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Function of Post UKK in an Effort to Improve Occupational Health of Informal Sector Workers

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Abstract

Pos Upaya Kesehatan Kerja (UKK) is the main activity of Puskesmas which is aimed mainly at informal sector workers in the working area of the Puskesmas, in the context of efforts to prevent and eradicate work diseases and accidents and the work environment. This study aims to determine the role of Pos UKK in improving the health and safety of workers in the informal sector which includes the relationship between knowledge and occupational health, workspace conditions and occupational health, use of PPE with occupational health, fire prevention techniques with occupational health, and health facilities with occupational health. This research used observational method with cross sectional study. The research subjects were 80 informal sector workers who were selected by stratified random sampling. The collected data was analyzed by using correlation test from Spearman with significant level of 95%. The results showed that there was a relationship between knowledge and occupational health, there was no relationship between workspace conditions and occupational health, there was a relationship between the use of PPE and occupational health, there was a relationship between health facilities and occupational health. It is concluded that the role of Pos UKK that can improve the health and safety of informal sector workers in Kupang City.

Keywords: Pos UKK, Occupational Health, informal sector workers

Peranan Pos UKK Dalam Upaya Meningkatkan K3 Pekerja Sektor Informal Di Kota Kupang

Abstrak

Pos Upaya Kesehatan Kerja (UKK) adalah kegiatan pokok Puskesmas yang ditujukan terutama pada masyarakat pekerja sektor informal di wilayah kerja Puskesmas dalam rangka upaya pencegahan and pemberantasan penyakit serta kecelakaan yang berkaitan dengan pekerjaan and lingkungan kerja. Penelitian ini bertujuan untuk mengetahui peranan Pos UKK dalam upaya meningkatkan Kesehatan and Keselamatan Kerja Pekerja Sektor informal yang meliputi hubungan pengetahuan dengan Kesehatan and Keselamatan Kerja Pekerja Sektor informal yang meliputi hubungan APD dengan K3, pencegahan tehnik pemadam kebakaran dengan K3, and fasilitas kesehatan dengan K3. Penelitian menggunakan metode observasional dengan studi cross sectional. Subyek penelitian 80 pekerja sektor informal dipilih secara stratified random sampling. Hasil penelitian menunjukkan bahwa ada hubungan penggunaan APD dengan K3, tidak ada hubungan kondisi ruang kerja dengan K3, ada hubungan penggunaan APD dengan K3, ada hubungan pencegahan tehnik kebakaran dengan K3, ada hubungan fasilitas kesehatan dengan K3. Disimpulkan bahwa Peranan Pos UKK dapat meningkatkan Kesehatan and Keselamatan Kerja Pekerja Sektor Informal Di Kota Kupang.

Kata kunci: Pos UKK, Kesehatan dan Keselamat Kerja, pekerja sektor informal

INTRODUCTION

The rapid industrialization in urban areas is still a strong attraction that triggers the high flow of urbanization. This has resulted in a drastic increase in population and labor force growth in the destination areas. According to Ramand (2012) This condition has an impact on various social, environmental and employment opportunities as well as the limited ability of cities to absorb formal sector workers. Job opportunities in the formal sector have indeed developed but are only able to absorb a limited number of workers. The inability of the formal sector to absorb this workforce has led to the emergence of an alternative sector as a safety sector capable of accommodating labor, hence the informal sector jobs were born.

Worker health is a special concern of the Ministry of Health, especially the informal sector. Every type of business and workplace both in the formal and informal sectors has a risk of health problems and accidents (Kementerian Kesehatan, 2016). In general, informal sector workers lack awareness and knowledge of the hazards that exist in place. Workers in the informal sector have more workload and worktime due to demands from employers on the quantity of products produced without paying attention to the health and safety of their work. This occurs partly due to the lack of socialization to employers and workers regarding the risk of hazards in the work environment.

Pos UKK is the main activity of the Puskesmas which is aimed primarily at the informal sector workers in the working area of the Puskesmas in certain area to prevent and eradicate diseases and accidents-related to work and the work environment. This is one form of government attention in the application of occupational safety and health in the sector (Denny, et al., 2016). This program has also been implemented internally in several Puskesmas in Kupang City, where each poly also has an explanation of the risks that cause infectious diseases as well as occupational safety and health. In line with the increasing number of residents in Kupang City, the number of the workforce also increases every year. The increase in population is not only naturally due to increasing age, but also due to the flow of population migration from outside the region with an orientation to find work, especially in urban areas such as Kupang City (International Development Research Centre, 2018). Based on the existing distribution, it indicates that the informal sector group is an attractive business field group for job seekers. This is common in urban areas in general.

