

ABSTRAK

Kebijakan pengendalian Demam Berdarah Dengue (DBD) merupakan upaya lintas sektor melalui regulasi, strategi, dan tindakan berbasis masyarakat, lingkungan, serta pelayanan kesehatan untuk menurunkan angka kesakitan dan kematian. Namun, di wilayah kerja UPTD Puskesmas I Denpasar Barat masih terjadi peningkatan kasus dengan Case Fatality Rate (CFR) dan Incidence Rate (IR) melebihi target. Penelitian ini bertujuan menganalisis kebijakan pengendalian DBD menggunakan kerangka segitiga kebijakan di wilayah tersebut.

Penelitian menggunakan pendekatan kualitatif deskriptif dengan teknik pengumpulan data melalui wawancara mendalam, observasi, dan telaah dokumen. Informan penelitian terdiri dari tujuh orang, yaitu pemegang program, petugas kesehatan lingkungan, surveilans, promosi kesehatan, dan koordinator jumentik.

Hasil penelitian menunjukkan bahwa Aktor telah melibatkan lintas sektor sesuai Instruksi Wali Kota Denpasar Tahun 2024, namun kolaborasi dengan masyarakat dalam Gerakan 1 Rumah 1 Jumentik masih rendah. Konten kebijakan mengacu pada Permenkes No. 2 Tahun 2023 dan Instruksi Wali Kota Denpasar No. 2 Tahun 2024 dengan penerapan PSN 3M Plus, surveilans aktif, fogging selektif, dan program G1R1J yang berjalan efektif. Konteks didukung regulasi tetapi terkendala rendahnya partisipasi masyarakat, kesenjangan ekonomi, minimnya dukungan sektor swasta, dan kepadatan penduduk serta Proses telah berjalan sesuai pedoman, namun efektivitasnya masih terhambat oleh rendahnya partisipasi masyarakat dan kendala teknis pelacakan kasus.

Kesimpulan dari penelitian ini, diperlukan penguatan peran masyarakat dalam Gerakan 1 Rumah 1 Jumentik, mengoptimalkan kolaborasi lintas sektor, perbaikan sistem monitoring kasus untuk meningkatkan efektivitas pengendalian DBD.

Kata kunci: Kebijakan Pengendalian DBD, Analisis Segitiga Kebijakan, Puskesmas.

ABSTRACT

The controlling dengue fever (DF) policy is a cross-sectoral effort through regulations, strategies, and community, environment, and health service-based actions to reduce morbidity and mortality rates. However, in the working area of the West Denpasar Community Health Center I, there has been an increase in cases with a case fatality rate (CFR) and incidence rate (IR) exceeding the target. This study aims to analyze DBD control policies using a policy triangle framework in the region.

The study employs a descriptive qualitative approach with data collection techniques including in-depth interviews, observations, and document reviews. The study informants consist of seven individuals: program managers, environmental health officers, surveillance officers, health promotion officers, and jumantik coordinators.

The study results indicate that stakeholders have involved cross-sectoral collaboration in accordance with the Mayor of Denpasar's Instruction No. 2 of 2024; however, collaboration with the community in the "1 House 1 Jumantik" movement remains low. The policy content refers to Ministry of Health Regulation No. 2 of 2023 and Denpasar Mayor's Instruction No. 2 of 2024 with the implementation of PSN 3M Plus, active surveillance, selective fogging, and the GIRIJ program, which are running effectively. The context is supported by regulations but hindered by low community participation, economic disparities, limited private sector support, and population density. The process has been carried out in accordance with guidelines, but its effectiveness is still hindered by low community participation and technical challenges in case tracking.

The conclusion of this study is that strengthening community involvement in the "1 House 1 Jumantik" initiative, optimizing cross-sectoral collaboration, and improving the case monitoring system are necessary to enhance the effectiveness of dengue fever control.

Keywords: *Controlling dengue fever policy, Policy triangle framework, Health center*