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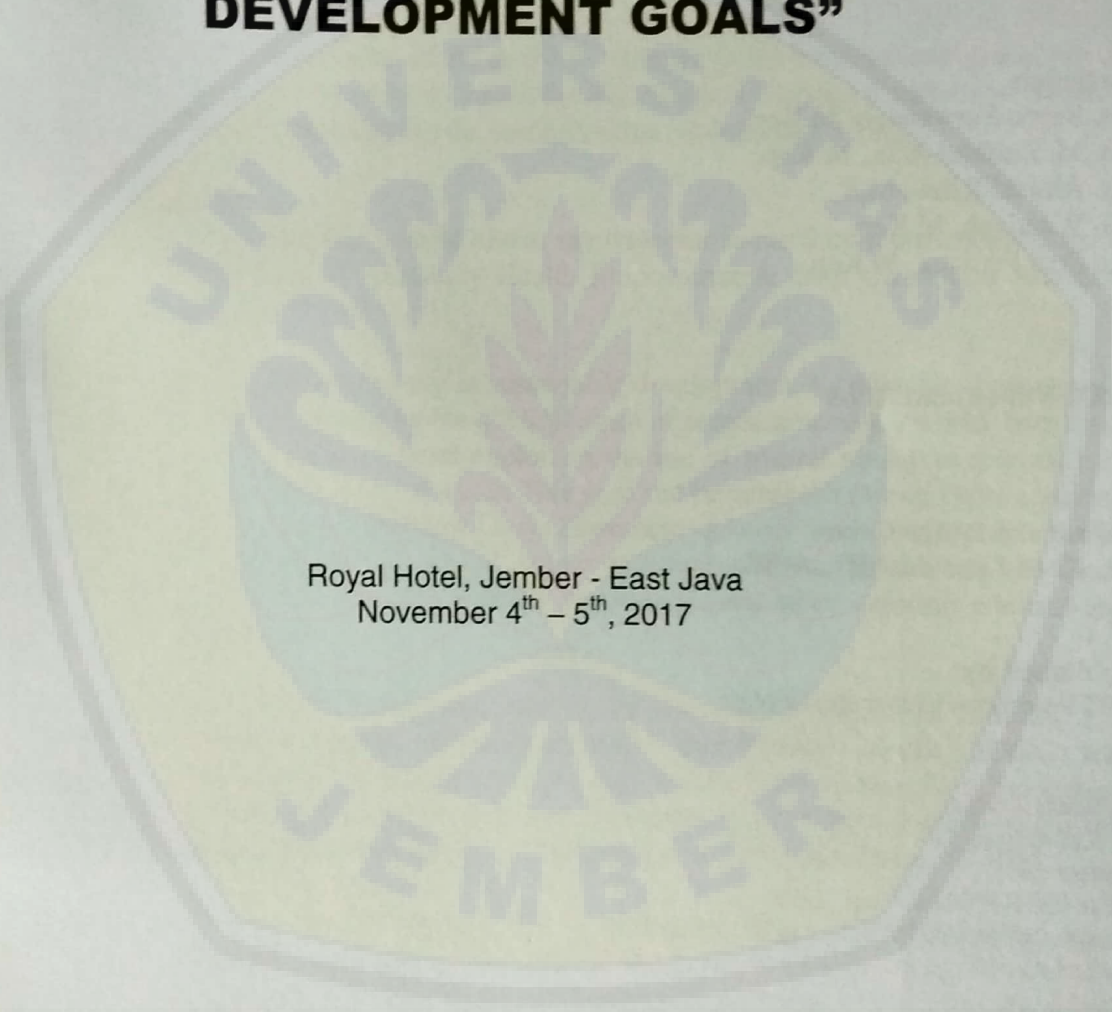
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PROCEEDING

3rd INTERNATIONAL NURSING CONFERENCE “COMMUNITY HEALTH EMPOWERMENT: STEP UP ACTION ATTAINING SUSTAINABLE DEVELOPMENT GOALS”



