



THE PROCEEDING OF INTERNATIONAL JOINT CONFERENCE



“CHALLENGES IMPLEMENTATION OF THE ASEAN ECONOMIC COMMUNITY (AEC) IN THE HEALTH SECTOR IN INDONESIA”

15 - 16 November 2015
Grand Surya Hotel - Kediri



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CHALLENGES IMPLEMENTATION OF THE ASEAN ECONOMIC COMMUNITY (AEC) IN THE HEALTH SECTOR IN INDONESIA

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Editor:

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GREETING FROM COMMITTEE PRESIDENT

On behalf of the committee, it is a great honor me to extend this opportunity to welcome all of you to International Joint Conference with a theme “Challenges Implementation Of The Asean Economic Community (AEC) In The Health Sector In Indonesia.” The International Joint Conference conducted by 10 institution consist of STIKES Karya Husada Kediri, STIKES Surya Mitra Husada Kediri, STIKES Hutama Abdi Husada Tulungagung, STIKES RS Baptis Kediri, STIKES Bhakti Mulia Pare, FIK Unipdu Jombang, STIKES Patria Husada Blitar, STIKES Satria Bakti Nganjuk, Akademi Kebidanan Dharma Husada Kediri, Institut Ilmu Kesehatan Kediri and supported by Akper Pamenang Kediri. I hope you all have wonderful, fulfilling conference and are able to take great ideas back to your individual program. Through this conference we hope there is transfer knowledge, sharing idea so we can response the change of global needs across health system .

Ladies and Gentlemen,

This conference brings together academicians, practitioners, researcher as much as 200 participant from different provinces in Indonesia and different countries such as Malaysia, Filphina.

Finally, I would like congratulate those whose selected papers are included in the International proceeding and I also would like to thank to the attendance keynote speaker, expertise, participant and organizing committees of this conference.

Thank you very much and enjoy the conference

Committee President



Ns. Ratna Hidayati, M.Kep., Sp.Mat

**INTERNATIONAL JOINT CONFERENCE AGENDA
2015**

NO	DAY	TIME	ACTIVITY	RESPONSIBLE EVENT
1	Sunday 15 th November 2015	07.00-08.00	Registration	COMMITTEE
		08.00-09.30	Opening Ceremony National Anthem (Indonesia Raya) Traditional dance Speechs 1) The head of commite 2) The regent head of health department Kediri 3) Prayers 4) Photo session	COMMITTEE
		09.30-09.45	Tea Break	
		09.45-10.30	Key Note 1 (30' presentation, 15' discuss) Update Management of Trauma in Pregnancy: Resuscitation priorities in the Implementation of ASEAN Economic Community (AEC)	Prof. Dr. Idzwan Zakaria (Malaysia)
		10.30-11.15	Key Note 2 (30' presentation, 15' discuss) Update Management of HIV-AIDS in the Implementation of ASEAN Economic Community (AEC)	Prof. Dr. Wongsu Laohasiriwong (Faculty of Public Health Khon Kaen University Thailand)
		11.15-12.30	Pray and lunch	
		12.30-13.15	Key Note 3 Legal aspect of ethical use of foreign labor in Indonesia health filed	Head of Province Health Department, Indonesia
		13.15-14.00	Key Note 4 Update Management of Stunting in the Implementation of ASEAN Economic Community (AEC)	Sugeng Irianto, MPS.,PhD (Indonesian Representatif WHO)
		14.00-14.45	Key Note 5 The learning strategy (include hardskill, softskill, entrepreneurship, and foreign language capabilities health students)to face of ASEAN Economic Community (AEC) inUniversiti Sarawak Malaysia	Rose Nanju (Faculty of Medicine and Health Science) Universiti Sarawak Malaysia
		14.45-15.15	Tea Break and Pray	
		15.15-16.00	Key Note 6 Update Management of Acute Coronary Syndroma (ACS) in the Implementation of ASEAN Economic Community (AEC)	Assoc. Prof. Dr. Wasana Ruaisungnoen (Faculty of Nursing KCU Thailand)
		16.00-16.45	Key Note 7 Disaster Management in the	Sarah Sandy S.M, Phd

			Implementation of ASEAN Economic Community (AEC)	(Philippines)
NO	DAY	TIME	ACTIVITY	RESPONSIBLE EVENT
2.	Monday 16 th November 2015	08.00-10.00	Oral Presentation (session 1)	CONFERENCE COMMITTEE
		10.00-10.15	Tea Break	
		10.15-11.15	Oral presentation (session 2)	CONFERENCE COMMITTEE
		11.15-11.30	CLOSING	
		11.30-12.30	Pray and Lunch	
		12.30-	City Tour	