Currently the role of the Puskesmas must be used as a main source for occupational health development which includes the development and coaching of community health for informal workers, which is carried out in an integrated manner by emphasizing occupational health services, occupational safety, and environmental health. However, awareness of the health of informal workers, especially in small and medium enterprises, is currently experiencing a decline. The reason is the owner of SMEs does not pay attention to the health and safety of their employees.

Study from Denny, *et al.* (2016) showed that the establishment of the Pos UKK for small industry workers making household appliances in Bugangan village, Semarang can protect workers from hazards in the workplace so that workers can work safely, healthy and productively.

Based on the description above, the researcher was interested in examining the relationship between knowledge and PPE, working space conditions with PPE, use of PPE with PPE, fire prevention techniques with PPE, and health facilities with PPE through the role of UKK post in an effort to improve the Occupational Health and Safety of informal sector workers in Kupang city.

METHOD

This study used an observational method with a cross sectional study with the aim of answering the role of Pos UKK in an effort to increase PPE for informal sector workers in Kupang City. The population in this study is all informal sector workers in Kupang City, totaling 450 workers who work in several types of sector businesses. informal sector and sampling using stratified random sampling based on the target work area in 3 Puskesmas in Kupang City with a research sample of 80 informal sector workers. Data collection techniques used PPE factor assessment questionnaires in the workplace, interviews, observations and documentation. Data analysis used the spearman correlation test with a significance level of 95%.

RESULTS AND DISCUSSION

Good knowledge affects the learning process. The learning process is obtained from both formal and non-formal education. Formal education is obtained at school while non-formal education is obtained from training and other activities such as increasing knowledge in the form of counseling (Putri, 2017).

Table 1
Analysis of Knowledge and Occupational Health of Informal Sector Workers

		Occupational Health							
Knowledge	Good		Bad		Total		p		
Kilowieuge	n	%	n	%	n	%			
Good	21	38.9	2	7.7	23	28.8	0.004		
Poor	33	61.1	24	92.3	57	71.3			

n = Number

The results of the analysis in Table 1 showed a significant relationship between knowledge and occupational health, with a p value <0.05 (p=0.004). This shows that good knowledge, there is good occupational health at 38.9% and poor knowledge, there is good occupational health at 61.1%. The results of interviews with respondents indicated that several workers had heard, seen, read, and received explanations from business owners and had also been trained on occupational health by health workers. Workers who have good knowledge will be able to distinguish the risks of hazards in the workplace and carry out work activities in accordance with existing procedures, because they know the risks that are experienced when carrying out work activities that are not in accordance with the procedures. Meanwhile, workers with less knowledge have good occupational health, this is because workers with less knowledge have sufficient work experience. So that workers tend to do work activities safely because of the work experience they have. This research is in accordance with Green's opinion which states that knowledge is an important factor in motivating someone to act. A person's behavior based on knowledge will be more durable than someone's behavior without knowledge. The more positive the behavior, the more the person will be able to avoid unwanted events (Siregar, 2014).

According to Mangkunegara (2013), the condition of the work environment can be seen from how the preparation and storage of dangerous goods, work space, and disposal of sewage and waste.

Table 2
Analysis of Workspace Conditions and Occupational Healthof Informal Sector Workers

	Occupational Health							
Workspace Condition	Good		Bad		Total		p	
	n	%	n	%	n	%		
Good	18	33.3	11	42.3	29	36.3	0.465	
Poor	36	66.7	15	57.7	51	63.8		

n = Number

The results of the analysis in Table 2 show that the workspace conditions are not related to occupational health, where the p value is >0.05. The results of interviews and observations at the location of the workplace found that the conditions of the workspace were lacking, there were 66.7% good occupational health, and good workspace conditions were 42.3%. It was found that workspace condition did not contribute to occupational health of informal sector workers. Workspace conditions in the informal sector workers in this study are different when seen from their work activities, for example furniture workers and weaving workers that work in open spaces while catering and noodle factory workers work in closed work spaces. This condition causes workspace conditions have no relationship with occupational health. Sunyoto (2012) stated that the working environment condition is one of the most important parts in obtaining good work results for employees. Good working conditions will have an impact on increasing the motivation and enthusiasm of workers at work.

