





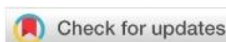


Increasing Knowledge About the Utilization of Public Health Insurance with Education RW 11 Jayagiri Village, Lembang District, West Bandung Regency

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Abstract

The community service aim to increase public understanding of the importance of health insurance. The implementation of activities carried out in August-October consists of preparation, implementation and closing which is carried out in the community in RW 11 of Jayagiri Village. Jayagiri Village is located in Lembang District, West Bandung Regency. The target number of community service activities is 40 people, consisting of elements: Jayagiri Village community, especially in RW 11, health cadres, and village governments and related agencies. The result of the analysis showed that before the implementation of counseling, only 54% of the public understood about health insurance and after counseling it rose to 63%, or an increase of 9%. The number of respondents was 29 people, with answers considered valid amounting to 28 respondents. It can also be seen below public understanding of health insurance increased by 7%, understanding of the components of health insurance increased by 11%, thus significantly encouraging understanding of health insurance by 25%. It also boosted public understanding of the risks in life which increased quite sharply by 21%. By having enough information about health insurance, people are better able to maintain health, prevent disease, and use preventive services provided by health insurance programs. Proper information about health insurance helps people understand the level of financial protection they have in relation to health care costs, so they can avoid unwanted financial surprises and better manage their family budgets.

A. Introduction

Article 1 Number (1) of Law No. 23 of 1992 concerning Health states that health is a condition of well-being of the body, soul, and social that allows everyone to be economically productive. Therefore, health is the basis of the recognition of the degree of humanity. If one's health is impaired, one becomes conditionally unequal and cannot obtain other rights (Grugel et al., 2024). An unhealthy person will naturally experience a decline in the right to life, be unable to obtain and live a decent job, unable to enjoy the right to association, assembly, and expression, and unable to obtain education for the future (Netanael et al., 2022). This right to health is recognized and regulated in various international conventions. Some laws, such as Article 25 of the Universal Declaration of Man, Article 12 of the Economic, Social and Cultural Convention, Articles 6 and 7 of the International Convention on Civil and Political Rights, and Article 28 H Paragraph 1 of the Constitution of the Republic of Indonesia of 1945, guarantee recognition of the right to health (Yuliana et al., 2022).

One of the main needs of every citizen is health. Health development aims to achieve good public health status (Adebisi et al., 2020). To achieve this, nationally, the goal of health programs is to raise public awareness of the importance of maintaining a healthy lifestyle. Through all health programs held, the government is trying to improve public health. The National Health Insurance Program or in Indonesian it is called *Jaminan Kesehatan Nasional* (JKN) is one of the health programs created by the Indonesian government. The JKN program is a type of social health insurance that aims to give everyone in Indonesia better access to health services (Stiyawan & Ainy, 2023).

The National Health Insurance Program (JKN) is one of the efforts established by the Indonesian government (Perdana et al., 2022). To fulfill the right of every community to get the best health. The previous health insurance program, PT, Askes and Maintenance Insurance Program (JPKPT Jamsostek), continued by the National Health Insurance Program (JKN), which is controlled by the Social Security Organizing Agency or in Indonesian it is called *Badan Penyelenggara Jaminan Sosial* (BPJS) (Amadea & Rahardjo, 2022). Health Insurance is a guarantee that provides health protection to participants so that they can obtain health maintenance benefits and protection to meet their basic health needs. Health Insurance is given to those who pay contributions (Sundoro, 2023).

Health insurance provides health protection to participants to get health maintenance benefits and protection to meet basic health needs provided to those who pay contributions (Sihotang & Simangunsong, 2022). Presidential Regulation Number 12 of 2013 concerning Health Insurance stipulates that recipients of health insurance contribution assistance (PBI) are people who are indigent or poor (Dewi & Salsabilla, 2019). *Jaminan Kesehatan Nasional-Kartu Indonesia Sehat* (JKN-KIS) is the name of the health insurance program offered by BPJS Kesehatan. Indonesia is expected to achieve universal health coverage (UHC) when the entire population is registered as JKN participants. Universal membership coverage ensures that all residents receive high-quality health services that include preventive, preventive, curative, and rehabilitative, and without financial constraints (Ayu, 2022). A social assistance program called *Jaminan Kesehatan Masyarakat* (Jamkesmas) is organized nationwide to provide health services to the poor and underprivileged with the aim of providing cross-subsidies in order to realize comprehensive health services (Endang, 2020). Having health insurance will reduce the likelihood that people will spend money out of personal pockets (Wulan et al., 2022).

As a result of the monitoring of the LPPM team, public knowledge about health insurance has not been widely spread and there are even some civil servants who do not know about the use of the health insurance system in the community. Another factor that causes JKN services to decline is that people do not know about the JKN Mobile application. They also do not know of new management mechanisms to provide health insurance for their family members. In addition, many independent participants previously did not have health insurance (Lumi et al., 2023).

Lack of public knowledge of the obligations that must be fulfilled as PBPJ participants can result in a lack of awareness in making premium payments. As research conducted by Budi Eko Siswoyo (2015) in Basarang et al. (2023), that the level of knowledge most contributes to determining the awareness of informal sector workers towards JKN. This can be a problem for the participants themselves as well as for the sustainability of the program. Limited access to health services and low public health literacy. As well as the awareness of the village community about the importance of health planning for themselves and their families. Limited access and ineffective health services are two hallmarks of inadequate quality health care in most rural areas in developing countries (Laturrakhami et al., 2020).

