



INNOVATIVE: Journal Of Social Science Research

Volume 4 Nomor 3 Tahun 2024 Page 9346-9352

E-ISSN 2807-4238 and P-ISSN 2807-4246

Website: <https://j-innovative.org/index.php/Innovative>

## Problem Diagnosis, Problem Assistance, Prioritizing Health Problems, and Alternative Solutions to the Problem of the Low Level of Physical Activity in Kapas Village, Bojonegoro City, East Java

Dinah Arum Mardhiyah

Airlangga University

Email : [dinah.arum.mardhiyah -2020@fkm.unair.ac.id](mailto:dinah.arum.mardhiyah -2020@fkm.unair.ac.id)

### Abstrak

Latar Belakang: Berdasarkan analisis data sekunder data Posbindu PTM, data Ponkesdes dan survei kuesioner primer, wawancara, ditemukan empat permasalahan kesehatan di Desa Klampok, yaitu tingginya angka perokok aktif yang merokok di rumah, tingginya prevalensi penyakit asam urat, tingginya angka kematian ibu dan anak. prevalensi hipertensi, dan Program sosialisasi pencegahan penyakit tidak menular belum optimal. Tujuan: Mengidentifikasi permasalahan kesehatan, menentukan prioritas permasalahan kesehatan, menganalisis akar penyebab permasalahan kesehatan, menentukan rencana pelaksanaan program berdasarkan prioritas permasalahan kesehatan, dan melaksanakan program permasalahan. Metode: Desain penelitian menggunakan analisis SWOT. Kami menggunakan data primer berupa angket, wawancara mendalam, observasi, diskusi kelompok. Data yang digunakan adalah data sekunder berupa data demografi Desa Klampok dan profil Puskesmas Kapas pada tahun 2019 dan 2020. Jumlah populasi sebanyak 894 orang dan sampel yang diambil sebanyak 107 orang dengan menggunakan metode cluster random. contoh. Hasil: Hasil penelitian menunjukkan bahwa prioritas masalah kesehatan PTM di Desa Klampok adalah hipertensi dengan prevalensi sebesar 15,9% dan hasil diagram pohon masalah menunjukkan bahwa tingginya prevalensi hipertensi disebabkan oleh rendahnya minat berolahraga di kalangan masyarakat. . masyarakat, mayoritas masyarakat masih memiliki kebiasaan merokok, kurangnya penerapan manajemen stres, dan konsumsi garam berlebihan. Kesimpulan: Penentuan prioritas alternatif solusi dengan metode MEER (metodologi, efektivitas, efisiensi, relevansi) dan diperoleh alternatif solusi yang tepat adalah Program Pemberian Menggali Potensi (Gerakan Kedaton Peduli Hipertensi) yang mempunyai beberapa sub kegiatan diantaranya penyuluhan tentang pengendalian hipertensi, pembuatan media promosi kesehatan, pelatihan dan pembekalan kader PTM mengenai masalah hipertensi, dan pengenalan Toga.

Kata Kunci : *Diagnosa Masalah, Pertolongan Masalah, Prioritas Masalah Kesehatan, Alternatif Solusi, Aktivitas Fisika*

## Abstract

Background: Based on secondary data analysis of Posbindu PTM data, Ponkesdes data and primary questionnaire surveys, interviews, four health problems were found in Klampok Village, namely the high number of active smokers who smoke at home, the high prevalence of gout, the high prevalence of hypertension, and The socialization program for preventing non-communicable diseases is not yet optimal.

Objectives: Identify health problems, determine priority health problems, analyze the root causes of health problems, determine program implementation plans based on priority health problems, and implement problem programs.

Method: Research design using SWOT analysis. We use primary data in the form of questionnaires, in-depth interviews, observations, group discussions. We used secondary data in the form of demographic data for Kamplok Village and the profile of the Kapas Health Center in 2019 and 2020. The total population was 894 people and the sample taken was 107 people using the cluster random method. example.

