International Conference on Lifestyle Diseases and Natural Medicine (ICOLIFEMED)
Vol.1 No.1
Issn:xxx-xxx
Penerbit: unpripress (Anggota Ikapi)

Analysis Of Factors Influencing The Utilization Of Integrated Counseling Posts For Non-Communicable Diseases (Posbindu PTM) In Work Area Siulak Deras Public Health Center, Mount Kerinci District, Kerinci Regency

Syariful Hijri[1], Chrismis Novalinda Ginting[2], Nurhayati[3]
[1,2]Master of Public Health (MKM) Study Program/Prima Indonesia University (Unpri) Medan [3]D3 Nursing Study Program, Adiwangsa Jambi University, Jambi, Indonesia
*E-mail: msnurhayati.24@gmail.com

ABSTRACT
This study aims to analyze the factors that influence the use of the Integrated Development Post for Non-Communicable Diseases (Posbindu PTM) in Siulak Deras Mudik Village, Gunung Kerinci District, Kerinci Regency. This type of research is cross sectional. The sample in this study was the number of patient visits, namely 212 respondents. Data were analyzed using Chi-Squere and Logistic Regression.
The results of the research show that there is a significant relationship between level of education, health status, family support and support from health cadres on the utilization of integrated development posts for non-communicable diseases (Posbindu PTM) in the Siulak Deras Community Health Center Working Area, Gunung Kerinci District, Kerinci Regency. There is no relationship between work and knowledge regarding the use of integrated development posts for non-communicable diseases (Posbindu PTM) in the working area of the Siulak Deras Community Health Center, Gunung Kerinci District, Kerinci Regency. The variables of health cadre support and family support are the most dominant variables in the utilization of integrated development posts for non-communicable diseases (Posbindu PTM) in the Siulak Deras Community Health Center Working Area, Gunung Kerinci District, Kerinci Regency

***Keywords**: factors that influence the use of Posbindu PTM.*

INTRODUCTION
Non-communicable diseases (NCDs) are one of the causes of death in the world, killing 41 million people per year or globally equivalent to 71% of all deaths. NCDs that contribute to the majority of deaths are cardiovascular diseases with 17.9 million people each year, then cancer (9.3 million), respiratory diseases (4.1 million), and diabetes (1.5 million) (WHO, 2020).
The prevalence of non-communicable diseases in Indonesia based on the National Basic Health Research (Riskesdas) in 2018 based on doctor's diagnosis in the population of all ages according to the type of disease in Indonesia has the largest percentage, namely the prevalence of stroke with a percentage of 10.9% followed by the prevalence of hypertension of 8.36%, then the prevalence of joint disease of 7.30%, the prevalence of asthma of 2.4%, the prevalence of cancer of 1.79%, the prevalence of diabetes mellitus and the prevalence of heart disease of 1.5% and the smallest percentage of disease prevalence is chronic kidney failure with a percentage of 0.38%. This figure actually interprets that the prevalence of non communicable diseases in Indonesia is still high (Ministry of Health of the Republic of Indonesia, 2018).
Data from the Jambi Province Riskesdas in 2018, the prevalence of non-communicable diseases diagnosed by doctors against residents of all ages according to the type of disease in Jambi Province, namely the prevalence of joint disease with the highest percentage of 8.67% followed by the prevalence of hypertension of 7.43%, then the prevalence of asthma of 1.70%, the prevalence of cancer of 1.32%, the prevalence of diabetes mellitus of 1.02%, the prevalence of heart disease of 0.89%, the prevalence of stroke of 0.68% and the lowest percentage of disease prevalence is chronic kidney failure of 0.32% (Riskesdas, 2018).

While in Kerinci Regency, hypertension is the highest disease in the elderly where in 2018

there were 903 people and increased until September 2019 to 2400 people (Kerinci Regency Health Office, 2019).