Based on the results of observations made by the Research Team, it was found that community service activities in the RW 11 area of Jaya Giri Village, Lembang District, West Bandung Regency consisted of 357 families and 1236 people. Based on the analysis of the situation from the initial survey data of community service activities, several health problems were obtained in RW 11, namely: 62% of the population does not have JKN health insurance 62%, 29% of the population are smokers, 25% of the population do not use clean water, 38% of family members have been diagnosed with high blood pressure / hypertension, 23% of the population takes high blood pressure / hypertension medication regularly. Based on the description above, the purpose of this community service is to increase public understanding of the importance of health insurance.

B. Methods

The implementation of activities carried out in August-October consists of preparation, implementation and closing. which is carried out in the community in one RW of Jaya Village. Jaya Giri Village is located in

Lembang District, West Bandung Regency. The target number of community service activities is 40 people, consisting of elements: Jayagiri Village community, especially in RW 11, health cadres, and village governments and related agencies. The purpose of this activity is to plan community service activities to solve problems obtained based on situational analysis on the priority of problems obtained by providing health education to the community to always maintain their health and take advantage of health insurance.

C. Result and Discussion

Before socialization was carried out in Jaya Giri Village, Lembang District, West Bandung Regency. Initial observation, namely by situational analysis in RW 11, found several health problems that require health intervention. The problems obtained from the identification results are: there are 62% of people who do not have JKN health insurance, 29% smoker distribution (but 92% are aware of not smoking at home), 25% of people have not used clean water, 38% of family members have been diagnosed with high blood pressure / hypertension, 23% distribution of taking high blood pressure / hypertension drugs regularly. From some of these problems, another analysis was carried out to narrow the problem by examining the urgency and magnitude of the problem so that it was found that the problem was a priority in the RW 11 problem. The priority issues obtained are: about 62% of people do not have JKN health insurance and about 38% of family members have been diagnosed with high blood pressure / hypertension. So for both problems, the Community Service Working Group TEAM took the initiative to solve these problems by conducting counseling activities.

From the survey results also identified before counseling, 57% of respondents realized they were potentially exposed to high-risk diseases, but only half had health care coverage to fund their disease risk. After counseling, it was re-identified that it turned out that 64% of respondents who were potentially affected by high-risk diseases, and now all respondents are aware of the need for health financing.

After counseling the community's understanding of health insurance, before the implementation of counseling, only 54% of the public understood about health insurance and after counseling it rose to 63%, or an increase of 9%. The number of respondents was 29 people, with answers considered valid amounting to 28 respondents. Community understanding along with the topic of understanding, before counseling and after counseling as follows:

Table 1. Extension Results

No	Comprehension Topics	Before	After	Increase
1	An understanding of family purpose	79%	86%	7%
2	An understanding of the components of purpose in power	36%	46%	11%
3	Understanding makes family goals	11%	36%	25%
4	Understanding of risk	14%	36%	21%
5	Understanding of financing risk	86%	89%	4%
6	Understanding of the government's purpose in providing BPJS	36%	46%	11%
7	Understanding of BPJS healthcare	79%	75%	-4%
8	Understanding of the purpose of BPJS	89%	86%	9%

Based on table 1 below, public understanding of health insurance increased by 7%, understanding of the components of health insurance increased by 11%, thus significantly encouraging understanding of health insurance by 25%. It also boosted public understanding of the risks in life which increased quite sharply by 21%. However, the understanding of risk financing is still quite small, only about 4%. Understanding of the government's goals in health implementation and the objectives of BPJS has also increased, but a detailed understanding of BPJS health has decreased. Therefore, with this counseling, the public knows more about health insurance information for the community.

Knowledge and education factors influence the involvement of the head of the family in the JKN program. Higher education will affect the way a person thinks, argues, and acts, including planning. his family's health, one of which is by following JKN. Having JKN allows people to pay dues that have been set to prevent illness. After conducting implication education obtained by the community, namely better access, after counseling, the community is better able to take advantage of the health insurance program. They will better understand how to apply, what is covered by the guarantee, and where they can get the necessary health services. The dissemination of information will increase public awareness about the importance of having health insurance, as well as the rights and benefits associated with it. And better health, people can get earlier treatment and more effective disease prevention with better access to health services. This can reduce the rate of severe disease and improve general well-being.

The limitation of this study is that the number of respondents is not yet comprehensive, only samples taken from one RW so that for future research, it is expected that the number of respondents will be increased both on a sub-district or district and city scale.





Figure 1. Activity Documentation

D. Conclusion

Public knowledge about health insurance has not been widespread. So that with this community service, the dissemination of information will increase public awareness about the importance of having health insurance public understanding of goals in life, risk recognition, and risk financing through government health insurance, before the implementation of counseling 54% understand and after counseling to 63%, or an increase of 9%. The number of respondents was 29 people, with answers that were considered valid amounting to 28 respondents so that with this counseling the increase in information about health insurance for the community increased. By having enough information about health coverage, people can make better decisions about the options available for health insurance. They can compare different plans and choose the one that best suits their health and financial needs. Proper information about health insurance helps people understand the level of financial protection they have in relation to health care costs, so they can avoid unwanted financial surprises and better manage their family budgets.

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