

Analysis of Factors of Utilizing Dental Patient Services During the Covid-19 Pandemic to Kertawinangun Health Center, Indramayu Regency

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Original Article

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ABSTRACT

Background: First Level Health Facilities (FKTP) during the Covid-19 pandemic are very much needed, especially in public health center services to prevent, detect and respond in the prevention and control of Covid-19. This is part of what must be done in order to control the number of cases more. The public health center must also be able to manage, utilize existing resources effectively and efficiently in breaking the chain of transmission, both at the individual, family, and community levels. The factors that influence the use of dental patient services during the covid-19 pandemic are very diverse

Material and Methods: This research is an analytic observational with a cross-sectional design. The population in this study were all patients who used the dental and oral health services at the Kertawinangun Health Center, Indramayu Regency, with the sampling procedure carried out by purposive sampling, a sample of 34 patients. Data were collected through observation, questionnaires, and documentation. Data were analyzed by multivariate analysis in this study was conducted using path (pathway analysis)

Results: There is a significant difference in the use of dental patient services during the Covid-19 pandemic to the Kertawinangun Public Health Center, Indramayu Regency based on predisposing factors (attitudes and perceptions), reinforcing factors (distance and time), and enabling factors (attitudes dental health workers and family support) with a probability value of 0.000 < 0.05.

Conclusion: The use of dental patient services is very supportive for treatment at the Kertawinangun Health Center even during the covid-19 pandemic.

Keywords: Covid-19 Pandemic, Dental Patients, Service Utilization Factors.

Introduction

The utilization of health services is an important determinant of health, which has particular relevance as a public health and development problem in low-income countries. In fact, the use of health services has been recommended by the World Health Organization (WHO) suggesting that health should be universally accessible without barriers based on affordability, physical accessibility, or service acceptance.¹⁻³



Health is a fundamental human right for every citizen. Apart from being a human right, health is also an investment. For this reason, considering that health is a shared responsibility, it needs to be fought for by various parties, not just the health ranks. The patient's decision factor to continue to use the medical services offered by the hospital cannot be separated from behavioral factors owned by each individual.^{4,5}

The factors that cause behavior can be divided into three types, namely: predisposing factors, these factors are antecedent factors to behavior that become the basis or motivation for behavior. Included in this factor are knowledge, attitudes, beliefs, values, and perceptions that are related to the motivation of a person or group to act. Enabling Factors, this factor is an antecedent factor to behavior that allows a motivation or aspiration to be implemented. Included in this factor are skills, personal and community resources. Such as the availability of health services, affordability, policies, regulations, and laws. Reinforcing Factors, these factors are factors that determine whether health actions are supported or not.6-8 Utilization of the puskesmas in Indramayu Regency as a health service facility, the use of the health center is still one of the health facilities for the community to seek treatment, including dental treatment. This can be seen from the ten main diseases that the community complained about, especially at the Kertawinangun health center during the Covid-19 pandemic, the role of the public health center facility was very important.

The role of First Level Health Facilities (FKTP) during the Covid-19 pandemic is very important, especially Puskesmas in carrying out prevention, detection, and response in the prevention and control of Covid-19. This is part of what must be done in order to control the number of cases. Health centers must be able to manage, utilize their resources effectively and efficiently in breaking the chain of transmission, both at the individual, family, and community levels.^{9,10} Corona virus is a group of viruses that can cause disease in animals or humans. A new type of coronavirus that was discovered, named Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-COV2), causes the disease Covid-19. The World Health Organization (WHO) has declared the coronavirus (Covid-19) outbreak a Public Health Emergency of Concern for the World. Then Covid-19 was declared a global pandemic by WHO. The determination of this pandemic status was caused by the rapid and widespread spread to areas far from the center of the outbreak. 11-13

Efforts to achieve optimal public health status, one of which is to provide health services. The health services provided by the public health center have changed due to the Covid-19 pandemic. There are changes in the procedures and operating hours of the public health center services, where people who will seek treatment are directed to wait outside the building with the implementation of physical distancing and the service hours are increased until the evening at the public health center that does not serve inpatients.¹⁰ The Kertawinangun Health Center, which underwent changes to the service mechanism and the queue of patients who came to health facilities, namely from the time the patient arrived until he was treated by the health center medical team.

The Health Research and Development Agency of the Ministry of Health recorded a decrease in patient visits by 83.6 percent in 2020. In addition, 43 percent of public health centers also omitted posyandu services. Then the immunization coverage at the public health center also decreased to 56.9 percent. Visits to the homes of stunting toddlers by the public health center also decreased by 68.7 percent. Then the service visits to the health center for pregnant women also decreased by 69.4 percent.9 Data on dental patient visits in 2019 who seek treatment at the Kertawinangun Health Center is an average of 4.4% of the population, dental patient visits decreased in 2020 with an average visit of 2.7%, as well as dental patient visits in 2021 per January until April an average of 0.2% there was a very drastic decrease in visits.



