



DENGUE HEMORRHAGIC FEVER (DHF) SURVEILLANCE OFFICER PERFORMANCES IN DHF CONTROL PROGRAM IN NORTH SEMARANG DISTRICT

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ABSTRACT

One of the Dengue Control programs is DHF Health Surveillance Officer (GASURKES) according to the Semarang City Regulation Number 5 of 2010, which was then supplemented by the Semarang City Mayor Regulation No. 27 B of 2012 concerning Instructions for Implementing Regional Regulation No. 5 of 2010. However, the incidence of DHF in Semarang City in 2015-2020 has not yet reached the national DHF incidence rate target. Therefore, there is a need for an in-depth study of the performance of Health Surveillance Officers and a description of the factors that affect performance as a description of the condition of health workers. The purpose of this research is to describe and analyze the performance of GASURKES in a dengue control program. This research is qualitative research conducted in North Semarang District. The main informant in this study was the DHF surveillance officer, while the triangulation informant was the coordinator of the health surveillance officer. The sample was determined through the purposive sampling technique. Data collection was carried out by in-depth interview method. Data were analyzed using qualitative data analysis. The results of the study indicate that the knowledge of health surveillance officers (GASURKES) in the North Semarang District is quite good. The description of GASURKES' workload is still high and tends to be multi-job. The motivation factor for GASURKES is still lacking because it is related to the lack of rewards received compared to the high workload. Health Resources for the implementation of dengue control efforts are sufficient. However, the performance of health surveillance officers (GASURKES) in the North Semarang District has reached the work target.

Keywords: dengue hemorrhagic fever; gasurkes; performance

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INTRODUCTION

In Indonesia, Dengue Hemorrhagic Fever (DHF) is an acute epidemic disease that is transmitted to humans by *Aedes Aegypti* and *Aedes Albopictus* mosquitoes that have been infected with the Dengue virus. The virus that causes Dengue Fever (DD), Dengue Hemorrhagic Fever (DHF), and Dengue Shock Syndrome (DSS) is included in group B Arthropod Virus (Arbovirosis) known as the Flavivirus genus, family Flaviviridae, and has 4 types of serotypes, namely: -1, Den-2, Den-3, Den-4 (Kemenkes RI, 2017)

Semarang City Government DHF Control Program appoints a Surveillance Officer (GASURKES) to regularly monitor and control DHF conditions in Semarang. This program is supported by Semarang City Regulation Number 5 of 2010 concerning Dengue Hemorrhagic Fever Control (DHF) and the Semarang City Mayor Regulation No. 27 B of

2012 concerning Guidelines for the Implementation of Regional Regulation No. 5 of 2010. Health Surveillance Programs aim to reduce the number of dengue cases in the city of Semarang. The role of GASURKES is as a facilitator in solving the problem of DHF by conducting larvae checks and providing counseling about DHF. GASURKES began to be assigned on January 2, 2015, in all urban areas of the city of Semarang. The data obtained since 2015 are as follows:

In 2017, the DHF incidence rate (IR) in the North Semarang district was 15.08 per 100,000 population with a case fatality rate (CFR) of 10.54%; in 2018, DHF IR was 1.59 per 100.00 population and CFR decreased by 0%. There is an increase in DHF IR which is 13.51 per 100.00 population while CFR became 5.88%. And until August 31, 2020, the IR increased to 14.27 per 100,000 population and the CFR was 0%. (HIEWS, 2021). GASURKES has reached the target in carrying out their duties, but the number of dengue cases remained high. The purpose of this study is to describe and analyze the performance of GASURKES in the DHF control program in the North Semarang District. To find out the cause of the failure of the DHF control program in the North Semarang District.

METHOD

This research was conducted in North Semarang District, namely Bandarharjo Health Center and Bulu Lor Health Center. The study design is qualitative research with a descriptive approach. This research was conducted in March 2021 in the District of North Semarang District. In this study, there are 2 kinds of informants, namely the main informants and triangulated informants, (1) The main informants of this study were GASURKES DBD Puskesmas Bulu Lor and Puskesmas Bandarharjo, and (2) The triangulation informant is the coordinator of GASURKES at the Puskesmas. 2, which has been used to maintain the validity of the data. In data collection, this research used the purposive sampling technique. The data in this study are primary data and secondary data. Primary data was conducted through in-depth interviews with respondents, namely: Secondary data in this study is a review of related documents The analysis consists of 3 parts, namely data reduction, data presentation, and concluding/verification.

