

Research Article



ANALYSIS OF THE HEALTHY LIVING COMMUNITY MOVEMENT PROGRAM WHICH WAS CARRIED OUT WITHOUT ANY POLICY IN THE INDUSTRIAL AREA IN KONAWE REGENCY

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ABSTRACT

Background: Based on the results of a short interview with the Konawe District Health Office Health Promotion Program, it was explained that the Healthy Living Community Movement policy had not been implemented due to many factors. One of them is the absence of a legal umbrella in the form of a district head's regulation that has been issued. Therefore the author feels interested in conducting research related to the title Analysis of Healthy Living Community Movement Activities carried out without any Policy being made in Industrial Areas in Konawe Regency

Methods: Qualitative research uses a case study approach, with a triangulation method. The sample in this study consisted of Key Informants (1 person), Main Informant (5 people) and Supporting Informants (5 people), by taking samples using the QSR NVivo 12 application.

Results: Informant interviews about Healthy Living Community Movement activities carried out without any policies being made in the industrial area of Konawe Regency which stated that there were guidelines for implementing Healthy Living Community Movement activities, availability of budgetary, human resources and socialization of activities that were comprehensive and with the support of commitment from the government in the industrial area of Konawe Regency.

Conclusion: Healthy Living Community Movement activities without a Health Policy are due to the existence of guidelines for Healthy Living Community Movement implementation, budget and human resources, implementation of socialization and local government support.

Keywords : *Healthy, Living, Community, Movement, Policy*

INTRODUCTION

Health development is essentially an effort carried out by all components of the Indonesian nation which aims to increase awareness, willingness and ability to live healthily for everyone in order to realize the highest degree of public health. Indonesia is currently experiencing an epidemiological transition marked by increasing mortality and morbidity from non-communicable diseases (NCDs) such as stroke, heart disease, diabetes and others. Although morbidity and mortality from communicable diseases are decreasing, the prevalence of disease in general is still quite high.(1)

Today, Indonesia is facing a triple burden in the health sector. These three health problems are communicable diseases where the number of cases is still high, non-communicable diseases whose prevalence is increasing, and diseases which have previously been resolved are reappearing. Shifts in disease patterns (epidemiological transitions) in the last 30 years have been caused by changes in lifestyle in society. This triple burden will become a threat to the nation because it causes people's productivity to be disrupted by Non-Communicable Diseases and unhealthy lifestyles.(2)

Based on the results of Basic health research from 2008, 2013 and 2018 it shows that the prevalence of Non-Communicable Diseases continues to increase. An increase in the number of Non-Communicable Diseases cases also occurred in Konawe district. Konawe district health profile data, from 2019 to 2021 types of hypertension, diabetes mellitus, stroke and joint/rheumatic/gout disease the number of cases has increased. The increase in Non-Communicable Diseases is influenced by unhealthy lifestyles. The risk factors that

influence Non-Communicable Diseases are smoking with a national prevalence of 24.3%, consumption of alcoholic beverages with a prevalence of 3.3%, lack of physical activity with a proportion of 33.5%, and insufficient consumption of vegetables and fruit with a proportion of 95.5%.(3)

Law Number 36 of 2009 article 158-161 states that efforts to prevent, control and handle Non-Communicable Diseases are carried out by the government, local government and the community. These efforts can be carried out through promotive, preventive, curative and rehabilitative activities. One of the promotive and preventive efforts in preventing Non-Communicable Diseases is Healthy Living Community Movement. Systematic and planned movement carried out by all components of the nation together with awareness, willingness and ability to behave healthily and improve the quality of life. In accelerating and synergizing promotive and preventive efforts to live a healthy life, Presidential Instruction Number 1 of 2017 concerning Healthy Living Community Movement was stipulated.(4)

Since Presidential Instruction No. 1 of 2017 concerning Healthy Living Community Movement was promulgated, some provincial governments have taken the first steps by preparing various legal umbrellas that will become the basis for the activities of the regional governments under them (districts/cities) and related OPDs. The latest development, related to Healthy Living Community Movement policy data, shows that around 15 provinces have issued Governor Regulations, namely the Provinces of South Sumatra, Lampung, DIY, Central Java, West Nusa Tenggara, North Sulawesi, Southeast Sulawesi, Gorontalo, Riau, Bali, East Kalimantan, Jambi, South Kalimantan,