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AFFECTING FACTORS OF COMMUNITY PREPAREDNESS AT DISASTER PRONE AREAS KELUD MOUNTAIN

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ABSTRACT

Speciality for disaster management needed to loss minimizing affected by its main disaster in preparedness phase. Disaster Preparedness phase include community as initial subjects of disaster management as well as disaster victims till be able to manage disaster at certain limit and expected disaster do not develop to bigger scale. Purpose of the research is to know Affecting Factors of Community Preparedness at Disaster Prone Areas Kelud Mountain. Design of the research used analytic descriptive desain with cross sectional approach. Sampel generated from 360 respondent used cluster sampling technique consisting of village officials, community leader, jangkar kelud community member, health worker and community member at Disaster Prone Areas Kelud Mountain. Result of research data analized using logistic regression method and showed that contributing variable to preparedness is knowledge (OR 1,509; CI 95%), attitude (OR 1,127; CI 95%), nurses role (OR 1,076; CI 95%), and culture (OR 0,856; CI 95%). Information given to community will shape community attitude and behaviour facing disaster preparedness at Disaster Prone Areas Kelud Mountain because in behaviour shaping based knowledge till shape behaviour eternally. Information spreading about disaster preparedness performed by nursing may do collaboration between nurses and jangkar kelud community through community radio so information spreading more comprehensive and targetted. Affecting factors of community preparedness at disaster prone areas kelud mountain is role nursing, knowledge, attitude and culture.

Key Word : Preparedness, Disaster, Community

INTRODUCTION

Indonesia is part of the path of the Pacific Ring of Fire which is a series of lines of active volcanoes in the world. In a study also showed that the cause of the disaster in Indonesia 60.66% of floods, landslides 63.11%, and 65.57% volcano. Higher percentage obtained volcano it is related to the position or location of Indonesia which is a region pacific ring of fire (Khairuddin, 2011). Mount kelud (+ 1,731 m DPAL) is a strato volcano type which has a crater lake at its peak, located in the border region of Kediri, Blitar and Malang. According to data from the Center for Volcanology and Geological Hazard Mitigation in Bandung, eruption of Mount Kelud recorded history began in 1000 until 1990, the longest interval of intermittent breaks between 65-75 years and shortest 3 years.

In Indonesia the center of the disaster is BNPB as the giver of command in collaboration with public, private, and several related sectors including the government and the health sector. The role of the people here as well as perpetrators of early disaster victims must be able to handle a disaster within certain limits in order to prevent disaster into a larger scale.

NAP-DRR 2010-2012 explained that the new paradigm of the implementation of disaster management is directed to the concept of community-based disaster management. Implementation of disaster management-oriented empowerment and self-reliance through community participation, among others, will lead to disaster risk reduction efforts with communities in disaster-prone areas independently and avoid the emergence of a new vulnerability and dependence of communities in disaster-prone areas to outsiders.

Karancy (2005) explains that something which can influence community preparedness in the face of disaster is the

knowledge and behavior. The importance of the knowledge society towards disaster preparedness aims to change people's behavior in order to be aware of the disaster. But people tend to be less active in the dissemination of disaster for reasons flurry by the job. Lack of public awareness of disaster preparedness will also influence the behavior of the community. Another factor is the availability of health resources, the nurse on duty as educators to empower communities in disaster preparedness. Providing training to the community is also required which is associated with the training of community volunteers for casualty evacuation and rescue training and first aid (WHO, 2011). Therefore, this study was conducted to determine factors - factors that affect the community in the face of disaster preparedness Kelud in Disaster Prone Areas Kelud.

METHODS

This study was observational analytic research with cross sectional approach conducted in Disaster-Prone Areas Kelud Blitar in May-June 2013. The subjects were selected using cluster sampling where samples were people living around the mountain lava flow kelud. Retrieving data using a questionnaire given to the people associated with factors that affect preparedness (the nurse's role, knowledge, attitudes and cultural) communities in the face of Kelud. A total of 360 samples were taken in six selected villages and villages through which the lava flows Kelud. Analysis of the data used to see the relationship between factors that influence (knowledge, behavior, culture, the role of nurses, nurse's knowledge and skills of nurses) and community preparedness in the face of a mountain disaster kelud then performed bivariate analysis. Using a statistical test Chi-Square test if they meet and alternatively using Fisher's exact test with a confidence interval of 95% or $p \leq 0,05$. As for the multivariate analysis using logistic regression

statistical test with a confidence interval of 95% or $p \leq 0.05$.

