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Determinants Influence the Effectiveness of Health Centre Mandatory Health Effort Program Implementation in Keerom Papua Province

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Abstract

Program health efforts are required in the clinic was launched in 2014 by KEPMEN RI, NO: 75 / Menkes / SK / II / 2014, on the basic policy of community health centers, while the health efforts are required in the clinic include health promotion, health efforts environment, efforts maternal health and children, including family planning, efforts to improve people's nutrition and the prevention and control of diseases. This study aims to collect information on the implementation of the mandatory health efforts on health centers in Keerom. This research is a qualitative research conducted by direct interview. The number of informants in this study there are 9 people, research sites in nine health centers in Keerom is a health care institution which is implementing a program Health Efforts Required. Implementation of Mandatory Health Efforts in the health center in Keerom there are still many obstacles, so that the implementation is not maximized. Some inhibiting factors so that the implementation of Mandatory Health Efforts in the health center is not maximized, including community education levels are relatively low, social and cultural circumstances of the society, public awareness is still low, the lack of health personnel and other factors. So that implementation efforts Mandatory Health in PHC can be achieved in accordance with the target program, it should be in planning efforts Mandatory Health to consider the human resources (HR) owned health centers and the level of community needs for health, indicators of success of each program to be prepared should refer to the plans that had been developed central and local level.

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These results indicate that the process of compulsory health efforts still need a lot of improvement, especially in the planning process, which should PHC given full authority to conduct the planning process so that the

program produced according to the analysis of the needs of the community.

Keywords: Effort; Healthcare; Mandatory.

1. Introduction

Health development is an integral and important part of national development. The objective of health development is to increase awareness, willingness and ability to live a healthy life for everyone in order to realize the degree of optimal health. The success of health development plays an important role in improving the quality and competitiveness of Indonesian human resources. Further stated that in order to achieve the goal of health development was held a variety of health as a whole, tiered and integrated. PHC is in charge of organizing health efforts to level the first level. The health condition is the part that is closely related to the success of human development. Health development is directed to improving the quality of human resources, improving the quality of life, increase life expectancy and enhance public awareness of the importance of

healthy living [1,2].

Since it was introduced the concept of community health centers (Puskesmas) in 1968, a variety of results has been achieved. Maternal mortality and infant mortality has fallen and while the life expectancy of the average Indonesian people has increased significantly. At this time the Community Health Centre (PHC) have been established in almost all corners of the country to reach all the regions of its work. PHC is reinforced by the health center and the Mobile Health Center, except for areas far from referral service facility. Health Services in the region of the District Health Office Keerom many have problems, it can be seen from the high morbidity and mortality although the number decreases, it is because although the service facilities Health in the village has increased, but is still less energy Health and the absence of equitable health personnel in health facilities that already exist [3]. However, the implementation of the Health Efforts Mandatory health center in the working area of the District Health Office Keerom, overall health services are carried out Community Health Center has not so optimal, this was due to the geographical situation unfavorable, the level of public education is relatively low, social and cultural conditions community and public awareness is still low, of course, it is also associated with the implementation of the Compulsory Health Center Health Services Program and Health Services Development Program PHC. Therefore, the researchers took the initiative to conduct research on the determinants that affect Effectiveness of Mandatory Health Effort Program PHC in the region of Keerom District Health Office.

2. Materials and Methods

2.1 Types and Methods

This study is a qualitative research undertaken on an independent variable, ie without making a comparison with other variables [4], which are intended to determine the implementation of the program compulsory health center health efforts in the region of Keerom District Health Office.

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The method used in this research is descriptive method, because the data collected from sample populations. This is in accordance with the opinion of [5, 6] that one of the methods of social research that is very widely used is descriptive method.

2.2 Site and Time Research

Research site: This research carried out in 9 health centers which is the working area of the District Health Office Arso Keerom namely health center Arso III, Health Center West Arso, Health Center Arso city, Health Center East Arso, Ptewi health centers, Waris health centers, Sengggi health centers, Ubrub health centers and Health centre of Towe.

2.3 Time Research

Time which used in this research is one month that is from July to August 2015.

3. Results and Discussion

Efforts program planning approach used by the Mandatory Health PHC is an annual plan to address health problems in health centre, based on interviews with 9 Head Health Center researchers in the working area of Keerom District Health Office, then the results and discussion is elaborated as follows:

3.1 Public Health Centre (PHC) of Arso III

PHC Arso III in principle to implement the entire program Efforts Mandatory Health centre, which is generally 5 program health efforts Mandatory namely services Efforts of Health Promotion, services Effort of Environmental health, Efforts Services for Maternal and Child health and Family Planning, Effort Services of Public Nutrition and effort Services of Prevention and Control of Diseases. These are carried in PHC Arso III can work well and are not experiencing problems, it is caused PHC Arso III when seen from the number and educational background of personnel of Health who served in Arso III PHC was enough, also when viewed from the means and infrastructure available, [7,8].

3.2 Health Center West Arso

Arso West PHC in principle also carry out the entire program health Efforts Mandatory, but there are experiencing problems that the efforts Maternal and Child Health and Family Planning mainly on examination of pregnant women and this is because the target use is data population projection instead of the real population data, so it makes coverage get lower, this coverage involves examination of pregnant women and deliveries handled by skilled health, lack of energy (Midwives) because some midwives in health centers Arso West continuing education so that it causes a midwife No one should deal with the two areas, a lack of awareness of the public or pregnant mother checkups regularly, this can be seen from the K1 and K4 coverage

3.3 Arso City Health Center

Arso Kota PHC in principle also carry out all program Health Efforts are required, but there are also experiencing problems is the first attempt Health Promotion this is due to lack of understanding, understanding and preparing extension materials will be delivered in counseling, in addition also on extension inside and outside the building having problems due to the difficulty of gathering people who seek treatment at the health center Arso City because people who come for treatment are not the same, so also counseling outside the building having trouble collecting community because most people search eyed as a farmer. In the implementation of the Health Efforts Mandatory PHC Arso city with the constraint that both are efforts Environmental Health, it is caused due to the lack of health personnel educational background in Environmental Health (only 1 Orang) in health centre Arso City, while concerned are also responsible as Chief Administration in Arso City Health Center (also the responsibility) [7, 9].