One form of Community-Based Health Efforts (UKBM) that has just been developed by the Government in accordance with WHO recommendations to focus on handling NCDs through three main components, namely risk factor surveillance, health promotion, and prevention through innovation and reform of health service management is the integrated non-communicable disease development post (Posbindu PTM) (Ministry of Health of the Republic of Indonesia, 2018).

In terms of preventing various risk factors early. One strategy is through empowerment and increasing the role of the community. The community is given facilities and guidance in developing a forum to play a role, equipped with knowledge and skills to recognize problems in their area, identify, formulate and solve their own problems based on existing priorities and potential. Efforts to control PTM are built on a joint commitment from all elements of society who care about the threat of PTM through Posbindu PTM.

Posbindu PTM is a form of service that involves community participation through promotive-preventive efforts to detect and control early the existence of PTM risk factors in an integrated manner. Posbindu PTM is the role of the community in carrying out early detection activities and monitoring of the main PTM risk factors which are carried out in an integrated, routine, and periodic manner. Risk factors for non-communicable diseases (PTM) include smoking, consumption of alcoholic beverages, unhealthy diet, lack of physical activity, obesity, stress, hypertension, hyperglycemia, hypercholesterolemia and early follow-up of risk factors found through health counseling and immediately referring to basic health care facilities.

The development of Posbindu PTM is an integral part of the health service system, organized based on the problems of PTM in the community and includes promotive and preventive efforts and referral patterns. The State's commitment to efforts to prevent and control PTM is stated in the Regulation of the Minister of Health of the Republic of Indonesia Number 21 of 2020 which states that the government, regional governments and the community make efforts to prevent, control and handle PTM and its consequences. For this reason, early detection of community-based PTM risk factors needs to be developed.

A person's behavior in visiting health service facilities is determined by three factors, namely predisposing factors (including knowledge, attitudes, beliefs, values, individual characteristics), enabling factors (including the availability of health facilities, distance, government laws, health-related skills), and reinforcing factors (including family, peers, teachers, community leaders) (Notoatmodjo, 2018). Among the three factors, family support and community leader support are very important because they are reinforcing factors for a person's behavior.

The results of the survey conducted in June 2023, there are 7 villages of Siulak Deras Mudik Village, the total number of male residents is 3740 people and female residents are 3468 people, a total of 7208 people. Meanwhile, based on the age above 15 years as the target of PTM with 2161 male and 2107 female residents, 4268 people were obtained.

Based on the description of the problems above, the author is interested in researching "Analysis of Factors Influencing the Utilization of Integrated Non-Communicable Disease Development Posts (Posbindu PTM) in Siulak Deras Mudik Village, Gunung Kerinci District, Kerinci Regency".

LITERATURE REVIEW

Definition of Non-Communicable Diseases

Non-communicable diseases (NCDs) are chronic diseases that develop slowly over a long period of time and are the result of a combination of genetic, physiological, environmental and behavioral factors (World Health Organization, 2018). Non-communicable diseases are diseases that do not have specific clinical signs, causing a person not to know and realize the

condition from the beginning of the disease (Ministry of Health of the Republic of Indonesia, 2020). There are several types of diseases that fall into this group. The main types of these

diseases are diabetes, hypertension, coronary heart disease, stroke, cancer, and chronic respiratory diseases (chronic obstructive pulmonary disease and asthma) (National Health Mission, 2018).

Understanding Posbindu PTM

Posbindu PTM is a form of community participation in early detection activities, monitoring and early follow-up of PTM risk factors independently and continuously. This activity was developed as a form of early awareness of PTM because most PTM risk factors initially do not give symptoms (Ministry of Health of the Republic of Indonesia, 2019).

Definition and Types of Health Services

According to Levey and Loomba (1973) in Davi (2016), health services are any efforts carried out individually or together in an organization to maintain and improve health, prevent and cure diseases and restore the health of individuals, families, groups and/or communities. According to Hodgetts and Cascio (1983) quoted by Azwar (2016), health services are divided into two types, namely:

a. Medical Services

Health services included in the medical services group, when viewed from the type of services provided in general, can be divided into two types, namely:

1) Providing only one type of medical service, for example general practitioner practice and specialist practitioner practice.