East Java and North Kalimantan. 7 provinces issued governor circulars, namely South Sulawesi, West Kalimantan, Island Babylon, West Sumatra, North Sumatra, Central Kalimantan and Bengkulu. 4 provinces issued Governor Instructions, 2 provinces issued Governor Decrees, and 3 provinces are still in the process of formulating policies, namely Banten, Papua, West Papua. As for Regencies or Cities.(5)

In the early stages in 2016-2017, Healthy Living Community Movement nationally began by focusing on 3 activities, namely doing 30 minutes of physical activity per day, consuming vegetables and fruit and having regular health checks. Healthy Living Community Movement is expected to increase community participation and participation for a healthy life, increase community productivity and reduce the burden of health costs. Whereas currently, the Healthy Living Community Movement program consists of 6 (six) main activities, namely increasing physical activity, increasing clean and healthy living behavior, providing healthy food and accelerating nutrition improvement, increasing prevention and early detection of disease, improving environmental quality and increasing education on healthy living. The program includes five Healthy Living Community Movement indicator clusters, namely the increased physical activity cluster.(6)

The policy from the President instructs all Ministries, Non-Ministerial Government Agencies, Social Security Administrator Health, as well as Governors and Regents/Mayors to establish policies and act according to their respective duties, functions and authorities. In accordance with the mandate from the Presidential Instruction, then the Governor of Southeast Sulawesi followed up by enacting Governor

Regulation Number 35 of 2017 concerning Healthy Living Community Movement.(5)

A policy that has been set must be implemented in order to have the desired impact or goal. Policy implementation is the implementation of laws in which various actors, organizations, procedures and techniques work together to carry out a policy in an effort to achieve policy or program objectives. The success of a policy implementation is determined by 20% planning, 60% implementation and the remaining 20% how we control the implementation.

The Konawe district area has now become a mining industrial area. One of the nickel smelters that has been operating to date is PT. Virtue Dragon Nickel Industry (VDNI) and PT. Obsidian Stainless Steel (OSS) which is located around the Work Area of the Morosi Health Center and Laosu Health Center, Konawe Regency.

The intended impact is the emergence of various health problems such as Acute Respiratory Infection, tuberculosis, polluted water, and the non-implementation of occupational health and safety as well as changes in clean and healthy lifestyles. Besides that, mining can also have an impact on health conditions through the social problems it brings. Men arrive looking for work in the mines, women who need income can become sex workers, and this combination can be a source that can quickly spread HIV/AIDS infection and other sexually transmitted diseases.(7)

As an effort to prevent these health problems, Healthy Living Community Movement can do it through the implementation of healthy living behaviors by the community in order to improve their quality of life. The priority targets for Healthy Living Community Movement are

health workers, policy makers, institutions and the community. While the perpetrators are all components of the nation. Community empowerment efforts are needed to increase knowledge, awareness and abilities of individuals, families and communities. The Health Center is the spearhead in organizing Public Health Efforts which are responsible for health problems in the working area of the Health Center.(8)

METHODS

This research method is a qualitative research using a case study approach, with the triangulation method.(9) This research was conducted in Konawe Regency and the industrial area health center in Konawe Regency from February to April 2023. The sample in this study consisted of Key Informants (1 person), Main Informant (5 people) and Supporting Informants (5 people). In this study, the samples were taken from people within the scope of the research who could provide information about the situation and background conditions of the research, which were then analyzed using the QSR NVivo 12 application.

RESULTS

Table 1 shows that the biggest causes of Healthy Living Community Movement activities being carried out without any policies being made in the Konawe Regency industrial area were due to implementation instructions (30.8%), resources (28.8%), outreach (21.2%) and government support (19.2%).

Figure 1 shows that the biggest reason why Healthy Living Community Movement activities are carried out without any policies being made in the industrial area of Konawe

Regency is due to implementation guidelines of 30.8% and the lowest is due to government support of 19.2%.

1. Implementation Guide

The results of interviews with informants stated that with the guidebook for organizing Healthy Living Community Movement activities from the provincial health office and the current technical guidelines for Health Operational Assistance in the industrial area of Konawe Regency, Healthy Living Community Movement activities can run without any policies. This is also supported by information from several informants. Here's an excerpt of the interview:

"...because we have only followed the implementation guidelines from the Provincial Health Office..."(YM, 44 Years).

"...because most Healthy Living Community Movement activities are funded from non-physical Special Allocation Fund funds from the central government for the implementation of Healthy Living Community Movement in districts..."(YM, 44 Years).

