

## ABSTRAK

**Latar Belakang:** Industri tahu merupakan lapangan pekerjaan yang didirikan oleh perseorangan dengan tidak ada perlindungan hukum maupun jaminan sosial kesehatan dari pemerintah. Penerapan kesehatan kerja di industri informal memerlukan perhatian khusus yang nantinya akan berdampak buruk apabila tidak diterapkan. MSDs merupakan salah satu penyakit akibat kerja yang sering kali dialami dan dapat mengakibatkan penurunan produktivitas kerja. Pengetahuan mengenai K3 merupakan hal yang harus dipahami oleh setiap pekerja sebagai pedoman dalam upaya pencegahan risiko kecelakaan dan penyakit akibat kerja. Permasalahan tersebut diperlukan adanya penerapan kesehatan kerja yang harapannya dapat memberikan pengetahuan terkait kesehatan kerja ditempat kerja untuk kedepannya dapat mengurangi penyakit akibat kerja di tempat kerja khususnya pada industri tahu.

**Tujuan:** Menganalisa masa kerja, postur kerja, riwayat penyakit penyerta dan peran pemerintah terhadap keluhan MSDs di Desa Kalijambe, Kecamatan Bener, Kabupaten purworejo

**Metode:** Analisis kuantitatif dengan jenis penelitian *observasional analitik, observasional partisipatif* dan menggunakan rancangan *cross Sectional study*. Pengukuran MSDs menggunakan NBM dan pengukuran postur kerja menggunakan REBA. Peran pemerintah meliputi dinas kesehatan, puskesmas dan kepala desa didukung dengan pengambilan data sekunder.

**Hasil:** Uji *Chi square* didapatkan bahwa masa kerja, riwayat penyakit tidak mempengaruhi terjadinya keluhan MSDs dengan  $p\text{-value} > 0,05$ . Masa kerja tidak mempengaruhi terjadinya keluhan MSDs pada pekerja industri tahu dengan  $p\text{-value} = 0,711$ . Riwayat penyakit tidak mempengaruhi terjadinya keluhan MSDs pada pekerja industri tahu. Riwayat penyakit hipertensi dengan  $p\text{-value} = 0,102$ , *Diabetes Mellitus*  $p\text{-value} = 0,323$ , PPOK  $p\text{-value} = 1,000$ , *Cardiovascular*  $p\text{-value} = 0,465$  yang dimana nilai  $p\text{-value}$  secara keseluruhan  $\geq 0,05$

**Kesimpulan:** Masa kerja dan riwayat penyakit tidak memiliki hubungan yang signifikan terhadap keluhan MSDs (*Musculoskeletal Disorders*). Hasil REBA *high risk* dan *very high risk*. Kurangnya keterlibatan pemerintah dalam upaya promotif dan preventif pekerja informal industri tahu Desa Kalijambe.

**Kata Kunci** : MSDs, Masa Kerja, Postur Kerja, Hipertensi, Diabetes Mellitus, PPOK, Kardiovaskuler, Dinas Kesehatan, Puskesmas

## ABSTRACT

**Background:** Tofu industry provides job opportunities, and it is established by individuals that do not provide legal protections and facilitate government social health insurance for their workers. The implementation of occupational health and safety in the informal industry requires special attention, otherwise the workers will suffer negative impacts. MSDs is one of the occupational diseases that are often suffered by workers and can lead to a decreased productivity. Knowledge of occupational health and safety must be understood, so that they can prevent work-related accidents and diseases. This issue requires the implementation of occupational health and safety that is expected to provide knowledge related to occupational health and safety in the workplace for the future to reduce occupational diseases and accidents in the workplace, especially in the tofu industry.

**Objective:** This study aimed to analyze the job tenure, work posture, history of co-morbidities, and the role of the government in responding to MSDs-related complaints in Kalijambe Village, Bener District, Purworejo Regency.

**Methods:** This study involved a quantitative analysis; it was both analytic observational research and participatory observational research and conducted using a cross sectional study design. The MSDs was measured using NBM and work posture using REBA. The government's role is represented by the Health Agency, community health centers, and village heads supported by secondary data collection.

**Results:** Chi square test found that job tenure and medical history did not affect the occurrence of MSDs complaints with a p-value of  $> 0.05$ . The job tenure did not affect the occurrence of MSDs complaints in the tofu industry workers with a p-value of 0.711. Medical history did not affect the occurrence of MSDs complaints in the tofu industry workers. The hypertension history had a p-value of 0.102; diabetes mellitus had a p-value of 0.323; COPD had a p-value of 1.000; cardiovascular had a p-value of 0.465, and the overall p-value was  $\geq 0.05$ .

**Conclusion:** Job tenure and history of illness had no significant relationship with MSDs-related complaints. REBA results showed high risk and very high risk level. There was a lack of government involvement in promotive and preventive efforts for informal workers in the tofu industry in Kalijambe Village.

**Keywords:** MSDs, job tenure, work posture, hypertension, diabetes mellitus, COPD, cardiovascular, health agency, community health center