

Rational Drugs Use Socialization in South Cicinde Village to Increase Health Promotion

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Abstract

People who have started to get used to using various types of drugs can cause errors in the use of drugs. Non-compliance with the rules of use in the use of drugs will result in problems such as drug side effects. Rational use of drugs is the selection and use of drugs whose effectiveness is guaranteed and safe, at the most favourable price. This activity aims to provide understanding, preventive health promotion, as well as information and studies to rural communities related to rational drug use. This activity was carried out in Cicinde Selatan Village with activity stages consisting of the preparation stage and the implementation stage. Data was collected before and after socialization using a survey questionnaire. Based on the data obtained, there was an increase in public knowledge after socialization regarding rational drug use from 11% to 90%.

Keywords: Health Services, Rational Drugs Use, South Cicinde Village

INTRODUCTION

The use of a variety of medicines has become a social habit that aims to heal, control, or supplement daily activities. The causes of this occurrence are affected by such factors as the production of various drugs and supplements, the development of diseases, and the ease of access to medications due to implementation of the national health insurance.

These advances have had a variety of impacts, both positive and negative. The growth of a society that pays attention to health by going to healthcare facilities is one of the positive impacts that can be seen. However, it can lead to errors in using and disposing of drug waste which is a negative impact on increased drug use in communities. The lack of knowledge and information that are presented to communities regarding the use of good and correct drugs is likely to be responsible for this. Errors in medicine can cause harm both to society and to the environment (Rahmatullah & Permadi, 2020)

According to the BPOM, drugs are substances that are used as preventive or curative and improve health quality for their users. As well as its benefits, each drug also has adverse side effects. Drug side effects are the result of unregulated drug use (GNPOPA, 2015). Drug use is rational when it is selected and used to have safe and secure effectiveness, at the most profitable but affordable prices. The medicines used have to be rational, so the need for accurate diagnosis and the prescription of drugs with the correct dose, method, interval, and administration duration to ensure effectiveness and safety (Kementerian Kesehatan, 2011).

Based on the facts in the field, not all of the prescriptions given by other colleagues fit the criteria for the use of rational drugs. The importance of using drugs rationally in society to build health services. Irrational drug use has such a negative impact as reducing the quality of health care and treatment, resistance, dangerous drug interaction, and a waste of funds. Therefore, drug management needs to be carried out in a rational and structured way to optimize societies for the improvements of medical care to improve (Yuliasuti et al., 2013).

Observations made on the community around the village of South Cicinde stated that many people suffer from chronic diseases such as asthma, gout, high blood pressure, and cholesterol. People rarely have health control at doctors, according to them minor illnesses can be treated with over-the-counter medicines. Asthma and high blood pressure are among the most common

diseases. Asthma is a hereditary disease of local people because it is believed to be the descendant of their parents who have a history of asthma.

According to the background that has been described, it needs to be socially implemented to provide insight, preventive health promotion, as well as information and studies to village communities on the use of rational medicine. The expectations of this socialization of villagers' knowledge and awareness regarding rational drug use will increase, train student skills, and develop the tri dharma of colleges, especially in the field of community service.

METHOD

This activity was carried out in South Cicinde Village, Banyusari District, Karawang Regency from September to November 2021. The stages of the study to solve the problem are divided into two, namely the stages of preparation and implementation. The flowchart method can be seen in Figure 1.

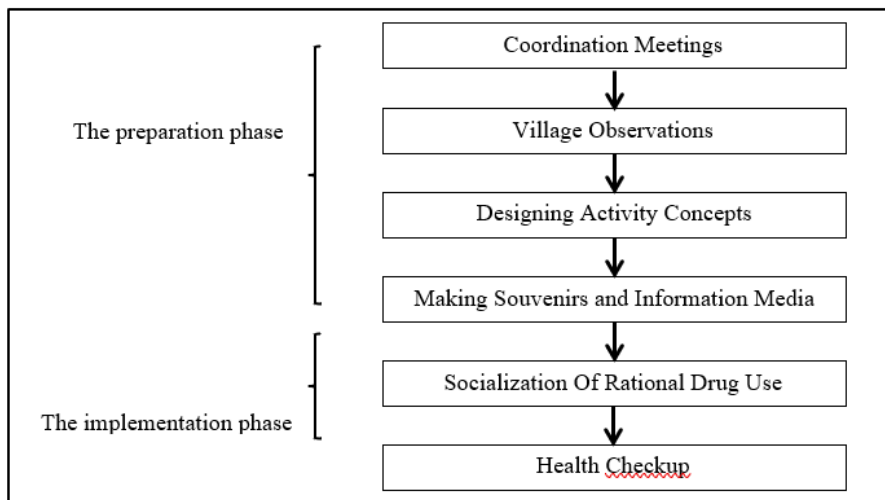


Figure 1. Flowchart Method

The preparatory phase includes coordination meetings, village observations, designing activity concepts, and the making of such souvenirs as stickers and information media such as posters, flipcharts, banners, and presentation materials. The implementation phase includes the socialization of rational drug use and health check-ups. At this stage data collection was carried out by filling out a survey questionnaire by the village community before and after carrying out the socialization.