RESEARCH RESULT

In this study, the respondents were 360 respondents consisting of people living in disaster prone area I, disaster prone area II and disaster prone area III. It is gained from 360 respondents were 60 respondents (16.67%) lived in disaster prone area III, 120 respondents (33.33%) live in disaster prone area II and 180 respondents (50%) live in disaster prone area I. Results obtained demographic data that the average age of the respondents 35 years and a minimum age of respondents 20 years. Characteristics of the sex of the 360 respondents, 269 respondents (74.72%) were male and 91 respondents (25.28%) were female. Based on the characteristics of the educational level of the 360 respondents the majority of respondents are junior high school graduates as many as 124 (34.44%) and a minority of respondent uneducated as many as 8 respondents (2.2%) it is also affected by economic conditions Disaster Prone Areas Mt. kelud. Based on the characteristics of the 360 respondents earning an average income Rp. 500.000, - because the majority of people work as laborers on plantations and farmers. the average length of stay is based on the characteristics of long-stay community disaster prone area Kelud is 33 years so that people have experienced at least two times the eruption of Mount Kelud. Data obtained information related to disaster preparedness community with the majority of people getting information from television that 151 respondents (41.94%), while for others that they get information from the local village officials that 17 respondents (4.72%) and total 4 (1.11%) never get information related to disaster preparedness.

Table 1

Analysis results Bivariat

Variable	<i>p-value</i>
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The role of nurse	0,004
knowledge	0,000
behavior	0,004
culltural	0,007

Results of bivariate analysis to determine the relationship of each variable (the role of nurses, knowledge, attitudes and culture) towards community preparedness Kelud obtained their significance - each 0,004; 0,000; 0,004; 0,007 to $p < 0.05$ which means there is relationship between the nurse's role, knowledge, attitudes and culture towards community preparedness $p < 0.25$ at Chi-Square test. Test results showed that in a sequence that affects community preparedness is knowledge (OR 1.509), attitude (OR 1,127), the role of nurses (OR 1076) and culture (OR 0.865).

Table 2

Results of Multivariate Analysis

Variabel	p	OR
The role of nurse	0,30	1,076
Knowledge	0,01	1,509
Behavior	0,01	1,127
Cultural	0,22	0,865

DISCUSSION

The Relationship Between The Role of Nurse With Kelud Community Preparedness

Results of the analysis showed that the nurse's role is primarily a community nurse can influence community preparedness of disaster-prone areas Kelud with the results of significant value 0,004 less than alpha (5%). Researchers get the results of a survey related to the nurse's role in educating the public showed a majority of the nurse's role is less (62.2%). The theory of the formation of behavior according to Green one that is a supporting factor (enabling factors) in the formation of behavior is infrastructure

and health resources. Low role of nurses in providing education to the public will have an impact on the information received that could influence the knowledge and behaviors of society towards disaster preparedness.

Efforts dissemination of information related to disaster preparedness is not only played by health professionals, but also played by non-medical personnel such as government or NGOs. In the region there are Kelud community radio is a community radio anchor kelud an active role in the dissemination of information related to disaster preparedness volcanoes. The data obtained from the survey results relating to the public the information obtained in Disaster-Prone Areas Kelud majority of people get information through TV (41.94%) and radio (40.83%). According Notoatmodjo (2010) health promotion method which is used if the target is public then it should use the method of mass health promotion. For public health promotion methods frequently used one of them the use of electronic mass media, such as radio and television. Efforts dissemination of data obtained proved that although the information obtained from the community health workers less but community preparedness in the face of disaster preparedness has good (54.7%). This research was supported by a study conducted by Runblad et al (2010) conducted on 1,000 respondents that use the radio to educate the public effectively to raise public awareness in the use of clean water in the floods.

Relationship Between Knowledge With Kelud community preparedness

Results of the analysis showed that the knowledge society can influence community preparedness of disaster-prone areas Kelud with the results of $0,000 p < 0.05$. The study was supported by the results of research conducted on 100 respondents found that there is a relationship between knowledge and

society in the face of disaster preparedness (Lakhsmi, 2007).

Based on the theory of Lawrence Green et al (1980) knowledge is a predisposing factor in the formation of behavior. Knowledge in cognitive domain has 6 levels that know, understand, application, analysis, synthesis and evaluation (Notoatmodjo, 2010). In this study the realm desired by the researchers is to know and understand the realm of disaster preparedness in the face of the mountain erupted. The material must be known and understood community with regard to disaster volcano is the type and characteristics of the hazard, early warning self-protection tool should be prepared community in case of volcanic eruption, volcanic eruption hazard material, sanitary water and evacuation route.

