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tuntutan fisiknya. Interaksi antara kesehatan mental dan dinamika keluarga bersifat dua arah, namun beberapa keluarga mungkin memprioritaskan perawatan individual, mengabaikan atau menepis perlunya pendekatan yang berpusat pada keluarga (Negash et al., 2022). Hubungan keluarga dapat memengaruhi kesehatan mental secara signifikan, baik memicu atau memperburuk penyakit mental, atau meringankan masalah emosional dan perilaku, yang mengarah pada hasil yang lebih baik (Saroca & Sargent, 2022). Sudah diketahui dengan baik bahwa dukungan keluarga yang kuat berfungsi sebagai penyangga pelindung, menawarkan keuntungan yang cukup besar bagi mereka yang bergulat dengan kondisi kronis. Secara khusus, dukungan ini meningkatkan kepatuhan pengobatan, menumbuhkan ketahanan, dan meningkatkan kesehatan psikologis secara keseluruhan, yang mengarah pada peningkatan nyata dalam kualitas hidup pasien.

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demikian, model ini memiliki relevansi empiris dan teoretis yang memadai untuk menjelaskan perilaku sehat berbasis konteks sosial-budaya.

7. Dibutuhkan pendekatan intervensi kesehatan berbasis keluarga dan komunitas dan perlunya integrasi layanan kesehatan medis dan konseling bagi penderita TB komorbid. Diperlukan pula peran para pengambil kebijakan untuk memwadahi intervensi berbasis komunitas ini. Program peningkatan literasi kesehatan akan lebih efektif jika melibatkan lintas sektoral sebagai unit perubahan sosial.

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4.10 Kesimpulan

Modul promosi kesehatan berbasis dukungan sosial, spiritual, budaya, dan literasi kesehatan terbukti efektif dalam meningkatkan pengetahuan dan sikap keluarga pasien TB komorbid, yang pada gilirannya dapat memperbaiki kondisi kesehatan jiwa pasien. Oleh karena itu, penting untuk terus mengembangkan dan menerapkan intervensi berbasis modul dalam mendukung peran keluarga dalam proses pemulihan pasien TB komorbid.

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spiritual, budaya, dan literasi kesehatan, serta dinilai sangat layak sebagai intervensi edukatif berbasis bukti. Kebaruan tahap ini terletak pada transformasi temuan teoretis menjadi intervensi praktis yang dapat direplikasi untuk promosi kesehatan jiwa pada pasien TB komorbid.

Secara integratif, penelitian ini menghasilkan kebaruan komprehensif dalam bidang kesehatan masyarakat, khususnya kesehatan jiwa pasien TB komorbid. Untuk pertama kalinya, dilakukan rangkaian penelitian berjenjang yang menggabungkan studi kualitatif, pengembangan model kuantitatif berbasis SEM, dan uji intervensi eksperimental berbasis modul keluarga. Sinergi ketiga tahap ini menghasilkan model dukungan keluarga integratif yang tidak hanya menjelaskan hubungan teoritis antarvariabel sosial–spiritual–budaya–literasi, tetapi juga membuktikan efektivitas penerapannya dalam meningkatkan kesejahteraan mental pasien TB komorbid. Hasil penelitian ini memperkaya literatur kesehatan masyarakat dengan pendekatan baru berbasis keluarga (*family-centered approach*) yang sensitif terhadap konteks budaya dan spiritual masyarakat Indonesia.

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