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**Perspective of health workers on tourism health problem in the working area of Nipah health center North Lombok District**

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**Abstract**---The West Nusa Tenggara Province (NTB) is designated as a Special Economic Zone (SEZ), where the direction of development is tourism. North Lombok is one of the districts with a developing tourist area. The tourist areas of North Lombok regency are mostly located in the working area of the Nipah Health Center. Tourism can have both positive and negative impacts. One of them is tourism health problem. This study aims to determine the perspective of health workers related to tourism health problems in the working area of the Nipah Health Center. Researchers used qualitative research design with a phenomenological approach. The researcher used purposive sampling technique with data collection method using observation and in-depth interviews with the five informants. The results of the study based on the perspective of health workers in the working area of the Nipah Health Center showed tourism health problems including sunburn, heat stroke (physical hazard), food poisoning (chemical hazard), insect bites, mosquitoes and food contamination by flies (biological hazard) and traffic accidents, drowning, impaled by marine animals such as sea urchins, jellyfish (mechanical hazard). Prevention and handling carried out include free health checks, counseling, formation of *Disaster Preparedness Team* (TAGANA) and coordination with related parties. The obstacles faced by health workers are language problems, barriers to prevention and services and weather conditions in the area. insect bites, mosquitoes and food contamination by flies...
(biological hazard) and traffic accidents, drowning, impaled by marine animals such as sea urchins, jellyfish (mechanical hazards). The causes of tourism health problems consist of jellyfish stings, accidents and diarrhea. Prevention and handling carried out include free health checks, counseling, formation of Disaster Preparedness Team (TAGANA) and coordination with related parties. The obstacles faced by health workers are language problems, barriers to prevention and services and weather conditions in the area. insect bites, mosquitoes and food contamination by flies (biological hazard) and traffic accidents, drowning, impaled by marine animals such as sea urchins, jellyfish (mechanical hazards). The causes of tourism health problems consist of jellyfish stings, accidents and diarrhea. Prevention and handling carried out include free health checks, counseling, formation of Disaster Preparedness Team (TAGANA) and coordination with related parties. The obstacles faced by health workers are language problems, barriers to prevention and services and weather conditions in the area. accidents and diarrhea. Prevention and handling carried out include free health checks, counseling, formation of Disaster Preparedness Team (TAGANA) and coordination with related parties. The obstacles faced by health workers are language problems, barriers to prevention and services and weather conditions in the area.

Keywords---perception, health workers, tourism health.

Introduction

Tourism is very important for a country. With tourism, a country or especially the local government where the tourism object is located, will get income from the income of each tourism object. Internationally, Indonesia is famous for its diverse tourism potential. Starting from natural attractions such as beaches, waterfalls, mountains, and cultural tourism which is still thick with cultural customs from various tribes and cultures that exist in Indonesia. NTB Province is included in the Special Economic Zone (SEZ). One of the tourist attraction areas that have enormous tourism potential is the island of Lombok. On this island, there are many very interesting, exotic, and fascinating tourist objects to visit and can be used as a tourist icon, especially for the Province of NTB.

Showing the diversity of tourism on the island of Lombok, the potential for tourism areas in the northern part of Lombok is currently starting to develop. One of the tourist attractions currently being developed and encouraged by the NTB Provincial Government is a tourist area in the working area of the Nipah Health Center. Most of the tourism that stands out in the working area of the Nipah Health Center is the beach. Considering the work area of Nipah Health Center oversees many well-known tourist areas in North Lombok Regency, so it is
necessary to identify tourism health problems in the working area of the Nipah Health Center. This is important to do so that it can provide assurance that the place still guarantees safety by not forgetting health problems that may occur.

![Diagram](image1.png)

**Image 1. The framework in this study uses the HL Blum theory**

**Method**

This study uses a qualitative research method with a phenomenological approach. Phenomenology aims to describe the meaning of life experiences experienced by several individuals, about certain concepts or phenomena by exploring the structure of human consciousness (Setyawati, 2017). Researchers want to know the meaning from the experience experienced by health workers related to tourism health problems in the working area of the Nipah Health Center.

