Kampanye dan penggunaan garan beryodium di Desa Leuwiliang, Jawa Barat

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Abstrak

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"In 2002, about 71.8% of community at district bogor consumed iodized salt at adequate category. This figure is far beyond target of universal salt iodization (USI), i.e. >90% of households consume high concentrate iodized salt. If salt consumed fulfills requirement it will minimize problem of swollen goitre glands in community. The study used qualitative method. Data were obtained theough indepth interview, focus group discussion, and iodized salt to test. There were 39 informers that consist of mothers either having an occupation or not who lived or did not live with their parents, providers, cadres, family welfare and empowerement, seller of daily living necessities in market or stalls at subsdistrict of leuwiliang. In general there was a difference between informers living with their parents and those living separately, either in those who worked or did not work. Informers living with their parents tended to choose salt in bricket because they like it. Meanwhile informers living away from parents chose iodized salt without influence of their parents. All informers said that message was communicative and clearly delivered. There was no difference in behavioral changes based on age and occupation. There were informers with elementary or junior high school education found it difficult to change their behavior. Whereas informers with senior high school or diploma 3 education soon changed their behavior by consuming iodized salt after watching campaign. Availability of salt and purchasing power of community were relatively good. There was no special socialization about iodized salt conducted by providers.informers living with their parents tended to choose salt in bricket because their parents like it; on the other hand, informers living away form their parents prefered iodized salt withour influence of their parents. Message in short campaign was memorable so that informers still remember it. Behavioral changes of informers in using iodized salt were not affected by age and occupation but by education. Availability of iodized salt and purchasing power of community were relatively good.