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Analysis Of Knowledge Influence, Perception, Motivation, Information Searching And Alternative Evaluation Of Decision Making From *Kartu Jujur Sehati* Participants In The Using Of Healthcare In Bima

Nur Fitriah Hikmawati

Email: nurfitria.machie@gmail.com Student Master in Healthcare Management, Administration Study Program and Health Policy, Faculty of Public Health, Airlangga University, Surabaya, Indonesia

Abstract. The purpose of this research is to know and analyze the factors that influence the decision making card participant honest in sharing healthcare utilization in Bima City. The research was conducted in 5 villages with a sample of 388 people taken by simple random sampling. The research method used an observational analytic with cross sectional study design study. The data analysis using logistic regression analysis. The result of the research conclude that the knowledge, perception, motivation and evaluation of alternative have significant effect to the utilization of healthcare by *Kartu Jujur Sehati (KJS)* participants in Bima. Persuasive communication, promotion, strengthening commitment of local government and fulfillment the standard accreditation of Public Health Center as recommendation of effort to increase healthcare utilization by *KJS* participant in Kota Bima.

Keyword: Healthcare Utilization, KJS Service Policy, Decision Making

1. INTRODUCING

Health according to Law Number 36 Year 2009 states that health is a human right and one of the elements of welfare that must be realized. Both central and local governments are responsible for public healthcare insurance.¹

Kartu Jujur Sehati (KJS) is a policy which stipulated by the government of Bima with the aim to improve the health status of the people of Bima through the levy relief of basic healthcare.²

Based on the annual report of *KJS* service program, the coverage of outpatient visits is one of the indicators used to measure the performance of the *KJS* service program. In the last three years, 2014, 2015 and 2016, coverage of outpatient visits has increased, but when compared to the number of *KJS* service targets, the utilization of KJS services in Public Health Center is still low at 52.3% (2015) and 51.84% (2016). Thus it can be assumed that the low utilization of healthcare by *KJS* participants is caused by the behavior of *KJS* participants themselves.

Assael (1992) states that the analysis of consumer behavior is the action of a consumer

in obtaining a good or service that involves the process of decision making and analysis of factors that affect consumers of a goods or services. There are 3 (three) factors that influence consumers in making decisions, those are consumer factors, environmental influences and the application of marketing strategies.⁴

Kotler (2008) states that the process of decision-making by consumers in buying a product or service includes the introduction of needs, information search, alternative evaluation, purchasing decisions and aftersales behavior.⁵

Apriyanti's research (2015) shows that in utilizing labor facilities, not all patients seek information and perform alternative evaluations. Family habits, support from reference groups and perceptions of accessibility and promotion are factors that influence decision making to utilize labor facilities.⁶

2. RESEACRH METHOD

The type of this study is observational analytic where only do the data or information collection without giving intervention or treatment on population or sample. The

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research design is cross sectional study that is taking variable data is done in one time simultaneously and only once, so that between cause variable and result variable are indistinguishable. This research only collecting data or information without giving intervention or treatment on population or sample (Supriyanto & Djohan, 2011).⁷

This research was conducted in 5 urban villages in Bima. The population of the study were residents of Bima who did not have healthcare guarantee or BPJS Health member as many as 63,681 people. A sample size of 388 people with age criteria 18 years and over, can communicate well. The technique of sampling was simple random sampling.

Collection techniques and processing data collection conducted by interviews using questionnaires. Processing and analysis of research data are using SPSS in the form of univariate analysis, bivariate and multivriat.

3. RESEARCH RESULT

Univariate Analysis Demographic Characteristics

1st tabel Distribution of Demographic Characteristics of *Kartu Jujur Sehati* participants in Bima

| Demographic | Category | To | otal |
|----------------|------------|-----|------|
| Characteristic | | n | % |
| Gender | Male | 159 | 41,9 |
| | Female | 229 | 59,0 |
| Education | Low | 337 | 86,9 |
| | High | 51 | 13,1 |
| Occupation | Unemployed | 170 | 43,8 |
| | Employee | 218 | 56,2 |

Source: Primary Data, 2017

The 1st Table shows that the majority of respondents in this study are women (59.0%), with low education level (Elementary School, Junior High School, Senior High School) of 56.9% and has worked of 56.2%.

