

Movement Of Healthy Society Living-Anti Dengue Hemorrhagic Fever In Sumarambu Village, Telluwanua District, Palopo City

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ABSTRAK

Kasus Demam Berdarah Dengue (DBD), sejak Januari 2018 cenderung mengalami peningkatan dan Kejadian Luar Biasa (KLB) DBD di berbagai provinsi di Indonesia. Kasus penderita DBD dari tahun 2017 hingga tahun ini meningkat signifikan. Tujuan Pengabdian masyarakat ini adalah untuk menggerakkan masyarakat hidup sehat dengan melakukan pencegahan demam berdarah. Metode kegiatan Program Pengabdian Kepada Masyarakat ini, melaksanakan kegiatan dalam pembimbingan dan pendampingan dengan tiga pola yang digunakan yaitu health education, health protection, prevention. Dilaksanakan dikelurahan Sumarambu pada bulan Juni sampai dengan September 2019 yaitu dengan kegiatan penyuluhan tentang DBD, Pemberantasan Sarang Nyamuk (PSN) 3M Plus dan rekrutmen satgas Jumantik (Juru Pemantau Jentik), Pelatihan dan Penyuluhan Tentang Perilaku Hidup Bersih dan Sehat, Pelantikan dan Pelatihan Satuan Tugas (Satgas), Juru Pemantau Jentik (Jumantik), Penyuluhan dan Pemeriksaan Kesehatan sejak dini, Penyuluhan tentang dampak merokok. Kesimpulan Pelaksanaan PKM yang dilaksanakan di Kelurahan Sumarambu tidak mengalami banyak hambatan. Pihak Puskesmas Padang Lambe, aparat pemerintah Kelurahan Sumarambu, dan Masyarakat sangat responsif dalam setiap program yang dilakukan dengan pendekatan kemitraan.

Abstract. *Dengue Hemorrhagic Fever (DHF) cases, since January 2018, have tended to increase, and DHF Extraordinary Events (KLB) in various provinces in Indonesia. DHF cases from 2017 to this year have increased significantly. The purpose of this community service is to move people to live healthy lives by preventing dengue fever. The method of this Community Service Program activity is to carry out activities in mentoring and mentoring with three patterns used, namely health education, health protection, prevention. Conducted in the Sumarambu sub-district from June to September 2019, namely through outreach activities on DHF, 3M Plus Mosquito Nest Eradication (PSN) and the recruitment of the Jumantik task force (Larva Monitoring Officer Task Force), Training and Counseling on Clean and Healthy Behavior, Inauguration and Training of the Task Force (Task Force), Larva Monitoring Officer (Jumantik), Early Health Counseling and Examination, Education about the impact of smoking. Conclusion the PKM implementation in Sumarambu Village did not experience many obstacles. The Padang Lambe Health Center, Sumarambu Urban Village government officials, and the community are very responsive in every program carried out with a partnership approach.*

1. INRODUCTION

Dengue Hemorrhagic Fever (DHF) cases since January 2018 have tended to increase and the extraordinary incidence (KLB) of DHF in various provinces in Indonesia. DHF cases from 2017 to this year have increased significantly. In January 2018, the Ministry of Health received reports of 6,800 cases with a death rate of 43 people, 10 provinces with the highest number of DHF cases were reported in 10 provinces with the highest number of DHF cases in the past month: 1) East Java 2,657 cases; 2) West Java 2,008 cases; 3) East Nusa Tenggara 1,169 cases; 4) Central Java 1,027 cases; 5) North Sulawesi 980 cases; 6) Lampung 827 cases; 7) DKI Jakarta 613 cases; 8) South Sulawesi 503 cases; 9) East Kalimantan 465 cases, and 10) South Sumatra 353 cases. The Ministry of Health (*Kemenkes*) recorded cases of Dengue Hemorrhagic Fever (DBD) during the rainy season. Throughout 2018, dengue cases recorded by the government reached 11 thousand cases. Director of Vector and Zoonotic Infectious Diseases of the Ministry of Health, Siti Nadia Tarmizi, admitted that dengue cases still occurred in 2018 but were still smaller than in 2017. "DHF cases during 2017 were around 22 thousand cases and currently (2018) only 11 thousand cases (*Kemenkes RI*, 2018).

