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# THE RELATIONSHIP BETWEEN MOTIVATION AND THE ENVIRONMENT WITH MALARIA PREVENTION EFFORTS IN THE WORKING AREA OF PUSKESMAS, TENGAH IIIr DISTRICT, TEBO DISTRICT

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#### **ABSTRACT**

Malaria is still a public health problem in Indonesia because of its high morbidity and mortality rates, especially in areas outside Java and Bali. In transmigration areas where there is a mixture of people from endemic and non-endemic areas of malaria, cases or epidemics still frequently occur which cause many deaths. Data from the Tebo District Health Office for January-July 2014 were 519 people out of a population of 328,564 people (0.16%) with an AMI of 1.6. The highest incidence of malaria was in the Mengupeh Health Center, Tengah Ilir District, with 75 people out of a population of 11,820 people (0.63%) with an AMI of 6.34.

The purpose of this study was to find out the description and relationship between malaria prevention efforts in the Working Area of the Mengupeh Health Center, Tengah Ilir District, Tebo Regency in 2015. This research is a quantitative study with a cross sectional research design. In this study, the sample was the community in the Working Area of the Mengupeh Health Center, Tengah Ilir District, Tebo Regency, with a sample size of 96 people.

The results showed that of the 96 respondents, 57 (59.4%) respondents had poor motivation, 59 (61.5%) respondents had a bad environment, respondents had poor malaria prevention efforts. The results of the analysis showed that there was a relationship between motivation and a p value of 0.007 (p <0.05), environment with a p value of 0.009 (p <0.05) on malaria prevention efforts in the Working Area of the Mengupeh Health Center, Tengah Ilir District, Tebo Regency.

Advises the public to be active in seeking information about prevention of malaria in order to reduce the incidence of malaria. At the same time actively maintaining the cleanliness of the home environment and their respective settlements.

**Keywords**: Motivation, Environment, Role of Officers and efforts to prevent malaria.

Reading list :25 (1997-2014)

#### INTRODUCTION

Implementation of health efforts is any activity or series of activities carried out in an integrated, integrated and sustainable manner to maintain and improve the health status of the community in the form of disease prevention, health improvement, disease treatment, and health recovery by the government and the community.

Health problem is a complex problem, which is related to other problems besides health itself. Many factors affect health, both individual health and public health, one of which is environmental health. Environmental health is a condition or state of the environment that is optimal so that it has a positive effect on optimal health status as well3.

Malaria is still a public health problem in Indonesia because of its high morbidity and mortality rates, especially in areas outside Java and Bali. In transmigration areas where there is a mixture of people from endemic and non-endemic areas of malaria, cases or epidemics still frequently occur which cause many deaths 9.

The number of clinical cases reported in Indonesia in 2009 was 1,143,024 people with the number of positive cases found based on laboratory tests of 199,577 people. This number may be smaller than the actual situation, because not all cases are reported due to transportation constraints from endemic villages in remote areas 7.

From the data from the Jambi Provincial Health Office, it was found that the incidence of malaria in Jambi Province in 2013 was 3,620 people out of a population of 3,231,056 people (0.1%) with an AMI of 1.12. The highest malaria incidence rate was in Jambi Province in Tebo District, with 1,000 people out of a population of 308,526 people (0.3%) with an AMI of 3.24 4.

Judging from the data from the Tebo District Health Office, it was found that the incidence of malaria in Tebo District in January-July 2014 was 519 people out of a population of 328,564 people (0.16%) with an AMI of 1.6. The highest malaria incidence rate was at the Mengupeh Health Center, Tengah Ilir District, with 75 people out of a population of 11,820 people (0.63%) with an AMI of 6,345.

According to Blum in Notoatmodjo (2007) that health status is influenced by four factors, namely environment, behavior, health services and heredity. The environment has the biggest contribution to health status, followed by behavior which has the second contribution, health services, and heredity which has the smallest contribution to health status. Environmental health is essentially a condition or state of the environment that is optimum so that it has a positive effect on the realization of optimum health status as well. Green (1980) in Notoatmodjo (2007) explains that behavior is a dilator behind or influenced by three main factors, namely: predisposing factors, supporting factors and driving factors. Behavior towards the environment as a determinant of human health.

#### **RESEARCH METHODS**

This research is a quantitative study with a cross-sectional research design. This research aims to find out the description and relationship between malaria prevention efforts in the Working Area of the Mengupeh Community Health Center, Tengah Ilir District, Tebo Regency.

The population in this study are all people who are in The working area of the Mengupeh Health Center, Tengah Ilir District, Tebo Regency, totaling 11,820 people with a total sample of 96 respondents, used a random sampling technique, namely simple random sampling 2.

Data analysis consisted of univariate analysis to describe each variable and bivariate analysis to see the relationship between motivational and environmental variables on malaria

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prevention efforts in the Working Area of the Mengupeh Health Center, Tengah Ilir District, Tebo Regency.

