Phenomenology of Health Service Evaluation at the Indonesian National Police in Responding to the Challenges of Sustainable Development Goals (SDGs) 2030

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Abstract---Health problems in the 21st century are generally caused by non-communicable diseases (NCDs) such as heart disease, hypertension, cancer, diabetes mellitus and obesity that hit many countries, especially in developing economies. This also happened to Civil Servants at the National Police (CSNP) so that it resulted in a decrease in the number of personnel in the Indonesian National Police (Polri) agencies who died during their service (early death) and had implications for the ideal number of future Police. The purpose of this study is to elaborate and evaluate the health service program for CSNP in order to answer the challenges of developing superior human resources in the Polri environment. The method used is to conduct an exploratory analysis of the annual report data of Polri personnel, followed by a qualitative study (phenomenological method) to obtain information about the lifestyle of CSNP who died during their service due to NCDS. The results showed that CSNP who experienced premature death in the 2015 to 2020 range reached 977 to 1700 people every year, and the trend continued to increase. From these premature deaths, 75% died from NCDs due to neglect of health, lack of
knowledge to create a healthy life, and lack of self-efficacy to carry out activities that can improve health. This shows that promotive health services are important to be a priority program in the National Police Institution.

**Keywords**—challenges, health service, healthy life, phenomenology, sustainable development goals (SDGs).

**Introduction**

The trend towards non-communicable diseases (NCDs) such as heart disease, cancer, diabetes mellitus, has become a global concern based on reports from credible world institutions such as WHO (World Health Organization, 2014). NCDs is a new challenge, especially for countries with lower-middle economies (Remais et al., 2013). Oleg Chestnov, Assistant Director-General of Noncommunicable Disease and Mental Health at the World Health Organization, said that human suffering and economic losses in the socio-economic structure of the country have been caused by an increase in NCDs that exceeds the capacity of the state in overcoming it (World Health Organization, 2014). In addition, 80% of NCDs in Indonesia is caused by cardiovascular disease and diabetes mellitus (Kesehatan, 2017).

In the era of the COVID-19 pandemic, NCDs became a factor that aggravated the risk of human death with broad implications. Several experts, such as Stefano M. Berttozi, reviewed the exposure to covid for NCDs sufferers, that 22% of the world’s population is at risk of being exposed to COVID-19 with severe conditions for people with NCDs (Gutierrez & Bertozzi, 2020). Muniyappa and Gubbi said that the corona virus disease will be easily infected for people who have a background affected by diabetes mellitus (Muniyappa & Gubbi, 2020). Obesity is also one of the NCDs that is suspected as a major risk factor for comorbid COVID-19 (Stefan et al., 2020), as also revealed by Kass and Dugal that obesity can have a severe impact on young people who are obese (Kass et al., 2020). However, currently heart disease is the highest prevalence of NCDS (Maharani et al., 2019). On the one hand, this description raises new concerns about NCDs related to the ongoing COVID-19 condition.

The current concentration of world health on NCDs has hit the majority of the world’s population and has an impact on premature death, so WHO has agreed to achieve Universal Health Coverage (UHC) in 2014 (World Health Organization, 2014), namely a health system that ensures that every citizen in the population has equitable access to quality promotive, preventive, curative and rehabilitative health services at affordable costs. UHC in the long term aims to improve the health status of the wider community. Improving public health is one of the targets for achieving the Sustainable Development Goals (SDGs) 2030 (Niessen et al., 2018).

Indonesia as part of the world community has incorporated the UHC global program through Indonesia’s human development policy to realize superior human resources, without exception the National Police institution which has a
role as protector, protector, and public servant as well as law enforcement (Undang-undang Kepolisian Negara Republik Indonesia, 2002), and is expected to have the same physical and spiritual health. Therefore, to build the health of civil servants in the National Police (CSNP), the Government of Indonesia mandates the CSNP health service program through government regulations (Pemerintah RI, 2010), whose operations are regulated through the National Police Chief Regulation Number 14 of 2017 concerning Health Services within the Indonesian National Police. There are four (4) forms of health services: Promotive, Preventive, Curative and Rehabilitation (Kapolri, 2017), with the aim of realizing a better CSNP health status.

The form of government institutional support for the health of the Indonesian National Police, namely the allocation of budget for program activities, facilities in the form of infrastructure and human resources to provide CSNP health services. In some policies, government support is adequate, only from the analysis of field data, the incidence of CSNP deaths for the last 6 years (2015-2020) is relatively high when compared to the annual depreciation rate of CSNP, which is around 10-15% with an upward trend (Figure 1). with the largest causes of death are NCDs: heart, stroke, diabetes, kidney failure, cancer, tumors, stomach, lymph nodes, complications, brain, asthma, appendicitis, bile reaching 78% (Figure 2), not including the death rate due to suicide self (Sonta, 2016).

The high rate of premature death from CSNP with the main cause of NCDs shows the similarity in the pattern of global events that is of concern to WHO. This fact also shows that the impact of CSNP health management through health service programs that have been mandated by the Government has not provided optimal results. Therefore, an in-depth evaluation is needed to see how the promotive health service program is able to bridge the achievement of the SDGs goals for ideal police resources. Furthermore, this study aims to carry out elaboration and evaluation in order to find critical hazard factors that need to be improved in order to achieve the objectives of the Health Service Program, namely increasing the health status of CSNP which is getting better.

