



FACTORS RELATED TO THE UTILIZATION OF HEALTH SERVICES BY PARTICIPANTS RECEIVING ASSISTANCE IN THE HEALTH CENTER OF SIJUNJUNG, 2020

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ABSTRACT

From the recapitulation of Sijunjung Public Health Center 2018 visit report, the total number of BPJS Health participant visits was 23,673 visits, with the visit of beneficiary participants totaling 8,165 visits or 34% of the total visits. Whereas in 2019 there was a comparative data between visits of independent participants and contribution recipient participants (PBI), namely the total visits in 2019 were 25,430 visits with visits of participant beneficiaries only 7,524 visits or 29.66% of the total visits. This study aims to determine the factors related to the utilization of health services by beneficiary beneficiary participants in 2020 Sijunjung Health Center. This type of research was descriptive analytic with cross sectional study approach. This research was conducted in the nagari in the working area of the Sijunjung health center in April - May 2020. The population was all participants receiving contributions in the working area of the Sijunjung health center with a total sample of 101 people, the sampling technique was random sampling. Data collection through interviews using a questionnaire. Computerized data processing, univariate and bivariate data analysis using chi-square test. The results of this study indicated that the Knowledge variable ($p = 0.146$) has no relationship with the utilization of health services, factors that have an access relationship ($p = 0,000$), and the Behavior of officers ($p = 0.001$) with the utilization of health services at the public health center by the beneficiary participant. It is expected that the Regional Government and sub-districts pay attention to the problem of access to BPJS PBI patients in reaching health services to the Puskesmas by repairing roads or by turning on affordable inter-village transportation. patients so that it can cause a positive image in the community.

Keyword: *Knowledge, Access And Behavior, Utilization Of Service Officers, Recipients Of Contribution Assistance*

INTRODUCTION

National Health Insurance (JKN) is part of the National Social Security System (SJSN) which is implemented using a compulsory social health insurance mechanism based on Law Number 40 of 2004 concerning the National Social Security System (SJSN) with the aim of meeting the basic needs of public health. which is appropriate given to every person who has paid contributions or whose contributions have been paid by the government.

JKN membership includes Health Insurance Contribution Beneficiaries (PBI) and non-PBI health insurance participants. Participants who are not PBI health insurance are paid workers (PPU) and family members, non-wage earners (PBPU) and family members, as well as non-workers (BP) and family members. Health insurance for the poor and needy is determined by the government. (Presidential Regulation No. 82, 2018).

Public health centers in the JKN system have a big role to play for BPJS



Kesehatan participants. If Puskesmas services are good, more and more BPJS participants will take advantage of health services, but the opposite can happen if services are felt to be inadequate.

The Sijunjung Community Health Center is one of the Nursing Health Centers in Sijunjung Regency with the address of Nagari Sijunjung, Sijunjung District, Sijunjung Regency. Based on data from the Solok Branch of BPJS Kesehatan, the number of JKN participants registered at the Sijunjung Puskesmas as of December 2019 is 18,979 people with the registered share of the PBI APBN of 11,608 people, PBI APBD3,209 people and Non PBI 3,821 people. The existence of the Sijunjung Puskesmas is in the context of equitable distribution and efforts to improve public health in Sijunjung which serves 6 Nagari with working hours from Monday to Saturday. However, the number of visits by JKN PBI participants was still lower than the number of visits by BPJS Mandiri and PBI. And the visit cannot be ascertained whether the participants are repeat or not.

Based on the survey interviews with the general practitioner of the Public Health Center, dr. Rini Azizah and the Head of the Community Health Center, Ms. drg. Deby Puri Perta there are still many people in the target areas of the Sijunjung community health center who

do not / rarely access the community health center as a means of treatment or health consultation. There are still people who use alternative medicine for cases that can be resolved by the public health center.

MATERIAL AND METHODS

This type of analytic research with a cross sectional study approach. The research location is in the working area of the Sijunjung Community Health Center, Sijunjung Regency and the time of the research was carried out from April to May 2020.

The population in this study were all Contribution recipient participants in the working area of the Community Health Center Sijunjung as many as 14,817 in habitants. The total sample was 97 participants who received contribution assistance to the Sijunjung Community Health Center.