The questionnaires have 18 problems consisting of the presence of chronic illness, the frequency of drug use, sick behaviour, prescription use, knowledge of antibiotics, drug purchase and storage, and the side effects of medications. The socialization was carried out for 90 minutes with lecturers and students with 15 minutes each for filling in the questionnaire before and after the socialization. Data analysis was carried out by looking at the frequency of the questionnaire results obtained.

Free souvenirs and medical check-ups are given as a form of community appreciation who attended. A health check-ups consists of pressure and blood sugar tests.

RESULTS AND DISCUSSION

The activity was carried out for 5 weeks. The data gathered gives mixed results. Respondents who participated in this study amounted to 100 people. Respondents' characteristic data is divided into age, kind of sex, occupation, and last education level. Data on these characteristics can be seen in Table 1.

Table 1. Characteristics of Respondents

Characteristics	Research Respondents (n = 100)
Age	< 18
Kind of Sex	
a. Male	32
b. Female	68
Occupations	
a. Unemployment	7
b. Housewives	54
c. Laborer	17
d. Bargainer	10
e. Farmer	4
f. Entrepreneur	4
g. Employee	4
Last Education	
a. No School	3
b. Elementary School	60
c. Junior High School	17
d. Senior High School	18
e. Bachelor	2

The characteristic result in the respondents was over 18 years of age, 32 the male sex, and 68 the female. The occupation of most respondents was 54% of housewives, and the most recent level of education was elementary school at 60%.

The socialization was carried out using power points presented by one of the students as a representative. Documentation of socializing activities can be seen in Figure 2.



Figure 2. Implementation of socialization on rational drug use

Data were collected before and after the socialization of the use of Rational Medicines. The results of the pre-socialized data analysis survey questionnaire can be seen in Figure 3.

