



Farmers' Intention to Apply for National Health Insurance

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Abstract

Farmers could be one of the biggest target groups for the Healthcare Social Security Agency (BPJS Kesehatan) program. In this study, some variables are investigated to identify intention to apply for National Health Insurance among farmers in the working area of Sungai Rambutan Integrated Independent City Community Health Centre in Ogan Ilir Regency. The current descriptive analytical research conducted with a cross-sectional design involved 104 farmer samples selected through cluster random sampling. More than half of the farmers intended to apply for national health insurance. There are five variables related to the intention of farmers to apply for national health insurance. Those variables are motivation to comply, behavioural beliefs, outcome evaluation, perceived power, and control beliefs. The most dominant variable affecting their intention was outcome evaluation since other variables controlled it. To increase the number of national health insurance members, local stakeholders should provide education about the benefit of national health insurance to encourage people to apply for the program.

INTRODUCTION

The commitment of the members of the World Health Organization (WHO) in realizing Universal Health Coverage (UHC) has been started since 2005 (World Health Organisation, 2010). This commitment is also implemented by the Indonesian government through the National Health Insurance program or JKN (Siswoyo, 2015). National Health Insurance (JKN) is a social insurance that requires every Indonesian citizen to register themselves and their family as members (Buku Pegangan Sosialisasi Jaminan Kesehatan Nasional (JKN) dalam Sistem Jaminan Sosial Nasional (online), 2017). National Health Insurance (JKN) was first implemented on January 1, 2014, with the hope of being able

to overcome access inequality to health services, provide financial protection, and guarantee each resident to receive comprehensive health services in the form of promotive, preventive, curative, and rehabilitative services (Dewan Jaminan Sosial Nasional, 2012).

Participation is one of the dimensions formulated by the WHO to achieve universal health coverage (World Health Organisation, 2010). It is also a successful indicator of the implementation of national health insurance and is included in eight goals of the national health assurance roadmap (Republik Indonesia, 2013). The data from Healthcare Social Security Agency (BPJS Kesehatan) on January 13, 2017, shows that it has guaranteed 172,620,269 people of 2,555 million, a

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total population in Indonesia. The number of independent PBPU (Non-Wage Recipients) participants was, however, still relatively low at around 11.3% of the total participants (Buku Pegangan Sosialisasi Jaminan Kesehatan Nasional (JKN) dalam Sistem Jaminan Sosial Nasional (online), 2017).

The informal sector has currently dominated the economy in developing countries, including Indonesia (Idris, 2017). Based on the 2017 Central Statistics Agency (BPS) concerning employment records, employment in agriculture is the highest among others (Republik Indonesia, 1997). The high number of farmers is a potential target to increase the membership coverage of national health insurance which later contributes to higher Universal Health Coverage (UHC) (BPJS and Semarang, 2017).

Several studies regarding farmers' interest in the participation of National Health Insurance show that behavioural beliefs, evaluation of behavioural outcomes, normative beliefs, control beliefs, and control strengths influence the interest of farmers to register JKN (Haile et al, 2014). Low membership achievement of Non-Wage Recipients (PBPU) indicates poor awareness

by workers in formal sectors and socialization by health institutions (Mania, 2017). With that said, the objective of this study is to investigate some variables contributing to farmers' intention to apply for National Health Insurance in the working area of the Integrated Independent City Community Health Centre in Sungai Rambutan, Ogan Ilir regency.

METHODS

The current quantitative analytical descriptive research was conducted with a cross-sectional design in May 2018. It involved farmers in the working area of the KTM Sungai Rambutan Community Health Centre. The population of this study was all farmers in KTM Sungai Rambutan Community Health Centre. Cluster random sampling method was employed for group selection with a simple random sampling technique. It means the population were divided into smaller groups known as clusters, and samples were randomly from those clusters. Since this current study involved large population across regions, cluster sampling is a perfect probability sampling. The minimum sample size was 104 respondents. Independent variable data was ob-

Table 1 Univariate Analysis of Farmers' Intention to Apply for National Health Insurance

