

Village Transformation

Through the Healthy and Prosperous Village Program: Implementation in Suka Damai Village, North Tambusai District

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Abstract

So far, villages have often been neglected due to the tendency of development in urban areas. This study aims to realize the implementation of the Sustainable Development Goals of the Village through a healthy and prosperous village program in Suka Damai Village, North Tambusai District. The research method uses qualitative data collection techniques of observation, interviews and documentation. Based on the results of the study, it can be concluded that the implementation of the Sustainable Development Goals of the Village in healthy and prosperous villages has achieved indicators, namely births in health service facilities and using skilled health workers reaching 100%, maternal mortality rates reaching 0%, infant mortality rates reaching 0%, basic infant immunization reaching 100%, deaths and serious injuries due to traffic accidents reaching 0% and access to proper sanitation reaching 100%. While the indicators that have not been achieved are BPJS Kesehatan which has not reached 100% of the population, the percentage of smokers ≤18 years has not reached 0%, the prevalence of contraceptive use in married residents aged 18-49 years has not reached 100%, the birth rate in adolescents aged 15-19 years has not reached 0% and access to clean drinking water has not reached 100%. The achievement of the Village SDGs indicators in this case is driven by good cooperation and coordination between village governments.

Keywords;

village transformation; healthy and prosperous village program; implementation

Introduction

Public health is an important foundation for achieving sustainable development that has an impact on economic, social and environmental aspects. Sustainable development is able to produce quality human resources, stimulate innovation and be able to face challenges in a healthy state. A quality and healthy society must be formed through healthy and prosperous villages. The government's focus on paying attention to village development can be seen from the implementation of Sustainable Development Goals villages.

Village SDGs are an integrated effort to realize the acceleration of village development through data-based community empowerment in order to achieve sustainable development goals as a role model for sustainable development by emphasizing elements of local wisdom and religiosity as the main points (Agita et al., 2023). Village SDGs are the main reference for medium-

term village development throughout Indonesia through comprehensive development measurements of various aspects of community life that have been tested. The simplification of SDGs into Village SDGs directs development more clearly and in detail to achieve holistic goals so that village governments can utilize the potential of their resources. (Nurgawan et al., 2023).

Healthy and prosperous villages are intended to ensure the healthy lives of village residents in order to realize prosperity. In achieving Village SDGs, village and supra-village governments must ensure the availability of village residents' access to health services; affordable health insurance for village residents; decreasing maternal mortality rates (MMR); infant mortality rates (IMR); increasing the provision of complete immunization for infants; increasing the nutritional status of the community; prevalence of contraceptive use; controlling HIV/AIDS/TB obesity, malaria, leprosy, filariasis (elephantiasis); controlling drug abuse, the percentage of smokers ≤ 18 years reaching 0% and decreasing the birth rate in adolescence. (Directorate General of Village and Rural Development, 2022).

Justice of health rights must be felt by the entire community in terms of promotive, preventive, curative and rehabilitative (Irawan and Sari, 2022). The development gap between urban and rural areas cannot be separated from the uneven distribution of demographics and economic capacity and the availability of adequate infrastructure, including the gap in information, communication and health technology (Purnamawati et al, 2023). Suka Damai Village, located in North Tambusai District, Rokan Hulu Regency, is one of the villages that is trying to implement the Village SDGs program in the field of health and prosperity. This program is expected to improve the quality of life of village communities through various health and welfare indicators.

Table 1.

Data on the Population of Suka Damai Village

No	Information	Amount
1.	Population	3.674
2.	Male	1.911
3.	Female	1.763
4.	Pregnant Women	24
5.	Pregnant Women Died	0
6.	Toddlers	402
7.	Elderly	203
8.	Sick Residents	70
9.	Residents Died	13

Source: Integrated Health Service Post of Suka Damai Village, 2024

Designing urban, suburban or rural environments can influence people to engage in healthy behaviors such as physical activity and healthy eating (Community Preventative Services Task Force, 2016; Rahmanian, 2014; Charron, 2019). However, the problem that often occurs is

that the government tends to design healthy environments in urban and suburban areas. While rural areas that live more traditionally are still forgotten. To carry out healthy and prosperous village development, the village government needs to design it based on the indicators that have been set in the village SDGs.