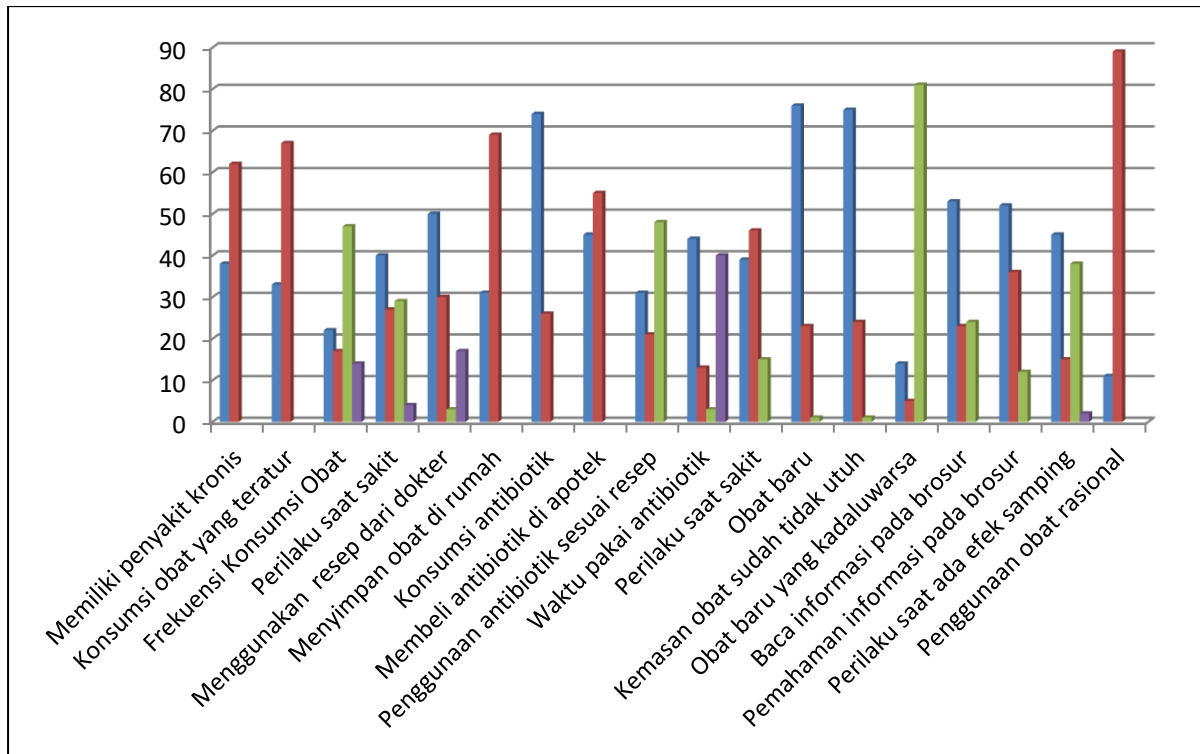


Figure 3. Pre-socialized data analysis

The questionnaire's filling states 62% of people have no disease and 38% have stomach, hypertension, uric acid, and cholesterol. Most people diligently use drugs that can improve their quality of life.

Based on the data, 40% of respondents go to their doctor when they felt sick. It's not always drugs that buy in the pharmacy with a doctor's prescription. This can be seen, as much as 50% of respondents do not use a prescription to buy drugs in a pharmacy, and sometimes as much as 30%. This condition was said to be rational if the class of drugs purchased are over-the-counter drugs, limited over-the-counter drugs, pharmacist's mandatory drugs, and multivitamins. But if the medicine purchased is a class of hard medicine it is said to be irrational because it must be purchased using a prescription (Atmaja & Rahmadina, 2018).

As many as 74% of respondents had used antibiotics. Where 48% of those who took the antibiotic were obtained from a pharmacy with a prescription, and 31% were not prescribed. Although the Minister of Health of the Republic of Indonesia Number 2406/Menkes/Per/XII/2011 concerning General Guidelines for the Use of Antibiotics states that antibiotic use is only a prescription but in fact, it is still easily used because it is available without a prescription. This will result in resistance and irrational use of drugs if allowed to continue without providing information to the general public. This data describes the pharmaceutical ministry, especially pharmacies, which still many people do without a prescription for antibiotics so that they can have harm the community if they are not provided with the right information.

Of the 100 respondents, only 40% of those who use drugs rationally used to eliminate resistance, while the rest is said to be irrational in their use of antibiotics. According to Suwantara's research, there is a significant influence between the perception of pain on rational drug use. The highest medication error is how to use the medicine. The condition of the body, which has pain complaints and is unable to do anything, causes the public to seek out treatment. This can lead to an understanding of rational drug use (Suwantara et al., 2021).

Related to the drugs that are still available after public health therapy, up to 46% throw the drugs in the bin intact. It can be concluded that people still do not practice rational drug use behaviour because there are still many disposing of drug waste in the wrong way. This may be

due to a lack of public knowledge. Kristiani's research (2021), states that there is a significant relationship between knowledge and proper drug management. This is related to the results of the questionnaire which states that the public has never heard of rational drug use verified by 89% and 11% already know about rational drug use.

After socialization, the questionnaire's charge largely changed the pattern of using rational drugs. Proven by the respondent's answers to the same questions they had before socialization. The results of data analysis after socialization can be seen in Figure 4.

