

## ABSTRACT

**Background:** Non-communicable disease (NCDs) is the biggest cause of death globally and continues to increase. One of the efforts to overcome NCDs in Indonesia is by early detection of NCDs risk factors in the community through a community-based program called *posbindu PTM*, which is an integrated service post for controlling NCDs. The utilization of *posbindu PTM* by the community is still very low. Cases of hypertension and obesity (NCDs risk factors) managed by *posbindu PTM* in 2018 were much smaller than the *Riskesdas* 2018 (national basic health research) results. If ignored, the impact of NCDs in Indonesia has the potential to continue to increase due to NCDs risk factor that is not managed and discovered by the *posbindu PTM* program.

**Objective:** This study aims to develop a health promotion strategy in the early detection of NCDs risk factors through community-based intervention activities in the Tasikmalaya City - West Java.

**Methods:** This research is a mixed-methods, which is a mixed method of qualitative and quantitative research with a sequential exploratory design approach. Qualitative research with case studies was conducted from February to July 2019 in Tasikmalaya City, West Java Province, involving a total of 37 purposively selected participants. Data was collected in three FGD groups (religious and community leaders, *posbindu PTM* cadres, and community members) and two in-depth interviews (cadres at the sub-district level and heads of community associations). The researcher asked the participants about the problem of controlling community-based NCDs through the *posbindu PTM* and solutions to overcome these problems. The implementation of data collection and the completeness of the qualitative research results report used the COREQ criteria guidelines. The data were analyzed using the Colaizzi analysis stage, assisted by the OpenCode 4.03 application. At the quantitative research stage, the health promotion intervention was measured starting from March to October 2020. Measurement of the increase in knowledge and skills of cadres before and after the intervention was carried out on 16 cadres and questionnaire data collection measured the behavioral intention of the community to come to the *posbindu PTM* against the intervention strategies obtained. The qualitative results, it was carried out on a sample of 300 community participants in the *posbindu PTM* area being studied.

**Results:** The qualitative research resulted in two main themes and eight categories, namely: first, problems in the *posbindu PTM* with categories: 1) Fear of NCDs which is slow but fatal; 2) The cadre's communication skills are still lacking; 3) Utilization of *posbindu PTM* by the community is low, and 4) Support and facilities from *puskesmas* (health community center) are not optimal. Second, the theme of the potential of local culture with four categories: 1) *Pasampeur-sampeur* (to invite/pick up each other); 2) mutual cooperation; and 3) Supporting figures by utilizing existing communication channels, and 4) The community hopes that the *posbindu PTM* service will be complete and entertaining. From these qualitative results, intervention strategies were obtained and implemented in four intervention activities, namely: 1) NCDs socialization meetings and coordination between

stakeholders with cadres and religious leaders and community leaders; 2) cadre training; 3) promotion of posbindu PTM; and 4) Measurement of people's behavioral intentions. Quantitative research found that there was an increase in the knowledge and skills of cadres after cadre training (all p-value 0.0001) and in measuring the behavioral intention of the community to come to the posbindu PTM, the community in the posbindu PTM area stated that 52% of the community's behavioral intentions were high, and 12% of the behavioral intentions. the community is very high to come to the posbindu PTM.

**Conclusion:** The results of this study indicate that there are problems that cause the low utilization of posbindu PTM by the community. However, there is potential for local communities that can be developed to overcome these problems. This study also shows that there is an increase in knowledge and skills of posbindu PTM cadres after training and development of intervention strategies and the implementation of health promotion interventions based on community needs which have an impact on the high behavioral intention of the community to visit the posbindu PTM to detect NCDs risk factors early in Tasikmalaya City - Java West.

**Keywords:** Non-communicable diseases (NCDs), NCDs risk factors, NCDs health promotion, posbindu PTM, the local cultural potential of the community, empowerment of religious leaders.

## INTISARI

**Latar belakang:** Penyakit tidak menular (PTM) merupakan penyebab kematian terbesar secara global dan terus meningkat. Salah satu upaya penanggulangan PTM di Indonesia adalah dengan deteksi dini faktor risiko PTM di masyarakat melalui program berbasis masyarakat yang bernama Posbindu PTM, yaitu pos pelayanan terpadu untuk pengendalian PTM. Pemanfaatan posbindu PTM oleh masyarakat masih sangat rendah. Kasus faktor risiko PTM hipertensi dan obesitas yang dikelola oleh posbindu PTM pada tahun 2018 jauh lebih kecil dibandingkan dengan hasil Riskesdas 2018. Bila diabaikan, dampak PTM di Indonesia berpotensi terus meningkat akibat FR PTM yang tidak dikelola dan ditemukan oleh program posbindu PTM.