"We will continue this activity because it is included in the Health Promotion program and is funded by Health Operational Assistance funds. Automatically these activities must be carried out..." (HF, 46 years).

2. Resource

The results of interviews with informants stated that with the existence of human resources, budgetary resources and infrastructure in the current industrial area of Konawe Regency, Healthy

Living Community Movement activities could run without any policies. This is also supported by information from several informants. Here's an excerpt of the interview:

"As for the team, it's definitely promokes. And according to information from the programmer, they formed a team of approximately three people" (HF, 46 years).

"...for print media through our posters, what we do is use posters and leaflets as well as banners..." (IR, 36 years).

"...We are here at the Morosi Health Center, we got a motorbike. The motorbike is specifically for Promkes. So the motorbike really has a device like a loudspeaker..." (HF, 46 years).

3. Socialization

The results of interviews with informants stated that the process of conveying Healthy Living Community Movement information in the industrial area of Konawe Regency was carried out during coordination meetings at the sub-district level, villages, Integrated Service Post, and WhatsApp groups. Healthy Living Community Movement socialization in the community involves health cadres, using media such as print media (leaflets, posters and billboards), electronic media (mobile phones), means of transportation (Healthy Living Community Movement motorbikes and cars), and social media (whatsapp). This is also supported by information from

several informants. Here's an excerpt of the interview:

"For the Healthy Living Community Movement socialization activity at the Morosi Health Center, we have carried out this activity. Where our socialization coincided with the coordination meeting at the sub-district level..." (HF, 46 years).

"... What we have done is outreach mainly through me, because I am a programmer, I socialize in villages..." (IR, 36 years).

"... ever by means of counseling ..." (RN, 30 years).

"... counseling about Healthy Living Community Movement..." (NR, 48 years).

"... there was once a counseling session at the Posyandu about the Healthy Living Community Movement..." (FT, 38 Years).

"...counseling has ever been carried out..." (ST, 38 years).

"... extension of community movements..." (NT, 37 years).

4. Government Support

Based on the results of interviews with informants, the form of government support in the industrial area of Konawe Regency is in the form of a commitment to community empowerment in the health sector, not only from the health sector but other sectors besides health, such as support

DISCUSSION

Healthy living community movement activities carried out without any policies being made in the industrial area of Konawe Regency

a. Implementation instructions

Implementation guidelines for implementing the Healthy Living Community Movement policy include guidelines for implementing Healthy Living Community Movement activities from the provincial health office which are used as a reference in carrying out activities.

The results of interviews with informants stated that implementation guidelines were the biggest cause of Healthy Living Community Movement activities being carried out without any policies in the industrial area of Konawe Regency. The guidelines for implementing Healthy Living Community Movement activities used by the health office and Health Center in the industrial area of Konawe Regency are a guidebook for implementing Healthy Living Community Movement activities and technical instructions for Health Operational Assistance.

States that in the implementation instructions it is necessary to share tasks, responsibilities, activities or programs in several work units according to their respective fields. With this in mind, implementation will be more effective because it is carried out by competent and capable organizations.

Study (10) stated that the Health Operational Assistance program was a form of government support for the implementation of Health Center operations. The government hopes that health center staff and their network will carry out promotive/preventive health service activities and increase community participation in promotive and preventive health efforts. The results of data processing inform that almost all health

centers receive Health Operational Assistance funds and are the largest source of funds, around 80 – 90%, for the operation of health promotion activities and community empowerment.

b. Resource

Resources in implementing the Healthy Living Community Movement policy include human resources, budgetary resources and infrastructure.

The results of interviews with informants stated that the human resources involved in implementing the Healthy Living Community Movement policy in the industrial area of Konawe Regency were all components of the government and society. According to the Healthy Living Community Movement guidebook, it is stated that Healthy Living Community Movement actors include both central and regional governments, the world of education, the private sector and the business world, community organizations, individuals, families and communities.

Resource the budget for Healthy Living Community Movement activities in the industrial area of Konawe Regency is integrated into health promotion and community empowerment activities. Adding the results of interviews with informants from the head of the health promotion department and the head of the Health Center, they explained that the budget for Healthy Living Community Movement was allocated to the Health Operational Assistance of the Health Center, because the Healthy Living Community Movement indicators had been integrated into the activities/promkes program. According to research from Paramita et al, states that the minimum budget standards for health promotion activities and community empowerment are clearly regulated in regulations.