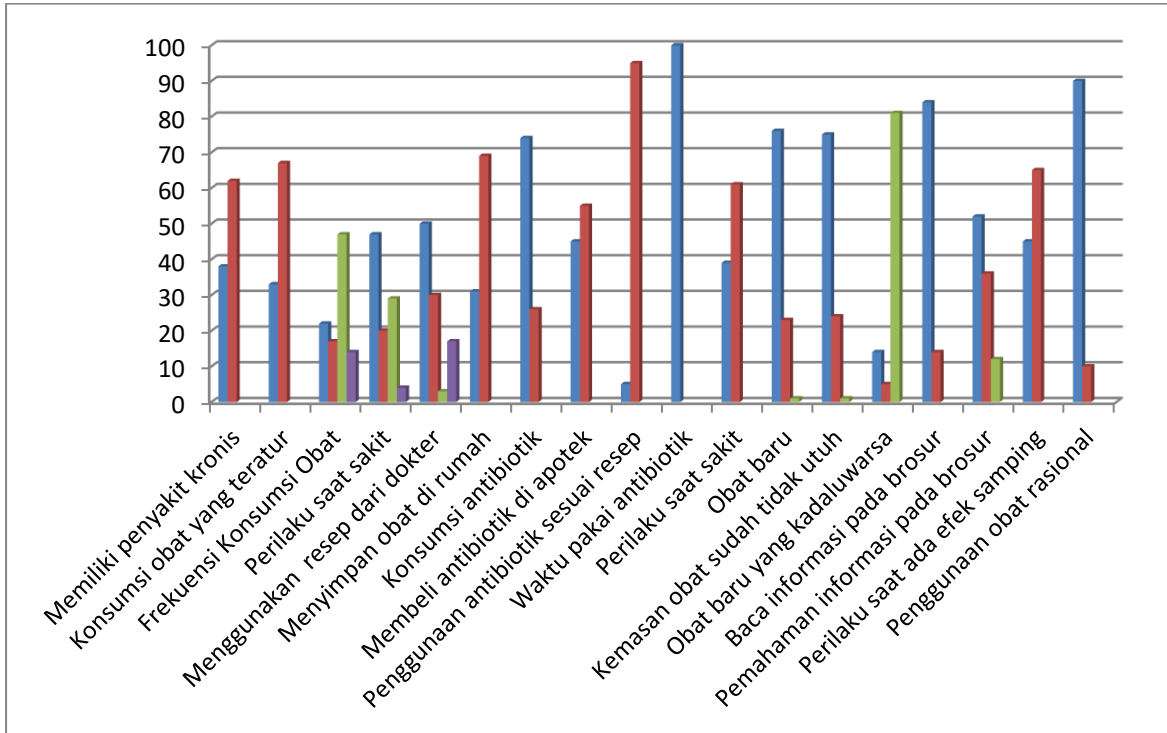


Figure 4. Data analysis after socialization

Before socialization, people who go to doctors when sick by 40% turn to 48%. Changes occur because people have learned that using drugs should not be careless. After all, they can have undesirable effects. As many as 95% buy antibiotics with a doctor's prescription, and 100% use antibiotics until they run out because they already know that unfinished antibiotics can cause resistance.

Before socialization, most societies disposed of the drugs in their entirety for the drugs that were still there, and after 61% of socialization, because it had been explained in socialization how to dispose of the correct drug, and 49% saved just in case it needed, because of the reason for the resurgence of the disease. Hence, to prevent the use of an expired drug, it requires good storage, such as regular checks or before the drug is used again.

One important factor in deciding one's actions is the knowledge that can cause a change in one's perception or habits. Knowledge is an essential domain that underlies a person's behaviour because both actions and behaviours are created over the individual's cognitive or knowledge (Notoatmodjo, 2012)

Respondents with enough knowledge would have pretty good drug management. This is because the level of education can affect one's knowledge. If the method of obtaining drugs is correct, such as buying drugs at licensed drugstores and pharmacies, disposing of drugs that have expired, changed colour, shape, smell, and decay, and proper use and storage of drugs, then drug management is said to be sufficient. When drug management is sufficient, the mistake of obtaining, using, storing, and disposing of the drug can be avoided and reduced (Kristiani et al., 2021).

A drug error will make a mistake when drug usage of the drug is reached and a dangerous side effect is likely to occur. Improperly stored drugs can affect the stability of the drug and cause damage to the drug. It has negative effects when used, such as unwanted effects or even poisoning. Drugs that are disposed of improperly or inappropriately discarded will result in environmental pollution and provide opportunities for others to abuse drug use (Hajrin et al., 2020).

Reading a brochure is a requirement because it contains information about drugs that will be used to minimize unwanted effects. Before socialization, only 50% of respondents read the medical information before using it, but after socialization, the data turns to 86% but 14% of the respondents answered sometimes, mostly because they can't read. This could be related to the last level of education which states that the majority of people's education level is elementary school. This is in line with Utaminingrum's research, that education level is related to the rationality of drug use. The causes of medication errors are caused by limited public knowledge about medicine and its use. Limitations result in irrational treatment if they do not match providing the proper information (Utaminingrum et al., 2015)

Side effects are the result of adverse or unexpected treatment. To the results of the study, as much as 60% of respondents would stop taking the drug and consult it with a doctor or pharmacist. Based on the data from the questionnaire questions submitted after socialization, it can be concluded that there is an increase in public knowledge regarding rational drug use from 11% to 90%.

CONCLUTIONS AND RECOMENDATIONS

The use of rational drugs is the selection and use of effective drugs secure and safe, at the most profitable prices. Socialization of rational drug use can be understood by the community because there is an increase in public knowledge after socialization. It suggests that students are able to provide education on rational drug use, especially in communities who lack information and have a low level of awareness. The recommendation of this activity are in the community sector, empowering society is very profitable in the process of approach to direct society. With cadre formation in society it may be closer to the goal of transmitting direct information on the rational drugs use.

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