Royal Hotel, Jember - East Java
November 4th – 5th, 2017

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“COMMUNITY HEALTH EMPOWERMENT: STEP UP
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GOALS”

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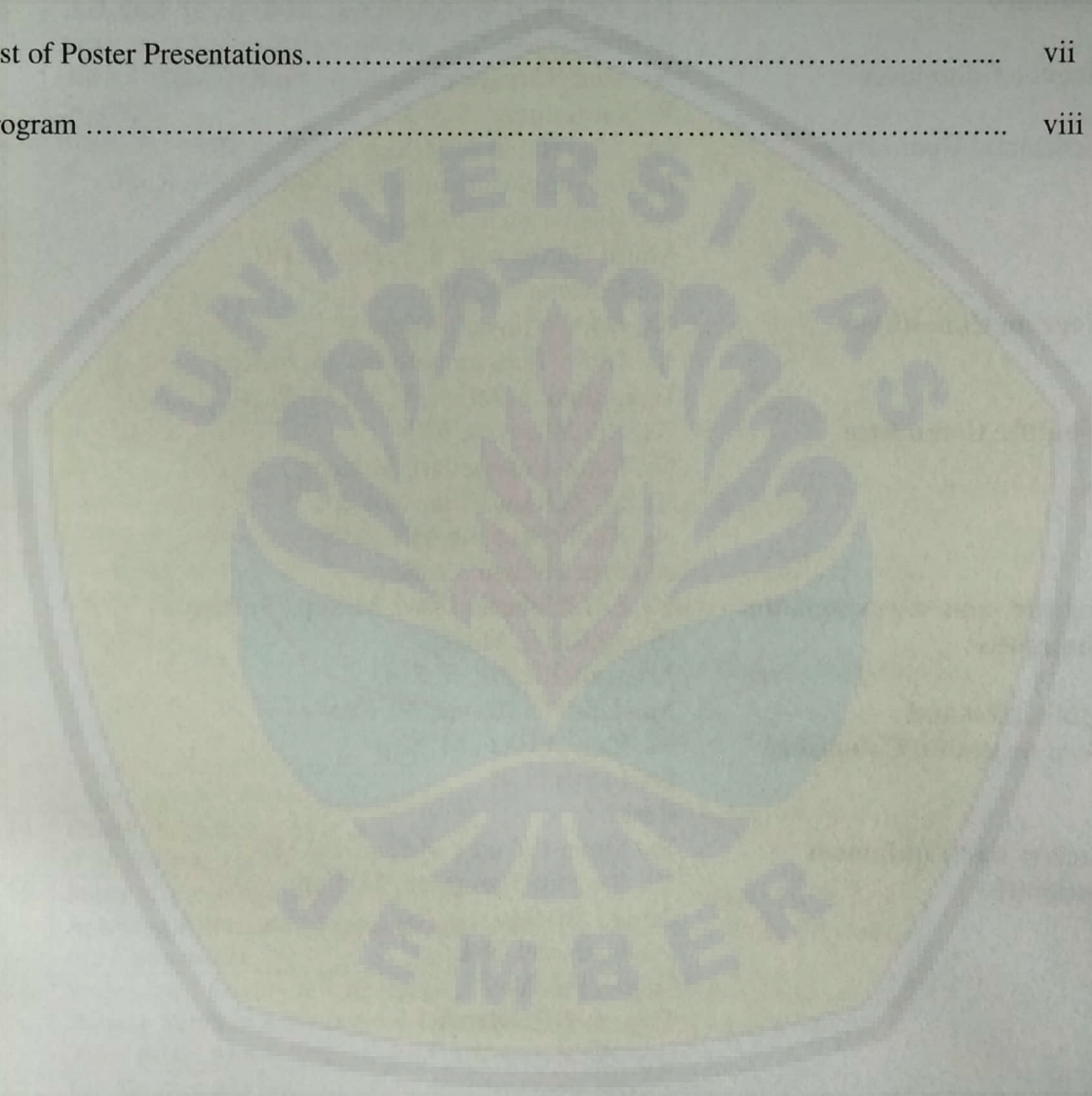
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SOCIAL MARKETING STRATEGY VOLUNTEER EXPERIENCE IN HANDLING CLEFT LIP AND PALATE PATIENTS (CLPP) IN JEMBER AND BONDOWOSO DISTRICT