Infrastructure in implementing the Healthy Living Community Movement policy is also needed.

Infrastructure facilities are used to support operational activities. The results of interviews with informants stated that the infrastructure used to support the implementation of the Healthy Living Community Movement policy was adequate. The intended infrastructure includes the availability of health education media such as motorbikes and Healthy Living Community Movement cars as well as printed media in the form of leaflets and billboards.

Study (10) stated that the use of Health Operational Assistance funds was more dominant for activities to increase the education of health extension workers, to improve the management of school health businesses, to educate people about healthy lifestyles, to monitor evaluations, to train small/adolescent doctors, to advocacy, and to develop alert villages. This shows the optimization of Health Center the Health Operational Assistance funding is in accordance with the 2014 Health Operational Assistance technical guidelines.

c. Socialization

Socialization in the implementation of the Healthy Living Community Movement policy includes transmission, clarity and consistency. Transmission is the process of conveying policy information to both implementers and target groups.

The results of interviews with informants stated that the process of conveying Healthy Living Community Movement information in the industrial area of Konawe Regency was carried out during coordination meetings at the sub-district level, villages, Integrated Service Post, and WhatsApp groups. Healthy Living Community Movement socialization in the community involves health cadres, using media such as print media (leaflets, posters and billboards), electronic media (mobile phones), means of transportation (Healthy Living

Community Movement motorbikes and cars), and social media (whatsapp).

Process transmission in socialization affects the clarity of policy implementation. Clarity of communication can be assessed how implementers and target groups know the intent, content and objectives of the policy itself. The results of the interview stated that the delivery of Healthy Living Community Movement information carried out by the Health Center had been carried out clearly in accordance with the objectives and indicators of Healthy Living Community Movement. The clarity of this information has been felt by health cadres. According to health cadres, the Healthy Living Community Movement delivery was carried out by the puskesmas repeatedly.

The aspect of consistency in socialization is related to the delivery of content and objectives of activities that do not change. Based on the results of the Forum Group Discussion (FGD) that researchers conducted with cadre groups in the industrial area of Konawe Regency, the puskesmas has provided outreach related to Healthy Living Community Movement according to the indicators. In addition, the delivery of Healthy Living Community Movement is also carried out by integrating it into the health promotion programs/activities which are carried out at the Integrated Service Post according to different schedules.

Study (11) The Healthy Living Community Movement program is one of the tasks of health facilities such as health centers to provide outreach or provide explanations either verbally, in writing or in action to the community to improve health status.

Study (12) mentioned that the delivery of health information and education can be done through socialization which cannot be separated from the communication process, this is

an important thing for the government in conveying messages to the public.

d. Government support

Government support in the implementation of the Healthy Living Community Movement policy includes the attitude and commitment of the implementers. Based on the results of interviews with informants, the form of government support in the industrial area of Konawe Regency is in the form of a commitment to community empowerment in the health sector, not only from the health sector but other sectors besides health, such as support from the sub-district government, religious leaders and community leaders so that Healthy Living Community Movement activities are carried out without any policies at the Konawe district level. The attitude and commitment of good executors also need to be supported by the commitment of the leader. The leader's commitment in this case is the head of the Health Center in the industrial area of Konawe Regency.

Study (13) which is guided by the regulations of the ministry of health regarding the role of Community Health Centers to increase community involvement in community-based health efforts, namely supporting the achievement of national health development goals, increasing awareness, willingness and ability to live healthily for everyone who lives in their working areas, realizing the highest degree of health, as a driving center for health-oriented development, community empowerment, and a first-level service center.

Study (14) mentioned that the village government's participation can be seen from its roles and duties in budgeting village funds for public health efforts, facilitating all forms of activities in the village related to Community-Based Health Efforts, accommodating

and accommodating community aspirations. The role of the village government is to carry out government affairs and community interests by developing community independence and priorities and utilizing community resources through establishing policies, programs, activities, budget planning and community assistance according to community needs.

CONCLUSION

The Healthy Living Community Movement activities were carried out without any policies being made due to the existence of guidelines for the implementation of Healthy Living Community Movement, the existence of a budget and human resources, the implementation of socialization and the support of the local government. It is recommended that assistance be provided to related agencies, communication and coordination should be established, especially between the Regional Development Planning Agency and the Konawe District Health Office and the local Health Center.

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