Material & Methods

Observational qualitative research method with descriptive-analytical research design. The population is the number of visits to dental and oral polyclinic patients from January to April 2021, which is a total of 399 patients. The sampling technique used was the Quota Sampling technique, so 34 people were obtained. Data were collected directly from the target through filling out a questionnaire. The implementation of the research began by filling out a questionnaire question sheet about the factors of the utilization of dental patient services which included predisposing factors, reinforcing factors, and enabling factors. Data were analyzed using ANOVA test.

Result

The results showed that the shows that the characteristics of the respondents have a proportion of mostly > 30 years of age with a female, last education in junior high school with housewife job. (**Table-1**)

Variable		Frequency	Percentage
Gender	Male	11	32.4
	Female	23	67.6
Age	< 30 years	12	35.2
	≥ 30 years	22	64.8
Education	Primary school	11	32.3
	Junior high school	12	35.3
	Senior high school	9	26.5
	College	2	5.9
Profession	Housewife	19	55.9
	Private employees	3	8.8
	Student	5	14.7
	Government employees	2	5.9
	Unemployment	1	2.9
	Entrepreneur	4	11.8

Table 1: Frequency distribution of respondent characteristics.

The results showed that the predisposing factors, enabling factors and utilization of dental health services had the same proportion, namely enough category while the reinforcing factors were in the less category. (Table-2)

Variable		Frequency	Percentage
Duo dian aging factors	Enough	30	88.2
Predisposing factors	Less	4	11.8
Dainfauging factors	Enough	9	26.5
Reinforcing factors	Less	25	73.5
Enghling factors	Enough	34	100
Enabling factors	Less	0	0
Utilization dental health	Enough	34	100
services	Less	0	0

Table 2: Distribution of the frequency of predisposing factors, reinforcing factors, enabling factors and utilization dental health services in the covid-19 pandemic period.



The test results show that predisposing factors with p = 0.000, reinforcing factors p = 0.000 and enabling factors p = 0.000, meaning that it is smaller than p = <0.05 then there is a significant relationship between variables. (**Table-3**)

Variable	Coefficient	p-value	
Predisposing factors	0.559	0.000	
Reinforcing factors	0.475	0.000	
Enabling factors	0.223	0.000	

Table 3: Analytical test of predisposing factors, reinforcing factors, enabling factors to the utilization dental health services in the covid-19 pandemic period.

The results of statistical tests using One Way Anova obtained a significance probability value of 0.000. Therefore, the significance probability value is 0.000 <0.05, which means that there is a significant difference in the factors in the use of dental patient services during the Covid-19 pandemic in the Kertawinangun Health Center, Indramayu Regency based on predisposing factors, reinforcing factors, and enabling factors. (**Table-4**)

Variable	Mean <u>+</u> SD	Min-Max	95% CI	P-value
Predisposing factors	34.12 <u>+</u> 2.434	28-39	33.27-34.97	
Reinforcing factors	10.62 <u>+</u> 1.074	9-14	10.24-10.99	0.000
Enabling factors	37.06 <u>+</u> 2.215	32-42	36.29-37.83	

Table 4: Analysis of the factors of utilization of dental patient services with the One Way Anova test.

Discussion

This study was carried out to determine and analyze the factors of utilizing dental patient services during the Covid-19 pandemic at the Kertawinangun Health Center, Indramayu Regency. Utilization of dental and oral health services is the utilization or use of dental and oral health service facilities in the form of dental and oral health services and programs aimed at individuals or collectively, with the aim of maintaining dental and oral health. the utilization of health services can be influenced by many factors in this study. The author only stipulates three factors, namely predisposing factors, reinforcing factors, and enabling factors.

Predisposing Factors

The results of the study based on filling out a questionnaire on predisposing factors which included attitudes and perceptions showed that in the attitude statement with the type of negative statement in the statement about if the gums bleed, there is no need to go to the dentist, it is enough to drink vitamin C by 27 (79.4%) stating disagree and for negative statements. about cavities often suffer from many people, therefore it does not need to be patched by 28 (82.4%) who stated they did not agree, supported by the results of the frequency distribution of the highest predisposing factors were those who had attitudes and perceptions with



enough categories of 76.5% while attitudes and perception in the less category by 23.5%. So it can be concluded that most of the category is enough.

The predisposing factors are quite good because some indicators have a fairly dominant positive category. From these results, it can be seen that a good predisposing factor does not necessarily make someone use health services, as well as someone who has a bad predisposing factor, does not prevent him from using health services. This shows that there are other variables that affect the use of health services utilization.