Results: The research results show that the priority health problem for NCDs in Klampok Village is hypertension with a prevalence of 15.9% and the results of the problem tree diagram show that the high prevalence of hypertension is caused by the low interest in exercise among the community. society, the majority of people still have smoking habits, lack of implementation of stress management, and excessive salt consumption. Conclusion: Determining the priority of alternative solutions using the MEER method (methodology, effectiveness, efficiency, relevance) and obtaining the right alternative solution is the Provision of the Dig Potency program (Gerakan Kedaton Cares for Hypertension) which has several sub-activities including counseling about controlling hypertension, establishing health promotion media , training and equipping PTM cadres regarding hypertension problems, and the introduction of Toga .

Keywords : *Problem Diagnosis , Assistance Problems , Priorities Health Problems , Alternative Solutions, Activities Physique*

## INTRODUCTION

Health is important and has become a necessity for everyone, this is because when the body is sick, a person will not be productive and is at risk of death. Basically, everyone has their own way of maintaining their health. Individual perspectives on health and well-being vary widely and are influenced by knowledge, understanding, values, and goals. It cannot be denied that health is the most important capital for individuals and society to achieve optimal living conditions, thus enabling humans to carry out various activities. However, not everyone is able to achieve or improve their health. Therefore, various initiatives are needed from both the government and society to improve the level of public health.

Collaboration between government agencies and community participation is very necessary to achieve a high level of public health. Therefore, public awareness of the importance of healthy living requires environmental and behavioral factors, as well as the willingness and affordability of health services. Apart from that, government efforts are also needed as a provider of health service facilities to provide optimal health services to the

community. Students as the nation's next generation are expected to be able to solve every health problem that exists in society. Students have three main roles, namely as agents of change, agents of development, and agents of modernization. Students are expected to be pioneers in solving existing community problems and optimizing the potential that exists in an area to realize the welfare and well-being of the people who live there as a result of these three roles. The development of the times and technology is moving very rapidly. In addition, globalization is causing changes in the epidemiological transition, namely changes in disease patterns from infectious diseases to non-communicable diseases which are influenced by changes in people's lifestyles to unhealthy lifestyles such as physical insufficiency, activity, smoking and drinking habits, and poor diet.

One of the causes of non-communicable diseases that arise due to advances in time and technology is lack of physical activity. Physical activity is anything that physically moves the body or the human body. Doing regular physical activity can increase heart efficiency, lower blood pressure, reduce the risk of hypertension, improve muscle and joint function for the better because the body's organs become stronger and more flexible . Lack of physical activity has predictable consequences, namely causing low physical quality so that you get tired easily during activities, get sick easily, get sore and become less productive.

So that become something outward movement normal in increase quality health in society if a health program has been implemented by the agency government collaborated with creative ideas student . So that new programs are created can give innovation that makes public more interested or not Afraid For follow him . In creating new related programs with health also needed consultation to figure public as well as adapt habit , custom as well as existing culture trusted . Like in effort increase activity physique public need creative activities . And together student , figure public as well as agency government activity the can held with Good .

## RESEARCH METHODS

The research design uses SWOT analysis, Precede-Proceed (Social Diagnostics, Epidemiological Diagnostics, Environmental and Behavioral Diagnostics, Educational and Organizational Diagnostics, Policy Administration Diagnostics, and intervention alignment), Urgency, Seriousness and Growth, and fishbone diagrams. Determining alternative solutions using further methods (methodology, effectiveness, efficiency and relevance) with several stakeholders and cadres. Secondary data comes from publications from the Bojonegoro District Health Service, data from Kapas Village government publications, and data from publications from the Central Statistics Agency. The research population is people aged over

15 years who live in Kapas Village, Kapas District, Bojonegoro Regency, totaling 2,730 people. The sample used was simple random sampling, 100 people were taken who were divided into 20 RTs where each RT had 4-5 people as samples.

## RESULTS AND DISCUSSION

The population is 2730 people or 304 families consisting of 1,686 men and 1,753 women, the majority group aged 31-40 years is 143 people, the majority's education level is high school or equivalent. The results of research based on the ultrasound method show that the priority health problem for NCDs in Kapas Village is low physical activity. The results of the fishbone diagram show that the low level of physical activity is caused by lack of literacy, lack of motivation to carry out physical activity, lack of infrastructure intended for physical activity, busy work, monotonous and less innovative joint physical activity, and lack of knowledge and perception about health. The alternative solution is using the meer method and the result is that the best alternative solution plan is to hold gymnastics with innovation, namely cooking demonstration activities, suggestion boxes, and sharing healthy menus alternately.