The research was conducted in 6 villages in the working area of the Sijunjung Community Health Center. Data collection was carried out by interview using a questionnaire. Respondent checking is carried out by checking the community's JKN card number with the help of the JKN / pcare and LUPIS mobile applications. Data processing was performed computerized and data analysis was performed univariate and bivariate using the chi-square test.

RESULT

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a) Characteristics of Respondents

Distribution of respondents based on identity (age, gender).

Table 1
Age Frequency Distribution of Contribution Beneficiary Participants at the Sijunjung Community Health Center in 2020

Age Range	<i>f</i>	%
19- 39 th	32	31,7
40-60 th	57	56,4



61-69 th	12	11,9
Total	101	100,0

Based on table 1, it is found The highest respondent age range was the age range of 40-60 years, namely 57 (56.4 %).

Table 2

Distribution of Frequency of Gender of Respondents and Contribution Recipients at Sijunjung Health Center in 2020

Type of delivery	<i>f</i>	%
Male	32	31,7
Women	69	68,3
Total	101	100,0

Based on table 2, it is found that the highest respondent is female, namely 69 (56.4%)

b)Utilization

The distribution of respondents based on the utilization of health services at community health centers can be seen in the following table

Table 3

Frequency Distribution of Participants' Health Service Utilization Contribution Aid Recipients at the Sijunjung Community Health Center in 2020

Type of delivery	<i>f</i>	%
Male	32	31,7
Women	69	68,3
Total	101	100,0

Based on table 3, it shows that more than half of the respondents (63.4%) did not take advantage of health services at the Sijunjung community health center.

c)Knowledge

The distribution of respondents based on knowledge can be seen in table 4 below.

Table 4

Relationship Type of Delivery with Jaundice Incidence in Neonates in the Perinatology Room of the Padang Panjang City Hospital in 2019

Knowledge	<i>f</i>	%
High	54	53,5
Low	47	46,5
Total	101	100,0

Based on table 4 above shows that more than half (53.5%) of respondents have high knowledge.



d) Access

Table 5
Access Frequency Distribution of Contribution Beneficiary Participants at the Sijunjung Community Health Center in 2020

Access	<i>f</i>	%
Near	36	35,6
Far	65	64,4
Total	101	100,0

Based on table 5, it can be seen that more than half (64.4)% of respondents have access to a place to live that is far from the Sijunjung community health center.

e) Officer Behavior

Table 5
Distribution of Behavior Frequency of Health Workers in Sijunjung Community Health Center in 2020

Officer Behavior	<i>f</i>	%
well	37	36,6
Not Goo	64	63,4
Total	101	100,0

Based on table 5 above, it is known that more than half of the officers (63.4%) have bad behavior

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Table 6
Knowledge Relationship with Health Service Utilization by Contribution Beneficiary Participants at the Sijunjung Community Health Center In 2020

Pengetahu an	Pemanfaatan Pelayanan Kesehatan				Total		P val ue
	Memanfaatkan		Tidak Memanfaatkan				
	<i>f</i>	%	<i>f</i>	%	<i>f</i>	%	
Tinggi	11	23,4	36	76,6	47	100,0	0,1 46
Rendah	21	38,9	33	61,1	54	100,0	
Jumlah	32	31,7	69	68,3	101	100,0	

Based on table 6 above, of the 54 respondents who had low knowledge, there were 33 people (61.1%) who did not use the service while 21 people (38.9%) used the service.

The results of the chi-square statistical test showed that the p value = 0.146 (p <0.05) means that there is no relationship between knowledge and utilization of health services by participants receiving contribution



assistance at the Sijunjung Public Health Center in 2020.

Table 7
Relationship between Access and Utilization of Health Services by Contribution Recipient Participants at the Sijunjung Community Health Center in 2020

Access	Utilization of Health Services				Total		P value
	Make Use Of		Not Using				
	f	%	f	%	f	%	
Near	20	55,6	16	44,4	36	100,0	0,0 00
Far	12	18,5	53	81,5	65	100,0	
Amount	32	31,7	69	68,3	101	100,0	

Based on table 7 above, of the 65 respondents who had far access, 53 (81.5%) did not utilize health services and 12 (18.5%) used health services. The results of the chi-square statistical test showed that the p value = 0.000 (p

<0.05) means that there is a relationship between access and utilization of health services by participants who receive contribution assistance at the Sijunjung Public Health Center in 2020.

