis. This activity aims to reduce the stigma of Tuberculosis in society, and Tuberculosis sufferers receive support from the surrounding community and especially support from the family, as well as providing education about Tuberculosis. This activity is carried out to foster Behavioral Beliefs (Attitude), Normative beliefs (Subjective norms), and Control beliefs (Perceived behavioral control) in the family, community and sufferer behavior according to the research results.

Before and after this activity, community knowledge and attitudes regarding the prevention and control of pulmonary Tuberculosis were measured. The research team carried out this knowledge and attitude measurement.

**Table 1.** Frequency distribution of knowledge and attitude categories of mothers suffering from pulmonary tuberculosis (n=50)

Variable	Pre	Pre Test		Post Test	
	n	%	n	%	
Knowledge					
Good	4	8	47	94	
Not enough	46	92	3	6	
Attitude					
Good	3	6	48	96	

Variable	P	Pre Test		Post Test	
	n	%	n	%	
Not enough	47	94	2	4	
Amount	50	100	50	100	

Based on the table above, it can be seen that before the home visit by the Pulmonary Tuberculosis Ambassador (pre-test), the knowledge was 92% lacking, while the attitude before counseling (pre-test) was 94% poor, only 6% good. After being given intervention (post-test), good knowledge was 94%, and good attitude was 96%.

**Table 2.** Average distribution of knowledge and attitudes of mothers suffering from pulmonary tuberculosis (n=50)

from paintonary tubercurosis (if 50)					
Variable	Mean ± SD	Mean Change ± SD	p-value*		
Knowledge					
Before	$44.00 \pm 15.31$	$-39.30 \pm 7.148$	0.001		
After	$83.90 \pm 8.162$	-39.30 ± 7.146	0.001		
Variable	Mean ± SD	Mean Change ± SD	p-value*		
Attitude					
Before	$47.00 \pm 14.56$	26.40   5.515	0.001		
After	$83.40 \pm 8.045$	$-36.40 \pm 5.515$			

<sup>\*</sup>difference within groups (before and after) using paired t-test, at a significance level of 5%

Tables 1 and 2 above show that after the home visit by the Tuberculosis Ambassador, there was an increase in the average knowledge score of 39.30 and the excellent knowledge category about Pulmonary Tuberculosis. There was also an increase in the mean attitude value, namely 36.40, and they had a good attitude towards pulmonary Tuberculosis. The results of statistical tests using paired t-test statistics show differences in the community's average knowledge and attitudes toward preventing and controlling pulmonary Tuberculosis.

#### Discussion

The results of this research were that after home visits by Tuberculosis Ambassadors and socialization at the military service, there had been an increase in the average knowledge score of 39.30, and all were in the excellent knowledge category about preventing and controlling pulmonary Tuberculosis. There was also an increase in the mean attitude value, namely 36.40 and all had a good attitude towards pulmonary Tuberculosis. The results of statistical tests using the paired t-test showed differences in the average knowledge and attitudes before and after the socialization and home visits carried out by the Pulmonary Tuberculosis ambassadors. This research is supported by research results from(Muthia, 2016). There is a significant difference between the increase in knowledge of the test group and the control group, with a significance value (sig) of 0.041 (p<0.05). Conclusion. Health education using audiovisual media increases students' knowledge about Tuberculosis more than the lecture method. The same thing (Sumiyati et al., 2018) The research results show that health education using guidance and counseling methods through flip sheets and media leaflets significantly increases the knowledge of mothers of toddlers about pulmonary Tuberculosis in children (p-value=0.0001) and can also significantly improve the attitudes of mothers of toddlers about pulmonary Tuberculosis in children (pvalue=0.0001). Results of this research (Latif & Tiala, 2021)The average mean and min-max values in the intervention group (2.93) were higher and significant compared to the control group (1.27). Furthermore, the results of the Mann-Whitney test in the pre-post intervention group showed value 0.001 and the pre-post control group showed a value of value 0.003, which means a significant effect after being given educational actions via video or through leaflets in the WhatsApp group. Providing education via video on WhatsApp groups more effectively increases knowledge related to Tuberculosis prevention compared to using leaflets or standard media.

