

## ANALYSIS OF PUBLIC HEALTH DEGREE ON THE ARCHIPELAGO ISLAND COMMUNITIES IN DERAWAN ISLAND REGENCY DISTRICTS BERAU

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### Abstract

Public health issues are influenced by various factor (multiple causal), therefore the problem should be solved comprehensively. The Public health programs/activities/efforts directly or indirectly intended for disease prevention (preventive), health promotion (promotive), treatment (curative) and health recovery (rehabilitative). The coastal region is a region that is administratively far from downtown allowing the occurrence of health problems caused by limited access and infrastructure due to geographical conditions consisting of a group of islands separated by the sea. The objective of this research/study was to obtain data and information on the health status for preparation and implementation of appropriate and sustainable health programs.

This study is a survey that is directly observing the condition and the health problems found in coastal communities of derawan island including 100 samples by using simple randomized sample.

The survey and observation of 100 heads of households show that, the results show that (75%) archipelago community in the district of derawan island have problems managing household waste, (78,8%) lack of health insurance ownership, and (68%) had the smoking behaviour inside the house.

This study concluded that the archipelago communities in the district of derawan island have problems in the environmental health aspects, especially in waste management, administrative and health policy aspects especially in health insurance ownership and the health behavior aspects that shows high rates of smoking inside the house.

**Keywords :** Public health degree, health promotion, environmental health, administration and health policy, health insurance

### A. Introduction

Public health s mutlicausal problem, then the solution must be multidisiplinary. All activities either directly or indirectly intended for disease prevention (preventive), health promotion (promotive), treatment (curative) and health recovery (rehabilitative) is a public health efforts.

Public health efforts required a cooperation between the public and health workers by preventing disease and health recovery efforts. Supporting factors in improving health is a state of socio-economic, environmental health, maternal and child health, clean water, nutrition, health and safety, health promotion and reproductive health.

Public health efforts can be achieved if the government and the community work together to make prevention efforts by taking into account factors that have a contribution to the emergence of a variety of health problems, it is necessary for supporting data that will give a general overview of health problems in the region. Therefore it takes the efforts of public health degree assessment of coastal region which is a region that is administratively distant city center allows the health problems caused by the access and inadequate infrastructure, especially the coastal areas that are separated from the cluster of small islands.

## B. Method

The type of this research is observational with data collection on the health status of a particular community as well as the incidence of the disease for use in formulating hypotheses for further research. This study is a survey that is directly observing the state and health problems in the community and supported by secondary data collection in the island of Berau.

## C. Results and Discussion

Based on the survey results at Derawan

Island, Berau Regency, East Kalimantan with 100 respondents were interviewed. Results showed 86% of society illustrates that knowledge is still limited perception of sound that a "healthy" has the sense not sick. Indicator of clean and healthy behaviors, within the scope of births assisted by skilled health personnel still have 11% of the mothers delivered not with the help of medical personnel. Surely it can be seen from the figure there are groups of mothers delivered with no assistance of trained medical tenaga. Thus the group choose a risk or threat of safety and health

Tabel 1. Recapitulation Health Problems

No.	Pillars of Public Health	Indicators of Public Health Problem	Frequency	(%)
1.	Health Education and Behavioral Sciences	Perception of Health (limited to no pain)	86	86,00
2.	Behavior Clean and Healthy	1) Labor is not helped by non-medical personnel 2) Scope of exclusive breastfeeding 3) The water quality is not good 4) Consumption of vegetables and fruit 5) The presence of a smoker in the family	11 24 7 47 61	11,00 24,00 7,00 47,00 61,00
3.	Administration Health Policy	1) Ownership social security or health insurance	23	23,00
4.	Epidemiology	1) Degenerative non-communicable diseases 2) Family members who are sick prone children 3) The condition of a sick family member is ill or recovering from illness yet	44 25 14	44,00 38,50 21,50
5.	Health and Safety	1) Knowledge of respondents to the occupational risk to health 2) Use of Personal Protective Equipment at work	24 41	28,30 58,30
6.	Nutrition Family	1) How to use iodized salt when cooking with sows while cooking 2) How to cultivate vegetables washed in freshly cooked pieces	81 28	81,00 28%
8.	Health of both mother and child	1) Don't check the pregnancy to health care 2) Workers who help persalinanan (shaman) 3) Coverage of exclusive breastfeeding 0-6 months 4) Provision of colostrum (first milk yellowish liquid) 5) Mother gave birth at home	15 8 24 18 56	16,6 8,00 24,00 18,00 64,37
9.	Environmental Health	1) The water quality is not good 2) Disposal of waste water / sewage into any place 3) Trash open 4) Abolish the garbage by burning in the area around the house 5) Destroying waste by burying	7 29 33 75 20	7,00 29,00 33,00 75,00 20,00

of the mother and child at birth process. In the scope of exclusive breastfeeding, the data obtained from the interviews that the scope of exclusive breastfeeding is still at 24%. Respondents who did not breastfeed exclusively of around 14%. There are also respondents who expressed forget what has been breastfed exclusively or by 33%. For exclusive breastfeeding coverage needs to be improved further with efforts promotive of health workers. Given the importance of creating a healthy generation and smart for human resource development in the future.

