

## Health Behavior Models and Mental Health Literacy in Realizing Family Resilience

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**Abstract: Health Behavior Models and Mental Health Literacy in Realizing Family Resilience.** **Objektive:** The family is the most important unit in forming health behavior to create a resilient family that is happy and prosperous as the basic foundation for the integrity of strength and sustainable development, thus the family is the heart of an individual's life. To live a life, the main key is physical and mental health, if the condition of the body and soul is healthy, then individual activities and activities will run smoothly and in accordance with expectations. The aim of this research is to obtain a fit model between mental health literacy and health behavior to increase family resilience. In addition, it examines the relationship between mental health literacy and health behavior to increase family resilience. **Method:** The method in this research is quantitative by conducting model tests using Structural Equation Modeling (SEM). The subjects in this research were 125 married families, men and women throughout Indonesia. The measuring instrument used is the health belief model scale for exercise (HBMS-E), while mental health literacy uses the Mental Health Literacy Questionnaire- for adults (MHLq-fA) and family resilience uses the family functioning style scale measuring instrument. (FFSS). **Finding:** The research results show a relationship between mental health literacy and health behavior to increase family resilience. BesidesThe modified model obtained shows that there is no difference between the model and the data. So the model is theorized *fit* with data. **Conclusion:** The model is theorized fit with data.

**Keywords:** mental health literacy, family resilience and health behavior.

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## ■ INTRODUCTION

The pandemic conditions that have been going on since the beginning of 2020 have caused various problems to arise, such as psychological problems in the form of people feeling afraid, worried and even experiencing anxiety about contracting the Covid-19 virus. This outbreak is able to change the world order of humans, who as social creatures require direct interaction but must be distracted by encounters with the virtual world. As a survey showed that 50% of people felt afraid to carry out daily activities outside the home during the pandemic, 23.5% of people felt

very afraid to carry out normal activities like before the pandemic.

The health conditions of the Covid-19 pandemic are a top priority in providing policies such as education, the economy and other areas. Health is very important for human survival because with a healthy body, humans can carry out their activities well and not experience difficulties. Negative emotions that arise in society such as worry, fear and anxiety cause the body's immune system to decrease and have an impact on health conditions. (Harjudin, 2020). After various policies were implemented and taken by

the government, one of them was the implementation of large-scale social activities or known as PSBB as a form of preventive effort for prevention measures taken by the government in the spread of the corona-19 virus. Currently the government has implemented a new normal order, in mensMaking the process of implementing the new normal order successful requires cooperation from various parties such as the government, business actors, education practitioners, health practitioners and the community. The new normal order policy requires adaptation of various

elements. The new normal does not mean that the Covid-19 virus has disappeared from this world, but the recovery rate is getting bigger and how society is able to live side by side with Covid-19 while still maintaining health protocols in carrying out its activities. Even in the new normal and post-pandemic era, people are still encouraged to be vigilant in maintaining their health, in accordance with several research results on health literacy in the community as showed in the figure below.



**Figure 2.** portrait of health literacy in the community

Blum & Knollmueller (1975) describes there are four pillars that influence an individual's level of health, namely heredity, environment, health services, and behavior. The factors that have the greatest influence are environment and behavior. An example of behavior that can influence health is individual health behavior, this is a parameter that determines whether an individual has awareness about health or not. Health behavior in the new normal period is important in efforts to improve public health. The fact is that there are still many people who have bad health behaviors such as not complying with health protocols, underestimating their level of health which without realizing it has endangered themselves and others.(Anwar & Julia, 2021);(Yunus & Rezki, 2020);(Zahrotunnimah,

2020). Health behavior is an individual's response to objects related to physical, mental and social health, how individuals behave, have knowledge and awareness to improve health in themselves and others in an effort to maintain their physical, mental and social health.(Diaz, 2019). The public's lack of awareness of maintaining physical, mental and social health is due to a lack of information about the importance of maintaining physical, mental and social health. That's why it is important to have mental health literacy, especially to maintain well-being, happiness and a healthy condition physically, mentally and socially. Mental health literacy according to(Jorm et al., 2006) elaborate efforts to gain knowledge with actions in preventing and seeking mental health help.