Knowledge

2nd Table Knowledge of *Kartu Jujur Sehati* participants about the Utilization of Healthcare In Bima

| Knowledge | Frequency | | | | |
|-----------|-----------|------|--|--|--|
| | n | % | | | |
| Not good | 76 | 19,6 | | | |
| Good | 312 | 80,4 | | | |

| 10141 | 366 | 100 | _ |
|-------|-----|-----|---|
| Total | 388 | 100 | |

Source: Primary Data, 2017

The 2nd Table shows that the majority of *Kartu Jujur Sehati* participants have a good knowledge about the utilization of healthcare that is equal to 80.4%.

Perception

3rd Table Distribution Perception of Kartu Jujur Sehati participants about Healthcare Utilization In Bima.

| Perception | Frequency | | | | |
|------------|-----------|------|--|--|--|
| | n | % | | | |
| Not good | 72 | 18,6 | | | |
| Good | 316 | 81,6 | | | |
| Total | 388 | 100 | | | |

Source: Primary Data, 2017

The 3rd Table shows that the majority of *Kartu Jujur Sehati* participants have good perception about the utilization of healthcare that is equal to 81.6%.

Motivation

4th Table Distribution Motivation of *Kartu Jujur Sehati* participants in Healthcare Utilization in Bima

| Motivation | Frequency | | |
|------------|-----------|-------|--|
| | n | % | |
| Not good | 92 | 23,7 | |
| Good | 296 | 76,3 | |
| Total | 388 | 100,0 | |

Source: Primary Data, 2017

The 4th Table shows that the majority of *Kartu Jujur Sehati* participants have high motivation in the utilization of healthcare that is 81.6%

Information Searching

5th Table Distribution of Information Searching of *Kartu Jujur Sehati* participants in Utilization Healthcare in Bima

| Search Information | Frequency | | | |
|--------------------|-----------|-------|--|--|
| _ | n | % | | |
| Less Search | 74 | 19,1 | | |
| Search | 314 | 80,9 | | |
| Total | 388 | 100,0 | | |

Source: Primary Data, 2017

The 5th Table shows that the majority of *Kartu Jujur Sehati* participants are honest to seek information in the utilization of healthcare that is 80.9%

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Alternative Evaluation

6th Table Distribution of Alternative Evaluation of *Kartu Jujur Sehati* participants in Healthcare Utilization in Bima

| Pengetahuan | Freq | uency |
|-------------|------|-------|
| | n | % |
| There is no | 76 | 38,4 |
| There is | 312 | 61,6 |
| Total | 388 | 100,0 |

Source: Primary Data, 2017

The 6th Table shows that the majority of *Kartu Jujur Sehati* participants are honest as having an alternative evaluation in the utilization of healthcare which is 61.6%

Healthcare Utilization By Kartu Jujur Sehati Participant

7th Table Distribution of *Kartu Jujur Sehati* participants in the Utilization of Healthcare in Bima 2017

| Healthcare Utilization | To | tal |
|------------------------|-----|-------|
| | n | % |
| Not utilizing | 166 | 42,8 |
| Utilize | 222 | 57,2 |
| Total | 388 | 100,0 |

Source: Primary Data, 2017

The 7th Table shows that 222 persons or 57.2% of *Kartu Jujur Sehati* participants are honest people who utilize healthcare.

Bivariate Analysis

8th Table Cross-tabulation Between Knowledge of *Kartu Jujur Sehati* participants Utilization of Healthcare in Bima 2017

| | Uti | Utilization of Healthcare | | | | Total | |
|-----------|-----|---------------------------|-----|------|-----|-------|--|
| Knowledge | | No | | Yes | 1 | Otai | |
| | n | % | n | % | n | % | |
| Not good | 69 | 90,8 | 7 | 9,2 | 76 | 100,0 | |
| Good | 97 | 31,3 | 215 | 68,9 | 312 | 100,0 | |

The 8th Table provide information that *Kartu Jujur Sehati* participants together with good knowledge tends to utilize healthcare that is equal to 68,9%. On the other hand, *Kartu*

Jujur Sehati participants with unfavorable knowledge tend not to utilize healthcare that is 90.8%.