3.4 Health Center of East Arso

Health Center of Arso Timur in principle to implement the entire program Efforts Mandatory Health, but there is still no implementation effort Mandatory Health Center East Arso who experienced problems are efforts Maternal and Child Health and Family Planning, this is caused because the level of public knowledge about family planning is still minimal and they residing not settled (sedentary) Problems in the face as the responsible efforts Maternal and Child Health and Family Planning in the Health Center of East Arso is the geographical distance between the village that one village to another very far apart and transportation for officers is inadequate, communities like moving from one village to another and more people rely on for help when deliveries by trained herbalists are one tribe in compare in favor by a midwife. In Family Planning (KB) the problems we face, among others, more people believe in family planning (FP) Naturally, people still think Papua is still wide (so many children are not a problem), the husband does not allow his wife to wear Contraceptives (more trusting nature)" [10]

3.5 Public Health Center (PHC) of Ptewi

PHC Ptewi in principle also carry out all program Health Efforts are required, but there also are experiencing problems, which have constraints on program implementation efforts Mandatory Health in PHC Ptewi is Attempts Health Promotion, although during this run but usually counseling inside and outside the building The regular running but sometimes it does not run, it caused no supporting tools to do counseling as loudspeakers and other support tools are in use in counseling.

3.6 Health Center of Waris

Waris health centre in principle also carry out the entire program Efforts Mandatory Health, but there are also experiencing problems is On implementation efforts Mandatory Health PHC Waris who experienced problems is Prevention and Control of Disease and this is because the field of broad scope and sources of energy that are less stuff This is because the effort of Communicable Disease Control oversees Leprosy, tuberculosis, malaria and other infectious diseases and the disease is not contagious.

3.7 Health Center of Senggi

Senggi Health Center in principle also carry out the program all Health Efforts are required, but there also are experiencing problems that health promotion efforts, this is caused because the responsible person in addition to being in charge of Health Promotion efforts, is concerned as well as the nurse in the care services. Indeed, during this counseling both inside and outside the building that used to walk but sometimes it does not run, it caused a lack of understanding, understanding and preparing extension materials to be conveyed in counseling.

3.8 Ubrub Health Center

Ubrub Health Center in principle also carry out all program Health Efforts are required, but there also are experiencing problems that Yang suffered constraints on program implementation efforts Mandatory Health in PHC Ubrub was Attempts Services Disease Prevention and Control, this is caused because Reagents nothing and Microscopes for examination Tuberculosis bacteria (TB) is damaged, so in principle constrained with respect to inspection tools (microscope) was broken and the reagents are not available.

3.9 Towe Health Center

Towe Health Center in principle also carry out all program Health Efforts are required, but there are still some who have constraints that are experiencing constraints on program implementation efforts Mandatory Health in PHC Towe is Health Promotion, this is caused shortages of Health who served in Towe Health Center so insurer responsible for Health Promotion in duplicate at the same time by the head of the health center in charge of the health center Towe, next Efforts Environmental Health, this is caused because the person in charge of Environmental Health that was once served in Towe Health Center has been transferred to the another Health Center, the next one which experienced problems is Health Maternal and Child Health (MCH) it is caused due to the lack of midwives in villages and the distance between villages and health centers Towe far, so it is difficult to be reached by the midwife on duty at the health center Towe. So the point of the third program Compulsory Health Efforts abovementioned less goes well, this is caused by the lack of HR (Human Resources)" [11, 12,13]

4. Conclusion and Suggestion

4.1 Conclusions

Based on the results of research and discussion that has been described above, the authors draw the following conclusion:

1. Implementation of Health Promotion Efforts in Work Area Health Center in the Department of Keerom generally going well, but in Arso heath centre, Ptewi heath centre, Senggi health centers, health centers of Towe experiencing have problems, due to the lack of personnel and supporting equipment used in the guidance and education was not available.

- 2. Implementation Efforts Environmental Health at Work Area Health Center District Office Keroom generally going well, but in the arso city health centers and Towe health centers revealed that the implementation of Environmental Health Efforts have constraints, this was due to lack of health personnel educational background and labor Environmental Health who transferred his post.
- 3. Implementation efforts of maternal and child health and family planning health center in the Work Area of District Kerom generally experienced problems, in West Arso Health Center and in, East Arso PHC, this is due to geography, socio-cultural awareness and community.
- 4. Implementation of public nutrition improvement efforts in the Work Area Health Center of District Keroom generally going well.
- 5. Implementation of the prevention and eradication of infectious diseases in the Work Area of Health Center of District Keroom generally going well, but in Waris health centre and Ubrub health centre have experienced problems due to environmental factors, public awareness about healthy living behaviors and socio-economic status is still low and factor the lack of health personnel.

4.2 Suggestions

In accordance with the results of research and discussion above, there are some suggestions that need attention such as the following:

- 1. It should be in the preparation of Mandatory Health Efforts in health centers by considering the strengths, weaknesses, and constraints.
- 2. Maximize the implementation of Mandatory Health Efforts in health centers, thus improving community health status.
- 3. Keerom District Health Office is expected to put power in accordance with the needs of the health center in the working area.

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