Sorensen (2012) explained that health literacy can be obtained through understanding the health information and services needed by them to manage and make the right decisions for the health of themselves and their families. The family as the smallest unit has an important role in improving welfare, happiness and health. The strength of national development is rooted in the realm of the family element as a micro community in social society, a prosperous and healthy family is the basic foundation for the integrity of the strength and sustainability of development. The importance of strengthening family resilience or what is called family strength is an important component in national development efforts, this is in accordance with Law no. 10 of 1992 concerning population development and building prosperous families. Family strength is family resilience which shows the capability of family members both individually and as a family unit in facing crises, stress, and strengthening the function of the family system (Danjpmann & Tiftik, 2014). When families are able to find solutions and face crises together, they will be able to encourage the development of the family's potential in facing a crisis, and will help improve the welfare and resilience of the family. This is reinforced by Carr (2015) who states that the construct of family strength is the foundation of the family which has protective, affectional, socio-cultural, educational and other functions.

## ■ METHOD

### Participants

The method in this research uses a quantitative approach with a population of all Indonesian people. The number of subjects in this research is 500 subjects who will be given questionnaires in the form of mental health literacy, health behavior and family resilience to see whether the three construct models fit or not and see the correlation model between constructs. that is measured.

### Instrument

The measuring instrument used in this study to measure health behavior was the health belief model scale for exercise (HBMS-E), while mental health literacy used Dias et al's Mental health literacy questionnaire- for adults (MHLq-fA) (20 and resilience). families use the family functioning style scale (FFSS) measuring instrument (Danjpmann & Tiftik, 2014). Researchers adapted the three measuring instruments to suit the culture and characteristics of the research subjects.

### Research Design and Procedures

Quantitative Approach is a type of research based on the philosophy of positivism, which is used to investigate a specific population or sample, with random sampling and data collection using indicators, and the data analysis is statistical in nature (Afthanorhan, 2013). It also employs data analysis methods, namely the Structural Equation Model (SEM).

### Data Analysis

Structural Equation Model (SEM) is an analytical technique that allows for the simultaneous testing of a series of relationships. The relationships are built between one or more independent variables and one or more dependent variables. Each variable can take the form of an indicator or a construct built from several indicators. SEM is an integrated approach between two analyses, namely indicator analysis and path analysis. Afthanorhan et al. (2020) stated that 'structural equation models are well recognized as the most important statistical method to serve the above purpose and can be applied to many fields'. SEM uses indicator methods to present data for achieving research objectives and can apply many models to achieve research goals and problem statements. There are three constructs used in this research: health behavior, mental health literacy, and family resilience.

## ■ RESULT AND DISCUSSION

<b>Model Fit</b>									
Model	$\chi^2$ (sig)	df	CFI	TLI	RMSEA	RMSEA Confident Interval 90%			SRMR
						Lower	Upper	P-value	
3 Factor Unmodified	141.497 (0.000)	51	0.891	0.858	0.109	0.088	0.130	0.000	0.081
3 Factor Modified	53.571 (0.109)	42	0.986	0.978	0.043	0.000	0.074	0.612	0.057

<b>Unmodified Family Resilience</b>							
Dimension	Sub	Estimate	Std.Err	Z-value	P-value	Note	
Health Behavior Models	Perceived Severity of not using Immunity Certificates (dim1)	0.694	0.073	9.460	0.000	P	
	Perceived COVID-19 Susceptibility (dim2)	0.872	0.066	13.146	0.000	P	
	Perceived COVID-19 Severity (dim3)	0.914	0.064	14.181	0.000	P	
	Perceived Benefits of Immunity Certificates (dim4)	-0.613	0.076	-8.065	0.000	P	
	Perceived Barriers of using Immunity Certificates (dim5)	-0.601	0.076	-7.866	0.000	P	
Mental Health Literacy	Knowledge of mental health	0.686	0.079	8.665	0.000	P	
	Erroneous beliefs / stereotypes	0.005	0.090	0.056	0.956	X	
	First aid skills / help seeking	0.684	0.079	8.635	0.000	P	
	Self – help strategies	0.801	0.076	10.481	0.000	P	
Family Resilience	Interactional patterns and family values	0.958	0.067	14.327	0.000	P	
	Family commitment	0.704	0.074	9.473	0.000	P	
	Intrafamily coping strategies	0.590	0.077	7.644	0.000	P	