In previous research conducted by Nurgawan, et al. (2023) it was found that the Petirhilir village government made efforts to implement the Village SDGs policy in realizing a healthy and prosperous village to prevent stunting and malnutrition. By paying attention to health services that can be accessed by the community. Research conducted by Budhy, S. et al. (2022) shows that providing training to the community both online and offline regarding the use of clean water changes people's views on utilizing water tanks to store clean water. Research conducted by Widyastuti, et al. (2020) regarding the implementation of the Healthy Serang City which began in 2013 until now has not run optimally as a whole, especially regarding the implementation of 9 (Nine) Healthy Regency/City arrangements and the role and function of the Healthy Serang City Forum (FKSS) and the Healthy Serang District Communication Forum (FKKSS). Research conducted by Irawan and Sari (2022) found that to achieve a healthy and prosperous village, it is necessary to improve the quality of clean water, human resource competence and active community participation so that village development can be realized for the sake of a progressive village.

Based on the problems above, the purpose of this study is to see the implementation of Village Sustainable Development Goals (Village SDGs) through the healthy and prosperous village program in Suka Damai Village, North Tambusai District, Rokan Hulu Regency.

Methods

This study uses a qualitative method with the selection of informants using the purposive sampling technique, namely selecting informants who really understand the information on the research object and informants can be trusted as competent data sources. The informants in this study were 5 people, namely the Village Head, Village Secretary, Village Midwife, Posyandu Cadre and Health Center Officer. Data collection techniques include observation, interviews, and documentation. The data that has been obtained, through descriptive analysis stages to get an overview of the implementation of the Village SDGs program.

Results and Discussion

Sustainable Development Goals village in the Healthy and Prosperous Village Program

To achieve a healthy and prosperous village in the sustainable development goals villages, it is necessary to pay attention to several indicators in the SDGs, namely 1) health services: childbirth in health care facilities and using skilled health workers, maternal mortality rates, complete basic immunization in infants, victims of death and serious injuries due to traffic accidents, access to proper sanitation, prevalence of contraceptive use in married people and aged 18-49 years, residents who are BPJS Kesehatan participants, birth rates in adolescents aged 15-19 years, Smokers under 18 years old. To achieve the healthy and prosperous village program, the SDGs Goals 3 indicators need to be the attention of the village government.

a). BPJS Health Participants

Health insurance must cover the entire community. This health insurance is expected to be able to protect and help the community in overcoming health problems. The government has issued a requirement for the community to be able to register themselves as BPJS Health participants. However, what happened in Suka Damai Village, not all residents were registered as BPJS Health participants. The population of Suka Damai Village is 3,674 people, while those registered as BPJS participants were 2,394 people. The residents of Suka Damai Village have two types of health insurance, namely BPJS PBI and BPJS non-PBI. The population covered by BPJS PBI is 1,812 people and BPJS non-PBI is 582 people.

The large number of people who have not registered as BPJS participants is due to the belief that is still strongly attached to traditional medicine in curing diseases. As well as the assumption that people do not need health insurance and the poor experience of BPJS Health participants in getting services so that people who have not become BPJS Health participants are reluctant to register themselves. Through this problem, the village government innovated by recording data on people who have not registered for BPJS through the SIKS-NG website.

b.) Childbirth with health care facilities

In the past, peaceful village communities tended to use midwives in the delivery process. The different views of village communities regarding childbirth made health service facilities less popular. Through the implementation of healthy and prosperous villages formed by the village government, it gradually began to influence changes in the community's perspective in utilizing health service facilities. The community began to give birth at the Community Health Centers that had been provided. Health service facilities in accordance with service standards and the presence of skilled health workers became supporters to change the community's perspective.

c.) Maternal Mortality Rate

Sustainable Development Goals (SDGs), countries are united in achieving the target to accelerate the reduction of maternal mortality rates by 2030 (World Health Organization, 2024). According to the Directorate General of Village and Rural Development (2022), maternal mortality is the number of deaths of women during pregnancy or within 42 days of termination of pregnancy regardless of the duration and place of delivery, which is caused by the pregnancy or its management and not other causes per 1,000 live births. In Suka Damai Village, maternal mortality during pregnancy is at 0% or there are no deaths. This achievement cannot be separated from the role of the integrated health post in providing health services to pregnant women by conducting pregnancy checks, monitoring nutrition and providing information on how to stay healthy during pregnancy..

d.) Infant Mortality Rate

Infant mortality is one of the major health problems in the world. The Infant Mortality Rate (IMR) is one of the indicators of health status in the Sustainable Development Goals (SDGs). Suka Damai Village had one case of infant death. This one case of infant death was caused by late referral to the hospital. Parents' understanding and knowledge in caring for and maintaining children is the front line to protect the child. Parents need to understand what factors cause disruption to children's health. This limited knowledge and understanding caused one case of infant death.