9th Table Cross tab Between the Perception of *Kartu Jujur Sehati* participants With Healthcare Utilization in Bima 2017

| Domoontio | Н | ealthcare | Utiliza | tion | т | atal |
|-----------|-----|-----------|---------|------|---------|-------|
| Perceptio | No | | Yes | | - Total | |
| n | n | % | n | % | n | % |
| Not good | 64 | 88,9 | 8 | 11,1 | 72 | 100,0 |
| Good | 102 | 32,3 | 214 | 67,7 | 316 | 100,0 |

The 9th Table provide information that *Kartu Jujur Sehati* participants together with good perception tends to utilize healthcare that is equal to 67,7%. On the other hand, *Kartu Jujur Sehati* participants with unfavorable perception tend not to utilize healthcare that is equal to 88.9%

10th Table Cross tabulation Between Motivation *Kartu Jujur Sehati* participants With Utilization of Healthcare in Bima 2017

| Motivation | Uti | lization | | Total | | |
|------------|-----|----------|-----|-------|-----|-------|
| | No | | Yes | | | |
| | n | % | n | % | n | % |
| Low | 87 | 94,6 | 5 | 5,4 | 92 | 100,0 |
| High | 79 | 26,7 | 217 | 73,3 | 296 | 100,0 |

The 10th Table provide information that *Kartu Jujur Sehati* participants with high motivation tend to utilize healthcare that is equal to 73,3%. Conversely, *Kartu Jujur Sehati* participants with low motivation tend not to utilize healthcare that is equal to 94,6%.

11st Table Cross tab Between Information Searching of Kartu Jujur Sehati participants With Utilization of Healthcare in Bima 2017

| Informati | Utilization of Healthcare | | | | Т | Total . |
|-----------|---------------------------|------|-----|------|-----|---------|
| on | No Yes | | - | | | |
| Searching | n | % | n | % | n | % |
| Less | 43 | 58,1 | 31 | 41,9 | 74 | 100,0 |
| search | | | | | | |
| Search | 123 | 39,2 | 191 | 60,8 | 314 | 100,0 |

The 11st Table provide information that the *Kartu Jujur Sehati* participants who

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seeking the information tends to utilize healthcare that is equal to 60.8%. On the contrary, the candidates *Kartu Jujur Sehati* participants who are less seeking information tend not to utilize healthcare which is 58.1%.

12nd Table Cross Tabulation Between Alternative Evaluation *Kartu Jujur Sehati* participants With Utilization Of Healthcare in Bima 2017

| Alternative | Utilization of Healthcare | | | | Total | |
|-------------|---------------------------|--------|-----|------|-------|-------|
| Evaluation | | No Yes | | | | |
| | n | % | n | % | n | % |
| There is no | 141 | 94,6 | 8 | 5,4 | 149 | 100,0 |
| There is | 25 | 10.5 | 214 | 89.5 | 239 | 100.0 |

Th 12nd Table provide information that the *Kartu Jujur Sehati* participants conduct an alternative evaluation tend to utilize healthcare that amounted to 89.5%. Conversely, *Kartu Jujur Sehati* participants who did not conduct alternative evaluation tended not to utilize healthcare that is equal to 94,6%.

Multivariate Analysis

Influence of Knowledge, Perception, Motivation, Information Searching and Evaluation of Alternative *Kartu Jujur Sehati* participants to utilization of healthcare in Bima

13rd Table Influence test of Independent Variables to Research-Related Variables

| Depend | Independe | Signific | Exp | Descripti |
|----------|------------|----------|------|-----------|
| ent | nt | ant | (B) | on |
| Variabl | Variabel | Value | | |
| e | | | | |
| Utilizat | Knowledg | 0,002 | 0,05 | There's |
| ion of | e | | 8 | Influence |
| Healthc | | | | |
| are | Perception | 0,000 | 0,03 | There's |
| | | | 6 | Influence |
| | | | | |
| | Motivation | 0,000 | 0,04 | There's |
| | | | 2 | Influence |
| | | | | |
| | Search | 0,483 | 1,70 | No |
| | Informatio | | 1 | Effect |
| | n | | | |
| | | | | |
| | Alternativ | 0,000 | 0,00 | There's |
| | e | | 3 | Influence |
| | Evaluation | | | |
| | | | | |

The 13rd Table provides information that alternative knowledge, perceptions, motivation, and evaluation have a significant effect on the utilization of healthcare by *Kartu Jujur Sehati* participants, of which p <0.05. This means that the better the knowledge, perception, motivation and evaluation alternative then tend to increase healthcare utilization.

Information of searching has no effect on the utilization of healthcare. This implies that information retrieval is not a decisive factor for *Kartu Jujur Sehati* participants competitors in making decisions to utilize or not to utilize healthcare.