RESULTS

North Semarang District is a work area served by Bandarharjo Health Center and Bulu Lor Health Center. They have 9 target areas, namely sub-district Bandarharjo, Kuningan, Tanjung Mas, Dadapsari, Bulu Lor, Panggung Lor, Panggung Kidul, Purwosari, and Plombokan. In 2019, there were 10 GASURKES at the Bandarharjo Health Center and Bulu Lor Health Center. Then there was a reduction in the number of GASURKES at the end of 2020 to only 1 GASURKES in each health center because other GASURKES were reassigned to be COVID-19 tracers.

As for the position of the GASURKES coordinator, before 2019 there were 2 kinds of coordinators, namely the sub-district coordinator and the GASURKES coordinator at the health center. However, from 2019 until now, there is only 1 GASURKES coordinator and they are in their respective health center. Based on table 1, there are 6 main informants. All informants are in the productive age of 17-54 years. In terms of educational background, all of the informants came from the health sector with 2 informants having an education background in Nurses and Public Health. The length of work as a GASURKES varies from 1-5 years. The main informant is GASURKES working area of North Semarang District in 2020. While the triangulation informants amounted to 2 people aged 40-50 years. All triangulated informants

have had more than 10 years of service. This relates to the position of the informant, namely as the coordinator of GASURKES who already has high work experience at the puskesmas.

Tabel 1
Table characteristics of main informations and triagulation

| Informants | Age (years) | Education | Length of employment (years) |
|---------------|-------------|---------------|------------------------------|
| Utama 1 | 26 | Public Health | 4 |
| Utama 2 | 28 | Ners | 5 |
| Utama 3 | 26 | Ners | 3 |
| Utama 4 | 24 | Public Health | 1 |
| Utama 5 | 27 | Public Health | 4 |
| Utama 6 | 29 | Public Health | 4 |
| Triangulasi 1 | 50 | Public Health | 25 |
| Triangulasi 2 | 43 | Public Health | 19 |

GASURKES Workload

The Health Surveillance Officer (GASURKES) is a manifestation of the Dengue Larva Monitoring Officer which is mentioned in Regional Regulation Number 5 of 2010 Chapter I General Provisions Article 1 Point 30. In Regional Regulation Number 5 of 2010, it is stated that a Routine Larva Inspection Officer is a person appointed and given the task of carrying out routine larva inspection, collecting, and reporting data, counseling, and mobilizing the community.

In 2019, GASURKES was responsible for Vector Infectious Disease Control and Zoonoses and Disease Control and Eradication. Starting in 2020, the workload of GASURKES has increased. They have to manage more than 1 program such as Tuberculosis, Kusta, and other program surveillance. For the DHF surveillance program, the work target is to monitor Mosquito Nest Eradication Program with a target of 50-100 houses every month, conduct routine counseling in the target areas, and monitor the Student Participation DHF Control program in schools. GASURKES in North Semarang has reached the target in 2019-2020. The target of 1 week of 100 houses in 2019 and reduced to 1 week of 50 houses in 2020. GASURKES also actively participates in activities to prevent and eradicate dengue vectors, such as giving fish to prevent dengue larvae, lavender flowers, or fogging in areas with high cases.

The government regulation mention that if the larvae are found in a house up to 3 times, a written warning (letter) will be given by the head of the RT or RW. The written warning is also followed by the installation of a special sign (sticker) in green, yellow, and then red colors. After a warning letter is issued and it is still found to be larvae positive to positive 5, based on Regional Regulation No. 5 of 2010 sanctions will be imposed in the form of a fine of Rp. 50,000,000 (fifty million rupiahs) or a criminal offense for 6 months committed by Satpol PP who served as law enforcement with a team from DKK and other cross-sectoral governance. GASURKES also has to provide health education to the community 12 times per month following the target of GASURKES Work in Regional Regulation no. 5 of 2010. Health promotion has to be done in the community, schools, and other sectors. The target of the health promotion program is 8 times in the community, 4 times in schools, or 1 time in other sectors,

GASURKES Resource Utilization

The resources provided to officers contain work bags, flashlights, and administrative equipment. To achieve good results, facilities are needed. The facilities are supported by the City Health Office. The facilities include flashlights, counseling materials on DHF, field uniforms, bags, hats, laptops, and printers for each sub-district 1 piece, as well as a report form. The availability of infrastructure, both facilities, tools, and materials in service tasks affects individual performance because it has the function of generating work motivation, activating employee responses, and being able to attract employees' attention.