#### RESEARCH RESULT

### 1. UNIVARIATE ANALYSIS RESULTS

This study involved 96 respondents to collect quantitative data using a questionnaire, the results of univariate analysis on motivation, environment and efforts to prevent malaria in the Working Area of the Mengupeh Health Center, Tengah Ilir District, Tebo Regency

**Table 1**. Distribution of motivation, environment, and efforts to prevent malaria in the Working Area of the Mengupeh Health Center, Tengah Ilir District, Tebo Regency

Variable	Frequency	%		
Motivation				
Not good	61	63.5		
Good	35	36.5		
Environment				
Not good	59	61.5		
Good	37	38.5		
malaria prevention efforts				
Not good	61	63.5		
Good	35	36.5		

Based on table 1, it shows that out of 96 respondents, 61 (63.5%) had poor motivation, 59 (61.5%) unfavorable environment, and 61 (63.5%) unfavorable malaria prevention efforts.

#### 2.RESULTS OF BIVARIATE ANALYSIS

To find out whether the independent variable is related to the dependent variable, a bivariate analysis is performed using a statistical test*chi-square* with a significance level ( $\alpha = 0.05$ ). The results of the bivariate analysis can be seen in table 2 below as follows:

**Table 2.** Relationship between motivation and environment for malaria prevention efforts in the Working Area of the Mengupeh Health Center, Tengah Ilir District, Tebo Regency

	malaria prevention efforts			Total			
Variable	Not good		Good		Total		P-Value
	n	%	n	%	N	%	
Motivation							
Not good	43	75,4	14	24,6	57	100	0.007
Good	18	46,2	21	53,8	39	100	0.007
Environment							
Not good	44	74,6	15	25,4	59	100	0.000
Good	17	45,9	20	54,1	37	100	0.009

From table 2 above it can be seen that the relationship between motivation and malaria prevention efforts shows that out of 57 respondents who have poor motivation, there are 43 (75.4%) respondents had poor malaria prevention efforts. Of the 39 respondents who had good motivation there were 18 (46.2%) respondents who had good malaria prevention efforts, statistically obtained a p-value of 0.007 (p <0.05) which means there is significant relationship between motivation and malaria prevention efforts.

The relationship between the environment and malaria prevention efforts showed that out of 59 respondents who had a bad environment, there were 44 (74.6%) respondents have poor malaria prevention efforts. Of the 37 respondents who had a good environment, 17 (45.9%) respondents had good malaria prevention efforts. Statistically, a p-value was obtained of 0.009 (p < 0.05) which means that there is a significant relationship between the environment and malaria prevention efforts.

#### **DISCUSSION**

According to Notoatmodjo (2007) disease prevention behavior is a response to disease prevention, for example sleeping using mosquito nets to prevent malaria mosquito bites, immunization and so on. This includes behavior not to transmit disease to others3.

Furthermore, according to Timmreck, Thomas C. (2004) The goal of prevention is to block the development of disease and illness before it can progress. The concept of prevention is broad, including steps to interrupt or slow down a disease or disorder. It was from this expansion of the idea that three stages of prevention were developed, namely primary, secondary and tertiary8.

Malaria prevention behavior is an individual, group and community effort to prevent malaria by always keeping the environment clean and active in seeking information about preventing malaria in order to reduce the incidence of malaria.

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Most people do not know about how malaria is transmitted so that people cannot prevent the disease. Malaria is transmitted through the bites of Anopheles mosquitoes and this disease can be prevented by sleeping with mosquito nets, using mosquito coils and sprays, hoarding standing water around the house and not hanging dirty clothes. Therefore, it is necessary to increase counseling on malaria prevention by health workers so as to motivate the community to prevent malaria.

With a dirty environment that will increase the breeding of malaria mosquitoes (Anopheles) therefore it is hoped that the community will always maintain a clean environment by working together like clean Friday so that the breeding of malaria mosquitoes can be stopped.

## **CONCLUSION**

It can be concluded that out of 96 respondents, 61 (63.5%) respondents had poor malaria prevention efforts, 57 (59.4%) respondents had poor motivation, 59 (61.5%) respondents had a bad environment. a significant difference between motivation, environment, and efforts to prevent malaria in the Working Area of the Mengupeh Health Center, Tengah Ilir District, Tebo Regency

#### **SUGGESTION**

In order for the Tebo District Health Office to improve supervision, monitoring, evaluation of malaria prevention and budgeting for malaria prevention and control program funds. For the Mengupeh Community Health Center to make a budget activity plan by increasing health promotion in counseling activities and mobilizing community participation such as holding mutual cooperation to clean up the environment.

Therefore it is necessary to increase counseling on malaria prevention by health workers so as to motivate the community in malaria prevention, so that the community is active in seeking information about prevention of malaria to reduce the incidence of malaria and is also active in maintaining the cleanliness of their respective home environments and it is hoped that the community will always keep the environment clean by working together like clean Friday so that the breeding of malaria mosquitoes can be stopped.

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