



Abstract

ANALYSIS OF COMPLIANCE IMPLEMENTING PUBLIC HEALTH EFFORTS PROGRAM IMPLEMENTING HAND HYGIENE IN COMMUNITY HEALTH CENTERS IN THE URBAN AREA, MALINAU DISTRICT

Background: Hand hygiene is effective in reducing infection and preventing cross-transmission between health workers and patients. Hand hygiene is done by washing hands with soap and running water if hands are dirty, or using a hand sanitizer if hands are not dirty. Health workers act as health facilitators and provide examples of healthy behavior. The research aims to analyze and dig deeper into the hand hygiene compliance of Public Health effort Program Executors.

Methods: The study was conducted in three urban health centers in Malinau District from May to June 2023, using explanatory mixed methods. The quantitative research sample consists of a total of 80 respondents. Research informants were selected by qualitative purposive sampling of 13 informants. Collecting quantitative data using a questionnaire using Google Forms and qualitative data through in-depth interviews. The validity of quantitative data is determined through validity and reliability tests, and qualitative data is determined through triangulation. Quantitative data analysis with descriptive and bivariate analysis; qualitative analysis with phenomenological design. **Results:** Quantitative analysis found low hand hygiene adherence at 30%. There is no significant relationship between knowledge (p -value 0.486) and hand hygiene compliance. There is a significant relationship between motivation (p -value 0.013), leadership policies (p -value 0.017), and hand hygiene compliance. Based on the qualitative analysis, it is known that non-compliance occurs due to a lack of knowledge, awareness, self-awareness, infrastructure, appreciation, and reporting of hand hygiene. Factors supporting compliance due to good motivation, positive leadership support, the availability of media information, routine simulations, and coordination across sectors are maintained. **Conclusion:** Increased knowledge and understanding related to hand hygiene, adequate extrinsic and intrinsic motivation, as well as good leadership support and policies, can improve hand hygiene compliance.

Keywords: Hand Hygiene, Compliance, Public Health Efforts



Abstrak

ANALISIS KEPATUHAN PELAKSANA PROGRAM UPAYA KESEHATAN MASYARAKAT MENERAPKAN HAND HYGIENE DI PUSKESMAS WILAYAH PERKOTAAN KABUPATEN MALINAU

Latar Belakang: *Hand hygiene* atau kebersihan tangan efektif mengurangi infeksi dan mencegah kontaminasi silang petugas kesehatan dengan pasien. *Hand hygiene* dilakukan dengan mencuci tangan memakai sabun dan air mengalir bila tangan kotor atau menggunakan hand sanitizer bila tangan tidak kotor. Petugas kesehatan berperan sebagai fasilitator kesehatan dan memberikan contoh berperilaku sehat. Penelitian bertujuan untuk menganalisis dan menggali lebih dalam terkait kepatuhan *hand hygiene* Pelaksana Program Upaya Kesehatan Masyarakat.

Metode: Penelitian dilakukan di 3 (tiga) Puskesmas perkotaan Kabupaten Malinau pada bulan Mei sampai Juni 2023, menggunakan metode campuran (*mixed methods*) *eksplanatori*. Sampel penelitian kuantitatif adalah *total sampling* sebanyak 80 responden. Informan penelitian kualitatif dipilih secara *purposive sampling* sebanyak 13 informan. Pengumpulan data kuantitatif dengan kuesioner menggunakan *google form* dan data kualitatif melalui wawancara mendalam. Keabsahan data kuantitatif melalui uji validitas dan realibilitas, data kualitatif melalui triangulasi. Analisis data kuantitatif dengan analisis deskriptif dan bivariat, analisis kualitatif dengan desain fenomenologi.

Hasil: Analisis kuantitatif menemukan kepatuhan *hand hygiene* rendah sebesar 30%. Tidak ada hubungan signifikan antara pengetahuan (*p-value* 0,486) dengan kepatuhan *hand hygiene*. Terdapat hubungan signifikan antara motivasi (*p-value* 0,013), kebijakan Pimpinan (*p-value* 0,017) dengan kepatuhan *hand hygiene*. Berdasar analisis kualitatif diketahui ketidakpatuhan terjadi karena kurangnya pengetahuan, kesadaran, kewaspadaan diri, sarana prasarana, belum ada penghargaan dan pelaporan *hand hygiene*. Faktor pendukung kepatuhan karena motivasi baik, dukungan positif Pimpinan, ketersediaan media informasi, simulasi rutin dan koordinasi lintas sektor terjaga.

Kesimpulan: Meningkatnya pengetahuan dan pemahaman terkait *hand hygiene*, tercukupinya motivasi ekstrinsik dan intrinsik, serta dukungan dan kebijakan Pimpinan yang baik dapat meningkatkan kepatuhan *hand hygiene*.

Kata Kunci: *Hand hygiene, Kepatuhan, Upaya Kesehatan Masyarakat*