The sampling technique used is purposive sampling, which is taking informants with a purpose. (Creswell, 2015). The informants who became the research subjects were health workers who worked in the working area of the Nipah Health Center (Widiyanto, 2018). Researchers are the research instruments, intended as interviewers and observers. As an interviewer, the researcher will interview health workers who work in the working area of the Nipah Health Center. The steps are taken by researchers are analyzing the results of this study by 1) reducing the data, 2) displaying the data, 3) verifying and concluding the data.

**Results and Discussion**

Based on the results of interviews obtained 4 perspectives from health workers in this study.

**Perspective of health workers on tourism health.**

Hazard as potential danger is anything that has the potential to cause a bad impact (Wirawan et al., 2017). Various types of hazards can be found in tourism areas with various activities and characteristics. Most of the tourist areas in the working area of the Nipah Health Center are beaches. The hazards that can arise
in coastal tourism areas are: physical, chemical, biological and mechanical hazards (Widiyanto, 2022).

Regarding mechanical hazards in coastal tourism areas, there are many risks that can occur related to the lack of safe access to the beach. The coastal area of the Nipah Health Center working area has road access to the beach which can be said to be good because the road is paved so that it can be passed easily. This was explained by several informants, namely:

"Most of the KLL (traffic accidents) because they don’t know the terrain, because they rent a motorbike or car, Senggigi road is hilly because there are stray dogs so they have accidents due to themselves."
(TU Informant, 32 Years Old)

In the research conducted by Wirawan et al. (2020) The most common trauma mechanism when traveling is falls (53%), traffic accidents (30%), water sports accidents (6%) and others. Accidents do not only occur on the road but can also occur while swimming, such as drowning and being swept away by coastal currents, which are included in physical hazards. The following is a quote from an informant:

"Then local tourists usually drown because local tourists are less good at swimming than foreign tourists, so it’s easy to drown."
(Informant D, 29 years old)

Physical hazards in other coastal tourist areas can be caused by high temperatures (hot sun), being bitten or punctured by marine animals and noise. Health problems that may occur due to temperature are sunburn, heat stroke and others. Tourist activities such as sunbathing, playing on the beach during the day increase the risk of this health problem. Many tourists are also impaled by sea animals such as sea urchins, here are excerpts from the interview:

"Then sea animals like sea urchins or jellyfish, and also stone fish, which if they touch their spines or skin, it feels like a lot of pain that radiates throughout the body."
(Informant D, 29 years old)

Biological hazards can also be found in coastal tourist areas such as insect bites, mosquitoes and food contamination by flies. Risks related to food hygiene served by restaurants or stalls around the beach. This can result in health, namely the emergence of diarrhea. Here’s an excerpt of the interview:

“Usually foreign tourists, usually they don’t know the condition of our traditional food, usually at the hotel they can have breakfast, lunch and dinner, buy food outside, so sometimes they taste our traditional food. If he doesn’t have gastritis, he usually gets diarrhea.”
(TU Informant, 32 Years Old)

This is reinforced by the research of Hartjes et al. (2009) who said that 70% of the health problems that most often occur in travel data are infectious diseases,
especially infections of the gastrointestinal tract. It is also said in the research of Wirawan et al. (2020)

Chemical hazards can also occur in coastal tourist areas, because most restaurants around the beach sell alcoholic beverages.

“Poisoning is also related to normal food. From guests, he usually gets food poisoning too, a lot, then he has diarrhea, he has diarrhea and is hot with him mostly because he was drunk at night.”
(Informant P2, 31 Years Old)

**Perspective of health workers on the causes of tourism health problems**

There are several causes of tourism health problems in the working area of the Nipah Health Center, including:

**Jellyfish sting**

One of the disease cases reported at the health service at the Nipah Health Center was jellyfish stings. Although most of the jellyfish are harmless, some species can cause local as well as systemic reactions, controlling systemic reactions, including shock. In severe cases, the most important step is to stabilize and maintain vital functions. Here’s an excerpt of the interview:

“Tourists usually get disease problems from sea animals such as sea urchins or jellyfish, and also from stone fish, which if they touch their spines or their skin, it feels like a very painful feeling that radiates throughout the body.”
(Informant D, 29 Year)

Jellyfish stings are an environmental health problem that appears to have an impact, especially on very sensitive groups, namely children. The latest estimates point to 150 million jellyfish stings worldwide each year with up to several hundred daily reports in tourist areas (Cegolon et al., 2013). Jellyfish stings are one of the most common reasons for seeking medical help at health services around coastal tourist areas.

