



HEALTHY PERCEPTION BASED HEALTH BELIEF MODEL WITH SEEKING BEHAVIOR OF RUBBER FARMERS AT SENTOOL PLANTATION, SUCI VILLAGE, PANTI DISTRICT, JEMBER REGENCY

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ABSTRACT

Background: Perception is a process of giving meaning, interpretation, and sensation that is received by each individual and is strongly influenced by one's internal and external factors. These perceptions have a considerable role to play in behavior change, and efforts should be focused on increasing perceived vulnerabilities, perceived severity, perceived benefits, and perceived barriers. **Objective:** Analyzing the relationship between perceptions of health based on the Health Belief Model (HBM) and treatment-seeking behavior. **Method:** This study uses a correlational analytic design with an approach cross-sectional. This study involved 142 respondents obtained randomly. Data were collected using the HBM-based health perception questionnaire and the treatment-seeking behavior questionnaire with data analysis using the rank correlation test spearman with a 95% confidence interval. **Results:** Test analysis Spearman *rank* showed a significant relationship between HBM-based perceptions of health and treatment-seeking behavior and the value of $p = <0.001$ and $r = 0.274$. **Conclusion:** A significant relationship exists between the two variables with weak strength and a positive direction. This shows that the higher the perception of health, the higher the treatment-seeking behavior of rubber farmers. Healthy perception has an important role in maintaining a state of a person who will behave according to his perception. A good perception will be easier to implement behavior to achieve health with appropriate treatment-seeking behavior

Keywords: Health Belief Model, Health Seeking Behavior, Perception

INTRODUCTION

Perception is a process of forming memories, thoughts, and learning processes that are influenced by the sensory system and turn them into sensory effects (Soegijono, 2019). A person's perception in choosing or carrying out healthy behavior is studied in a theory health *Belief Model* (HBM). HBM is healthy behavior and strives for one's health which is supported by six components, of which there are four

main components, namely the perception of seriousness (*perceived seriousness*), perceived vulnerability (*perceived susceptibility*), perceptions of benefits (*perceived benefits*), perceived barriers (*perceived barriers*) and two additional components consist of *cues to action* (influenced by cues) and self-efficacy (self-confidence). *Health Belief Model* can help to understand the factors that influence a person's perceptions, beliefs, and behavior



in planning the most effective treatment for maintaining or restoring health and disease prevention (Potter & Perry, 2012).

According to Sari's research (2020), among the community, self-medicating (self-medication) has experienced an increase in dealing with symptoms or health complaints that are considered mild. Then, based on Riskesdas data in 2013, the percentage of people who store medicines for self-medication and use traditional health services is discussed. According to the research results of Supadmi et al. (2013), 53.3% of respondents who self-medicate work as farmers. Farmers are at higher risk of experiencing injury and illness due to the relatively heavy working period. Farmers are often exposed to chemicals and pesticides for long periods, especially rubber farmers who work from early morning to late afternoon. One of the risks that can be caused by farmer work is an injury to bones and muscles (Lestari et al., 2021)

According to data from the Indonesian Ministry of Agriculture (2021), the area of rubber plantations in Indonesia is 3,671,302ha, with rubber production of approximately 3,630,268 tons. for rubber productivity of 1,161 kg/ha which is dominated by smallholder plantations by 85%, which has created employment for 2.5 million families with an average ownership area of 1.25 ha, while for the export volume of 2.99 million tons with a value of US \$ 5.10 billion. This rubber opportunity is auspicious. Where synthetic rubber raw materials are increasingly limited, the demand for natural rubber is increasing (2.5%/year). East Java ranks third in rubber plantations on the island of Java after West Java and Central Java, with an area of 17,562 Ha, a total production of 16,844 tons, and a workforce of 6,210 rubber farmers (Directorate General of Plantations, 2018). Meanwhile, according to data from the Central Bureau of Statistics for Jember Regency in 2018, Jember has an area of 7,437 hectares with a production of 7,525

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tons and a workforce of 2,628 rubber farmers. The rubber commodity in Jember ranks second after tobacco in export value, reaching US\$ 16,257,676.98.