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ABSTRACT

Background: The reality shows that people with cleft lip and palate initially refuse to perform surgery. The reason are 1) the patient feels fear because the myth of the operation is dangerous; 2) the myth of skin for operation is taken from the thigh; 3) they feel afraid that they cannot pay operating costs because it is very expensive and 4) there is information if a patients do examination in the hospital only for taking photographs but no realization for treatment. This study aims to describe the meaning of social marketing strategy experience of a volunteer in handling cleft lip and palate in Jember and Bondowoso. **Methods:** Qualitative research with phenomenology design using in-depth interview technique on two participants with characteristics: 1) social marketing volunteer; 2) understand and be able to speak Indonesian; 3) expressed willingness to become a participant. **Results:** The research produced four strategic themes that it is used by social workers to assist in handling cleft lip and palate patients. The strategy included knowing the causes of delay in surgery, making a network, generating trust in patients, using media as tool or way of communicating with society. **Conclusions:** Social marketing volunteer experience in Jember and Bondowoso is very spesific with using four strategies as key to success supporting and handling society with cleft lip, and palate willing to do the operation.

Keywords: *phenomenology, cleft lip, and palate, volunteer social marketing, strategy*

Introduction

The prevalence of cleft due to multiple factors including genetics and diet (Lidral et al., 1997; Munger et al., 2004; Munoz & Meier, 2013). In general, population thought to be about 1 per 1000 births. The incidence of cleft lip and palate is one of 500 births in Asian and Native American (WHO, 2015). In the Philippines there are nearly 40% of low-income and poverty. Research in the Philippines showed the incidence of the cleft between 1 per 500

and 1 per 625 births (Mendoza, 2009; Murray et al.,1997).

In Indonesia the incidence of cleft lip and palate as much as 1-2 per 1000 births. According Anthony Pelly of Australia (1973) in Noer (2007) that in Indonesia every hour there are six babies born with cleft lip and palate or 360 babies in 2.5 days. According to Marzoeki (1989) that incidence of cleft lip with or without cleft palate in Surabaya is 1:1983 births, and for cleft palate is 1:9000 births. It was also

reported in men than women are as much as 63%:37% with left cleft more often than the right cleft (Noer, 2007). Besuki residency in the region (Jember, Lumajang, Bondowoso, and Situbondo) there were 269 children's cleft lip and palate (SmileTrain Express, 2014).

The incidence of cleft lip and palate in Jember and Bondowoso very high. The data showed that there were 3-4 cleft lip patients who come to Paru Province Government Hospital Jember every week. The patients came accompanied by non-governmental organizations (NGOs), foundations, or social worker from each region. Awareness of family to overcome the problems of the illness is still low. Some cleft patients who come to the hospital after there are complications such as malnutrition, pneumonia, speech disorders, although previously been directed by local health officials to seek treatment immediately. Families are often reluctant to seek treatment even though it is free of charge form government. This reluctance is caused by some reasoning ie: people as a result of a curse, destiny, even the fear of death from the surgery.

The role of health workers in finding patients with cleft lip and palate is still not optimal. The data indicate that health

workers, especially in the first level service, are preoccupied with many health programs from the government, while the available facilities are very limited, the condition of the area to be handled is sometimes quite wide and remote so that no illness in the community can be served. This condition resulted in some people less trusts in the role of health workers because of illness or problems faced by them not to be thoroughly overcome. So when there are social groups who are ready to help their problems ranging from home up to the hospital they almost never refused. This condition proves that people are more comfortable and easier to find information from NGOs, foundations, or local social worker. The non-governmental organizations more acceptable to people than the health professionals because they believe that the non-governmental organizations to immediately facilitate the hospital. This phenomenon is very interesting to observe about how social workers solve public health problems especially people with cleft lip and palate as families with cleft lip and palate are very complex problems not only physical problem but it also psychosocial problems. The result of study can be used as an input to overcome the problem of cleft lip and sky cleft especially in Jember and

Bondowoso areas that still have stigma to refuse operation.