Dengue fever is caused by the bite of *Aedes aegypti* and *Aedes albopictus* mosquitoes (Ginanjari, 2008; Anggraini, D.S., 2010). These mosquitoes will breed rapidly in an unclean environment (lots of standing water and garbage) especially in the rainy season like this, it will increase the cases of DHF (Sintorini, M.M., 2007; Widiyono, 2008).

To reduce the number of sufferers and deaths due to DHF, the Ministry of Health continues to promote the Eradication of Mosquito Nests (PSN) and issue circular letters to urge and encourage the public, starting with all State Civil Service (ASN) employees within the Ministry of Health to make efforts to prevent and control the disease. DHF. Letter Number PM.01.11 / MENKES / 591/2016 dated November 8, 2016, regulates the management of the 3M Plus Mosquito Nest Eradication (PSN) with the movement of one house (Larva Monitoring Officer).

Efforts to prevent and control dengue can be done by breaking the DHF transmission chain in the form of prevention of the bites of *Aedes aegypti* and *Aedes albopictus* mosquitoes (Suroso, 2004; Widiyono, 2008). The steps taken include monitoring mosquito larvae and the 3M Plus PSN in each house regularly to eradicate mosquito nests. (Anggraini, D.S., 2010; *Kemenkes RI*, 2016).

The Ministry of Health also invites the public to reactivate the One *Jumantik* House movement. *Jumantik* is the person who checks, monitors, and eradicates mosquito larvae, especially *Aedes aegypti* and *Aedes Albopictus*. This is done by: (*Kemenkes RI*, 2016).

Prevention of DHF is very dependent on individual behavior in society (Widiyono, 2008). The importance of changing people's lifestyles to a healthier direction underlies the priority program for Health Development in the 2015-2025 period which was implemented through the Healthy Indonesia Program with a Family Approach. The Healthy Indonesia Program with a Family Approach is implemented in stages with a target that by the end of 2025, all *Puskesmas* in Indonesia have been able to implement it.

Based on the results of the Focus Group Discussion (FGD) either with the community or with health workers at the *Puskesmas*, it was found that among the areas of the Telluwanua Subdistrict, Palopo City, which is still not optimally implementing a Clean and Healthy Lifestyle, are in Sumarambu Village. The following is the identification of the profile of Sumarambu Village based on the results of the FGD as partner 1 in the Community Partnership Program, namely:

First, Sumarambu Urban Village has a population of 1,381 people divided into 5 (five) RW (Kelurahan Sumarambu Profile, 2016). *Kelurahan Sumarambu* is one of the *Kelurahan* in *Telluwanua* sub-district with a relatively pristine lowland geographical condition. Because it is a low-lying area, it is possible that when the rainy season comes, it will cause flooding and stagnant water around the residents, which can be a breeding ground for mosquitoes.

Second, most of the people of *Sumarambu* Urban Village have a livelihood as farmers, namely rice field farmers and chocolate farmers. This tendency of community activities as farmers allows various health problems that arise in the community, family, and each individual in the region.

Third, the health status in the area has not improved. There is still 46 (forty-six) percent, residents of *Sumarambu* Urban Village do not have family latrines, because they rely on large rivers. The majority of farmers are active smokers who have never been educated directly and in a planned manner, lack of hygiene and healthy living habits, exclusive breastfeeding which is replaced by formula milk, lack of exercise so that physical activity is minimal and the environment around the house is not maintained. Some of the people there still believe in a *dukun* as someone who can provide treatment.