According to the results of Salsabilla's research (2020) there were several cases of rubber farmers, namely the impact of accidental exposure to ammonia which caused the mouth to burn, as well as cases of disease due to latex and exposure to chemicals such as skin, digestive tract, and respiratory tract. hypertension. According to Salsabilla's research (2020), the diseases that often occur in rubber farmers are respiratory system diseases, with 378 cases, and problems in the muscular system, with 227 cases. Besides that, incident health problems can also occur in some farmers, such as tobacco farmers at risk of their respiratory system (Hariyanto et al., 2021).

According to the results of observations and interviews with the people of Suci Village, the Sentool Plantation, it was explained that rubber farmers are still often exposed to health problems related to respiratory problems and skin disorders. Rubber farmers also do not understand the importance of maintaining occupational health and safety, such as using complete PPE, because there is no routine counseling at the Sentool Plantation. Some of the cases experienced by rubber farmers in sentool plantations include respiratory problems such as asthma, mild dizziness, and flu. In treating the disease, several rubber farmers are still doing self-medication and seeking treatment from paramedics or the nearest health worker they trust.

METHOD

This analytic research design is a correlational analytic approach cross-sectional carried out at the Sentool DesaSuci plantation, Panti District, Jember Regency. The research started from June 1 to June 17, 2022, after obtaining ethical approval from the Faculty of Nursing Ethics Commission, University of Jember, with



Number 086/UN25.1.14/KEPK/2022. The principles of this research are respect for human dignity and dignity, confidentiality, fairness, and considering benefits and not harm.

The population in this study were all rubber farmers who worked on the Sentool Desa Suci plantation, Panti District, Jember Regency. The samples in this study using the Slovin formula obtained as many as 142 rubber farmers. The sampling method is simple *random* sampling, namely by taking samples from rubber farmer data obtained from the Sentool plantation office, then researchers randomly using random number tables. Next, the researcher records the numbers that have been selected and adjusts them to the data to be used as respondents.

Data is processed using statistical software and presented in tabular form. The data analysis in question is univariate and bivariate. The univariate analysis described the distribution of the independent variable, namely perceptions of health, and the dependent variable, namely treatment-seeking behavior. In this study, the type of categorical data included the characteristics of the respondents and the main components of HBM, namely perceived seriousness, perceived vulnerability, perceived benefits, perceived barriers, and treatment-seeking behavior of rubber farmers presented in the form of frequency and percentage. Bivariate analysis was used to express the analysis. to two variables, namely the dependent variable and the independent variable. In bivariate analysis, the test is used-spearman because all the dependent and independent variables are categorical data. Furthermore, the data will be collected and processed using statistical applications on the computer.

RESULTS

The research results in Table 1. show that the average age of rubber farmer respondents is 50.65 years, with a standard deviation of 11,497 years (95% CI: 48.74-52.56). The youngest is 23 years old, and the oldest is 75 years old; from the results, it can

be concluded that rubber farmers are around 48.74 to 52.56 years old. Most of the rubber farmers in the Sentool plantation were male, namely 73 (51.4%) respondents. Most rubber farmers have an elementary school education, with 51 (35.9%) respondents. Based on the length of work, 134 (94.4%) respondents had worked for more than five years.

Table 1. Characteristics of rubber farmer respondents in Sentool Plantation, Suci Village, Panti District, Jember Regency (n=142)

Variable	Mean	SD	Min-max	95% CI
Age	50,65	11,497	23-75	48,74-52,56

No	Variable	f	%
1.	Gender		
	Man	73	51,4
	Woman	69	48,6
2.	Level of education		
	No school	10	7
	Not completed in primary school	33	23,2
	Elementary School	51	35,9
	Junior High School	29	20,4
3.	Length of work		
	<5 years	8	5,6
	≥5 years	134	94,4

Based Table 2. shows that most of the rubber farmers in the Sentool plantation have a healthy perception of 72 respondents (50.7%).

