

IMPLEMENTATION OF “GERMAS” AND ITS EFFECT ON NON-COMMUNICABLE DISEASE CONTROL

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ABSTRACT

Background: Indonesian government has a program called Healthy Living Community Movement (GERMAS). GERMAS aims to raise awareness, willingness, and ability to live healthy for everyone to realize the highest degree of public health. GERMAS has six main activities including increased physical activity, improving clean and healthy life behavior, provision of healthy food, and accelerated nutrition improvement, increased prevention and early detection of disease, improving environmental quality, and improved education of healthy living. This study aimed to evaluate the implementation of GERMAS and its effect on non-communicable disease control.

Subjects and Method: This was a retrospective cohort study. Patients who had non-communicable disease were selected for this study. The independent variable was GERMAS program. The dependent variable was the case of non-communicable disease. The data were obtained from the medical record. The other data were collected by in-depth interview and observation. The data were analyzed descriptively.

Results: The incidence of non-communicable diseases decreased after the implementation of GERMAS program.

Conclusion: GERMAS program reduces the non-communicable disease cases.

Keywords: GERMAS, non-communicable disease, Indonesia

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BACKGROUND

Globally 63 % of the causes of death in the world are Non Communicable Disease (NCD) that kill 36 million people per year, Indonesia based on results of Basic Health Research in 2007 and 2013 showed 61 % of total death were caused by NCD (cardio-vascular disease, cancer and kidney failure). Tugu Depok Health Center the highest population in Depok also contributes to the high incidence of NCD compared to other Health center in the Depok area. NCD reduced the productivity of human resources and national generational quality and costs for the government.

Ministry of Health RI in 2016 launched The Healthy Life Society Movement program (GERMAS) can be done by consuming vegetable and fruit, not smoking, not consuming alcohol, checking health regularly, cleaning the environment and using latrines and how to do physical activation. GERMAS must start from family, because the family is the smallest part of the society that forms personality. GERMAS can be done by doing physical activities, consuming vegetables and fruit, not smoking, not consuming alcohol, checking health regularly, cleaning the environment and using latrines.

This movement must be carried out by all levels of society, both individuals, families are expected to practice healthy lifestyles in everyday life, while academics, organization or institution to behave in a healthy manner which was then implemented by the regional government in charge of providing facilities and infrastructure to support the Germas program such as providing sport facilities, clean water, in the implementation of the community movement healthy living. The hide community movement is a reference for the community, academics and business community to initiate and carry out the activities of the Healthy Living Community Movement in the scope of their responsibilities.

The Healthy Life Community Movement is a one of the priority program in national health development. One of the efficient and effective non-communicable diseases control strategies is by empowering and increasing the participation of the two regional leaders, government leaders and society participation. Society is provided with facilities and guidance to participate in controlling risk factor for non-communicable diseases by providing them with the knowledge and skills to conduct early detection, monitoring risk factors for non-communicable diseases and their follow-up.

This activity is called the integrated non-communicable diseases development post (POSBINDU NCD). Posbindu NCD is one program that aims to increase community participation in the prevention and early discover of NCD risk factors carried out

in an integrated, routine and periodic manner. The target of this program is for all groups of people who are healthy, at risk and those with NCD aged 15 years and over. The implementation of posbindu NCD is the same as the implementation of a posyandu that uses 5 stages of service called 5 tables, namely registration, weighing, filling in KMS-FRNCD and health services. In Posbindu NCD there are 10 (ten) activities, namely activities to extract information on NCD risk factors through simple interviews, measurement activities (BB, TB, BMI, abdominal, circumference analysis of body fat, and blood pressure), simple pulmonary function checks, blood sugar checks, examination of total cholesterol and triglycerides, IVA examination (Acetate Visual Asam Inspection) examination of respiratory alcohol levels and urine amphoteric tests, counseling physical activity activities and or joint exercise and referrals to basic health care facilities.

The tools used during the posbindu include tables, chairs, weight scales, microtoise, meter tension and other medical devices that posbindu NCD has. Posbindu NCD activities are usually carried out on Saturday afternoons, the 4th week of each month. This activity is carried out with or without the presence of a health worker, the examination and measurement are carried out by the cadre, while the examination and consultation is carried out by the doctor who has the posbindu NCD. Other Germas activities according to the results of the interview were PROLANIS exercise carried out by the community at

Tugu Health Center yard. PROLANIS gymnastics are held every Friday at 7:30 in the morning. While health education activities are carried out in Posbindu or PROLANIS exercise.

Health policy is a fixed decision that is characterized by consistency and repetition of behavior from the actors who obey a decision by giving appreciation and sanction. Policy is an instrument of technical, rational, and prioritizes performance to solve a problem. Policy is closely related to planning, formulating, taking and implementing decisions and evaluating the impact of implementing a decision on targets targeted by the policy. Public policy is a decision that aims to overcome a particular problem or to achieve a certain goal carried out by an authorized government institution in the context of carrying out the tasks of the state government.

