

## Analysis of Time and Frequency of Implementation of Non-Communicable Disease Integrated Guidance Posts in the New Normal Era in Binjai City

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### Abstract

*The purpose of this study was to determine and analyze of time and frequency of implementation of non-communicable disease integrated guidance posts in the new normal era in Binjai City. This type of research is an analytic survey with a cross sectional design. The total population in this study was 179,650 with a total sample of 174 respondents obtained by purposive sampling. This research instrument uses a questionnaire that is used in the form of a google form. The data obtained in this study were analyzed by conjoint analysis. Based on the results of research on the people of Binjai City, the attribute activities of the non-communicable disease integrated guidance posts in the new normal era in Binjai City, the most important thing is the time of the implementation of the non-communicable disease integrated guidance posts, then the attribute activities of the non-communicable disease integrated guidance posts which are not too important are the frequency implementation of the non-communicable disease integrated guidance posts.*

### Keywords

time; frequency;  
implementation



## I. Introduction

Non-communicable disease is a disease that is not caused by bacterial or viral infection, cannot be transmitted to other people, develops very slowly or takes a long time and is chronic, diabetes mellitus, cancer, chronic obstructive pulmonary disease, injuries, and impaired vision and hearing. Non-communicable disease can occur due to unhealthy human behavior or an unhealthy living environment such as smoking, not consuming enough fruits and vegetables, doing physical activity for less than 30 minutes a day and consuming alcoholic beverages. Non-communicable disease has no symptoms so it is difficult to detect at the beginning, when it is found it is at an advanced stage so it is difficult to cure (Kementerian Kesehatan, 2019).

Non-communicable disease is one of the health problems that causes illness, disability and even death, has a bad impact on the economy and reduces the productivity of the nation because its treatment takes a long time and is very expensive. The largest absorption of national health insurance costs is the cost for Non-communicable disease treatment, the trend of which is increasing every year. Non-communicable disease is a disease with the highest mortality in the world, according to the World Health Organization (WHO) the total number of deaths in the world in 2016 was 57 million, 71 percent (41 million) of these deaths were caused by non-communicable disease such as heart disease, blood vessel disease, respiratory disease, cancer, and diabetes mellitus (Kementerian Kesehatan, 2018).

Non-communicable disease is developing in Indonesia with an increasing trend and the pattern of the disease is also shifting, at first non-communicable disease sufferers are old people but now non-communicable disease is also suffered by young people who are still productive. In Indonesia, the prevalence of non-communicable disease continues to increase every year. Basic Health Research data in 2018 compared to 2013, data shows the prevalence of high blood pressure increased from 25.8 percent to 34.1 percent, cancer increased from 1.4 per mil to 1.8 per mil, stroke 7 per mil to 10.9 per mil, kidney disease increased from 2.0 per mil to 3.8 per mil, diabetes mellitus increased from 6.9 percent to 10.9 percent, the prevalence of heart disease increased from 1.3 percent to 1.5 percent. The high prevalence of non-communicable disease in Indonesia is caused by an unhealthy lifestyle where 29.3 percent of people smoke, 95.5 percent of people consume less fruit and vegetables and 33.5 percent of people do not do physical activity and 21.8 percent of people are overweight.

The Covid-19 pandemic caused everyone to behave beyond normal limits as usual. One of the behaviors that can change is deciding the decision to choose a college. The problem that occurs in private universities during covid 19 is the decrease in the number of prospective students who come to campus to get information or register directly to choose the department they want. (Sihombing, E and Nasib, 2020)

The world is facing the current coronavirus disease-19 (COVID-19) pandemic, where this pandemic has changed human behavior and habits in every place such as on campus, in houses of worship, in offices and in health facilities. COVID-19 is an infectious disease caused by infection with the corona virus that enters the human body. The corona virus has a very small size, which is 125 nanometers, but this virus is very dangerous because it can cause death in infected humans. The symptoms that can be caused by COVID-19 are cough, runny nose, high fever and respiratory tract disorders, but there are also people who do not have any symptoms even though they have been infected by COVID-19. COVID-19 can cause death in patients with severe conditions because it causes respiratory failure, this usually occurs if the patient's immune condition decreases or the patient has comorbidities or comorbidities. COVID-19 can be transmitted through coughing/sneezing droplets (droplets), which are liquids that come out of the mouth when coughing/sneezing. Through the coughing/sneezing of an infected person, the corona virus will transfer to other objects or people nearby and if it is inhaled by a healthy person, the person will be infected with COVID-19.