2) Providing more than one type of medical service, for example those provided by maternal and child health centers.

b. Public Health Services

Health services included in the community health service group are characterized by a way of organizing which is generally done collectively in an organization, the main objective is to maintain and improve health and prevent disease, and the targets are primarily groups and communities.

METHODS

This study is an Analytical study with a cross-sectional design to determine the Analysis of Factors Affecting the Utilization of Integrated Non-Communicable Disease Development Posts (Posbindu PTM) in Siulak Deras Mudik Village, Gunung Kerinci District, Kerinci Regency with a population of 708 people aged >15 years and over. The sample in this study was 212 people. The sampling technique was purposive sampling. Data collection used a questionnaire by filling out the questionnaire. The study was conducted in Siulak Deras Mudik Village, Gunung Kerinci District, Kerinci Regency. Data analysis was carried out using Multivariate analysis, which aims to explain or describe the characteristics of each research variable by producing a frequency distribution and percentage of each variable.

RESULTS

Table 1. Frequency Distribution of Analysis of Factors Influencing the Utilization of Integrated Non-Communicable Disease Development Posts (Posbindu PTM) in Siulak Deras Mudik Village, Gunung Kerinci District, Kerinci Regency .

No Variables Utilization of PTM Posbindu

p-value **Not Taking**

Utilise

Advantage

I Education

N % N %

N %

1 Low 80 80.0 20 20.0 100 100 0,000 2 Tall 17 15.2 95 84.8 112 100 II Work
1. Doesn't work 28 47.5 31 52.5 59 100 0.877 2. Work 69 45.1 84 54.9 153 100 III Knowledge
1. Good 57 43.5 74 56.5 131 100 0.489 2. Not enough 40 49.4 41 50.6 81 100 IV Health status

1. Sufferer 16 13.3 104 86.7 120 100 0,000 2. Not a sufferer 81 88.0 11 12.0 92 100

V Family support

0.005 1. Good 66 40.2 98 59.8 164 100 2. Not enough 31 64.6 17 35.4 48 100 VI Support for health
cadres0,000 1. Not enough 83 88.3 11 11.7 94 100 2. Good 14 11.9 104 88.1 118 100 Amount
97 45.8 115 54.2 212 100

Table 2. Bivariate Selection Results of Independent Variables with Dependent Variables

Independent Variable Information

Sig (P-value)
0,000
0.877
0.489
0,000
0.005
0,000

Education Candidate Work Not a Candidate Knowledge Not a Candidate
Health status Candidate Family support Candidate Support for health cadres Candidate

a. Model 1

Table 3. Analysis of the Relationship between Independent Variables and Dependent Variables Based on Test Regression Multivariate Logistics (Method Enter)

Independent Variable	Sig (P-value)
Education	0.917
Health status	0.449
Family support	0,000
Support for health cadres	0.003

b. Model 2

Table 4. Analysis of the Relationship between Independent Variables and Dependent Variables Based on Test Regression Multivariate Logistics (Method Enter)

Independent Variable	Sig (P-value)
Health status	0.436
Family support	0,000
Support for health cadres	0.003

c. Model 3

Table 5. Analysis **of the Relationship between Independent Variables and Dependent Variables Based on Test Regression Multivariate Logistics (Method Enter)**

Independent Variable	Sig (P-value)
Family support	0,000
Support for health cadres	0,000

DISCUSSION

The Relationship between Education and the Utilization of Posbindu PTM The results of the statistical test showed a p-value = 0.000 (p <0.05) in other words, there is a significant influence between education and the use of the Integrated Development Post for Non-Communicable Diseases (Posbindu PTM) in Siulak Deras Mudik Village, Gunung Kerinci District, Kerinci Regency.