<b>Modified Ketahanan Keluarga</b>							
Dimension	Sub	Estimate	Std.Err	Z-value	P-value	Note	
Perilaku Kesehatan	Perceived Severity of not using Immunity Certificates (dim1)	0.694	0.073	9.516	0.000	P	
	Perceived COVID-19 Susceptibility (dim2)	0.864	0.065	13.238	0.000	P	
	Perceived COVID-19 Severity (dim3)	0.921	0.063	14.518	0.000	P	
	Perceived Benefits of Immunity Certificates (dim4)	-0.609	0.076	-8.041	0.000	P	

	Perceived Barriers of using Immunity Certificates (dim5)	-0.573	0.074	-7.722	0.000	P
Literasi Kesehatan Mental	Knowledge of mental health	0.693	0.080	8.621	0.000	P
	<b>Erroneous beliefs / stereotypes</b>	<b>0.065</b>	<b>0.092</b>	<b>0.705</b>	<b>0.481</b>	<b>X</b>
	First aid skills / help seeking	0.711	0.080	8.943	0.000	P
	Self – help strategies	0.707	0.075	9.437	0.000	P
Ketahanan Keluarga	Interactional patterns and family values	0.901	0.067	13.461	0.000	P
	Family commitment	0.725	0.072	10.010	0.000	P
	Intrafamily coping strategies	0.604	0.074	8.131	0.000	P

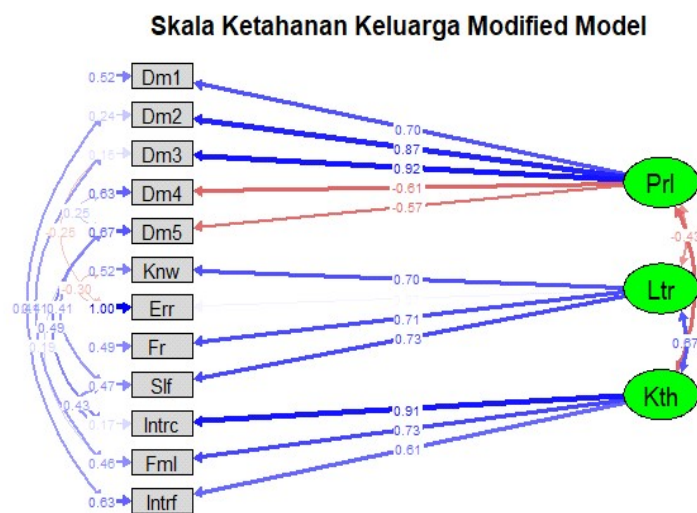


Figure 4. Modified model of family resilience, healthy behavior and mental health literacy

After modification, the values obtained were  $\chi^2 = 53.571$  ( $p = 0.109$ ),  $df = 42$ ,  $CFI = 0.989$ ,  $TLI = 0.978$ ,  $RMSEA = 0.043$  (lower = 0.000, Upper = 0.074,  $p < 0.05$ ),  $SRMR = 0.057$ . It can be interpreted that the modified model shows there is no difference between the model and the data. So the model is theorized fit with data. Results can be seen in the

table “modified”. From the table, it can be seen that the factor loadings have values between -0.609 to 0.921. There is also a sub-dimension that has the lowest loading, namely “erroneous beliefs/stereotypes” with a factor loading value of 0.065 ( $p > 0.05$ ). This means that this sub-dimension does not measure the dimension of mental health literacy.

Table 1. Inter-factor correlation

	Behavior	Literacy	Resilience
Behavior	1.000		
Literacy	0.435***	1.000	
Resilience	0.598***	0.668***	1.000

Note. \*\*\* =  $p < 0.001$ , \*\* =  $p < 0.01$ , \* =  $p < 0.05$

Table 1 further explains that there is a relationship between mental health literacy and family resilience of 0.66, meaning that when family members have high mental health literacy, the family's resilience is also high. Then there is a relationship of 0.598 between health behavior and family resilience, meaning that the higher the health behavior, the lower the family resilience. Likewise, mental health literacy and health behavior are related by 0.435, meaning that the higher the mental health literacy, the lower the health behavior.