**Tujuan:** Penelitian ini bertujuan untuk mengembangkan strategi promosi kesehatan dalam deteksi dini faktor risiko PTM melalui intervensi kegiatan berbasis masyarakat di wilayah Kota Tasikmalaya - Jawa Barat.

**Metode:** Penelitian ini merupakan penelitian *mixed methods* yaitu metode campur penelitian kualitatif dan kuantitatif dengan pendekatan desain eksploratori sekuensial. Penelitian kualitatif dengan studi kasus, dilakukan pada Februari sampai Juli 2019 di Kota Tasikmalaya, Provinsi Jawa Barat dengan melibatkan total 37 peserta yang dipilih secara purposif. Pengumpulan data dilakukan pada tiga kelompok FGD (tokoh agama dan tokoh masyarakat, kader posbindu PTM dan anggota masyarakat) serta dua wawancara mendalam (tokoh kader di tingkat Kecamatan dan ketua rukun warga). Peneliti bertanya kepada peserta tentang masalah pengendalian PTM berbasis masyarakat melalui posbindu PTM dan solusi untuk mengatasi masalah tersebut. Pelaksanaan pengambilan data dan kelengkapan laporan hasil penelitian kualitatif digunakan panduan kriteria COREQ. Data dianalisis menggunakan tahap analisis Colaizzi, dibantu dengan aplikasi OpenCode 4.03. Pada tahap penelitian kuantitatif, intervensi promosi kesehatan sampai dengan pengukuran dimulai bulan Maret s.d Oktober 2020. Pengukuran peningkatan pengetahuan dan keterampilan kader sebelum dan setelah intervensi dilakukan pada 16 kader dan pengambilan data kuesioner mengukur niat perilaku masyarakat untuk datang ke posbindu PTM terhadap strategi intervensi yang didapatkan dari hasil kualitatif, dilakukan pada sampel sebanyak 300 partisipan masyarakat di wilayah posbindu PTM yang diteliti.

**Hasil:** Penelitian kualitatif menghasilkan dua tema utama dan delapan kategori, yaitu: pertama, masalah di posbindu PTM dengan kategori: 1) Ketakutan terhadap PTM yang perlahan tetapi fatal; 2) Kemampuan komunikasi masih kader kurang; 3) Pemanfaatan posbindu PTM oleh masyarakat rendah; dan 4) Dukungan dan fasilitas dari puskesmas belum optimal. Kedua, Tema potensi budaya lokal dengan empat kategori: 1) *Pasampeur-sampeur* (saling mengajak/saling menjemput); 2) kerja sama secara gotong royong; dan 3) Dukungan tokoh dengan memanfaatkan saluran komunikasi yang ada; serta 4) Masyarakat berharap pelayanan posbindu PTM lengkap dan menghibur. Dari hasil kualitatif tersebut didapatkan strategi intervensi dan diimplementasikan dalam empat kegiatan intervensi yaitu: 1) Pertemuan sosialisasi PTM dan koordinasi antara *stakeholder* dengan kader dan tokoh agama-tokoh masyarakat; 2) pelatihan kader; 3) promosi posbindu PTM; dan

4) Pengukuran niat perilaku masyarakat. Penelitian kuantitatif mendapatkan hasil adanya peningkatan pengetahuan dan keterampilan kader setelah dilakukan pelatihan kader (semua p value 0.0001) dan pada pengukuran niat perilaku masyarakat untuk datang ke posbindu PTM, masyarakat di wilayah posbindu PTM menyatakan 52% niat perilaku masyarakat tinggi, dan 12% niat perilaku masyarakat sangat tinggi untuk datang ke posbindu PTM.

**Kesimpulan:** Hasil penelitian ini menunjukkan adanya masalah yang menyebabkan pemanfaatan posbindu PTM oleh masyarakat rendah. Namun, terdapat potensi masyarakat lokal yang dapat dikembangkan untuk mengatasi permasalahan tersebut. Penelitian ini juga menunjukkan terdapat peningkatan pengetahuan dan keterampilan kader posbindu PTM setelah pelatihan dan pengembangan strategi intervensi dan pelaksanaan intervensi promosi kesehatan yang berbasis kebutuhan masyarakat memberikan dampak tingginya niat perilaku masyarakat untuk berkunjung ke posbindu PTM dalam rangka deteksi dini faktor risiko PTM di Kota Tasikmalaya- Jawa Barat.

**Kata kunci:** Penyakit tidak menular (PTM), faktor risiko PTM (FR PTM), promosi kesehatan PTM, posbindu PTM, potensi budaya lokal masyarakat, pemberdayaan tokoh agama-tokoh masyarakat.