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Yogyakarta, 1-2 March 2016

12th INTERNATIONAL SEMINAR ON DISASTER

Health Care Issues Toward Sustainable Development Goals (SDGs)

PROGRAM & ABSTRACTS

ISBN : 9786028865593



12th INTERNATIONAL SEMINAR ON DISASTER
Health Care Issues Toward
Sustainable Development Goals (SDGs)

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**SCHOOL OF NURSING
FACULTY OF MEDICINE,
UNIVERSITAS GADJAH MADA
YOGYAKARTA**

in Collaboration with

**KOBE UNIVERSITY
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FOREWORD

All praises are directed to Allah, God the Almighty, so the proceedings of the 12th International Seminar on Disaster: Health Care Issues Toward Sustainable Development Goals (SDGs) by the School of Nursing, Faculty of Medicine, Universitas Gadjah Mada, Yogyakarta, Indonesia in collaboration with Kobe University Graduate School of Health Sciences, Kobe, Japan on 1-2 March 2016 could be arranged properly.

The proceedings contain the material presented by the speakers and abstract from participants who join in oral and poster presentation. It is our hope that the proceedings could give optimum contribution to the community.

Editor

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COMMITTEE REPORT

Assalamualaikum wr. wb.,

First of all I would like to welcome to Yogyakarta to all invited guests, speakers and all participants in order to attend the 12th International Seminar on Disaster: Health Care Issues Toward Sustainable Development Goals (SDGs) by the School of Nursing, Faculty of Medicine, Universitas Gadjah Mada, Yogyakarta, Indonesia in collaboration with Kobe University Graduate School of Health Sciences, Kobe, Japan on 1-2 March 2016.

This seminar is expected to provide an opportunity, in particular for those who are interested to work across generation in the community to support the survivors of the disaster, to exchange information, experience, and expertise. We hope that scientific networks could be established among participants.

This year there are 16 oral and 11 posters that would be presented by participants in parallel sessions. In addition, special session for postgraduate students to present their research is arranged.

I thank to Kobe University Graduate School of Health Sciences for the continuity of collaboration and to all the speakers who come to Yogyakarta to share information and experiences to all of us in the first and the second day of the seminar. I thank to all participants, to the committee of the seminar and those who have helped us so that this activity could be held properly.

Thank you very much.

Wassalamu'alaikum wr .wb

Syahirul Alim, BN, MSc, PhD
Chairperson

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PROGRAM

Day 1, March 1st 2016 PIC: Melyza

Time	Activity	PIC
07.00 – 08.00	Registration	Security
08.00 – 08.10	Safety Briefing	MC
08.10 – 08.20	Indonesia National Anthem	Students
08.10– 08.40	Opening Remarks 1. Committee Report 2. Speech from Kobe University 3. Speech from Dean of Faculty of Medicine	MC
08.40 – 09.00	Saman Dance	Students
09.00 – 09.45	Keynote Speech: Prof. Satoshi Takada, MD., Ph.D "Preparing for Disaster for People with Disabilities and other Special Needs"	
09.45 – 10.00	Coffee Break	
SESI I 10.00 – 10.05	Moderator introduction (5')	Moderator: Elsi DH, S.Kp., MS., DS
10.05 – 10.35	Speaker 1 Kobe University, Graduate School of Health Sciences, Japan "Survey for Elderly People: The Great East Japan Earthquake and Tsunami in 2011 and collaborative acute hospital study with Thailand"	Chieko Greiner, RN, PHN, Ph. D
10.35 – 11.05	Speaker 2 School of Nursing, UGM, Indonesia "Psychosocial aspects in disaster"	Sri Warsini, S.Kep., Ns., M.Kes., Ph.D

11.05 – 11.35	Speaker 3 Anglia Ruskin University, UK "Lesson learned from UK: Nurses' role in chronic disease management towards global climate changes"	Robert Priharjo, BSN, M.Sc., Ph.D Video playing Operator: Student
11.35 – 12.00	Q and A	Moderator: Elsi DH, S.Kp., MS., DS
12.00 – 13.00	Lunch Break	
13.00 – 14.40	Paralel Session 5 presenter , each max 20 minutes (including Q & A)	Mulyani & Wenny

