

Tingkat Kesejahteraan Dan Jaminan Kesehatan Terhadap Unmet Need Availability, Accesibility, Dan Acceptability Pelayanan Kesehatan Lansia Sebelum Dan Saat Pandemi COVID-19 = Welfare and Health Insurance on Unmet Need Availability, Accessibility dan Acceptability Health Care Services for Elderly Before and During The Covid-19 Pandemic

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Abstrak

Sejak tahun 2021, Indonesia telah memasuki struktur penduduk tua dengan persentase lansia sudah mencapai lebih dari 10 persen (BPS, 2022). Dalam tiga tahun terakhir unmet need pelayanan kesehatan di Indonesia lebih banyak dialami oleh penduduk lansia dibandingkan penduduk muda dan mengalami peningkatan di masa pandemi Covid-19. Unit analisis yang digunakan adalah lansia 60 tahun ke atas yang mengalami keluhan kesehatan dan mengganggu kegiatan sehari-hari. Tujuan penelitian ini untuk mengetahui kecenderungan lansia mengalami unmet need availability dan accessibility serta unmet need acceptability pelayanan kesehatan sebelum dan masa pandemi Covid-19. Data yang digunakan dalam penelitian ini Susenas Maret dan Podes tahun 2019 dan 2021. Hasil regresi multinomial menunjukkan tingkat kesejahteraan rumah tangga dan kepesertaan JKN lansia berpengaruh negatif terhadap terjadinya unmet need artinya semakin tinggi tingkat kesejahteraan lansia dan kepesertaan JKN cenderung mengalami unmet need availability dan accessibility serta unmet need acceptability yang lebih rendah dibandingkan lansia termiskin (Q1) dan bukan peserta JKN. Selain itu pelayanan kesehatan puskesmas terutama di perdesaan yang belum berfungsi secara maksimal menyebabkan kecenderungan unmet need availability dan accessibility lebih tinggi pada lansia yang ada puskesmas di wilayah tempat tinggalnya dibanding yang tidak ada. Berdasarkan karakteristik, lansia lebih muda, berstatus kawin, tinggal bersama pasangan atau anggota rumah tangga lainnya, wilayah perkotaan dan tidak disabilitas kecenderungan unmet need availability dan accessibility serta unmet need acceptability lebih rendah. Sementara, lansia bekerja kecenderungan unmet need acceptability lebih tinggi, sedangkan kecenderungan unmet need availability dan accessibility lebih rendah dibanding lansia tidak bekerja. Terakhir lansia berpendidikan tinggi kecenderungan unmet need acceptability lebih tinggi dibandingkan lansia pendidikan rendah. Hasil deskriptif menunjukkan pada saat pandemi Covid-19 unmet need acceptability lebih tinggi dibandingkan lansia pendidikan rendah. Hasil deskriptif menunjukkan pada saat pandemi Covid-19 unmet need acceptability mengalami peningkatan, sedangkan unmet need availability dan accessibility mengalami penurunan. Lansia yang lebih rentan terpapar Covid-19 menyebabkan takut ke faskes, melakukan pengobatan sendiri dengan membeli obat di apotek dan ketika penyakit belum parah tidak merasa perlu ke faskes sehingga unmet need acceptability tinggi di saat pandemi.

.....Since 2021, Indonesia has entered ageing population with the percentage of elderly more than 10 percent (BPS, 2022). The last three years, unmet need for health services in Indonesia has been experienced more by elderly than by young and has increased during the Covid-19 pandemic. The unit of analysis used is the elderly aged 60 years and over who experience health complaints and interfere with daily activities. The aim of this research is to determine the tendency of elderly people to experience unmet need availability and

accessibility as well as unmet need acceptability of health services before and during the Covid-19 pandemic. The data used in this study are Susenas March and Podes in 2019 and 2021. Multinomial regression results show that household welfare level and JKN membership in the elderly have a negative effect on the occurrence of unmet need, meaning that the higher the level of elderly welfare and JKN membership, the tendency of unmet need for availability, accessibility and acceptability is lower than the poorest elderly (Q1) and non-JKN participants. In addition, puskesmas health services, especially in rural areas, which have not functioned optimally, cause the tendency of unmet need availability and accessibility to be higher in the elderly where there is a puskesmas in the area where they live than where there is none. Based on characteristics, the elderly are younger, married, live with a partner or other household members, in urban areas and are not disabled, the tendency is for unmet need availability and accessibility and unmet need acceptability to be lower. Meanwhile, the working elderly have a higher tendency of unmet need acceptability, while the tendency of unmet need availability and accessibility is lower than the non-working elderly. Lastly, older with higher levels of education tend to have a higher unmet need acceptability than older adults with lower levels of education. Descriptive results show that during the Covid-19 pandemic unmet need acceptability has increased, while unmet need availability and accessibility have decreased. Elderly who are more vulnerable to Covid-19 are afraid to go to health facilities, self-medicate by buying medicine at the pharmacy and when their illness is not severe, they feel no need to go to health facilities so that the acceptability of unmet need is higher during the pandemic.