Personal protective equipment (PPE) is needed in every workplace. PPE is provided to informal sector workers in the form of masks, gloves and aprons.

Table 3
Analysis of PPE Usage and Occupational Healthof Informal Sector Workers

		Occupational Health								
PPE Usage	Good		Bad		Total		p			
	n	%	n	%	n	%				
Good	50	92.6	6	23.1	56	70.0	0.000			
Poor	4	7.4	20	76.9	24	30.0				

n = Number

The results of the analysis in Table 3 show that there is a relationship between the use of PPE and occupational health of informal sector workers. In table 3, it can also be seen that the use of good PPE is 92.6% good occupational health, while the use of PPE is poor, 76.9% occupational health is not good. The results of interviews and observations among informal sector workers show that workers know and feel the need of PPE at work. Masks and sarongs as PPE are mandatory, especially because of the Covid-19 pandemic, while boots and aprons are used for workers in the kitchen in catering workplaces and workers in noodle factories. PPE is also prepared for every worker in catering workers and noodle factories, but from the results of observations in the field there are still workplaces such as wood furniture workers that has incomplete PPE for their workers. Piri (2012) stated the use of PPE can reduce the potential for workplace accidents to workers. According to research by Busyairi, *et al.* (2014), it is stated that occupational safety and health have an effect on worker productivity.

Fire prevention techniques in the workplace are needed to prevent the risk of fire that can occur at any time. Fires often cause various undesirable consequences, whether related to material loss, business activities, environmental damage, or pose a threat to the safety of human life (Soehatman, 2010).

Table 4
Analysis of Fire Prevention Techniques and Occupational Health Informal Sector Workers

	Occupational Health							
Fire Prevention Techniques	Good		Bad		Total		p	
	n	%	n	%	n	%		
Qualified	54	96.4	4	16.7	58	72.5	0.000	
Unqualified	2	3.6	20	83.3	22	27.5		

n= Number

The results of the analysis in Table 4 show that there is a relationship between fire technique prevention and occupational health, where fire techniques prevention that meet the requirements is 96.4% good occupational health, while the prevention of fire fighting techniques that do not meet requirements of 27.5% has good occupational health by 3.6%. The results of interviews and observations of informal sector workers included an explanation of the dangers of fire, fire prevention posters, no smoking posters in the workplace, and fire extinguishers placed in several strategic places in the workplace. This is in line with research conducted by Nugraha (2014) that the establishment of a fire prevention unit is a necessary requirement to ensure the safety of its occupants with the correct procedures, responses and actions.

Health facilities for informal workers are needed to reduce the risk of work accidents that may occur. Work accidents can happen at any time and can happen to anyone at work.

Table 5
Analysis of Health Facilities and Occupational Healthof Informal Sector Workers

		Occupational Health								
Health Facilities	Good		Bad		Total		p			
	n	%	n	%	n	%				
Available	54	94.7	3	13.0	57	71.25	0.000			
Unavailable	3	5.3	20	87.0	23	28.75				

n= Number

The results of the analysis in Table 5 show that there is a relationship between health facilities and occupational health of informal sector workers. In the available health facilities, occupational health was good as much as 94.7% and the unavailable one were 87% occupational health was not good. The results of interviews and observations in the workplace included toilets, washing hands, a first aid kit adequate medicines, clean water, and consumable water. While a clinic is not provided, however, if a worker is sick then they will seek treatment at certain health facility that is paid by the business owner. According to Green (2005) one of the behavioral factors is the enabling factor, namely the availability of health facilities/facilities. Availability of facilities is one form of behavioral supporting factors.

CONCLUSION

The results of the analysis and discussion in this study can be concluded that Pos UKK can increase occupational health of informal sector workers in Kupang City. This research has not been able to reach all informal sector workers due to limited manpower and facilities, as well as the large area of Kupang City. Suggestions can be made for the Kupang City Public Health Office and Puskesmas to help forming a Pos UKK for all Puskesmas in Kupang City in an effort to improve occupational health for informal sector workers.

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