Table 2. Distribution of respondents according to healthy perceptions of rubber farmers in Sentool Plantation, Suci Village, Panti District, Jember Regency (n=142)

No	Healthy Perception	Frequency	Percentage (%)
1.	Bad	70	49,3
2.	Good	72	50,7
Total		142	100

Based on Table 3. shows that most of the rubber farmers in the Sentool



plantation have a serious perception that is felt when experiencing health problems or symptoms of illness in the serious category, namely 78 respondents (54.9%).

Table 3. Distribution of respondents according to the perceived seriousness of rubber farmers inSentool Plantation, Suci Village, Panti District, Jember Regency (n=142)

No	perceived seriousness	Frequency	Percentage (%)
1.	Not serious	64	45,1
2.	Seriously	78	54,9
Total		142	100

Based on Table 4. shows that most of the rubber farmers in the Sentool plantation have a perception of vulnerability that is felt when experiencing health problems or symptoms of illness in the vulnerable category, namely 81 respondents (57%).

Table 4. The distribution of respondents according to the perceived vulnerability of rubber farmers inSentool Plantation, Suci Village, Panti District, Jember Regency (n=142)

No.	Perceived vulnerability	Frequency	Presentase (%)
1.	Not Vulnerable	61	43
2.	Prone to	81	57
Total		142	100

Based on Table 5. Most rubber farmers in the Sentool plantation perceive the benefits felt when experiencing health problems or symptoms of illness in the useful category, namely 78 respondents (54.9%).

Table 5. Distribution of Respondents according to the perceived benefits of rubber farmers inSentool Plantation, Suci Village, Panti District, Jember Regency (n=142)

No.	Perceived benefits	Frequency	Percentage (%)
1.	Useless	64	45,1
2.	Beneficial	78	54,9
Total		142	100

Based Table 6. shows that most of the rubber farmers in the Sentool plantation have a perception of obstacles that are felt when experiencing health problems or symptoms of illness in the hampered category, namely 77 respondents (54.9%).

Table 6. Distribution of Respondents According to the perception of obstacles felt by rubber farmers inSentool Plantation, Suci Village, Panti District, Jember Regency (n=142)

No.	Perceived obstacles	Frequency	Percentage (%)
1.	Unhindered	65	45,8
2.	Hampered	77	54,2
Total		142	100

Based Table 7. shows that most rubber farmers in the Sentool plantation have treatment-seeking behavior in the category of seeking treatment when experiencing symptoms of illness, namely 90 (63.4%) respondents.

Table 7. Distribution of Respondents According to treatment-seeking behavior of rubber farmers in Sentool Plantation, Suci Village, Panti District, Jember Regency (n=142)

No.	Treatment Seeking Behavior	Frequency	Percentage (%)
1.	Not Seeking Treatment	52	36,6
2.	Seeking Treatment	90	63,4
Total		142	100

Based on Table 8. it shows that most of the rubber farmers in the Sentool plantation seek treatment for the disease they have; at most, they go to the Community Health Center in Panti District as many as 50 people (35,2%), while the fewest were to the hospital as many as nine people (6,3%).

Table 8. Distribution of Respondents According to the choice of rubber farmers seeking first treatment in Sentool Plantation, Suci Village, Panti District, Jember Regency (n=142)

No.	Ways In The Search For Treatment	Frequency	Percentage (%)
1.	Just ignore it	23	16,2
2.	Alternative medicine	29	20,4
3.	Public health center	50	35,2
4.	Hospital	9	6,3
5.	Medicine Hall	0	0
6.	Clinic	31	21,8
Total		142	100

Based on Table 9. shows the value of r equals for 0.274, which means that the strength of the relationship between the variable perception of health and treatment-seeking behavior of rubber farmers is weak and has a positive relationship direction. The significance value of 0.001 is smaller than 0.05 ($p \text{ value} < \alpha$), meaning that H_a is accepted, i.e., there is a significant

relationship between HBM-Based Health Perceptions and Treatment-Seeking Behavior of Rubber Farmers in Sentool Plantation, Suci Village, Panti District, Jember Regency.