Figure 1. Total depreciation of CSNP due to retirement, death and dismissal
Figure 1 indirectly shows that the number of depreciations for members of the National Police tends to increase every year due to many things, such as: death, being fired, and retiring at their own request. Especially for the trend of the death of the police, the figure has actually increased in percentage terms from 2015 - 2020. This shows that it is important to evaluate why there is an upward trend in the police environment. Does the death of CSNP have implications for the shrinkage of the number which has an impact on the lack of health management, or because there are other factors. Even CSNP deaths can be seen in graph no. 2 below. Further details regarding the causes of the shrinking of CSNP due to the death factor will be described in the discussion in this article.

![Graph: Percentage of causes of death in CSNP](image)

**Figure 2. Percentage of causes of death in CSNP**

Many studies on NCDs have been carried out, including predicting the prevalence of cardiovascular disease in Indonesia (Maharani et al., 2019) which predicts the distribution of NCDs areas in Indonesia. In addition, research evaluation of NCDs risk factor surveillance (Rahajeng & Wahidin, 2020) revealed that the surveillance
evaluation method for NCDs risk factors is only sensitive to explain the time of its distribution, not sensitive to explaining the characteristics of people, so it has only been used for disease epidemic analysis (Kroll et al., 2015). Special studies related to NCDs with surveillance methods have also been carried out with a historical and origin approach (Declich & Carter, 1994), which conducts tracking for epidemics by studying patterns of spread, patient handling measures, control. However, researchers have not found a phenomenological evaluation study of NCDs in the National Police Institution. The main problem is how does the National Police evaluate members who die during their service with a background of NCDs?

Based on the description above, this research is relevant and important because it seeks to use a phenomenological approach to the evaluation of Polri’s health services in responding to the challenges of SDGs 2030. In addition, this research is further useful in contributing to identifying problems to be used as a basis for formulating health service policies in the National Police Institution.

**Materials and Method**

To elaborate and evaluate in depth related to NCDs, qualitative research was carried out (Palmer & Bolderston, 2006), with the phenomenological method (Groenewald, 2004), namely by conducting semi-structured in-depth interviews with resource persons and informants. Identifying the chronology of NCDs occurrence in CSNP which has an impact on premature death, researchers set CSNP who died due to NCDs as the target phenomenon to be studied from aspects of habits/behavior that have implications for health conditions, insight/knowledge related to health maintenance and motivation/self-efficacy. The theory of health that was very early put forward by H.L Blum (Blum & Knollmueller, 1975), states that individual health is influenced by genetic, health care, environmental and behavioral factors. Referring to the nine (9) who targets in suppressing NCDs (World Health Organization, 2014) and research by Efrida Warganegara and Nida Nabila Nur (Warganegara & Nur, 2016). There are behavioral factors related to health, namely alcohol consumption, smoking, diet and lack of activity. Based on this concept, it is enriched with psychological knowledge that discusses the realm of the individual as Benjamin S. Bloom (Magdalena et al., 2020) the researcher made a semi-structured interview guide to explore behavior by making 3 sub categories which were coded as affective, cognitive and conative aspects for the behavioral aspects of CSNP who died due to NCDs.

The parties who were used as resource persons/informants in this study were people who were closely acquainted with CSNP who died due to NCDs and knew their habits and matters related to their personality, such as their wives, children or co-workers. The interview method was carried out using the aloe-anamnnesis method, which was retrospective. Researchers took samples from the East Java Regional Police, Central Java Regional Police and West Java Regional Police. The results of the interviews are made verbatim and simultaneous coding is done, which combines directive coding and conventional coding. The analysis was then carried out using Atllas.ti software version 8.4.26.
Results and Discussion

Based on the results of data processing with exploratory data analysis on the National Police Annual Report from 2015 to 2020 using the Excel Program, it shows that the amount of CSNP shrinkage is caused by 4 variables, namely: a). Police members who have reached the retirement age limit, b). Police civil servant who have reached the retirement age limit, c Members of Police/Police civil servant who apply for early retirement at their own request, d). CSNP who died during service, and e). Dismissed (fired). Based on these data, it was found that CSNP deaths during the service period were relatively large compared to the number of losses per year, which reached 977-1700 people, which when presented was 10% - 15%. The existence of a trend that continues to rise every year is a negative signal that needs to be observed and evaluated.

Based on a study of several informants, it can be seen that in general, non-communicable diseases are difficult to cure, and have implications for death. Therefore, the best effort that can be done is to prevent the occurrence of NCDs by monitoring risk factors such as smoking, eating less vegetables and fruits, lack of physical activity/exercise, alcohol consumption, and stress. CSNP as one of the elements of the National Police is important to be given education about the risk of non-communicable diseases so that the existence of a promotive health evaluation at the National Police institution can be one of the efforts to suppress the shrinkage of CSNP who died due to NCDs.