Variable	n = 104	%
Intention		
Interested	60	57.7
Less interested	44	42.3
Behavioural Belief		
Important	58	55.8
Unimportant	46	44.2
Outcome Evaluation		
Advantageous	57	54.8
Disadvantageous	47	45.2
Normative Belief		
Influencing	68	45.4
Not Influencing	36	34.6
Motivation to Comply		
High	60	57.7
Low	44	42.3
Control Belief		
Supporting	57	54.8
Inhibiting	47	45.2
Perceived Power		
High	64	61.5
Low	40	38.5

tained by interviewing respondents directly using a questionnaire. The analysis in this study employed statistical software with univariate, bivariate, and multivariate analyses with chi-square and multiple logistic regression prediction models as well. The Ethics Review Centre of the Faculty of Public Health, Sriwijaya University has approved the ethical standards for this study with a letter of ethical qualification No. 65/UN9.1.10/KKE/2018.

RESULT AND DISCUSSION

Based on table 1., Farmers who have an interest in applying for National Health Insurance in the working area of the Integrated Health Centre in Sungai Rambutan, in Ogan Ilir Regency were 57.7%. A total of 55.8% respondents reported the importance of applying for National Health Insurance.

Table 2. shows that the chi-square test results found 5 variables related to the interest of farmers to register for national health insurance in the KTM Sungai Rambutan Health Centre Work Area, Ogan Ilir Regency, namely the behavioural belief variable (p-value = 0.017), evaluation of behavioural outcomes (p-value = 0.003), motivation to follow (p-value = 0.050), control

belief behaviour (p-value = 0.032) and control strength (p-value = 0.006). While the normative belief variable has no relationship with farmers' interest in registering for national health insurance in the KTM Sungai Rambutan Health Centre Work Area, Ogan Ilir Regency.

In Table 3, the multivariate analysis, which had been carried out, points out that the variables significantly related to the farmers' intention to apply for National Health Insurance were evaluation of behavioural beliefs, the outcome evaluation, perceived power, and control beliefs. Farmers' intention to apply for the program depends the most on the outcome evaluation after being controlled by other variables. The obtained value of PR Adjusted = 3.6 (95% CI: 1.429-9.410). This means that farmers who had the outcome evaluation by assessing National Health Insurance as something useful have more opportunities of the interest 3.6 times to apply for National Health Insurance compared to farmers who had outcome evaluation by assessing National Health Insurance as something detrimental.

Some factors have been identified having influence on farmer intention to apply for National Health Insurance. Farmers who were interested in applying for National Health Insurance

Table 2 Bivariate Analysis between Dependent and Independent Variable

Variables	Intention				Total		p-value	PR 95% CI
	Less interest	interest						
	n	%	n	%	n	%		
Behavioural Belief								
Important	33	48,5	35	51,5	68	100	0,017	0,647
Unimportant	27	75	9	25	36	100		(0,475-2,881)
Outcome Evaluation								
Disadvantageous	42	71,2	17	28,8	59	100	0,003	1,780
Advantageous	18	40	27	60	45	100		(1,201-2,636)
Normative Believe								
Not influence	45	55,6	36	44,4	81	100	0,346	0,852
Influence	15	13,3	8	9,7	23	100		(0,596-1,217)
Motivation to Comply								
Low	36	67,9	17	32,1	53	100	0,012	2,417
High	24	47,1	27	52,9	51	100		(1,233-4,736)
Control Belief								
Inhibiting	19	44,2	24	55,8	43	100	0,032	0,657
Supporting	41	67,2	20	32,8	61	100		(0,450-0,960)
Perceived Power								
Low	43	69,4	19	30,6	62	100	0,006	1,713
High	17	40,5	25	59,5	42	100		(1,146-2,563)

Table 3 Multivariate Analysis of Farmers' Intention to Apply for National Health Insurance

Variables	Sig.	Exp(B)	95% C.I	
			Lower	Upper
Outcome Evaluation	0.003	3.668	1.429	9.410
Motivation to Comply	0.005	2.626	1.069	6.447
Control Belief	0.043	1.412	0.165	2.450
Perceived Power	0.009	2.158	0.887	2.510

were influenced by subjective norms, control factors, and attitudes that one has. Most farmers' attitudes towards National Health Insurance were still positive reflected by one participant who mentioned that National Health Insurance was important and had benefits. Moreover, the National Health Insurance's payment fee does not fully require a large amount of farmers' income, and the support from the closest people and the environment for the National Health Insurance program give positive feedback for them. Farmers who have high motivation to follow the opinions of others will have a high level of supporting control, belief behaviour, and the perceived power or capability.