Table 9. Correlation between HBM-Based Healthy Perception and Treatment-Seeking Behavior in Rubber Farmers in Sentool Plantation, Suci Village, Panti District, Jember Regency (n= 142)

No	indicator	Treatment Seeking Behavior				Total	p	r		
		Not Looking		Looking for						
		n	%	n	%					
1	Seriousness	No seriously	31	48,4	32	51,6	64	100	0,001 **	0,274
		Seriously	21	26,9	57	73,1				
2	vulnerability	No Prone to	34	55,7	27	44,3	61	100		
		Prone to	18	22,2	63	77,8				
3	Beneficial	No benefit	28	43,8	36	56,2	64	100		
		Benefit	24	30,8	54	69,2				
4	Obstacle	No hampered	21	32,3	44	67,7	65	100		
		Hampered	32	40,3	90	63,4				

**Correlation is significant at the 0,01 level (2-tailed)

DISCUSSION

The characteristics of the respondents in this study revealed that the average age of the rubber farmer respondents was 50.65 years. The youngest is 23 years old, and the oldest is 75 years old; from the interval estimation results, it can be concluded that the age of rubber farmers is 48.74 to 52.56 years. This is to research conducted by Harahap and Yulianti (2018), which states that the age range of farmers is in the range of 25-67 years, and in general, farmers are at a productive age and have patterns of thinking, acting, and planning something good to carry out activities. According to Susanti's research (2016), around 80.95% of medicinal plant, farmers in three Karanganyar Districts who cultivate sembung are productive adults aged around 30-59 years. The remaining 19.05% are farmers over 59 years of age who fall into the unproductive category. Farmers aged 30-59 years have the physical



potential to support farming activities and are creative and quick to accept new technological innovations. Therefore, researchers assume that the productive age will be more able to work, absorb information more quickly, be wise in attitude, and act while working. In managing agricultural land of productive age, farmers need it because managing agricultural land requires sufficient physical energy.

Gender in the Sentool plantation is more than half, namely male, as many as 73 (51.4%) of respondents. According to Bappenas (2014), the majority of farmers in Indonesia are dominated by men. This is based on a percentage of 75% which states that the male sex dominates farmers in Indonesia. However, some women work as main farmers (Syahyuti, 2021). Female farmers involved in land management are thought to be farmers' wives or family members (Bakti et al., 2017). Based on this, the researchers assumed that more than half of the respondents were male because farming requires a stronger physique, but women do not deny working as farmers.

The education level of rubber farmers is low because ten rubber farmers did not go to school (7%), 33 (23.2%) did not finish elementary school, most rubber farmers had elementary school education, 51 (35.9%) respondents, 29 people from junior high school (20.4%) and 19 people with high school education (13.4%). This study's results indicate that most farmers have an elementary school education (SD), which is more than 50%. This is to Septiani's research (2019) which stated that of the 91 farmers, the majority had elementary/non-school education (63.7%), junior high/MTs (13.2%), high school/MAN (19.8%), and university. High (3.3%).

Based on the research results on rubber farmers' work length, 134 (94.4%) respondents have worked for more than five years. This is by research conducted by Dwiyanti., et al. (2018), which states that

the longer the working period, the more exposure the farmers will receive and accumulate in the farmer body.