COVID-19 sufferers will show more severe and severe symptoms if they already have co-morbidities, namely other diseases that a person has before suffering from COVID-19, co-morbidities will make the clinical course of COVID-19 worse, this is because the immune system of COVID-19 sufferers with comorbidities are reduced. Comorbid COVID-19 that can worsen to cause death in COVID-19 patients, namely non-communicable disease, among others, hypertension, diabetes mellitus, chronic obstructive pulmonary disease and heart disease, therefore during the non-communicable disease pandemic, attention must still be given in terms of handling and prevention.

The COVID-19 pandemic situation causes uncertainty when it will end, while measures to determine the nature of the virus and ways to tame it are still being sought, there is an urge to return to normal life in various sectors, especially the economic sector. The World Health Organization together with governments in various countries around the world have begun to declare a new order of life to coexist with COVID-19, through the idea of a "new normal". The need to live a normal life with the return of social and economic activities to prevent a recession, because the pandemic has almost completely stopped economic activity in various countries (Mas'udi and Winarti, 2020).

People must get used to living with new habits, and be able to coexist with COVID-19 even though it is still in a pandemic period. New normal is narrated to be an adaptation of

new habits, namely a new habit of daily living, habits of behaving or taking actions such as work, study and others that are different from previous habits. The community remains productive and safe from the risk of COVID-19 transmission during activities during the pandemic, which is the goal of the new normal so that people can still work as usual, can still learn and carry out productive economic activities (Kementerian Kesehatan, 2020).

The purpose of this study was to determine and analyze of time and frequency of implementation of non-communicable disease integrated guidance posts in the new normal era in Binjai City.

## **II. Research Method**

This type of research is an analytic survey with a cross sectional design. Based on Pandiangan (2015), analytic survey is carried out to investigate how a response variable that is the comparison between sectors or subgroups of the population. Cross sectional design is a type of research that observes population or sample data only once at a time (Pandiangan et al., 2021).

The total population in this study was 179,650 with a total sample of 174 respondents obtained by purposive sampling. According Pandiangan et al. (2018), purposive sampling is the selection of samples based on certain characteristics that are considered to have relevance to the characteristics of the population that have been known previously. This research instrument uses a questionnaire that is used in the form of a google form. Research instruments are tools that are needed or used to collect data. This means, using these tools data is collected (Pandiangan, 2018).

The data obtained in this study were analyzed by conjoint analysis. Conjoint analysis is the optimal market research approach for measuring the value that consumers place on features of a product or service. This commonly used approach combines real-life scenarios and statistical techniques with the modeling of actual market decisions (Tobing et al., 2018).

## **III. Result and Discussion**

### **3.1 Characteristics of Respondents**

Binjai City is a city located in North Sumatra Province. Geographically, Binjai City is at 3° 31'40"-3°40'2" north latitude and 98°27'3"-98°32'32" east longitude and is located + above sea level. The area of Binjai city is 90.23 km<sup>2</sup>, in the north it borders with Binjai District, Langkat Regency and Hamparan Perak District, Deli Serdang Regency, in the east it borders with Sei Bingei District, Langkat Regency and Kutalimbaru District, Deli Serdang Regency, in the south it borders with Sei Bingai District, Kabupaten Langkat Regency. Langkat and Kutalimbaru District Deli Serdang Regency, in the west it borders on the Finish District, Langkat Regency.

Binjai City consists of 5 (five) sub-districts namely South Binjai, City Binjai, East Binjai, North Binjai and West Binjai and consists of 37 villages. The population of Binjai City is 276,597 people, the male population is 138,064 people and the female population is 138,533 people. Binjai City has 8 Community Health Centers, namely Kebun Lada Community Health Centers, Jati Makmur Community Health Centers, Rambung Community Health Centers, Binjai Estate Community Health Centers, Bandar Sinembah Community Health Centers, HAH Hasan Community Health Centers and Tanah Tinggi Community Health Centers and has 37 non-communicable disease integrated guidance posts where each village has 1 non-communicable disease integrated guidance posts.

### 3.2 Characteristics of Respondents

Characteristics of respondents, namely the characteristics of the people of Binjai City who participated in this study which included age, gender, education and income.

The 174 people there were 132 people (75.9%) aged 16-44 years and there were 42 people (24.1%) aged 45-59 years.

The 174 people, 73 people (42.0%) were male and 101 people (58.0%) were female.

The 174 people there are 3 people (1.7%) with elementary school education, there are 11 people (6.3%) with junior high school education, there are 93 people (53.4%) high school education, there are 24 people (13, 8%) have a diploma 3 education, 39 people (22.4%) have a bachelor's degree, 4 people (2.3%) have a master's degree.