Moreover, farmers who had behavioural beliefs by assessing the importance of the National Health Insurance involvement positively had a higher probability than farmers who rated the importance of the involvements negatively. These results were consistent with Komariah's research in 2015, finding out that informal sector workers mentioned that the National Health Insurance program was an important program, but they tended to delay the participation to apply for National Health Insurance because their knowledge about membership procedures was insufficient.

Evaluation of behavioural beliefs had a relationship with the intention to apply for National Health Insurance. Respondents who considered National Health Insurance to be beneficial were greater compared to respondents who considered National Health Insurance as something not useful (Witcahyo, 2016). According to Siswoyo's research in 2015, the beliefs related to the benefits of National Health Insurance are to alleviate medical costs, provide service guarantees when sick, make it easier for people to access health services, and participate in supporting compulsory programs from the government (Idris, 2017).

The results of multivariate analysis indicate that there is no relationship between normative beliefs and the intention to apply for National Health Insurance. It is opposed to research by Meilinda that found an association between normative beliefs and intention in the partici-

pation of Mandiri Healthcare Social Insurance Administration Organization, which states that the response in the form of support from others would provide confidence for the individual to realize the behaviour (Shaluhiah and Patriajati, 2014). Besides, this research does not accord with the theory of planned behaviour that mentions the pressure or encouragement given by the environment around the informant was one of the factors that influence one's beliefs to behave. Motivation to comply had a relationship with the intention to apply for National Health Insurance. The probability of high motivation to comply is greater than low motivation to comply. This is in line with Shaluhiah's study which claims that the motivation to comply or supporting the closest person affected people 4.01 times, which means that the respondents had good support and had the possibility of being interested to apply for Healthcare and Social Insurance Administration Organization (Ajzen, 2005).

Control belief behaviour had a relationship with the intention to apply for National Health Insurance. Supporting control belief behaviour was greater than the inhibiting control belief behaviour (Meilinda, 2016). This is in line with Ajzen's theory explaining that a person's behaviour is not only controlled by himself, but it also requires control, for example in the form of the availability of resources and the opportunity and even certain skills (De Allegri, 2006). Previous research shows different results that there is no relationship between control belief and the intention to apply for independent health insurance (Komariah, 2015).

In this study, there was a relationship between the perceived power and intention to apply for National Health Insurance. Most respondents had high perceived power compared to low perceived power (Idris, 2016). According to the theory of planned behaviour, the level of ability refers to how much one will carry out a behaviour if he or she considers all the things needed to realize the behaviour (Macha, 2014). The more factors that support him or her to realize the behaviour is the greater the possibility of this behaviour to

become a reality (Komariah, 2015). According to the research conducted by De Allegri, the existence of barriers in terms of income, the large number of family members, and high contribution are the reasons for the inability of the community, especially informal sector workers (Cameron et al, 2012).

CONCLUSION

Farmers who have an interest in applying for National Health Insurance in the working area of the Integrated Health Centre in Sungai Rambutan, in Ogan Ilir Regency were 57.7%. Variables related to this intention are behavioural beliefs, control belief behaviour, motivation to comply, outcome evaluation, , and perceived power. Outcome evaluation is the most dominant variable related to the intention to apply for National Health Insurance. It is suggested that Healthcare and Social Insurance Administration Organization approach local stakeholders to conduct socialization and education efforts on how to register for National Health Insurance and the benefits package that will be provided to attract farmers to apply for National Health Insurance.

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