

ABSTRACT

Background : Dengue Hemorrhagic Fever is a public health problem and is endemic in almost all districts/cities in Jambi Province. Indicators of dengue control activities are measured by the number of cases per 100,000 population (incidence rate/IR) and death rate (case fatality rate/CFR). IR in 2018 was 23.28 per 100,000 population and CFR in 2018 was 0.36%. Although there is a decrease in CFR every year, the incidence of dengue cases and deaths due to dengue disease still occurs every year in 11 districts/cities in Jambi Province.

Methods : This study aims to analyze the determinants of the incidence of Dengue Hemorrhagic Fever (DHF) in the work area of the Tangkit Health Center in 2021. The design of the case control study was carried out from March to April 2021. This study used primary data in 2021 with a sample of 60 respondents. The variables used were the incidence of dengue fever, age, knowledge, attitudes about 3M practices (draining, burying and closing), hanging used clothes in the house, the existence of water reservoirs, closing water reservoirs, frequency of cleaning water reservoirs, residential density.

Results : The frequency of cleaning water reservoirs < 1 time a week as many as 45% experienced the incidence of DHF. The multiple logistic regression model shows that after controlling for 3M practice attitudes (draining, burying and closing) and closing water reservoirs, respondents whose frequency of cleaning water reservoirs < 1 time a week have a risk of suffering from DHF 7.8 times compared to respondents whose frequency is less than 1 time per week. cleaning the water reservoir >1 time a week.

Conclusion : The problem of DHF in the work area of the Tangkit Health Center is caused by the 3M practice attitude (draining, burying and closing), closing water reservoirs and the frequency of cleaning water reservoirs.

Keywords: DHF, Tangkit Health Center, Water Shelter, 3M.

ABSTRAK

Latar Belakang : Demam Berdarah Dengue merupakan masalah kesehatan masyarakat dan endemis di hampir seluruh Kabupaten/Kota di Provinsi Jambi. Indikator kegiatan pengendalian DBD diukur dengan angka kejadian kasus per 100.000 penduduk (*incidence rate/IR*) dan angka kematian (*case fatality rate/CFR*). IR pada Tahun 2018 23,28 per 100.000 penduduk dan CFR Tahun 2018 0,36%. Walaupun terjadi penurunan CFR setiap tahunnya tetapi kejadian kasus DBD dan kematian akibat penyakit DBD tetap terjadi setiap tahun di 11 Kabupaten/Kota di Provinsi Jambi.

Metode : Penelitian ini bertujuan menganalisis determinan kejadian Demam Berdarah Dengue (DBD) di wilayah kerja Puskesmas Tangkit Tahun 2021. Design penelitian case control, penelitian dilakukan pada bulan maret sampai April 2021. Penelitian ini menggunakan data primer tahun 2021 dengan sampel sebanyak 60 responden. Variabel yang digunakan adalah kejadian DBD, umur, pengetahuan, sikap tentang praktek 3M, menggantung pakaian bekas dalam rumah, keberadaan tempat penampungan air, tutup penampungan air, frekuensi pembersihan tempat penampungan air, kepadatan hunian.

Hasil : Frekuensi pembersihan tempat penampungan air < 1 kali dalam seminggu sebanyak 45% mengalami kejadian DBD. Model regresi logistik ganda memperlihatkan bahwa setelah dikontrol sikap praktek 3M dan tutup tempat penampungan air, responden yang frekuensi pembersihan tempat penampungan air < 1 kali dalam seminggu mempunyai resiko untuk menderita DBD 7,8 kali dibandingkan dengan responden yang frekuensi pembersihan tempat penampungan airnya ≥ 1 kali dalam seminggu.

Kesimpulan : Masalah DBD di wilayah kerja Puskesmas tangkit disebabkan oleh faktor sikap praktek 3M, tutup tempat penampungan air dan frekuensi pembersihan tempat penampungan air.

Kata kunci : DBD, Puskesmas Tangkit, Tempat Penampungan Air, 3M.