According to Notoatmodjo (2018) education is any effort planned to influence others, whether individuals, groups or communities, so that they do what is expected by the educator. According to Feldstein in Notoatmodjo (2018), high family education allows early recognition of disease symptoms, thereby increasing efforts to seek treatment. The education factor influences the use of modern health services. Respondents with high levels of education tend to reduce the use of informal health services (village health workers/shamans) and increase the use of modern health services (doctors or paramedics).

Education is the basis of intellectual knowledge that a person has, the higher the education, the greater the ability to absorb and receive information. So that knowledge and insight are broad, besides that it is one of the factors that underlies the actions taken and will further influence a person's behavior (Mubarak, 2015).

Education level is related to a person's ability to absorb information and recognize symptoms of disease so that they have the desire to utilize health services and actively play a role in overcoming their health problems. In other words, educated people value health as an investment. Educational status is closely related to a person's awareness and knowledge, so that educational status has a significant influence on the use of health services. Usually people with low education have less awareness and good knowledge about the benefits of health services (Rumengan, Umboh, & Kandou, 2015).

Relationship between Work and Utilization of Posbindu PTM

The results of the statistical test showed a p-value = 0.877 (p > 0.05) in other words, there

was no significant influence between work and the use of the Integrated Non-Communicable Disease Development Post (Posbindu PTM) in Siulak Deras Mudik Village, Gunung Kerinci District, Kerinci Regency.

This shows that working or unemployed status does not affect the community in terms of utilizing Posbindu PTM. People with unemployed status certainly have a greater opportunity or chance to utilize existing services because most of their time is spent at home compared to those who work. However, in this study, respondents with unemployed status did not utilize Posbindu more. This is because the community is not supported by awareness and knowledge about the benefits of Posbindu. Most respondents did not know, which affected its utilization. Most chose to check their health at the health center when they were sick. There is a tendency for someone who works to be more active in seeking health services compared to those who do not work, because in addition to having higher knowledge, they are also more economically independent. In addition, the accessibility factor also affects the number of Posbindu visits. People with homes that are far from the location of the Posbindu implementation allow them not to utilize it. From the results of the researcher's observations, the people who utilize it are those who live close to the location of the Posbindu implementation so that it does not reach people who live far away.

This is not in line with the research of Sari and Savitri (2018), the results of the Chi-Square test obtained a p-value of 0.024, which means that there is a relationship between work and the use of Posbindu PTM in the work area of the Setiabudi District Health Center, South Jakarta City.

Relationship between Knowledge and Utilization of Posbindu PTM The results of the statistical test showed a p-value = 0.489 (p > 0.05) in other words, there was no significant influence between knowledge and the use of the Integrated Development Post for Non-Communicable Diseases (Posbindu PTM) in Siulak Deras Mudik Village, Gunung Kerinci District, Kerinci Regency.

Knowledge is one of the intrinsic factors that influence motivation. Knowledge is the result of knowing, and this occurs after people sense a particular object (Notoatmodjo 2018). A person's level of knowledge does not always motivate logical behavior, meaning that good knowledge (people who know about the meaning, purpose, form of service and targets) does not always lead to correct behavior in this case good knowledge about posbindu does not necessarily mean they want to visit posbindu. The demand for health services depends on knowledge about what is offered in the service, how and when and by whom and at what cost. Knowledge itself is the result of knowing and this occurs after sensing a particular object. Knowledge is a very important domain in shaping a person's actions (Notoatmodjo, 2018). Before someone adopts a behavior, they must first know what the meaning or benefits of the behavior are for them, including in the behavior of utilizing health services. (Notoatmodjo, 2018).

Relationship between Health Status and Utilization of Posbindu PTM The results of the statistical test showed a p-value = 0.000 (p <0.05) in other words, there is a significant influence between health status and the use of the Integrated Development Post for Non-Communicable Diseases (Posbindu PTM) in Siulak Deras Mudik Village, Gunung Kerinci District, Kerinci Regency.