Based on the results of research on healthy perceptions based on HBM, it can be seen that rubber farmers who have a bad perception of their health are 70 respondents, not much different from the perceptions of rubber farmers in the good category, namely 72 respondents. Bad perceptions are almost the same as respondents who have good perceptions. This is due to various causal factors, one of which is: demographic variables consisting of gender, age, and education. The research results by Rozali & Riskiafianti (2020) stated that perceptions of health and health behaviors used to improve health are associated with gender and age. Women are more likely to seek various information about the disease, causing women to tend to take action to seek appropriate treatment. According to Sinaga's research (2017), the last education of the average rubber farmer is almost the same, namely graduating from elementary school, so it does not have a large influence on treatment-seeking behavior.

Based on the study's results on perceived seriousness, it can be seen that when rubber farmers experience health problems or symptoms of illness, they are in the serious category, namely 78 respondents (54.9%). This study showed the same results as previous research, namely that the majority of respondents who felt serious about their illness was 54.8% (Trisnawan, 2015). The HBM theory developed by Rosentock (1982) states that the perception of the seriousness or severity of a disease can cause a person to have an attitude to seek treatment. Bakhtari's research (2012) predicts that someone will take action to protect themselves if they perceive that the condition they are experiencing is a serious problem. what is being felt, if the disease they consider is only a mild illness, then the rubber farmer prefers not to seek treatment at a health



service. While farmers' perceptions of serious and life-threatening illnesses, it is possible to take preventive action by seeking treatment.

Based on the research results on perceptions of vulnerability, it can be seen that when experiencing health problems or symptoms of illness, rubber farmers are in the vulnerable category, namely 81 respondents (57%). This study showed the same results as previous research; namely, previous research found that most respondents who felt vulnerable to the disease 43.7% of respondents (Trisnawan, 2015). According to Onoruoiza (2015), someone who feels they have a low risk of a disease they experience will tend not to do things that lead to health efforts. Meanwhile, someone who feels at high risk or vulnerable to health problems tends to make health efforts to either prevent or seek treatment. Where this is to the HBM theory, which states that when a person has a perception of being vulnerable to his condition, the chances of seeking treatment are greater. the researcher concluded that when a person's perceived vulnerability arises, it will directly impact work and the family economy. Because they think that their work can be a risk to their health. Therefore, it will have an impact on the treatment-seeking behavior of rubber farmers to check themselves if they feel symptoms of illness to a health service center, be it a medical center/health center/practicing doctor or buy their own medicine at the nearest shop and also a pharmacy to regain their health.

Based on the research results on perceived benefits, it can be seen that when rubber farmers experience health problems or symptoms of illness, they are in the useful category, namely 78 respondents (54.9%). In comparison, those who do not benefit are 64 respondents (45.1%). This study showed the same results as previous research, namely that most of the respondents felt it was useful, as much as 58.7% of respondents (Trisnawan, 2015).

self-benefit, not engaging in a treatment-seeking behavior effort. Although there are also rubber farmers who think that seeking treatment has its own healing benefits, many of them still choose not to take any treatment. Because they perceive that the pain they suffer will heal by itself. A person's tendency to perform a treatment action will be there when they feel the need (Notoatmodjo, 2010). Based on the discussion above, the researcher assumes that when the perception arises that taking medical action has benefits for them, in which many respondents feel that seeking treatment is beneficial in the healing process, but many of them think that by not taking treatment when symptoms of illness are experienced can heal by itself then the search for treatment is not done.