**Accident**

Another health problem experienced by tourists is an accident while traveling around the working area of the Nipah Health Center. Geographically, the route around the working area of the Nipah Health Center is surrounded by asphalt roads that tend to wind, climbs, and descends which are quite steep because they are surrounded by ravines that lead to the sea. Some tourist patients who come to the Nipah Health Center generally come with reports of accidents on land and accidents at sea. This is reported in the following excerpts from the informant’s questions:

“The most accident occur is from the accident because it is our field. In the past, in 2017 during Chinese New Year, tourists wanted to go to Gili Trawangan, the first
bus had arrived at Teluk Nara, the boat had already crossed to Gili, the second bus had just climbed up because he was too late to brake and couldn't get up.”

(TU Informant, 32 Years)

The types of accidents reported in the interview are land accidents resulting from travel, transportation, and human error. In addition, accidents in water areas, namely drowning, are one of the accidents reported by tourists visiting the Nipah Health Center. Road accidents are proving to be one of the leading sources of injury and death worldwide. It is necessary to identify hazardous locations to prevent traffic accidents. Recognition of ‘at risk’ or ‘safety black zones’ locations is the first step of a comprehensive ‘traffic safety’ analysis (Anderson, 2009; Ayati & Abbasi, 2011; Bakhtiyari et al., 2015; Chung & Song, 2018; Jamal et al., 2019).

Another accident that occurred was reports of tourists drowning on the beach. Drowning is the process of respiratory distress due to immersion or immersion in liquids and is considered a major global health problem (Idris et al., 2017). The drowning burden is particularly high in low-income countries and among men, children and young people (Franklin et al., 2020).

(Willcox-Pidgeon et al., 2021).

Diarrhea

One of the diseases experienced by foreign tourists in tropical areas such as Asia is diarrhea. This is also a disease that tends to be reported to tourists in the working area of the Nipah Health Center. This problem can come from the sanitation hygiene of food and beverage traders and the level of tolerance that varies according to the characteristics of tourists. Here’s an excerpt of the interview:

"Diarrhea is usually because of the food. Usually, it's because ee... had communication with Caucasians, usually there was a food factor. When you come here, it's an adaptation of the food. Then if you have diarrhea, then ee.. if you have a fever, it's usually the weather. Because he said, eh.. adapting to the same weather is already a food factor."

(Informant P2, 31 Year)

Diarrhea as one of the cases reported in interviews related to health problems in the working area of the Nipah Health Center was reported to come from the sanitation hygiene of food and beverage traders and the level of tolerance that varies according to the characteristics of tourists. According to several studies, the incidence of diarrhea varies according to the purpose of travel and the country of origin of the traveler, duration of exposure, and season of travel (Ashkenazi et al., 2016; Steffen et al., 2015; Stoney et al., 2017). Incidence is highest at destinations where hygiene and sanitation practices are poor, especially in areas with warmer climates (Al-Abri et al., 2005).

Traveler's diarrhea is usually acquired by faecal-oral transmission of the causative pathogen, usually through ingestion of food or water contaminated with faeces. Occasionally, traveler’s diarrhea can be acquired by handling contaminated objects or from accidentally ingesting contaminated water from swimming pools and other recreational water sources. (Leggat & Goldsmid, 2004).
Insects in particular flies are important vectors for several foodborne enteric pathogens. It should be noted that children are at a higher risk due to their natural curiosity and tendency to touch objects indiscriminately and put objects in their mouths. In addition, they are less selective in the types and sources of food they consume, less likely to receive medical advice before traveling, and less likely to always adhere to recommended hygiene measures. (Ashkenazi et al., 2016; Leung et al., 2006; Steffen et al., 2015).

The perspective of health workers on the prevention and management of tourism health problems

Traveling contributes various risks and impacts, both detrimental and beneficial for various parties. With various risks and impacts that can be caused, prevention and treatment are needed. Health workers have a role in educating the public regarding the prevention of infectious and non-communicable diseases as well as maintaining the environment and the community to live clean and healthy behaviors, obey and discipline health protocols.