Based on the approach, the results obtained by the proposed program plan are Gema Reducing Hypertension in Kapas Village Through Physical Activity (Active Getuk), this program consists of three sub-programs, namely SERABI" or "Hypertension Eradication Exercise, UBI JALAR" or "Let's Walk Healthy Together, PUKIS ASIK " or "Physical Activity Counseling and Education". The results of the Pukis Asik activity were 72% of invited participants who attended the activity, the results of the SERABI activity were 61 participants, and the results of the Jalar activity were 61 participants who took part in the activity. The results of the implementation of the UBI Jalar Activity were that 61 (sixty one) invited participants attended the UBI JALAR event. With the amount already achieved expected all over residents who have follow activity This can more active in activity physique To use push many sufferer hypertension Good from age young until old .

### Discussion

Based on the SWOT analysis, internal factors were found to be strengths (the strategic location of the village makes it easy to access transportation and information, the majority of people are highly educated, there are health workers who are ready to serve the community 24 hours a day, there are health facilities and infrastructure, religious facilities, formal education facilities, and sports fields) and Weaknesses (Village government experiences vacancies in positions, especially leaders so that several programs are not implemented optimally, Unequal distribution of promotional media and health information),

and external factors are Opportunities (There are activities of Posyandu for the Elderly and Posyandu for Toddlers which are routinely carried out every every month in Kapas Village, the Kapas Village Community regularly holds gathering events, such as social gatherings, thanksgivings, and routine recitations), Threats (The Kapas Village community still has the habit of burning rubbish which increases the risk of air pollution and endangers health. Most of the Kapas Village community has not yet done so. regular health checks, lack of physical activity in Kapas Kapas Village).

Based on social diagnosis, the largest population is male, namely 1,686 people, the majority work as someone else, 2,319 people, and 692 people are high school graduates. Based on behavioral and environmental diagnoses, the problem is the low literacy of the Kapas Village community regarding health information, especially PTM, due to the distribution of media and promotional information which is still not optimal. Based on organizational and educational diagnoses, it was found that knowledge regarding the importance of physical activity to prevent the risk of hypertension is still low due to a lack of socialization regarding the importance of physical activity which is still not good in the form of socialization. and health promotion media and physical activity facilities are still inadequate, support from stakeholders regarding the importance of physical activity to prevent the risk of hypertension is still lacking. Based on the diagnosis of policy implementation, several obstacles were found, namely registration procedures that were not carried out regularly and clearly, joint physical activities that were monotonous and less innovative, activity schedules that were uncertain/tentative, and encouragement/invitations that were less firm. in physical activity. Based on the epidemiological diagnosis, it is known that the environmental condition factor is that there are still people who use well water as bath water and the human condition factor is the low motivation of residents to carry out physical activity.

Determining problem priorities using the Focus Group Discussion method with the Urgency, Seriousness, Growth (USG) method and it was found that the main priority problem was the low level of community physical activity. Determining the root of the problem was carried out using the fishbone method, and determining alternative solutions using the MEER method and the alternative solution plan obtained was holding gymnastics with innovation, namely cooking demonstration activities, suggestion boxes, and distributing healthy menus alternately. . The proposed activity plan uses the PROCEED approach, namely the Active Gethuk work program (Gema Reducing Hypertension in Kapas Village through Physical Activity) which aims to increase the level of physical activity of the Kapas Village community and reduce risk factors for hypertension and other diseases. non-communicable

disease. This work program consists of 3 activities, namely the first SERABI (Hypertension Eradication Gymnastics) which is held twice a week and there is a suggestion box for variations of exercise so that it is not monotonous and boring. The results of the implementation of SERABI activities were that a total of 61 (sixty one) invited participants took part in SERABI activities, during the activities the participants showed high enthusiasm. This was indicated by the number of attendance exceeding the target and the enthusiasm of the participants seen from the movements carried out. All healthy food (polo pendem) was distributed and consumed by 4 "SERABI" participants, and 6 shows were collected. and suggestions from participants for the development of "SERABI" activities.