Within the scope of the use of clean water for domestic use, that almost entirely been using clean water with a good-quality which amounted to 93%. Only 7% remaining that meet water needs with water that is less feasible. Good water quality obtained from clean water sources such as wells, PAM, or from rivers that could be easily accessed by the public.

At handwashing habits majority of respondents 92% have implemented a good way of washing hands with water and soap. There are also washing their hands with water does not flow using soap (6%), and only use running water only (2%). Later in the family latrine ownership of 100% of respondents indicated that 99% of respondents have household toilets in private, only 1% who do not have a toilet and riding in public toilets around. Subdistrict community latrine ownership on the island Derawan sufficiently showed that people no longer throw feces at random so as to pollute the environment.

The results showed that for the needs of people on the island Derawan of 100 respondents surveyed, 47% still consume rice and side dishes, as well as vegetables. 41% are already consuming foods with added fruit daily menu and another 12 percent had added milk consumption in daily food consumption to nutrition. Furthermore, the presence of smokers in the family of 100 respondents by 61% with smoking habits diverse. There are smoked in the house by 6.5%, out of the house by 10%, and those who smoke in any place 83.5%. And still very much of a smoker who has

not been able to avoid the smoking habit that can threaten the health of other family members.

On indicators of health policy administration, only 23% of respondents who reported having health insurance, such as BPJS independent, civil or military, beneficiaries or private contributions. Low ownership of health insurance shows that public awareness to have health insurance is still low. In fact, if we look at the usefulness of health insurance as a guarantor of fulfillment of current costs come without pain that can be predictable bias will be very important and deserves to be prioritized.

On epidemiological indicators, there is a 17% had suffered from infectious diseases to spread diarrhea 5%, 2% of dengue fever, tuberculosis 1%, and Upper Respiratory Tract Infection 13%. For infectious diseases, much less as compared to the incidence of non-communicable diseases. And the most susceptible to the disease in the head of the family are the children and then the mother and father. This is due to the vulnerability of children to environmental conditions and which is relatively low immunity than adults. Infectious diseases suffered by residents districts Derawan when seen from the disease is still very high vulnerability where as many as four people experiencing the death of 17 patients. While treatment efforts more dominant society come to the clinic because Derawan island communities rely heavily on them when the cure rate will be faster pain during treatment or medication in the clinic. Based on the results of the survey in the district of the island Derawan there are 44% of people suffering from the disease is not transmitted from a total of 100 respondents for non-communicable diseases that are hazardous (hypertension, cholesterol, decreased eyesight, arteriosclerosis, heart disease and diabetes). For most diseases ever suffered by the respondents included in other diseases such as headache / migraine, pain in the bones, and blood is low. Amount obtained was 44%, most of the respondents suffered from more than one, and some have been suffering all these diseases.

#### D. Conclusion

Based on research conducted on 100 respondents were interviewed, it can be concluded as follows:

1. Indicators PKIP, healthy perception of pain is not only limited to 86%.
2. Indicator Behavior Clean and Healthy covering births assisted by skilled health personnel 89%, coverage of 24% exclusive breastfeeding, use of clean water for household needs 93%, 100% of them simply washing hands with running water without soap, 99% of respondents have their own latrines, 41% of respondents had been industrious fruit and vegetable consumption, 61% of smokers in the family where 55 of them were still smoking in the house and any place.
3. Indicators of Health Policy Administration with regard to the ownership of social security or health insurance about 23%.
4. Indicators of occupational health and safety risks of respondents who know his work by 61%, the use of personal protective equipment (PPE) which is used by 44%.
5. Family Nutrition indicators most respondents perceived that healthy food is a healthy food by 85%, the use of iodized salt covers 100% of respondents.
6. Indicators of maternal and child health, prenatal care has been carried out and covers 73% of the 90 respondents mother, pregnancy tests done at the midwife (27%) and health centers (49%), labor is done in the home by 63%, 89% percent of births assisted by medical personnel, 18% of mothers give colostrum to the baby after delivery, breastfeeding infants coverage 24%.
7. Environmental health: sources of clean water from wells 59%, 93% kulaitas good clean water, drinking water treatment with boiled 68%, water supply means 97% good, 99% latrine ownership with swan neck latrine 97% and watertight septic tank 65%, 18% trash untreated and 33% open, 75% of domestic waste was burned and buried in a hole 20%.

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