According to George C. Edward, there are four variables that determine the success of a policy or program, i.e. communication, resources, attitudes, and bureaucratic structure. The purpose of this study was to analyze the implementation of the Germas program at Tugu Depok Health.

SUBJECTS AND METHOD

1. Study Design

This was qualitative study with observational descriptive approach conducted at the Tugu Depok Community Health Center.

2. Study Informants

Key informants in this study included 2 posbindu cadres and 2 PROLANIS gymnastics instructors and 2 triangulation informants namely Tugu Community Health Center staff respon-

sible for non-communicable diseases and health programs related to the Germas implementation.

3. Data Analysis

The data were obtained using in-depth interviews, observation, and documentation. The technique of analyzing data were data collection, presentation, reduction, collection, and conclusion.

RESULTS

1. The implementation of the Posbindu program, PROLANIS gymnastics and health education in Tugu Health Center

There were 18 Posbindu in the area of the monument health center, the implementation of Posbindu NCD is dominated by the elderly, cadres and health workers and health workers have not been active in delivering information to the target of the Posbindu NCD program and there are no steps taken by cadres and officers tan safely in the morning of the community dissemination and information.

Health was carried out after the activities in addition to that, the complete data collection was not sufficient for the provision of information carried out in the region which caused adolescent not to participate in the implementation of the post-miss NCD program. PROLANIS exercise was carried out in the courtyard of the morning health center every Friday. Health counseling is carried out after Posbindu activities or after PROLANIS gymnastics.

The process of coordinating the implementation of integrated infectious diseases, PROLANIS gymnastics

and health counseling programs in Tugu Depok community Health Center work area according to the main informant 1 with the main inter 2 is different, according to one information stating that coordination is well done.

2. Communication in implementation of Germas Posbindu NCD, PROLANIS Gymnastic and Health Education in Tugu Depok Community DHealth Center

Submission of information about the implementation of the Posbindu NCD program. PROLANIS gymnastics and health counseling are held through regular meetings. In the meeting only discussed the program went on, the programs did not work were not followed up and cadres were less active in delivering information to Posbindu NCD.

In accordance with the statement of the majority of the main informants and one of the triangulation informants that the target of communication in the implementation of the Posbindu NCD program, PROLANIS gymnastic and health education is the entire community. However in its implementation according to the formulation of triangulation, it was stated that the target of communication in the implementation of PROLANIS gymnastics post program and health education was the elderly. Therefore the information held by the cadres in the informed back to the elderly only, not all people above the age of 15 years. This is due to the fact that according to the cadre of the Posbindu NCD program, the elderly and targeted PROLANIS gymnastics were registered but according to the triangulation informants with the Healthy Indonesia Program with Family

Approach (PIS-PK).

3. Resources in the implementation of Germas Posbindu NCD, PROLANIS Gymnastics and Health Education in Tugu Depok Community Health Center

Work area the majority of informants stated that the availability of a number of staff or cadres in the implementation of the integrated development program for non-communicable diseases, PROLANIS exercises and health education by health workers in Tugu community health center work area has been fulfilled. In carrying out the Germas program all informants stated that facilities and infrastructure could use the facilities that the surrounding environment already had. The source of funds for the implementation of the three Posbindu NCD programs, PROLANIS gymnastics and health education in the working area of Tugu health center came from the government in the form the government in the form of Health Operational Costs (BOK) and Indonesian Health Social Security Organizing Agency BPJS funds and the community or contribution from the community which was conducted every month.

4. Bureaucratic structure in implementation of Germas Posbindu NCD, PROLANIS Gymnastics and Health Education in Tugu Depok Community Health Center

Based on the results of in depth interviews conducted with 4 main informants and 2 triangulation information obtained that in implementing the Germas Posbindu NCD program, PROLANIS exercise and health counseling requires an implementation guide in the form of an implementation manual. One of the main informants and tria-

ngulation informants stated that were a division of labor and responsibility for implementing program and activities in accordance with their fields. In addition, one of the main informants was the Posbindu NCD cadre who stated that in the implementation of the posbindu NCD the cadres also shared their respective duties and responsibilities.

DISCUSSION

In conducting Germas the integrated Guidance Post Program for non-communicable diseases, PROLANIS gymnastic and health education required good coordination between the parties involved in order to achieve agreed goals. Based on the research that has been done, there are obstacles in the implementation, namely the implementation of the Posbindu NCD program is not optimal. The target is still elderly, prolanis exercise active participation is only 23 people while the incidence of high diseases.

Health education or counseling sometimes cannot be done by the officers on schedule due to lack of implementing officers health promotion in the field, which is only 1 person. Judging from several variables that affect implementation performance as a policy, there are obstacles to the process of resources, communication and coordination.

Constraints on the implementation of posbindu NCD program, PROLANIS gymnastic and education health are about communication and coordination. Many people are mistaken and do not know fully about the program and objectives of posbindu NCD program, PROLANIS gymnastic and education health that the implementation of PROLANIS gymnastics NCD and health education that reaches the

target is only the elderly. The first variable influences the successful implementation of a policy according to George C. Edward III is communication.