GASURKES Work Motivation

GASURKES is monitored by the coordinator of GASURKES 2 times a week. Monitoring activities are in the form of routine reporting, and daily attendance of GASURKES. Based on triangulation informants, the monitoring results are also used as the basis for giving rewards and punishments for GASURKES. The Semarang City Health Office also held the Best GASURKES activity and gave prizes to the winners. The winners were rewarded with a promotion or transfer to a higher-level Health Center. However, in 2019 the reward was no longer given. Meanwhile, punishment is given to GASURKES who do not collect reports or do not reach the target. GASURKES coordinator will give a verbal warning and directions, or report to the City Health Office.

DISCUSSION

GASURKES Workload

High workloads and multi-jobs can affect the quality of work of health workers. (Pamungkas & Kusmiati, 2021; Salsabila & Budi Bambang, 2018; Sari, 2020). Excessive workloads can reduce the productivity of health workers. According to our main informants, GASURKES's workload does not match their capacity. In 2020, there is only one GASURKES in every health center that conducts surveillance activities for all surveillance programs including DHF. Each program has a target that must be achieved every month. GASURKES officers need to work in both field and administrative activities. GASURKES can achieve the quantity target but the quality is declining. Our research informants said that the "health promotion" step in the surveillance program was only carried out quickly and instantaneously due to the limited time and personnel of GASURKES.

GASURKES Resource Utilization

The number of GASURKES placed in each health center is based on the population density and the size of the working area. According to informants, in 2019 Bulu Lor Health Center and Bandarharjo Health Center each had a total of 10 officers but there was a reduction in 2020 to only 1 officer per health center. Reducing the number of GASURKES affects the quality of GASURKES work in achieving the target. Previous research in Tembalang District found that the number of employee resources who carry out tasks can affect performance. (Herdywati et al., 2017). Based on Law No. 36 of 2009 concerning Health, it is stated that "Resources in the health sector are all forms of funds, personnel, health supplies, pharmaceutical preparations, and medical devices as well as health service facilities and technology that are used to carry out health efforts carried out by the government, regional governments, and/or society." Based on this study, resources in surveillance programs contain funding, officers, equipment, and surveillance technology. The triangulation informant said that the source of the GASURKES budget is the Health Operational Assistance for the Health Center. The supporting equipment provided also comes from the Semarang City Health Office. The informant also mentions that equipment such as bags and flashlights was no longer

provided in 2019-2020. However, this does not have much effect on GASURKES productivity. Similar results were also found in the recent study in Tembalang District. (Salsabila & Budi Bambang, 2018)

GASURKES Work Motivation

Motivation has a positive effect on job satisfaction and employee performance. Health workers who are given high support and there is two-way communication between leaders and health workers in problem-solving, the performance of health workers will be better (Husaini et al., 2016). One way that can be done to increase the motivation of health workers is by giving direct appreciation to officers who have achieved the target (Afriyanty et al., 2017). Reward gives more value to employees but it must be objective and follow the performance of the employee (Tryanto & Indrawati, 2017). In this study, rewards are not commensurate with the workload. These conditions can lead to demotivation of workers. Lack of acknowledgment leads officers to do tasks not optimally. Some officers argue that promotion or rewards increase their motivation to work more optimally. Other research on health workers shows a significant relationship between motivation and performance of health workers (Wijayanti & Nuraini, 2018)

GASURKES Productivity

Productivity is usually expressed as the relationship between the physical inputs and outputs of a process. Therefore, productivity is the relationship between the amount of output compared to the resources consumed in producing the output (Wibowo, 2011). The productivity of GASURKES can be seen in the targets achieved every month. Based on triangulation informants, GASURKES have reached the target. Some of the obstacles in 2019 are that there are different regional divisions so the workload of GASURKES is different from one another. GASURKES knowledge is limited to the target area in which they are stationed. Based on this evaluation, in 2020, the Coordinator of GASURKES assisted officers in all areas in the North Semarang district.

However, the productivity slightly decreased during the implementation of Large-Scale Social Restrictions (PSBB) in Semarang City related to pandemic COVID-19. This policy limits the access of GASURKES to achieve its target in the community because the public was reluctant to interact with health workers during the pandemic. In 2020, GASURKES reduce to only 1 officer per health center. This is also one of the factors that reduce the performance same with other research results (Emulyani et al., 2021; Ensha, 2018; Zainaro et al., 2020)

CONCLUSION

Based on the results of research and discussion, it can be concluded that the performance of Health surveillance officers (GASURKES) in North Semarang District has achieved their work targets but with the increase in workload at the end of 2020, the work quality has decreased. GASURKES's knowledge of North Semarang District is sufficient, but with amount of workload and target area GASURKES need to adjust the work quality which lead in decreasing productivity.

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