According to Febriani, Perdana, and Sari (2021), the perception and behavior of a person checking their health condition is interpreted as a belief and trust in healing. Where the condition of illness and disease is formed based on local cultural values and gives rise to behavior in utilizing health facilities that are influenced by social structures.

A person's health status is a factor of behavior, heredity and healthy behavior that will support increasing health levels, this can be seen from the many diseases based on behavior and lifestyle. According to the researcher's analysis, respondents who have a health status in the form of PTM sufferers but do not utilize Posbindu PTM because the respondents prefer

to check their health conditions at other health facilities, such as at the Health Center or at the Clinic. And other factors can be caused because the respondents are busy working so that they do not utilize Posbindu PTM (Ginting, 2019).
This is not in line with the research results of Fauziyah Purdiyani (2016) which stated that there was a relationship between the health status of respondents and the use of Posbindu PTM in the Cilongok Health Center work area, with a p value of 0.000.

Relationship between Family Support and Utilization of PTM Posbindu The results of the statistical test showed a p-value = 0.005 (p <0.05) in other words, there is a significant influence between family support and the use of the Integrated Non Communicable Disease Development Post (Posbindu PTM) in Siulak Deras Mudik Village, Gunung Kerinci District, Kerinci Regency.
Family support in this study has an effect on the utilization of Posbindu PTM. The most common form of family support is providing encouragement and motivation to attend Posbindu PTM activities (Wahyuni, 2016). Family is a strong motivator for the elderly to participate in Posbindu PTM activities. Positive support from the family is a source of encouragement for the elderly. Support is an effort given to others, both morally and materially. Family is the closest person who can provide the most active support compared to others (Sumendap, 2020).

Relationship between Health Cadre Support and Utilization of PTM Posbindu The results of the statistical test showed a p-value = 0.000 (p <0.05) in other words, there is a significant influence between the support of health cadres and the use of the Integrated Development Post for Non-Communicable Diseases (Posbindu PTM) in Siulak Deras Mudik Village, Gunung Kerinci District, Kerinci Regency.
The results of this study are in line with the research conducted by Nasruddin (2017) where the statistical test results obtained p value = 0.000 <(0.05), so it can be concluded that there is a significant relationship between health worker support and the use of Posbindu. This proves that health workers have an important role in improving the quality of maximum health services to the community so that the community is able to increase awareness, willingness, and ability to live healthily so that they can realize the highest level of health. Health workers in the Dalu Sepuluh Health Center area have played an active role in providing information related to counseling about Posbindu PTM even though there are obstacles faced by health workers in socialization during the Pandemic due to the limitations of holding community gatherings in order to prevent exposure to the spread of the virus (Handayani, Muhani, and Handayani 2021).

The Most Dominant Factors in the Utilization of Posbindu PTM
Based on the results of the study, it is known that from the results of the bivariate analysis there are 4 variables with p <0.25, namely the variables of education, health status, family support and support from health cadres. After conducting a logistic regression test, it was found that the variable of health cadre support with a p-value of 0.000, which means that health cadre support has a significant relationship or the most dominant influence on the Utilization of Posbindu PTM and an OR value = 56.052, meaning that respondents with good health cadre support are 56 times more likely to utilize Posbindu PTM than respondents with poor health cadre support. Another dominant variable is family support with a p-value of 0.000, which means that family support has a significant relationship or the most dominant influence on the Utilization of Posbindu PTM and an OR value = 22.353, meaning that respondents with poor family support are 22 times more likely not to utilize Posbindu PTM than respondents with good family support.
This study is in line with the research of Sari & Savitri (2018), the results of the Chi-Square test obtained a p-value of 0.000 which means that there is a relationship between cadre support and the utilization of Posbindu PTM in the work area of the Setiabudi District Health Center, South Jakarta City. An Odds Ratio (OR) value of 6.970 was obtained,

meaning that respondents who received support from cadres had a 6.970 times greater chance of actively utilizing Posbindu PTM compared to respondents who did not receive cadre support.