The 174 people, 11 (6.3%) are still students, 29 (16.7%) have jobs as employees, 24 people (13.7%) have jobs as civil servants, there are 17 people (9.8%) have a job as a farmer, there are 37 people (21.3%) have a job as an entrepreneur, there are 43 people (24.7%) have a job taking care of the household, there are 13 people (7.5%) has a job as a teacher, pharmacist and others.

The 174 people, 36 people (20.7%) had an income of less than two million rupiah (<Rp2.000.000.-), there were 121 people (69.5%) who had an income of between two million rupiah and five million rupiah (Rp2.000.000.- to Rp5,000,000,-), there are 17 people (9.8%) who have income above five million rupiah (> Rp5,000,000,-).

### 3.3 Conjoint Analysis Results

The results of the respondent's assessment were then analyzed using conjoint analysis to obtain the relative importance and utility value of integrated guidance posts attributes so that people's preferences for integrated guidance posts could be known. Based on the results of the conjoint analysis, it is known that the relative importance value which is considered the most important by respondents to integrated guidance posts is time of 30.426%, then frequency of 12.545%.

### 3.4 Time

Based on the results of research on the people of Binjai City, the attribute activities of the non-communicable disease integrated guidance posts in the new normal era in Binjai City, the most important thing is the time of the implementation of the non-communicable disease integrated guidance posts.

According to Hidayanto (2021), time is the entire series of moments when the process or action takes place. Time is also a dimension in which events occur that can be experienced from the past through the present to the future.

Based on the results of the study, it was found that respondents wanted the integrated guidance posts implementation time to be carried out in the morning at 09.00-12.00 WIB, which was seen from the largest utility estimate, which was 0.299, while the time level at 16.00-17.00 WIB did not need to be done because it has a utility value estimate which is smaller, namely -0.299. The results of the analysis above illustrate that it is very necessary to implement the non-communicable disease integrated guidance posts in the new normal era in Binjai City with the implementation time in the morning at 09.00-12.00 WIB so that the community can play an active role by visiting the non-communicable disease integrated guidance posts.

Based on the author's observations, the integrated service post in the city of Binjai in the new normal era can be reactivated according to the time desired by the integrated guidance posts target community, namely in the morning at 09-12.00 WIB. It is hoped that integrated guidance posts cadres and health workers who are responsible for implementing

the integrated guidance posts program can organize integrated guidance posts at a time that is adjusted to the wishes of the community who are the targets of the non-communicable disease integrated guidance posts.

### 3.5 Frequency

Health development is part of national development which has the aim of increasing the willingness and ability to live healthy for everyone in order to realize the highest degree of public health as an investment for human resource development (Manihuruk and Nadjib, 2018).

The attribute activities of the non-communicable disease integrated guidance posts which are not too important are the frequency implementation of the non-communicable disease integrated guidance posts.

Based on the results of the study, it was found that respondents wanted the frequency of implementing integrated guidance posts once a month as seen from the largest utility estimate, which was 0.073, while the level twice a month did not need to be done because the utility estimate was smaller, namely -0.073. .

Based on the research results, respondents want the frequency of implementing integrated guidance posts once a month. In this case, it is expected that non-communicable disease integrated guidance postscadres and Binjai city health workers carry out integrated guidance posts activities once a month in accordance with the wishes of the people of Binjai City so that the integrated guidance posts target community can participate in the non-communicable disease integrated guidance posts activities carried out.

## IV. Conclusion

Based on the results of research on the people of Binjai City, the attribute activities of the non-communicable disease integrated guidance posts in the new normal era in Binjai City, the most important thing is the time of the implementation of the non-communicable disease integrated guidance posts, then the attribute activities of the non-communicable disease integrated guidance posts which are not too important are the frequency implementation of the non-communicable disease integrated guidance posts.

Suggestions in this research are:

1. For the Binjai City Health Office to immediately re-run the non-communicable disease integrated guidance posts program in order to reduce or suppress cases of non-communicable disease in Binjai City.
2. Non-communicable disease integrated guidance posts in the new normal era in Binjai City should be carried out according to the results of this study, namely the non-communicable disease integrated guidance posts in the new normal era in Binjai City held in the morning at 09.00-12.00 WIB, outside the room, using integrated guidance posts facilities complete standard with cadre implementing officers, health workers and doctors, the activities carried out at the integrated guidance posts are the main integrated guidance posts activities so that the non-communicable disease integrated guidance posts.



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