Prevention

In preventing health problems in the working area of the Health Center, health workers have made preventive efforts to tourists visiting tourist areas by conducting free checks and traveling to hotels to conduct counseling and to public places (TTU) as well as collaborating with the hotel in taking precautions. Here’s an excerpt of the interview:

"There is. We have Health Center in our area, but the problem is that if it's a tourist, the game isn't only in one location, it could be that he went to Central Lombok or has been to the area of other tourist attractions. He happened to be passing by in front of here to go to Terawangan. yesterday was treated today. For our own region, we have carried out activities for counseling at TTU, including health promotion activities for clean and healthy living behavior.
(TU informant, 32Year)

In addition, the Puskesmas has also attempted to coordinate with villages and the Regional Disaster Management Agency (BPBD) and the Indonesian Red Cross (PMI) to form a Disaster Preparedness Team (TAGANA) so that they can provide first aid to tourists if they experience unexpected events while traveling. Here are the results of the interview:

"Temporary We are only educating them to take them to PUSKESMAS and we are trying to coordinate with the village to conduct training on first aid preparedness and coordination with BPBD and Redcross because we want to try to form a kind of TAGANA team, this already exists, only the cadres have been evaluated yesterday. In the same village they have not targeted these pelapak because usually the traders who provide first aid in the stalls are usually the same as Kadus or RT because if there is such a condition, usually the first contact is Pak Kadus or Pak RT. Yesterday we asked the village, the village is planning for 2022 or 2021 because most of the funds are for handling Covid. Yesterday it was planned, hopefully in 2022 all those in this tourist area can be trained."
In addition to maintain the prevention efforts for tourists who are visiting tourist objects, the health center also coordinated with Tourist Awareness Group (POKDARWIS) in the division of tasks in identifying vulnerable areas and providing education in public places such as throwing garbage in its place and providing hand washing facilities. Here’s the quote:

“That’s not yet, actually POKDARWIS already has their respective duties, for example identifying vulnerable areas, including educating them to dispose of waste in its place and providing hand washing facilities. Kalok, who is from the Health Center itself, we can’t provide counseling to tourist attractions, because these tourists live in hotels and usually live in the Senggigi area which incidentally is not our work area, so if we want to educate there, it’s not across Health Center anymore but across districts because the area of West Lombok, In the past, there was counseling but it was not specific to tourists because on Gili Trawangan they usually gather on the beach, so around the Gilis using speakers, either local tourists or foreign tourists who are related to Covid, we educate ourselves to wear masks of all kinds, including putting up signs. If banner board on the Gilis is our work area, so we come down from the pier, there is an inscription on it that it is mandatory for you to wear a mask, wash your hands like that. But if it’s in certain other places, for example here it’s prone to sinking, it’s not because we have to cooperate with many parties, there are already directions to it but not yet, we first form the TAGANA one”. including putting up the banners in our working area on the Gilis, so when we got off the pier, it was already written there that it was mandatory for you to wear a mask, wash your hands like that. But if it’s in certain other places, for example here that is prone to drowning, it is not yet because we have to cooperate with many parties, indeed there are already directions to it but not yet, we first form the TAGANA one”. including putting up the banners in our working area on the Gilis, so when we got off the pier, it was already written there that it was mandatory for you to wear a mask, wash your hands like that. But if it’s in certain other places, for example here it’s prone to sinking, it’s not because we have to cooperate with many parties, there are already directions to it but not yet, we first form the TAGANA one”.

(TU informant, 32 Year)

**Handling**

In handling tourists visiting the working area of the Nipah Health Center, the informant said that if an accident or drowning occurred, the local chief usually coordinated directly with the village ambulance was available, while the health workers at the clinic only carried out curative treatment with direct treatment to tourists who came for treatment. Here’s an excerpt of the interview:

“Well, at least if there is an accident or there is usually a drowning or something, it doesn’t pick up immediately, so there is coordination with us, because in the village now there is also a village ambulance”.

(Informant D, 29 Year)
In terms of handling waste in the working area of the Nipah Health Center, the perspective of health workers says that medical waste has been managed properly, it’s just that non-medical waste is not optimally managed. The community health center has coordinated with the environmental service but there is no agreement yet. Here’s an excerpt of the interview:

“Medical waste is good, it already has a warehouse for destruction, only non-medical waste which in our opinion is not optimal in managing both islands and land. Yesterday there was socialization with environmental sectors but their funds were small, so there was no transportation because there were no cars. Later, you can see in the field what non-medical waste is. There is no landfills, the environmental sectors staff is not optimal in transporting waste, here asking for a temporary TP location but it is not transported for weeks. Discussion with environmental sectors said it was health worker’s duties but it couldn’t be done”
(TU informant, 32Year)

**Perspective of health workers on barriers to tourism health services**

Barriers are conditions that can cause the implementation of an activity to be disrupted and not carried out properly. Obstacles tend to be negative, namely slowing down the pace of something someone is doing. In carrying out activities, there are often several things that hinder the achievement of goals, both obstacles in program implementation and in terms of development.