Sari & Savitri's (2018) research also stated that in the Chi-Square test results, a p-value of 0.037 was obtained, which means that there is a relationship between family support and the use of Posbindu PTM in the work area of the Setiabudi District Health Center, South Jakarta City. An Odds Ratio (OR) value of 2.153 was obtained, meaning that respondents who received support from their families had a 2.153 times greater chance of actively utilizing Posbindu PTM compared to respondents who did not receive family support. One of the determinants that influences patients to seek treatment is the people around them, including parents, siblings, etc.

CONCLUSION

1. The utilization of the Integrated Non-Communicable Disease Development Post (Posbindu PTM) was good, namely 54.2%.
2. There is a significant relationship between the level of education and the use of integrated non-communicable disease development posts (Posbindu PTM) in the Siulak Deras Health Center Working Area, Gunung Kerinci District, Kerinci Regency.
3. There is no significant relationship between employment status and the utilization of the integrated non-communicable disease development post (Posbindu PTM) in the Siulak Deras Health Center Work Area, Gunung Kerinci District, Kerinci Regency.
4. There is no significant relationship between knowledge and the use of integrated non communicable disease development posts (Posbindu PTM) in the Siulak Deras Health Center Work Area, Gunung Kerinci District, Kerinci Regency.
5. There is a significant relationship between health status and the use of integrated non communicable disease development posts (Posbindu PTM) in the Siulak Deras Health Center Work Area, Gunung Kerinci District, Kerinci Regency.
6. There is a significant relationship between family support and the use of integrated non communicable disease development posts (Posbindu PTM) in the Siulak Deras Health Center Work Area, Gunung Kerinci District, Kerinci Regency.
7. There is a significant relationship between the support of health cadres and the use of integrated non-communicable disease development posts (Posbindu PTM) in the Siulak Deras Health Center Work Area, Gunung Kerinci District, Kerinci Regency.
8. The variables of health cadre support and family support are the most dominant variables in the utilization of integrated non-communicable disease development posts (Posbindu PTM) in the Siulak Deras Health Center Working Area, Gunung Kerinci District, Kerinci Regency.

ACKNOWLEDGEMENT

The results of the study indicate that the utilization of Posbindu PTM is still good, but efforts are still needed to increase utilization through promotion and counseling about the benefits of Posbindu. It is hoped that health workers or Posbindu cadres will be more active in approaching or coordinating with the community so that they are willing to visit Posbindu regularly. The results of this study are expected to be used as a reference to increase insight for postgraduate students, especially regarding the utilization of Posbindu PTM.

REFERENCES

Azwar, A. 2016. Maintaining the Quality of Health Services Application of the Circle Principle. Problem Solving. Jakarta: Pustaka Sinar Harapan

Davi, M (2016). Factors Related to the Utilization of Health Services at Cibeureum Health Center. Study on Poor Families Receiving Health Insurance in Cibeureum District, Tasikmalaya City 2016. Thesis: Faculty of Health Sciences, Siliwangi University.

Kerinci District Health Office. 2019. Profile of Kerinci District Health Office. Kerinci District

Febriani, Christin Angelina, Agung Aji Perdana, and Tati Diana Sari. 2021. "Factors Related to the Utilization of Integrated Non-Communicable Disease Development Posts." Journal of Professional Nursing Research 3(1): 165–78.

Ginting, Sri Natalia. 2019. "Factors Influencing the Utilization of Posbindu PTM in the Elderly in the Working Area of Rantang Medan Health Center, PETISAH DISTRICT, 2018." Helvetia Health Institution, Medan. http://repository.helvetia.ac.id/id/eprint/2931/

Handayani, Opsi Okta, Nova Muhani, and Dina Dwi Handayani. 2021. "Evaluation of Non Communicable Diseases Posbindu Services During the Covid-19 Pandemic." Journal of Qualitative Health Research & Case Studies Reports 1(1): 41–53.