The second activity is Pukis Asik (Physical Activity Counseling and Education) where in every village activity there is counseling, namely PKK women's meetings, RT meetings, and posyandu. The results of the implementation of the PUKIS ASIK activity were that 72% of the invited participants took part in the PUKIS ASIK activity, namely 40 people. During the activity the participants showed high enthusiasm. This was shown by actively asking and answering as well as giving opinions, and participants who took part in the counseling experienced an increase in knowledge of 87.5% as seen from the increase in pre-test and post-test scores.

The third activity is UBI JALAR (Let's Walk Healthy Together) to increase physical activity and community productivity. The results of the implementation of the UBI Jalar Activity were that 61 (sixty one) invited participants took part in the UBI JALAR event. During the activity the participants showed high enthusiasm. This was shown by the number of attendance exceeding the target and the enthusiasm of the participants seen from the participation of all participants until the end of the event, as well as a total of 30 door prizes that were distributed to lucky participants .

## CONCLUSION

Primary data and data sets were analyzed using fishbone diagrams to identify the problem of lack of physical activity in Kapas Village. Based on the results approach, that is It was found that the proposed program plan was Gema Reducing Hypertension in Kapas Village through physical activity (Active Getuk), this program consists of three sub-programs namely "SERABI" or "Exercise to eradicate hypertension, UBI JALAR" or "Let's do it" healthy walking together, "PUKIS ASIK " or "Physical Activity Counseling and Education". Intervention programs that have been evaluated show that the program has a significant impact on program performance.

## REFERENCE

- Asmoko, H. (2013). Problem Illustration Technique-Fishbone Diagram. *Magelang: BPPK*.
- Ariyanto, A., Cinta, NP, & Utami, DN (2020). Physical activity on quality of life in the elderly. *Al-Irsyad Health Journal*, 13(2), 145-151.
- Hamzah, B., Akbar, H., & Sarman, S. (2021). Prevention of Non-Communicable Diseases Through Smart Education in the Community of Moyag Village, Kotamobagu. *Universal Service*, 3(1), 83-87.
- Makawekes, E., Suling, L. and Kallo, V. (2020) 'The Effect of Physical Activity on Blood Pressure in the Elderly Age 60-74 Years', *Journal of Nursing*, 8(1), p. 83. doi: 10.35790/jkp.v8i1.28415.
- Marleni, L. (2020) 'Physical Activity with Hypertension Levels in Palembang City Health Centers', *JPP (Palembang Health Polytechnic Health Journal)*, 15(1), pp. 66–72. doi: 10.36086/jpp.v15i1.464.
- Yanita, NIS (2022). Dealing with hypertension. Bumi Medika.
- Masi, GN, & Mulyadi, N. (2017). The relationship between physical activity patterns and eating patterns with blood sugar levels in type II diabetes mellitus patients at the internal medicine clinic, GMIM Manado Hospital. *Journal of Nursing*, 5(1).
- Rihiantoro, T., & Widodo, M. (2018). The relationship between diet and physical activity with the incidence of hypertension in Bone Bawang district. *Sai Betik Nursing Scientific Journal*, 13(2), 159-167.
- Arania, R., Triwahyuni, T., Prasetya, T., & Cahyani, SD (2021). The relationship between work and physical activity and the incidence of diabetes mellitus at the Mardi Waluyo Clinic, Central Lampung Regency. *Malahayati Medical Journal*, 5(3), 163-69.
- Tamamilang, CD, Kandou, GD, & Nelwan, JE (2018). The relationship between age and physical activity and the degree of hypertension in Bitung City, North Sulawesi. *KESMAS: Public Health Journal of Sam Ratulangi University*, 7(5).
- Sari, N., & Purnama, A. (2019). Physical Activity and Its Relationship with the Incidence of Diabetes Mellitus. *Window of Health: Journal of Health*, 368-381.