

INTERVENSI KEPERAWATAN BERBASIS BUDAYA TERHADAP PENINGKATAN CAKUPAN SKRINING TUBERKULOSIS

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Article Info	ABSTRAK
<p>Article History: Received 16/02/2026. Revised - Accepted 10/03/2026.</p> <hr/> <p>Keywords: Intervensi Berbasis Budaya Kelompok Berisiko Skrining Tuberkulosis</p>	<p>Penelitian ini dilaksanakan untuk menilai efektivitas intervensi keperawatan berbasis budaya terhadap peningkatan cakupan skrining tuberkulosis pada kelompok berisiko di Kabupaten Ende, Provinsi Nusa Tenggara Timur. Penelitian ini menggunakan desain quasi-eksperimental dengan pendekatan pre–post test with non-randomized control group. Sampel berjumlah 192 responden yang dipilih secara purposive, terdiri atas 104 responden kelompok intervensi dan 88 responden kelompok kontrol. Intervensi budaya dilakukan melalui pemberdayaan tokoh adat, tokoh agama, dan aparat desa sebagai penggerak komunitas, serta mobilisasi masyarakat untuk mengikuti skrining tuberkulosis secara partisipatif. Kelompok kontrol menerima edukasi standar berupa leaflet. Skrining tuberkulosis dilaksanakan satu bulan setelah intervensi menggunakan format skrining Kementerian Kesehatan. Hasil penelitian menunjukkan bahwa cakupan skrining tuberkulosis pada kelompok intervensi meningkat secara signifikan dari 17 menjadi 87 orang (67,31%), sedangkan pada kelompok kontrol meningkat dari 32 menjadi 56 orang (27,27%). Perbedaan peningkatan cakupan skrining antara kedua kelompok terbukti bermakna secara statistik ($p = 0,0001$). Penelitian ini menyimpulkan bahwa intervensi keperawatan berbasis budaya efektif dalam meningkatkan cakupan skrining tuberkulosis pada kelompok berisiko dan berpotensi menjadi pendekatan inovatif dalam penanggulangan tuberkulosis berbasis komunitas.</p>
	<p>ABSTRACT</p> <p><i>This study was conducted to evaluate the effectiveness of a culturally based nursing intervention in increasing tuberculosis screening coverage among high-risk populations in Ende Regency, East Nusa Tenggara Province. A quasi-experimental study with a pre–post test non-randomized control group design was employed. A total of 192 respondents were selected using purposive sampling, consisting of 104 participants in the intervention group and 88 in the control group. The cultural intervention involved empowering traditional leaders, religious leaders, and village officials as community mobilizers and encouraging participatory community engagement in tuberculosis screening activities. The control group received standard educational leaflets. Tuberculosis screening was conducted one month after the intervention using the Ministry of Health screening format. The results showed that tuberculosis screening coverage in the intervention group increased significantly from 17 to 87 participants (67.31%), while the control group increased from 32 to 56 participants (27.27%). The difference in screening coverage between the two groups was statistically significant ($p = 0.0001$). It was concluded that</i></p>

culturally based nursing interventions were effective in improving tuberculosis screening coverage among high-risk populations and offered a promising community-based strategy for tuberculosis control.

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