Ministry of Health of the Republic of Indonesia. (2018). Results of Basic Health Research (Riskesdas) 2018. Jakarta: Health Research and Development Agency, Ministry of the Republic of Indonesia.

Ministry of Health of the Republic of Indonesia. (2018). Technical Instructions for Integrated Development Posts for Non-Communicable Diseases (Posbindu PTM). Directorate General of Disease Control and Environmental Health. Ministry of Health of the Republic of Indonesia

Ministry of Health of the Republic of Indonesia. (2019). Non-Communicable Disease Management Guidelines. Directorate of Prevention and Control of Non Communicable Diseases

Ministry of Health of the Republic of Indonesia. (2020). Epidemiology Window Bulletin. Jakarta: Ministry of Health of the Republic of Indonesia

Ministry of Health of the Republic of Indonesia. (2020). General Guidelines for Integrated Development Posts for Non-Communicable Diseases. Ministry of Health of the Republic of Indonesia.

Mubarak, WI, Indrawati, L. and Susanto, J. 2015. Textbook of Basic Nursing Science. Salemba Medika. Jakarta

Nasruddin, Nurizka Rayhana. 2017. "Factors Affecting the Utilization of Integrated Non Communicable Disease Development Posts (Posbindu PTM) in the Working Area of Ballaparang Health Center, Makassar City in 2017." UIN Alauddin Makassar. http://repositori.uin-alauddin.ac.id/6515/

National Health Mission. (2018). Module for multi purpose workers (mpw) female/male on prevention, screening and control of common non communicable diseases, [e-book]. http://www.nhsrcindia.org/sites/default/files/multi purposeworkers%28MPW%29onprevention%2Cscreening%26controlofncdsenglish . pdf

Notoatmodjo, S (2018). Health Behavior Science. Rineka Cipta. Jakarta Notoatmodjo, S. 2018. Health Research Methodology. Jakarta: Rineka Cipta. Notoatmodjo, S. 2018. Health Promotion and Health Behavior. Rineka Cipta. Jakarta. Purdiyani, Fauzia. 2016. Utilization of Integrated Non-Communicable Disease Development Post (Posbindu PTM) by Elderly Women in Order to Prevent Non-Communicable Diseases in the Work Area of Cilongok Health Center. PUBLIC HEALTH JOURNAL (e-Journal) Volume 4, Number 1, January 2016 (ISSN: 2356-3346) http://ejournal-s1.undip.ac.id/index.php/jkm

Rumengan, DSS, Umboh, JML, & Kandou, GD 2015. Factors Related to the Utilization of Health Services for BPJS Health Participants at the Paniki Bawah Health Center, Mapanget District, Manado City. JIKMU, 5(1), 88-100, 2015.

Sari, DWR, & Savitri, M. 2018. Factors Related to the Utilization of Non-Communicable Diseases (PTM) Posbindu in the Work Area of the Setiabudi District Health Center,

South Jakarta City in 2018. Indonesian Health Policy Journal: JKKI VOL.07. No.02 June. 2018. Pages 49-56

Sumendap, Jeane, Sefti Rompas, and Valen Simak. 2020. The Relationship Between Family Support and Motivation with Elderly Interest in Posbindu. Journal of Nursing, 8(1):99–105.

Wahyuni, Indah Dwi, Asmaripa Ainy, and Anita Rahmiwati. 2016. Analysis of Elderly Participation in Elderly Health Development Activities in the Sekar Jaya Health Center Work Area, Ogan Komering Ulu Regency. Journal of Public Health Sciences, 7(02).

World Health Organization (WHO). (2020). Data and Statistics. http://www.euro.who.int/en/health-topics/noncommunicable-diseases