1. Communication

According to him, determines the successful of achieving the objectives implementing public policy. Implementation occurs when decision maker already know what they are going to do. Implementation of public policy will run effectively when communication goes well between the parties involved in carrying out this public policy. Good communication, distribution will result in good implementation. At present the distribution of communication carried out in terms of the implementation of the germas program is carried out through meetings between cadres, gymnastics instructors and health center official discussing the implementation, schedule, division of tasks and responsibilities and other important matters related to the implementation of this programs.

The informant argued that they received information and training related to posbindu NCD, PROLANIS exercise and health counseling. In addition every month NCD Posbindu cadres only submit activity reports. But there were also triangulation informants who said that if health workers did not come to Posbindu or not attend PROLANIS exercise the activities did not work. Given the limited number of staff resources, this is an obstacle to running smoothly.

This is a sign of communication that is not going well that can become an obstacle in the ongoing communication process. Staff or employees are the main resources in implementing policies that field. Based on the result of the study it is known that the parties

involved in the implementation of the postal training program integrated with non-communicable diseases where the staff of Health Promotion and Prevention and Eradication of Diseases (P2P) Tugu Health Center as well as Posbindu NCD cadres and gymnastics instructors who have participated in the training. This was shown at a meeting held every month by cadres, the discussion conducted was not focused on one program, but discussed many existing programs as well as the absence of follow-up conducted by the health center. This happened because there were many programs in Tugu Health Center but there were limited implementing staff. Quality of resources in implementing policy implementation is an important thing that must be considered. If these resources are not capable and do not have competence in their fields, then the implementation of the policy will not run well.

This can be seen from his understanding and knowledge of the implementation of Germas's postal program. Where as in known, the integrated guidance program for non-communicable diseases and health education is intended for all people over the age of 15 years. Information referred to in this case is related to guidelines or procedures for implementing policies. This can be in the form of strategies or directives in the form of stages in the implementation of the integrated guidance program for non-communicable diseases in the working area of Tugu Health Center. In carrying out the implementation of the integrated guidance program for non-communicable diseases and PROLANIS exercise, health education in the working area of Tugu Health Center also contained guidelines in the form of an implementation

manual. Based on the results of in-depth interviews with informants in charge of the NCD program at the Juklak. Based on results of in-depth interviews with informant in charge of the NCD program at the Puskesmas that operational guidelines refer to the operational guidelines issued by the Ministry of Health. Therefore the City Health Office no longer issued operational guidelines related to posbindu, PROLANIS exercise and health counseling.

The implementation manual was issued by the Ministry of Health in 2012 when the launch of the integrated guidance program on non-communicable diseases. However, not all informants knew the contents of the operational guidelines. Facilities are other important factors in implementing policy implementation. Without facilities and infrastructure and budget funds, the implementation of the policy will not succeed. At present, the source of funds in implementing the integrated development program for non-communicable diseases in the working area of Tugu Health Center from the government in the form of BOK and BPJS funds.

The attitude and support of the implementers regarding the implementation of the integrated guidance program for non-communicable diseases in the working area of Tugu Health Center is important. A positive attitude and the existence of support and feedback on the implementation of Germas's implementation that allows the implementation to be carried out in accordance with the desired goals. Based on in-depth interviews, all informants had a positive attitude toward the program. With the implementation of the Posbindu NCD program, PROLANIS gymnastics and health education, the infor-

mants felt very helpful because not only the informants were concerned about health, but also invited the community to participate to pay more attention to health. In addition, they said that this program was a forum for the community be more sensitive to non-communicable diseases. The form of commitment and support from all informants is by continuing to implement the integrated development program for non-communicable diseases in accordance with their respective duties. The implementation of complex policies requires cooperation from various parties. The bureaucratic structure that is not conducive to the implementation of a policy will hinder and make the implementation of policies ineffective. Based on the results of the study, the informant stated that there was an SOP in the implementation of the Gernas Posbindu Program, PROLANIS gymnastics and community counseling. According to George C. Edward II, SOPs can become obstacles for new policies that require new types of personnel to implement policies. The greater the policy requires changes in the ways that are prevalent in an organization, the greater the chance for SOPs to hinder implementation. However, SOP does not always hinder the implementation of policies, but also provides benefits in implementing policy implementation. The existence of SOPs in the implementation of a policy can be tailored to individual needs. Fragmentation is the second characteristic of bureaucratic structure that can influence can implementation of policies. According to Edward III fragmentation is the spread of responsibility for a policy that requires good coordination. In addition, according to Edward III, what influences the success of public policy implementation

is the bureaucratic structure. At present, the implementation of the gernas program for integrated guidance of non-communicable diseases, PROLANIS exercise and health education is carried out with the division of labor and responsibility for the implementation of the gernas program for integrated guidance of non-communicable diseases, PROLANIS exercise and health education in Tugu Health Center area. The division of tasks and responsibilities is given according to the condition in the field and their respective fields.

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