Further analysis by query using excel obtained details of categories related to the incidence of CSNP death during service, caused by several factors, especially due to suffering from NCDS including: heart, stroke, diabetes, kidney failure, cancer, tumors, stomach, lymph nodes, complications, brain, asthma, appendicitis, bile. The various types of NCDs, on the one hand, have become a serious concern for the Indonesian National Police in order to maintain a healthy and balanced diet and lifestyle that has become a habit, but because the control from superiors tends to have no blueprint, it is possible for NCDs to occur in the National Police, as illustrated in Figure 2. Based on the processing of verbatim data from the results of qualitative research using qualitative phenomenological methods, there is a picture of member of INP and Public Service in INP since 2015 – 2020 who died caused of non-communicable diseases having a history of unhealthy lifestyle including:

- Affective aspect: indifferent attitude towards the condition of the illness, for example, already knows that he has heart disease, he doesn't get enough rest (still likes to stay up late). They also ignore the risk factors that must be avoided, for example, they already know that gout is still eating offal, including ignoring the rules of treatment that must be followed, for example, they don't care too much about taking medication;
- In the cognitive aspect, it turns out that many CSNPs do not know about everyday things that have an impact on health, for example a healthy diet, how to process healthy food, the right types of food, the right diet, appropriate activities for individuals with chronic NCDs status. For example, there is a CSNP who died because of NCDs, the person concerned is a person who is diligent in exercising, but when exercising, the provision
of energy-boosting drinks is one bottle of mineral water. This was routinely
carried out for a long time until his kidney health was disrupted and
continued to deteriorate until it became a complicated disease leading to
premature death;
• Conative Aspect: from interviews with informants, it is shown that many
CSNPs lack the will (self-efficacy) to carry out activities that can balance
caloric intake and self-control to consume less healthy food so that it has an
impact on the emergence of various metabolic diseases such as obesity,
cholesterol and eventually lead to heart problems which also lead to
premature death;
• Environment: describes the burden that comes from the environment
outside of CSNP, namely some from office work, some from the family
environment. The environment is a further consideration for CSNP because
it contributes significantly to the need for control and a balanced work
pattern, and with the police managerial support related to a comprehensive
evaluation of the health aspects of the police;
• There is a relationship of influence between aspects, that the environmental
and cognitive aspects have an affective effect. So, it can be interpreted that
the attitude of CSNP is formed from the interaction of the environment and
the level of knowledge. Furthermore, cognitive and affective and the
environment in general are the sources of conative occurrence. When
interpreted, conative/willingness to do things related to realizing a healthy
life is influenced by affective factors (attitudes) based on knowledge, as well
as forms of environmental support.

The results of the behavioral analysis indicate the importance of improving
promotive health services to build healthy living attitudes, enlightening insight
into healthy living and building self-efficacy so that they have conative in realizing
a healthy life. Further, the causes of NCDS for CSNP can be seen in the verbatim
word cloud (Figure 3) and the information structure of Atlas.Ti results (Figure 4).

Figure 3. Word Cloud Results of Verbatim Research informants
Promotive health services have not touched the factors that cause NCDS in CSNP, this can be seen from the planning of activities that are not based on needs analysis but are given, for example, counseling programs related to heart disease and stroke and diabetes have not become a massive promotive program. Whereas previous studies and based on searches of informants as well as based on a review of verbatim documents, the three types of heart disease, stroke and diabetes are contributing factors to NCDS in the Indonesian National Police, so that if no special intervention is given, it will have an impact on the shrinking of members of the National Police who die due to NCDS, due to health evaluations. within the police environment, it is urgent to organize the development of human resources in the future in accordance with the challenges of the SDGs themselves.

The evaluation model in the National Police Institution has not comprehensively explored promotive, preventive, curative and rehabilitative health services. There has not been an evaluation that refers to evaluation research as developed in the academic world. The National Police does not yet have a Police Health Development Index as a benchmark for achieving the success of the SDGs program, measuring the positioning progress of the WHO and SDGs.

Optimal budgetary political support to prioritize promotive services, currently the orientation is more on curative health services. Not in accordance with the mandate of the United Nations, to prioritize preventive promotive services which are also economically cheaper, while support for personnel resources who study promotive science is relatively very small compared to the number of human resources who study curative services, so policies are needed that encourage an increase in the number of human resources who have promotive skills such as nutritionists and nutritionists, sports health specialists, and other health science experts.

**Conclusion**

The health service program in the Indonesian National Police needs to get serious attention, because with the findings from this study it can be seen that NCDS is one of the biggest contributors to the shrinking of the number of National Police human resources and has an impact on the development of a precision police model in the future. This is also in line with the United Nations through its WHO
body as stated in the 2015 SDGs, which is to promote good health and well-being by prioritizing prevention programs rather than treatment. The findings of the experts show that there is a correlation with research in the field, so this research is more supportive of previous findings from experts about the prevalence of non-communicable diseases that are very haunting and become a scourge for the socio-economic structure, especially in the Indonesian National Police. Evaluation of the causes of NCDS in the police environment needs to refer to existing academic rules, both qualitative and quantitative approaches that can measure the rationalization of program achievement by looking at causality between variables in it.

References

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