The knowledge gained by the society is also influenced by several factors such as socioeconomic, experience, education and age. Knowledge is very closely related to education, where it is expected that the higher education then that person will be more knowledgeable. The result showed that the educational level of the people living in Disaster-Prone Areas Kelud majority is graduated from junior high school (34.44%). Economic status of a person will determine the availability of a facility that is required for certain activities, so that socio-economic status will affect a person's knowledge (Lukman, 2008). Results of this study found that the average income of people living in disaster prone area Kelud Rp. 500.000. Getting experienced before disaster events can also be a lesson for the public to be more careful and community preparedness in facing similar disasters. The experience allows a person become aware and know the result is then called knowledge (Vardiansyah, 2008). The survey results are available to the public in Disaster-Prone Areas Kelud society obtained the average length of stay is 33 years.

Relationship Between Behavior With Kelud Community Preparedness

Results of the analysis showed that behaviors can influence community preparedness of disaster-prone areas Kelud with the results of $0.004 p < 0.05$. Behavior is covered person's response to a stimulus or object, both internally and externally so that its manifestations are not directly visible, but can only be interpreted in advance of behaviors covered. Behavior in reality indicate suitability response to certain stimuli (Sunaryo, 2004).

Based Rosenberg's theory known as the theory of affective-cognitive consistency in terms of behavior and this theory is also called two-factor theory is focused on the components of cognitive and affective components. In terms of relation with the volcanic eruption disaster preparedness related to preparedness knowledge must be understood by the community in the process of the formation of community behaviors in the face of disaster volcano. The results show the percentage of behaviors and knowledge by results (41.9%) and (49.4%). Other studies related to people's behaviors in the face of floods in North Sulawesi were collected from 125 respondents showed that 48.61% of respondents have a positive behavior, while 51.39% have a negative behavior (Kumajas et al, 2012).

Relationship Between Culture With Kelud Community Preparedness

Results of the analysis showed that culture can influence community preparedness of disaster-prone areas Kelud with the results of $0.007 p < 0.05$. In the theory of Lawrence Green culture is one of the predisposing factors of the formation and behavior of a person who possesses or believe a certain confidence will affect their behavior in the face of a disease that will affect the health (Green, 2000). Some people also see a different culture, culture is something that is

simple and very meaningful in life include values - values that exist in society (Williams, 1961). Some cultures are still embraced by society Kelud is "Larung Saji ritual" that each year is still done by local residents is the main people who are in disaster prone area III which is close to the area Kelud. People assume that they should respect the ancestors to be given safety and lush natural grace. The same study also found associated with the trust factor and superstition also gives an influence on the mindset and behavior of the people living around Mount Merapi eruption area. For people who live in the vicinity of the volcanoes, where the caretaker who becomes guardian of the volcano is still more trusted than the government even the choice of caretaker to remain in the area Kinahrejo (one of the areas affected by the eruption of volcanoes) is followed by many people around even the government ask the community for evacuation (Lavigne, et al., 2008).

Factors Affecting Community Preparedness Disaster Prone Areas Kelud

From the analysis it was found that sequentially factors that influence community preparedness is knowledge (OR 1.509), behavior (OR 1,127), the role of nurses (OR 1076) and culture (OR 0.865). Based on the theory of Lawrence Green there is relationship between the role of nurses, knowledge, behaviors and culture in shaping the behavior of society in the face of disaster preparedness kelud mountain. Health workers who are in community health centers is a nurse who has the task as educators is to promote the health of the community to empower communities in disaster preparedness through the organization or community development.

Knowledge is the most important factor that effect on preparedness because based on the Lawrence Green theory, knowledge is a factor predisposing factors that facilitate or predispose the

person's behavior. Or cognitive domain knowledge is very important for the formation of one's actions (overt behavior). The results of experience and research that behavior based on knowledge will be more lasting than behavior that is not based on knowledge (Anwar, 2010). Thomas & Znaniecki (1920) in Anwar (2010) asserted that the behavior is the predisposition to do certain behaviors, so the behavior is not only the internal state of psychological pure of individuals (purely psychic inner state), but the behavior is more a process of awareness of the nature of the individual. Another factor affecting the behavior is the behavior to the formation of culture. Unconsciously culture has instilled a steering line our behavior towards various issues. Culture has colored the behavior of members of the community, because of the culture that gives the experience of individuals in society (Anwar, 2010). Therefore health personnel in charge of people's behavior in this case related to disaster preparedness Kelud. As mentioned above that the behavior of the community is strongly influenced by socio-cultural in changing his behavior indirectly also social and cultural change (Notoatmodjo, 2010).

CONCLUSION

Factors affecting the community in the face of disaster preparedness volcanic eruption in Disaster-Prone Areas Kelud are knowledge, behaviors, the role of nurses and culture.

SUGGESTION

it is required coordination between health workers with NGOs in the provision of education on disasters through community radio anchor Kelud in order to complete the dissemination of information and on target. For the future research, the cultural factors are expected to further research using qualitative methods as will be explored

on the cultural aspects of the communities in disaster prone area Kelud.

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