4. DISCUSSION

Knowledge

According Notoadmodjo (2014) knowledge is the result of processed human mind or a person against external conditions or stimulus or with other meanings is an intellectual aspect relating to what is known by a person or human.

The results of this study are in line with the research of Lukiono (2010) which states that poor pregnant women with high knowledge tend to utilize antenatal services in complete compared with pregnant women with low knowledge.8

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Marnah's research, et al. (2016) also suggests that the use of PKH participants is good because PKH participants already know about healthcare, the benefits of the services provided and are able to distinguish the types of medical and alternative healthcare.⁹

Perception

Perception will make consumers have an idea of a product or service before the purchase decision (Schiffman & Kanuk, 2010) .10

The results of this study are in line with Ranoor's (2013) study which states that there is a perception effect on purchasing decision as an effort to marketing obgyn space at Surabaya Islamic Hospital.11 Research conducted by Napirah, Rahman, & Tony, (2016) states that there is a relationship between perception community about health with utilization of healthcare in work area of Tambarana Public Health Center Poso North Coast District Poso. 12

Motivation

Kotler (2008) suggests that motivation is an incentive in a person that produces an action. This encouragement results from the desire that exists within a person arising from an unmet need.

Humans will make sacrifices to get something optimally. This is often referred to as the economic principle that humans have done since prehistoric times. Such a thing is a necessity faced by both primary and tertiary primary humans. Understanding consumer behavior and knowing customers through their tendencies or motivations is a task for producers as providers of goods or services (Simamora, 2008) .13

The result of this research is in line with Ranoor (2013) research which stated that there is influence of motivation because product, price, personal, process and product according to the mind significantly to maternity decision at Surabaya Islamic Hospital. Given the motivation in a person will show a behavior directed at a goal and to achieve the goal of satisfaction, maintain loyalty, efficiency and effectiveness and create a harmonious relationship between producers and consumers.

Information Searching

Information searching is a process performed by a consumer after the consumer views that the need can be met by buying or using a product. Information searching can be internal ie information stored in its memory and is external ie information coming from outside or that is in the consumer environment (Sangadji & Sopiah, 2013) .14

The results of this study are in line with research Apriyanti (2015) which states that there is no significant effect of information seeking on decision making in the utilization of labor facilities. This is caused by the majority of respondents did not conduct information in determining the birth facility to be utilized

Alternative Evaluation

Engel (1995) After consumers collect information about alternative answers to a recognizable need, consumers evaluate options and narrow down the choices on the desired alternatives. 15

The results of this study are not in line with research conducted by Apriyanti (2015) stating that there is no effect of alternative evaluation on the utilization of delivery facilities at the Public Health Centers. This is due to the fact that the majority of respondents tend not to conduct alternative evaluations in determining the utilization of labor facilities...

5. CONCLUSION

Based on the results of the analysis can be concluded that the factors that influence card participants honestly in making decisions to utilize healthcares in Kota Bima include knowledge, perception, motivation and alternative evaluation. This means that the better knowledge, perception, motivation, and evaluation of alternative *Kartu Jujur Sehati* participants will tend to increase the utilization of healthcare in Bima.

6. SUGGESTIONS

1. Health workers conduct persuasive communication to *Kartu Jujur Sehati* participants who do not use *Kartu Jujur Sehati* services when utilizing healthcare in Public Health Center by:

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- a. Create a good first impression with a neat, clean, confident and friendly appearance to *Kartu Jujur Sehati* participants.
- b. Be empathetic with complaints or needs submitted by *Kartu Jujur Sehati* participants and can be relied upon to provide solutions to the problems faced by *Kartu Jujur Sehati* participants.
- c. Building credibility by developing expertise or competence, trust and existence with the objectives of *Kartu Jujur Sehati* participants affected to utilize *Kartu Jujur Sehati* services in Public Health Center.
- 2. Health Office, Public Health Center and Cross Sector concerned in this case Sub District and Village make promotion effort about *Kartu Jujur Sehati* service by:
 - a. Provision of information media to facilitate access to information about *Kartu Jujur Sehati* services such as leaflets, banners, standing banners, advertisements in mass media and electronics and social media such as facebook or website.
 - Involving community leaders or religious leaders in the delivery of information about KJS services in majelis taklim activities, or village deliberation activity.
 - c. For the community actively seek information either through electronic media, mass media or visit healthcare facility, active in village deliberation activity or routine activity of Posyandu and participate to give support for relatives to take care of *Kartu Jujur Sehati* service in Public Health Center.

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