Tuberculosis Figure in Indonesia is increasing. One of the challenges in handling Tuberculosis is the lack of public awareness and concern for Tuberculosis disease. Some people still think that Tuberculosis is a disease of witchcraft, a curse and a hereditary disease. This negative view/stigma causes sufferers to be embarrassed and reluctant to go to health services. Some people are also indifferent to family members or neighbors who have had a cough for more than two weeks. Community involvement is needed to make the end Tuberculosis strategy a success. Changing behavior from indifference to caring is a pretty complicated process (Haldane et al., 2021; Kaaffah et al., 2023; Pradipta et al., 2021).

So far, the stigma of Tuberculosis as a hereditary and witchcraft disease still applies, thereby reducing self-efficacy at a more general level with dysfunctional coping and a higher level of anticipation of stigma. Mothers who suffer from Tuberculosis in the Pantai Labu Village area do the same thing. To avoid feeling embarrassed and worried about being shunned by neighbors, mothers with pulmonary Tuberculosis cope as if they are not sick. This hurts preventing the transmission of pulmonary Tuberculosis because sufferers do not carry out the prevention process for fear of being suspected of having Tuberculosis, such as not covering their mouths/using masks when coughing or communicating with other people (Pradipta et al., 2022; Stephani, 2018).

## The Important Role of Mothers in the Family

The mother is the central figure who plays a vital role in a family. Mothers have many roles and can do many things to meet the needs of all family members. The figure of a superwoman who can do many things, including cooking, caring for children, educating, organizing the house, etc. The many roles of mothers cannot be described. A mother provides balance in a family (Das et al., 2021)(Awaluddin et al., 2020).

Mother is an excellent figure in the family. He can be anything in a family. The mother's role in the family is enormous. He can protect, educate and teach various things to his children. A mother can also bridge family communication, for example, between father and child. As we know, mothers have a reasonably significant role in the family. Mother as a manager to manage household affairs. A family certainly needs someone who can manage all household needs. Mother as a teacher who educates children. Mothers can also be teachers who teach good things or bad things that should be avoided. Mother was also a chef who provided the family meals (Bravo-Moreno, 2019; Tornu et al., 2023).

There is no more excellent cook than a mother. Think about the food menu every day. The mother is the best chef, and she tries to serve delicious and nutritious but also varied food so that her family does not get bored when eating her cooking. The mother is the motivator in the family. Mothers cannot just prepare quality tea while sitting and relaxing with the family; they can also motivate their family members. She is also a loyal supporter of her husband and children, helping them achieve their dreams. When a family member gives up, the mother is the first person to raise enthusiasm and motivate the family not to give up easily.

A mother is also a nurse and doctor in the family. When you are sick, your mother can be a nurse who provides her family with a cup of warm tea and soup. Even if their children are sick, mothers can choose the best medicine or make their own traditional medicine. So, the mother's role in the family can be both a nurse and a doctor (Loveday et al., 2020; Tornu et al., 2023; Zvonareva et al., 2021).

There are still many roles a mother plays in a family. The mother is a significant figure who completes the role of the family in everyday life. A person's life cannot be separated from a mother. Being a mother is a challenging job. A mother is a significant figure who can carry out her duties tirelessly. A mother also carries a hefty burden and responsibility. Mothers have a big responsibility for their families, especially regarding the physical health of the entire family. Her own health and her family's health is also the mother's responsibility.

## **CONCLUSION**

There is a commitment from Tuberculosis C Ambassadors to be agents of change in society who promote Tuberculosis and reduce stigma in society. There was an increase in the knowledge and attitudes of mothers with pulmonary Tuberculosis regarding pulmonary Tuberculosis (p-value < 0.05). The findings of this research provide a new understanding of efforts to prevent and control Tuberculosis in the community, especially among homemakers. This research is contextual, and the results may differ depending on the type and conditions of the community where the intervention is carried out. The findings in this study have several important implications, both for readers as health information in an effort to increase knowledge / education about tuberculosis. In this study, researchers experienced several research limitations, there were some communities who were reluctant to be visited by TB Ambassadors to provide education about TB. The suggestion is that cross-sectoral cooperation and health institutions are needed to continue to provide education to the community so that TB cases continue to decline and the community is healthy.

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