Methods

This study is a phenomenological qualitative study. The study aims to describe the meaning of a social marketing strategy volunteer experience in the treatment of patients with cleft lip and palate. Participants were selected using a purposive technique with the following characteristics: 1) social marketing volunteer; 2) understand and be able to speak Indonesian; 3) expressed willingness to become a participant by signing a research agreement. Participants who participated in this study were two people. The number of participants has met saturation data. The study was conducted in Jember and Bondowoso in 2017. Data were collected by in-depth interview techniques and documentation aided by a supporting instrument in the form of guidelines for the interview and recording equipment. Average time interview for each participant is approximately 120 minutes. The interview process was recorded using a mobile phone and field notes. Participant interview is terminated when all the necessary information has been obtained according to the research objectives. The transcript of the interview conducted by turning back the tape and typed verbatim

using micro soft word program. The results of field note in the form of non-verbal responses of participants, transcripts corresponding integrated in the response time of the incident during the interview process. Transcript data were analyzed manually by methods Colaizzi through stages. The process of data analysis was performed to identify clusters of themes that consist of keywords, categories, sub-theme, and the theme of the research.

Results

Theme: Causes of Delay in Handling Cleft Lip and Palate

Generally, the reality shows that people with cleft lip and palate initially refused to perform the operation. This is often happened and became a cause of delays in the handling of CLPP. Several things can cause the CLPP including: 1) the patient was afraid because there is a myth that operation is dangerous; 2) another myth mentions the skin for surgery were taken from the thigh; 3) fear of inability to pay the operating because the costs are expensive; 4) if the check into the hospital only do photos but no follow-up. Illustration of the reasons for the decline is reflected in the following statement:

"..... cleft lip patients often fear if they must be operated, sir.... because of the news that

her surgery was dangerous and could cause death and disability" (P.2).

"..... sometimes families asked me whether the skin for surgery is will be taken from the thigh skin and other skin? ... it also often makes the patient and his family fears" (P.1).

"..... if you want surgery later, whether the cost is not expensive, sir? And whether the drug for recovery is not expensive the questions that are often delivered by a family from harelip" (P.1).

"..... family of the patient's lips convey that they sometimes visited by health workers and in photographs but after that there was nothing" (P.2).

Theme: Strategies Social Marketing Volunteer Through Making Social Networking

One of the strategies of social marketing undertaken by volunteer is to create a social network between the volunteer with the community. Networking is important because the reality reveals that it is not easy to bring the CLPP to do operating. Previous social network should be established and enforced by the volunteer. Illustration of social marketing strategies through the creation of social networks is reflected in the following statement:

"..... usually I went to the Health office to ask data of cleft lip patients in Jember or Bondowoso district ... I also came to office Social department to request data of cleft lip and palate patients. These data will give social workers then social workers can find cleft lip and palate patients in the village" (P.2).

"..... I usually ask for help at the village and district officials to obtain data about patients of cleft lip ... but it is also partnering with the military on the anniversary of the military with a cleft lip surgery social program" (P.1).

"..... Families of cleft lip and palate said that before I invite them, sometime they are visited by health workers and they took photographs but after that there was nothing" (P.2).

".... I am also working with CB motorcycle club in Bondowoso, one of the children's member of motorcycle clubs have been done surgery succesfully In addition, I also make networking with gathering postman then the officer help us to conduct socialization in the villages" (P.1).

"I also make networking with Kyai (Religius leader in Islamic center or pesantren) then boarding to Islamic school like MAN , MIN, MTsN. (P.1).

"I think the network is also very strategic is to associate with disabilities comminuty so that the patient is looking for them" (P.1).