Through research conducted by Irawan, it is known that there is a relationship between predisposing factors and the use of health services. Respondents' predisposing factors were good or not influencing them in utilizing health services. They have the flexibility or freedom of choice by considering things such as suitability, the choice is effective or not, comfort and safety from the side effects of using health services, as well as choosing the appropriate and complete service. 14,15 Several kinds of health-related predisposing factors may be needed before the occurrence of personal health behavior. However, healthy behavior may not occur unless a person receives a cue that is strong enough to motivate him to act according to his predisposing factors. 16,17

Predisposing factors are factors behind behavioral changes that provide rational thinking or motivation for behavior. These factors include knowledge, attitudes, beliefs, beliefs, values, and so on. Although variations in demographic factors such as socioeconomic status, age, gender, and a number of family members are important variables as predisposing factors, these variables cannot be influenced easily directly through health care programs. The respondent's predisposing factors are enough, meaning that the respondent's actions and attitudes towards health are enough to utilize their predisposing factors to seek information about health.

Reinforcing Factor

The results of the study based on filling out the questionnaire on the reinforcing factor which included distance and travel time showed that in the statement of the distance to the health center near me, 15 (88.2%) often stated that they agreed, as for the statement of travel time 16-30 minutes to the nearest health center. Public health center respondents answered strongly agree as much as 15 (88.2%). The results of the frequency distribution on the highest reinforcing factor are those who are included in the less category as many as 25 people (73.5%).

Problems in the utilization of health services at the dental clinic at Kertawinangun Health Center, Indramayu Regency, can be influenced by the affordability of the location of the service and travel time. Places of service that are not strategic are difficult to reach, leading to reduced utilization of health services by the community. Insufficient reinforcing factors lead to low community utilization of health services. This research is supported by research conducted by Wulandari, factors related to the utilization of health services at the Langara Health Center, Konawe Islands Regency in 2016. The results showed that the respondents who did not utilize were 65 respondents (65%) and 35 respondents (35%).²¹ Based on this, the researcher argues that today's society is increasingly selective in choosing health services. The number of health services requires the public to see the quality of these health services. Quality services are health services that must have basic requirements, namely, available and sustainable, easy to achieve, easy to reach, acceptable and reasonable, as well as quality and adequate health service facilities and infrastructure. Quality services allow people to use these services, so that their utilization is high.



Enabling Factor

The results of filling out a questionnaire about reinforcing factors which include the attitude of officers who agree on statements about being satisfied with officers at the drug-taking section at the public health center as many as 30 (88.2%), and family support on negative statements that disagree with family statements that have forbidden you to 30 (88.2%) dental polyclinic treatment, this can be strengthened by the results of the frequency distribution which shows the results that the highest reinforcing factors are those who are included in enough category as many as 34 people (100%). All respondents answered that health workers who provide services have good skills and have a positive attitude. This is the reason for the relationship between the attitude of health workers and the driving factors for the use of health services. Health workers are an important component in the implementation of a health service. Therefore, the skills of health workers are an enabling factor that affects the utilization of a health service. Utilization of health services is something that requires medical action with skilled health workers.

Enabling factors are factors that encourage or strengthen the occurrence of the behavior. This factor provides a reward/incentive for persistence or repetition of the behavior. These reinforcing factors consist of community leaders, health workers, teachers, families, and so on. In health service programs at the public health center, reinforcing factors may be provided by peers, health workers, and parents. In general, reinforcing factors consisting of community support variables, community leaders, and the government are very dependent on the facilities and types of programs implemented. Therefore, the programmer must be careful in estimating the reinforcing factor. This is intended to ensure that program participants have the opportunity to get support during the behavior change process.^{22,23}

The results of statistical tests using One Way Anova obtained a significance probability value of 0.000. Therefore, the significance probability value is 0.000 < 0.05, the above hypothesis is rejected, which means that there is a significant difference in the utilization of dental patient services during the Covid-19 pandemic in the Kertawinangun Health Center, Indramayu Regency based on predisposing factors, reinforcing factors, and enabling factors. This can be seen from the mean value for the predisposing factor of 10.62, the reinforcing factor of 10.62, and the enabling factor of 37.06. This means that the highest service utilization factor is the enabling factor which includes the attitude of officers and family support which is quite good in the utilization of dental patient services during the Covid-19 pandemic to the Kertawinangun Health Center, Indramayu Regency.

Conclusion

Based on the results of the study, it can be concluded that there is the use of dental patient services is very supportive for treatment at the Kertawinangun Health Center even during the covid-19 pandemic.

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