Day 2, March 2nd 2016, PIC: Mulyani

Time	Activity	PIC
07.30 - 08.00	Registration	Sie KSK
08.00 - 08.10	Greeting from MC	MC
08.10 - 08.30	Jathilan Dance	Student
08.30- 09.15	Keynote Speech: WHO representative for Indonesia "Healthcare policy issues regarding disaster management and disaster prone area"	MC
09.15 - 09.30	Coffee Break	Students
09.30 - 09.35	Moderator introduction	Moderator: DR. Fitri H, S.Kp., M.Kes
09.35 - 10.05	Speaker 1 Kobe University, Graduate School of Health Sciences, Japan "Low Back Pain and Lumbo - Pelvic Pain During Pregnancy and After Giving Birth"	Rei ONO
10.05 - 10.35	Speaker 2 School of Nursing, UGM, Indonesia "Lesson learned from UGM: Developing disaster nursing into curriculum. "	Syahirul Alim, S.Kp., M.Sc., Ph.D
10.35 - 11.05	Speaker 3 Ramathibody School of Nursing, Mahidol University: Noppawan "Roles of Public Health Nrses in Post Disaster Management"	DR.Noppawan
11.05 - 11.35	Q and A	

11.35 - 12.00	Poster presentation	
12.00 - 13.00	Lunch Break	
13.00 - 14.40	Paralel Session 5 presenter , each max 20 minutes (including Q & A)	Melyza & Wenny
14.40 - 15.00	Closing Ceremony & best oral/ poster awards	MC

MATERIAL FROM SPEAKERS

Preparing for Disaster for People with Disabilities and other Special Needs

(Prof. Satoshi Takada, MD, Ph.D)

Survey for Elderly People: The Great East Japan Earthquake and Tsunami in 2011 and collaborative acute hospital study with Thailand

(Chieko Greiner, RN, PHN, Ph. D)

Psychosocial aspects in disaster

(Sri Warsini, S.Kep., Ns., M.Kes., Ph.D)

Low back pain and lumbo-pelvic pain during pregnancy and after giving birth

(Rei Ono)

Lesson learned from UGM: Developing disaster nursing into curriculum

(Syahirul Alim, S.Kp., M.Sc., Ph.D)

Roles of Public Health Nurses in Post Disaster Management

(Noppawan Piaseu RN,Ph.D, APN/NP)

Preparing for Disaster for People with Disabilities and other Special Needs

(Prof. Satoshi Takada, MD, Ph.D)

Graduate School of Health Sciences, Kobe University Japan

Asia is the most disaster-prone region in the world. The region has borne the brunt of the physical and economic damage caused by natural disasters. The April 2015 Nepal earthquake killed over 8,000 people and injured more than 21,000. In Japan, we experienced the Hanshin-Awaji earthquake in 1995 and Great East Japan earthquake in 2011. Indonesia also suffers from natural disaster such as floods and earthquakes frequently. People are faced with many problems and difficulties following the disaster situations. In particular, the burdens of disasters are usually more severe in people with disabilities. It is important that people with disabilities and their family members make plans to protect themselves in the situation of disasters. First, the responders need to know how to work with people with disabilities and how to evacuate them safely and quickly. Emergency planners must ensure that shelters are accessible to people with a variety of disabilities. I will focus on the importance of evacuation systems for people with disabilities and special needs. I will also discuss the reasons related to the difficulties of establishing evacuation systems for the disabled in Japan.

The Effect of The Cognitive Behavior Therapy (CBT) on The Level of Depression in Elderly in Panti Werdha Pangesti Lawang

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ABSTRACT

Background: Depression is one of the mental health problems that is experienced by elderly in the world. In Malang residence, there are 53.800 elderly people (8%) from total population in Malang residence. Depression is number 2 caused of mental health problem in 2020 which can cause disability to person whose experience that. Many therapies can decreased the depression disorder in erderly including Cognitive Behavior Therapy (CBT). This study aimed to find out the effect of cognitive behavior therapy (CBT) on the level of depression in elderly who lives in Panti Werdha Pangesti Lawang.

Methods: This research method was used pre experiment with One Group Pretest Posttest approach. Analysis of this research results used wilcoxon. This research took place in The Panti Werdha Pangesti Lawang.

Results: The number of research subjects who fulfilled the criteria of inclusion of as many as 22 people. It consist of 19 people (88,3%) with no depression and 3 people (13,7%) with mild depression. This study found that there was a significant effect of Cognitive Behavior Therapy (CBT) on the level of depression in elderly in Panti Werdha Pangesti Lawang (test Wilcoxon P Value $0.000 \leq 0.05$)

Conclusion: There is a significant difference to the level of depression decreased with using a Cognitive Behavior Therapy (CBT). So our recommendation is to improve the application of Cognitive Behavior Therapy in community with elderly or in Panti Werdha which can make the level of depression in elderly decrease significantly.