e.) Basic Immunization for Infant

In health services, immunization is important for children. Immunization is a process in forming immunity against a disease. Immunization can be given in the form of vaccines, injections or drinks. Suka Damai Village has 97 children aged 1-2 years and has had basic immunization since infancy. Public awareness to immunize children has now increased. Parents' awareness to immunize their children has been running by utilizing basic service facilities provided to the community. The large number of babies who are immunized will have an impact on the low number of infant mortality cases. The bad stereotype about immunization that is present in the community has been broken by the presence of health workers (posyandu cadres) who are able to build good communication with the community in Suka Damai Village.

f.) Smokers Under 18 Years of Age

A healthy and prosperous village must be free from smokers under the age of 18. The number of residents under the age of 18 in Suka Damai Village is 960 people, of which 510 are male and 450 are female. In the field, we found that 51 smokers were residents under the age of 18. The main cause of this is environmental factors and lack of parental supervision. Residents

under the age of 18 who become active smokers are generally influenced by their environment and curiosity about cigarettes. In overcoming this problem, the Village Government and the Suka Damai Village Health Center are trying to conduct socialization regarding the dangers of smoking for residents under the age of 18. And invite parents to be able to provide education to minors.

g.) Death and Serious Injury Victims Due to Traffic Accidents

Traffic accidents are unexpected and unintentional events on the road involving vehicles with or without other road users that result in human casualties and property losses. Accident cases in Suka Damai Village still occur. Accidents are experienced due to negligence when driving. Public awareness in driving properly and correctly is very much needed. Suka Damai Village has no fatalities or serious injuries from traffic accidents.

h.) Prevalence of Contraceptive Use Among Married People Aged 18-49 Years

Sustainable Development Goals Villages try to anticipate and control the rate of population growth, which is one of the indicators for achieving Village SDGs in the field of healthy and prosperous villages, namely the prevalence of contraceptive use among married people aged 18-49 years has reached 100%. The female population aged 18-49 years is 1,089 people. Several residents aged 18-49 years who are married are active family planning participants. The number of the Fertile Age (PUS) population aged 18-49 years who are married and active family planning participants is 682 people. Some people do not use contraception because they do not have children, lack of support from their partners, and fear of the side effects of family planning and lack of public awareness.

i.) Birth Rate Among Adolescents Aged 15-19 Years

The adolescent birth rate is seen from the number of births in women aged 15-19 years in a period per 1,000 women in the same age group (Directorate General of Village and Rural Development, 2022). Suka Damai Village has 13 cases of births in adolescents aged 15-19 years. The average age range for giving birth is 17-18 years, the cause of births at this age is dropping out of school due to economic constraints and some others because they choose to get married. The high rate of underage marriage is still a serious problem in Suka Damai Village.

j.) Access to Clean Drinking Water

One of the main needs of humans is drinking water. Every drinking water organization that is produced must be safe for health, namely if it meets physical requirements, and other parameters that measure whether the water is safe or not if consumed by the community (Zora et al., 2022).

In Suka Damai Village, there are 1,011 households with adequate access to drinking water, but the minimum distance of 10 m from the waste site has not yet been achieved. All

households in Suka Damai Village have water sources from drills and wells to obtain clean and drinkable water. Some households do not have water sources with a minimum distance of 10 m from the waste site. This is due to limited land and also the lack of awareness and understanding of the community.

k.) Access to Proper Sanitation

Sanitation is closely related to clean and healthy behavior or culture. The state of sanitation can be seen from the efforts made to maintain the cleanliness of the residential environment, so that residents are healthy both physically and mentally (Faradina & Rosariawari, 2023). In Suka Damai village, there are 1,011 households, all of which have access to proper sanitation. All households have toilets in the form of goose-neck toilets and sitting toilets as well as a final disposal site for feces in the form of a septic tank. This shows that Suka Damai Village has had access to proper sanitation for its people.

Conclusion

Implementation of Village Sustainable Development Goals (Village SDGs) through the healthy and prosperous village program in Suka Damai Village, North Tambusai District, Rokan Hulu Regency, several indicators have been achieved, but not all Village SDGs indicators have run well and optimally. The community needs to realize that to change the village they live in to be healthier and more prosperous, it starts with a shared will and awareness. The design of a healthy and prosperous village through a program developed by the village government needs to be supported by all parties. The implementation of this program is not only to achieve the Village SDGs indicators, but also to be the initial gateway to changing the lives of village communities towards more resilient, intelligent and characterful human resources. Several indicators of a healthy and prosperous village are support from good cooperation and coordination between governments.

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