The family is the smallest unit in social and community life, which is why the pillar of national resilience lies in the resilience of the family. Family resilience describes interaction and communication between individuals in harmony, physical and mental well-being (Olson et al., 2014). More Buzzanell (Buzzanell, 2017) explains that the function of the family is as a shield in the defense and protection of family members, apart from being a driver and building connections or relationships with other people to foster positive emotions in family members. Walsh (Walsh, 1996) states that the emotions that arise in family members will significantly influence the stress and happiness of the family. This is supported by Carr (Makruf, 2022) and Folkman and Moskowitz (Folkman & Moskowitz, 2000) which explains that family resilience influences regulations in family life. Family resilience refers to the family as a functional system caused by family members facilitating each other and providing a positive influence as well as togetherness between families Carr (2015).

Patterson (Patterson, 2002) states that family resilience can contribute positively to the protection of family members who are at risk and can prevent the risk of family problems (Puspitawati et al., 2018). Apart from that, the family is the best support and no service to family members in order to create a strong feeling of affection, love, gratitude and togetherness among

family members thereby strengthening the family's resilience. (Afifi et al., 2016). Furthermore, Affleck and Tennen, (Affleck & Tennen, 1996) in his research explains that the family is the basis for protecting physical and mental health.

Health is the basis that every individual must have to be able to carry out daily activities well and optimally. Health is not limited to physical conditions alone but also physical, mental and social health must be equally considered in order to achieve optimal health for each individual (WHO, 2014). WHO further explains that health is a basic need for individuals, so that the representation of health according to WHO is the fulfillment of four pillars, namely being able to recognize one's potential, being able to overcome stress faced in daily life, being productive and useful for others. In the last decade society and even the world has become concerned about mental health. This is because it is sad that people who experience mental disorders do not access health services and seek treatment from psychologists or psychiatrists. This low coverage is of course caused by various factors, one of which is the low level of public knowledge regarding mental health literacy.

Mental health literacy is an individual's knowledge or beliefs about mental disorders that help with recognition, seeking help or management and preventive or prevention actions. (Praherso et al., 2020). Furthermore Grubic et al. (2020). explains that knowledge and awareness of individual mental health will contribute positively to prevention efforts, efforts to obtain relief or assistance, access to treatment and effective self-help strategies to reduce mild mental disorders as well as the existence of psychological first aid skills for individuals experiencing a mental health crisis. Mental health literacy in the community is carried out by conducting campaigns or education about the importance of being aware and aware of mental health. Apart from that, it also promotes mental

health to the community in general with the aim that people have awareness and can access health services in order to obtain appropriate services and treatment. (Praherso etc., 2020).

Psychological resilience is the ability of a family to manage and have positive emotions in the family so as to create a positive self-concept. If family members have a positive self-concept then any problems or trials they face will be accepted positively too. This means that the family has the ability to learn lessons from every event that occurs, whatever and whatever its form. It is not easy to blame other people or events that occur, but rather to look for solutions to all the challenges and problems that are before our eyes. The ability to manage emotions and build a positive self-concept is the key in dealing with family health problems. Health behavior is an individual's response to objects related to physical, mental and social health, how individuals behave, have knowledge and awareness to improve health in themselves and others in an effort to maintain their physical, mental and social health (Sarafino & Smith, 2012) The public's lack of awareness of maintaining physical, mental and social health is due to a lack of information about the importance of maintaining physical, mental and social health.

## ■ CONCLUSION

Based on the research results, it can be concluded that:

- a. There is a fit model between mental health literacy and health behavior to increase family resilience.
- b. There is a positive relationship between mental health literacy and health behavior and family resilience
- c. There is a positive relationship between mental health literacy and family resilience. This means that the higher mental health literacy, the higher the family resilience.
- d. There is a positive relationship between mental

health literacy and health behavior. This means that the higher the mental health literacy, the higher the physical health behavior.

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