Keywords: cognitive behavior therapy (CBT), depressions levels, elderly

The Difference of Adolescent Life Skills in Between and Rural Area at Jember District

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ABSTRACT

Background: Life skills are needed for adolescents to adapt with their development tasks therefore adolescents able to live properly. The purpose of this study was to identify the differences of adolescent life skills determined by knowledge, attitude, and behavior related to reproductive health in between urban and rural areas at Jember District.

Methods: This was a quantitative study with comparative approach. The study was conducted in six regions at Jember regency, each representing rural and urban areas with 200 adolescents as samples, obtained by cluster sampling. Data were analyzed by using Mann-whitney U test with 95 % CI because the data for each indicator of life skills (knowledge, attitude, and behavior) were ordinal, categorized into three categories: good, fair, and less.

Results: The results showed that the adolescent life skills in urban area on both aspects of knowledge and attitude majority were good, but for adolescents' knowledge in urban area was higher (57.1%) than in rural (55.8%). In line with knowledge, for attitude in urban was also higher (84, 8 %) than in rural area (75,8 %). Meanwhile, for behavior as the last aspect, the majority of adolescents in both area were in fair category, however in rural area was higher (85,3 %) than in urban (83,8 %). Furthermore, based on statistical analyzes, there was difference attitude of adolescents in between urban and rural area ($p: 0,008$), but there were no differences on knowledge ($p: 0,672$) and behavior ($p: 0,555$) between adolescents in urban and rural area.

Conclusion: The life skills about reproductive health of adolescents in rural and urban regions have similarities and differences for each aspect of knowledge, attitudes, and behavior. Factors that influence adolescent life skills need to be examined as a basis to establish the fit model to improve adolescent life skills especially in reproductive health in both rural and urban area.

Keywords: adolescent, life skills, reproductive health, rural, urban

The Effect of Disaster Health Education with Savi Approach for Floods Disaster Preparedness at Kebonsari Village Jember Regency

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ABSTRACT

Background: Jember Regency is one of area that has high rainfall and potentially faces to floods, especially kebonsari village cause located on the riverside of the Bedadung river. Disaster preparedness by enhancing the personnel capacity is needed to reduce the risks of disaster and to minimize the impact of the disaster. One way to enhance the capacity is conduct the disaster health education to the community with Somatic, Auditory, Visual and Intellectual (SAVI) approach. This research aimed to investigate the influence of disaster health education with SAVI approach for preparedness behavior.

Methods: This research employed one group pretest-posttest design, involving 30 respondents that collected by using random sampling. The disaster health education with SAVI approach was conducted one week with 3 time session (60 minute each session). The data were collected by using disaster preparedness questionnaire from LIPI-UNESCO/ISDR and analyze used dependent t test with 95% CI.

Results: the reseach shows before intervention most of the respondents (80 %) have poor preparedness behavior, and after the intervention most of the respondents have good preparedness behaviour (75 %). The dependent t test showed t value - 12.355 ($p= 0.000$). There is significant difference of community preparedness behavior before and after intervention.

Conclusion: applying SAVI approach on disaster health education is effective to increase the preparedness behavior. Hopefully the nurses can increase the community preparedness behavior through the promotion of health such as health education and disaster simulation with SAVI approach to enhance the community preparedness behavior.

Keywords: disaster, disaster health education, floods, SAVI approach

Posttraumatic Stress Disorder (PTSD) in Children Two Years after Flash Flood in Manado

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ABSTRACT

Background: PTSD is a stressful experience as a consequence of trauma that can happen to everyone including children. The traumatic experience will affect the stages of the children's development physically, psychologically and socially. The aims of the study are to know the characteristics of the respondents, namely the gender and the age as well as to observe the relationship between the gender with the occurrence of PTSD and relationship of age with the occurrence of PTSD.

Methods: this study applies cross-sectional design towards 60 respondents. The study was conducted on February 2016 by taking samples, namely a purposive sampling with the sample criteria children when the flash flood happened have been educated in elementary school in Manado.

Results: The majority of respondents is male gender (53,3%). The age of the respondents was 60% of 9-10 years old and 11-12 years old is 40%. The result of the data analysis using Chi Square test for the gender on the occurrence of PTSD in p value is 0.023; the age on the occurrence of PTSD in p value is 0.003.

Conclusion: there is a relationship between the genders with the occurrence of PTSD and there is a relationship between the ages to the occurrence of PTSD toward the children in Manado after the two-year flash flood.

Keywords: children, flash flood, PTSD