Based on the results of research on the perception of obstacles, it can be seen that when rubber farmers experience health problems or symptoms of illness, they are in the hampered category, namely 77 respondents (54.9%), and those who are not hampered are 65 respondents (45.8%). This study showed the same results as previous research; previous research found that most of the respondents felt that they were not hampered 43.7% of respondents (Trisnawan, 2015). Research conducted by Salsabilla (2020) stated that farmers had several obstacles. Even though a medical center has been provided where medical treatment facilities are free, there are not a few farmers who seek treatment elsewhere/buy it themselves. The reason was that they felt the distance was not close to home. Rubber farmers live in housing owned by PTPN Kebun Renteng, but some live in villages. On average, village farmers feel lazy when they want to go to the medical center because the road from their house to the medical center is through a muddy garden road. Apart from that, some reason is that if it's just the flu, they can buy the medicine themselves at the stall/pharmacy. This can identify that external barriers originating from health



services also affect treatment-seeking behavior. Based on the discussion above, the researcher assumes that the perception of obstacles is experienced by rubber farmers who have perceptions of the symptoms of the disease being felt but prefer not to seek treatment because the various kinds of obstacles that are felt are huge, so the possibility of taking preventive action will be even less. The formation of a good perception of obstacles is because rubber farmers have the knowledge and are aware of all the obstacles encountered when seeking treatment.

Based on the results of research on treatment-seeking behavior, it can be seen that rubber farmers who have no treatment-seeking behavior 52 respondents (36.6%) whereas 16.2% of farmers just let them go when they are sick and 20.4% of traditional medicine, while 90 rubber farmers (63.4%) sought treatment when they were sick, of which they were taken to puskesmas (35.2%), hospitals (6.3%), no medical clinics, and practicing doctors (21.8%). The factors that influence a person seeking treatment are age, gender, education, marital status, economic status, and the number of family members (Razak & Situmorang, 2019). A person's response to health problems varies, ranging from letting it go, self-medicating or with traditional medicines, going to traditional healers, and going to health services (Notoadmojo, 2012). The behavior of seeking treatment is an effort carried out by someone to find an appropriate drug when they feel they have a health problem (Febriani, 2019). A person's behavior comes from self-motivation; this motivation is useful for meeting their needs through the effort made. Motivation or encouragement, it will cause a person to carry out treatment-seeking behavior (Gaol, 2013). From this study, the researchers assumed that most farmers seek treatment at health services, although some rubber farmers do not seek treatment due to various obstacles, one of which is distance, time, and cost.

Based on the results of research on the relationship between health perception based on HBM and treatment-seeking behavior, it was found that there was a significant relationship between health perception and treatment-seeking behavior, with the strength of the relationship being weak and in the same direction as the results $p\text{ value} < \alpha$ ($p\text{-value} = 0.001$ and $\alpha = 0.05$) with an R-value of 0.274. The results above align with research conducted by Asmara & Indarjo (2021) that a significant relationship exists between perceptions and Covid-19 prevention behavior in elderly hypertensives. These results mean that respondents with poor perceptions are 2.159 times more likely to act up than those with good perceptions. Someone who has the perception that the disease is entering a severe stage, then that person will only take action to protect himself or seek treatment.

The positive relationship between the two variables can be seen from the high level of instrumental support in parameter number 1, namely the perception of the seriousness of the illness that can interfere with the daily activities of rubber farmers. In line with this, most respondents answered Strongly Agree and Agree. Various factors cause the weak strength of the relationship, one of which is the perception that the rubber farmers have is good, but to implement treatment-seeking behavior is still not fully maximized, in addition to other factors that can influence behavior, such as in Lawrence Green's theory which explains individual behavior factors, namely predisposing, enabling, and reinforcing factors (Notoatmodjo, 2014). Predisposing factors are determinants of a person's behavior, including knowledge, attitudes, and individual beliefs. Enabling factors include several things, such as support from the environment, availability of health facilities, medical clinics, training or health promotion for rubber farmers, and so on; reinforcing factors come from family support, and the active role of health



workers is also part of strengthening the formation of healthy behavior somebody

CONCLUSION

The results of the analysis of the relationship between healthy-based perceptions *Health Belief Model* with treatment-seeking behavior of rubber farmers in the Sentool Plantation, Suci Village, Panti District Jember Regency shows that the results of Ha are accepted, which means that there is a significant relationship between the two variables in the direction of a positive relationship with a weak closeness relationship.

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