Theme: Strategies Social Marketing Volunteer to Raise Confidence in Patient and Families

Strategies to raise confidence in the community is very important because if they are no confidence so that they would not be willing to perform the operation. Following expressions of the participants in connection with the theme:

"... Some ways I do to convince cleft lip patient and families with showing before-after pictures of patients who have done surgery" (P.1).

"To convince people with cleft lip I sometimes have to invite a specialist directly into the patient's family" (P.1).

"... under certain conditions and circumstances I must take sub-district heads, village heads and village leaders to participate reassure the patient" (P.1).

"... for people who had children stay in the hut, I will contact Kyai to participate reassure the patient" (P.1).

"..... sincerity us as we move not paid, Insaallah lillahita'alawe are volunteers so the community knows about us and believe in us" (P.2).

"... .. one of the most effective strategies to ensure the patient is carrying patients and their families who had surgery to reassure the patient" (P.1).

"..... everything is free, meals are provided, roundtrip picked up by an ambulance" (P.2).

Theme: Social Media Marketing Volunteer

The volunteers also use a variety of media in order to communicate effectively and humanist to persuade patients that they are willing to surgery. Several media can be seen in the following explanation:

"..... to facilitate my communication with the patient's family usually I use leaflet posters and radio media to broadcast promo" (P.1).

"..... use of the facilities already provided by the state usually as a health card, or KIS" (P.2).

".....help support provided by the government....but not maximum.....for example the cost of entrepreneurial patient cost of living in the city" (P.2).

".....patients already have an automatic free.....KIS so we offer themwe facilitatewhom the cost of living, facilitating shelter, eat, drink free" (P.2).

".....using telephone, fuel, WA, and sosmed exist eg coordination group SR (charity group) Jember.....usually through group WA" (P.1).

".....direct communication by using Mother" (P.1).

"Similarity raises fate by way of professing the village and from poor families" (P.1).

Discussions

Social marketing is the systematic application of marketing concepts (along with related fields such as psychology and sociology) and techniques to achieve specific behavioral objectives, for social good or public (Eagle et al., 2013; Eagle, Hamann & Low, 2016). Related to the concept of volunteer health workers need the ability in social marketing with the aim of prospective patients do not object to perform an operation to cure patients CLPP. Social marketing offers a framework for designing flexible behavior change program to be implemented on a variety of issues of behavior change (Haldeman & Turner, 2009; Corner & Randall, 2011). Although the activities of the volunteers were not formed systemically but a series of activities carried out leading to affect those processes CLPP and family to want to perform the operation as a form of behavior to cure patients CLPP. This is confirmed by the opinion Hai Lee & Kotler (2011) which states that the use of marketing principles and techniques to influence a target to voluntarily accept, reject, modify or abandon behavior for the benefit of individuals, groups, or society as a whole.

Theme: Patient Handling Delay Causes Cleft Lip and Palate

Cleft lip and palate has never been the focus of the health program when events cleft lip and palate every year is increasing. Patients cleft lip and palate who came to the health service in the state is too late or did not receive treatment early. It is caused by several things:

First, people are afraid because surgery is a dangerous myth. The emergence of this assumption caused CLPP patient families lack adequate information from relevant stakeholders. This is in line with Nelson phrase stating that patients with cleft lip and palate and families in need of support and accurate information (Nelson et al., 2012a, b; Strauss et al., 1995).

Secondly, there is a myth in society that says that the operation is taken from the skin of the thigh. This myth, if left to bring up the fear and stress for patients CLPP. Respond to it should we need to convey information in a more detailed way related CLPP. In line with that Searle explains that it takes the right way to deliver information because in that way can give better results for families by reducing the amount of stress and anxiety (Searle, Ryan, & Waylen, 2016).

Thirdly, there is the fear of inability to pay for an expensive operation. This is due to the perception that formed CLPP patients' family has no valid information about the existence of free and inexpensive services for people with CLPP. This fact relevant with Nusbaum phrase stating that the family requires an accurate source of information and can be accessed from care settings eg written and internet resources that provide the latest information (Nusbaum et al., 2008).