The obstacles faced by health workers in providing services in preventing and dealing with tourism health problems that arise in the working area of the Nipah Health Center are:

**Language Barriers**

Services at the Nipah Health Center experience language barriers, especially patients who are foreign tourists. This causes the service to be not optimal. Here’s an excerpt of the interview:

“Barriers from human resources are still lacking, if tourists from within can connect but if from outside, language barriers or communication with foreign tourists. Yes, but it’s still lacking because it’s back to HR/Language communication”.
(KP informant, 53Year)

Language has great importance in dialogue and understanding between tourists and tourist facilities. This is in line with research conducted by (Whittaker and Chee, 2015) which states that the language barrier is still one of the obstacles why health workers in Indonesia cannot work well because they do not apply English from an early age as the language of delivery of health services in Indonesia. Barriers to Prevention Efforts.

In addition to language barriers, the Nipah Health Center also often faces obstacles in preventing efforts to provide counseling to the community. This is due to time constraints and lack of responsiveness from the community, visitors and the hotel in the working area of the Nipah Health Center. This makes health
promotion not achieved in accordance with the expected target, the following is an excerpt from the informant’s statement:

“That first one community activity, because the people here make their livelihood based on the tourism business, so even if there is training for ...(voice is not heard clearly) they are busy with their own wares because indeed, most of their livelihoods here are in tourism area whether he is in the rental car section, whether he is the guide or he is in the consumption section, meaning selling and selling more rice stalls, so gathering people and asking to be volunteers is a bit difficult.”
(TU Informant, 32 Years)

This is in line with research conducted by Ulumiah, et al (2013) which states that high mobility and dense community activities are one of the challenges that are often faced by health providers or facilitators. This is because many people are more concerned with doing work that generates money for their daily life rather than participating in empowerment activities carried out by health workers or other agencies.

Weather Barriers

The Nipah Health Center faces obstacles caused by the weather in its working area. Extreme weather is an obstacle because there are no patrols in the field so that if there is an accident, the health center will not noticed if there is no report from the community. Here’s an excerpt of the interview:

“Weather and nature, for example, there are extreme weather events, many landslides. So those are some obstacles, maybe community cooperation, sometimes when it rains, the community doesn’t come down, so we don’t know the conditions on the ground, for example, there is an accident when it rains, we don’t know, There is an idea that it’s best if there are reports from people around.”

(Informant D, 29 Year)

Extreme weather events can cause further disasters which sometimes result in greater losses. This is in accordance with the theory of the Asian Disaster Reduction Center (ADRC) which states that a disaster is a serious disturbance to society that can cause widespread and felt losses to the community, various materials and the (natural) environment where the impact exceeds human ability to cope with natural resources. existing resources (Khambali, 2017).

Conclusion

Based on the results of the study, the following conclusions can be drawn:

1. The perspective of health workers on tourism health problems in the working area of the Nipah Health Center is mostly in the form of beaches. The hazards that can arise in coastal tourism areas are: physical hazards (sunburn, heat stroke), chemical (food poisoning), biological (insect bites, mosquitoes and food contamination by flies) and mechanical (traffic
accidents, drowning, stabbed by marine animals). such as sea urchins, jellyfish).

2. The perspective of health workers on the causes of tourism health problems, namely jellyfish stings, accidents, and diarrhea caused by the sanitation hygiene of food and beverage traders and the level of tolerance that varies according to the characteristics of tourists.

3. The perspective of health workers on the prevention and management of tourism health problems. In carrying out prevention, health workers have made preventive efforts to tourists visiting tourist areas by conducting free checks and traveling to hotels to conduct counseling and to public facilities as well as cooperating with the hotel.

4. The perspective of health workers on service barriers from the research results obtained there are language barriers, barriers to prevention efforts for community empowerment and extreme weather barriers.

References