Table 8
Relationship between Officer Behavior and Health Service Utilization By Contribution Assistance Recipient Participants at Sijunjung Community Health Center in 2020

Officer Behavior	Utilization of Health Services for PBI Participants				Total		P value
	Make Use Of		Not Using				
	f	%	f	%	f	%	
Well	19	51,4	18	48,6	37	100,0	0,00 3
Not Good	13	20,3	51	79,7	64	100,0	
Amount	32	31,7	69	68,3	101	100,0	

Based on table 8 above, from 64 respondents who stated that the officers' behavior was not good, 51 (79.9%) did not use health services and 13 (20.3%) used services.

The results of the chi-square statistical test showed that the p value

= 0.003 (p <0.05) means that there is a relationship between the behavior of officers and the use of health services by participants who receive contribution assistance at the Sijunjung Health Center in 2020.

DISCUSSION

1) Knowledge Relationship with Health Service Utilization by Contribution Beneficiary Participants

Based on the research results, it was obtained that high knowledge data did not utilize health services (76.6%) compared to respondents with low knowledge (61.1%). The results of the



bivariate test using chi-square test analysis obtained p value = 0.146 ($p > 0,05$) which means that there is no significant relationship between knowledge and the use of services at the community health center.

The results of this study are in line with research conducted by Susi Sulastrri (2016) which states that knowledge has no significant relationship to the utilization of Payakabung Ogan Ilir health services.

The reason why respondents did not take advantage of health services was lack of knowledge. Which results were obtained from some who stated that they did not know that they were entitled to free medical treatment at a public health center for all diseases according to medical indications, were entitled to free medical consultations, were entitled to ambulance accommodation, and etc.

2) Relationship between Access and Utilization of Health Services by Contribution Beneficiary Participants.

Based on the research results, it was found that respondents who did not take advantage of health services had far greater access to 53 respondents (81.5%) than respondents who used 12 respondents (18.5%). The results of the chi-square statistical test showed that the value of p value = 0.000 ($p < 0.05$) means that there is a relationship between access to health service utilization by participants who receive contribution assistance at the Sijunjung community health center.

The results of this study are in line with research conducted by Sinaga (2014), which states that the access variable has a significant effect on the use of 24-hour health centers in Balige District, Tobasa Regency. According to Notoatmojo (2007), distance from residence to health facilities supports

community action in accessing health services.

The results showed that access in this study included the problem of being too far from the house / community settlement and the availability of private or public transportation and the funds needed to reach health services. People who have difficulties in this case do not have vehicles and very limited public transportation prefer to go to a midwife practice and / or buy medicine at a stall.

3) Relationship between Officer Behavior and Health Service Utilization by Contribution Beneficiary Participants

Based on the results of the study, it was found that respondents who did not take advantage of health services on the behavior of officers who were not good at 51 (79.7) compared to those who used and good behavior of officers was only 19 (51.4%). The results of the chi-square statistical test obtained p value = 0.001 ($p < 0.05$), which means that there is a relationship between the behavior of officers and the use of health services by beneficiary participants at the Sijunjung community health center in 2020.

This is in line with research by Susi Sulastrri (2016) which states that 63 respondents (63%) have an effect on the variable attitudes of medical personnel with $p < 0.002$ ($p < 0.005$) on the utilization of the Payakabung Ogan Ilir community health center.

Parasuraman, et al, in Bustami (2011) a sense of empathy is related to the staff's special care and attention to each service user, understands their needs, and makes it easy to contact them at any time if service users want to get their help. The role of health human resources greatly determines the quality of health services because they can directly meet the satisfaction of health service users. Give special attention to each patient, care for patient complaints, service to all



patients regardless of social status and others.

According to the researchers themselves, health services at the Sijunjung community health center could be improved by means of which all health workers were there when the patient needed them. In terms of service satisfaction, customers tend to easily remember negative things / experiences than positive things they have experienced

CONCLUSION

There is no relationship between knowledge and utilization of health services at the Sijunjung community health center in 2020. Relationship with the utilization of health services at the Sijunjung community health center in 2020. Behavior of health care workers at the Sijunjung Community Health Center in 2020

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