Fourth, if it went to the hospital only do photos but no follow-up. The views were somewhat traumatic trigger the experience of a few families CLPP who have failed surgery process. Therefore the necessary clarity how to access information that is valid. In line with this Nelson stated that patients with cleft lip and palate and families need clear written information and details on how to contact support groups and other people in the same situation (Nelson et al., 2012a, b).

Theme: Strategies Social Marketing Volunteer Through Making Social Networking

One of the strategies undertaken by trained volunteer health in influencing the behavior of patients CLPP is to create a strong social

network, form social networks are generally divided into several segments include:

First, the social network with government institution. This social networking among others: 1) the health department to obtain patient data base CLPP; 2) social services to get data from the patient CLPP social workers; 3) the village and district officials to recruit the patient directly to the villages; 4) the operator ministry of religion so socialization to MAN, MTsN, and MIN.

Second, volunteer health workers also take advantage of social networks with the security forces in this partnership with the military, cooperation is formed CLPP perform operations on the anniversary of the military.

Third, the social network with non-governmental parties including CB motorcycle club in Bondowoso, Kyai in pesantren and associated disabilities.

Based on the data and facts can be seen that in doing social marketing health volunteers using the maximum ability to create a network with all stakeholder relevant with CLPP patients. The volunteer action Wasko consistent with the theory that states that cognitive capital can increase network

stability and expansion ego. Cognitive capital shows individual resources as individual developments from time to time in the study of knowledge and skills, shared understanding and expertise, and establish norms of practice (Wasko & Faraj, 2005; Li et al., 2013; Yan and Guan, 2017).

Theme: Social Marketing Strategy Through Volunteer Raising Patient Confidence In in Patient and Families

Addition to making a strong social network with multiple stakeholders, volunteer workers also do social marketing through raises trust from the patient so that the patient and family CLPP CLPP willing to do surgery to the healing process. Some of the volunteer health strategies are: 1) showed evidence of concrete results of operations in the condition before and after the operation; 2) testimony from patients who had completed surgery; 3) presenting expert surgeons are to the homes of people CLPP; 4) invites religious leaders and community leaders to convince people to be willing in the operating CLPP.

Field findings can be seen that the element of trust in the power of volunteers to be one of the main factors that influence the behavior of patients CLPP so nominally refused operation. This means that trust is the individual social capital must be owned

by a health volunteer. It relevant with Carpiano statement that an individual's social capital cannot do without the trust of the public (Carpiano & Fitterer, 2014).

Theme: Social Media Marketing Volunteer

The volunteers also use various media to do social marketing in patients CLPP, this is done so that the volunteers can communicate effectively and humanist to persuade patients that they are willing to surgery. Some media include: media leaflets posters, radio to broadcast promos, telephone, fuel, WA, and sosmed, direct communication with the mother tongue.

The use of various media is usually preceded by using media social, which is now one of the most familiar means of communication in society. This fact is consistent with the statement Miller that social media is a potentially powerful major media to find the influence of society by involving them, and generate support. In order to establish and grow marketing, trust must be strengthened to overcome the reluctance of consumers (Miller & Lammas, 2010). The use of the mother tongue is very effective as Oztamur statement that the issue of the use of formal language for the communication process and create content less attract customers in

social media activities. Is less effective when compared to using twitter facebook account (Öztamur & Karakadılar, 2014).

The weaknesses of this study include informants whose numbers are very limited to only two people so the information is less extensive although using in-depth interviews. This research requires further study to collect more comprehensively data about volunteer relations and the process of handling cleft lip and palate. Implications for the nursing field that the strategies can be adopted as a strategy in dealing with people cleft lip and palate so that can cultivate public trust to health workers and optimize its role in overcoming health problems in the community.

Conclusions

Social marketing volunteer in Jember and Bondowoso is spesific with using three strategies as key to success supporting and handling society with cleft lip and palate willing to do operation.

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