Fourth, some health coverage information, as follows; the history of the disease; Dengue fever 30 cases, diarrhea, 90 cases, Tuberculosis 10 cases, DM 3 cases, while HIV / AIDS 3 cases. The coverage of counseling on Clean Living Behavior has never been implemented, counseling on Reproductive Health 682, Family planning counseling 553, and HIV / AIDS counseling have never been carried out. The number of fertile age couples was 983, while the

coverage of active family planning users and participants was 7 couples, MOW 27, and condoms 30 couples, 90 implants, 128 injections of 504 pills, a total of 786 active family planning participants. That means there are still 197 people who have not participated in the family planning program.

Fifth, the people of *Sumarambu* Urban Village are still not practicing clean and healthy living habits. Most of the residents use the bath, but the water is rarely drained, the large amount of rubbish in the form of used can, coconut shells, brown skin, and used tires around the house can collect water when it rains so that it becomes a mosquito nest. The conditions of the sewers are not smooth and there are lots of stagnant water in the environment around the residents' houses that can become a nest for mosquitoes. The habit of residents throwing garbage around the house also has an impact on health. As well as water conditions which are sometimes unhygienic.

Seeing the problems that have arisen in *Sumarambu* Village, a program that can be used as an education and follow-up implementation of the circular letter of the Ministry of Health of the Republic of Indonesia Number PM.01.11 / MENKES / 591/2016 dated November 8, 2016, regulates the management of 3M Mosquito Nest Eradication (PSN). Plus, with the one house one movement (*Juru Monitoring Jumantik*) and Presidential Instruction of the Republic of Indonesia Number 1 of 2017 concerning the Healthy Living Community Movement.

The PKM activity of revitalizing the role and optimizing the use of lime leaves as a larvicide can increase the capacity of the community, especially Bumantik cadres (Nian African Newari, 2018). Dony Setiawan Hendyca Putra (2016), stated that in community service activities many benefits can be obtained by the villagers of Jember Regency in terms of obtaining information about the eradication of the Dengue Hemorrhagic Fever mosquito. Ratna Dewi (2019), public understanding of matters regarding Dengue Hemorrhagic Fever in Sukagalih Village, Bandung has increased with an average understanding of 85.6%.

The PKM activity "Community Movement for Healthy Living Anti-Dengue Hemorrhagic Fever" is a form of concern for lecturers and universities in partnership with the community to actively solve problems related to a Clean and Healthy Lifestyle. Therefore, partners who will be involved in this activity are community leaders, heads of health centers, heads of sub-districts, heads of hamlets, heads of RT / RWs, and *posyandu* (*public health center*) cadres as the main components of the Healthy Living Community Movement Program Anti Dengue Hemorrhagic Fever First, the Head of the Community Health Center and his staffs, serves as a facilitator, motivator, dynamist, and coach for government officials from the Head of Sub-

District to the Head of RT / RW to make the Community Movement Healthy Life Anti Dengue Fever successful; Second, the Head of *Kelurahan*, Head of Hamlet, Head of RT / RW, cadres, and community leaders as the components most responsible for mobilizing the community to be actively involved in this community service program.

2. PROBLEMS



Picture 1: Focus group discussion (FGD) and observation in Sumarambu
Source: Tanwir Djafar private documentation

Based on the results of the Focus Group Discussion (FGD) and observations in the field, it was found that the problems faced by the Sumarambu community were: the high incidence of Dengue Fever, which had an impact on the quality of healthy life for the people of Sumarambu Village, the high number of active smokers, which could reduce the quality of life. Sumarambu Urban Village community healthy both in health and economic aspects. Smoking is one of the behaviors of an unhealthy lifestyle, the lack of knowledge and attitudes of the Sumarambu sub-district community about clean and healthy living habits, the posyandu cadres in Sumarambu sub-district as the spearhead of the health program of the Puskesmas, the community does not care about prevention and early detection disease. This is due to the lack of knowledge of various diseases such as ARD, dengue, typhoid, heart disease, cancer, etc., so that several cases have resulted in death.

3. METHOD

Community Service Design is the solution to the problem of anti-dengue fever with the implementation method in the form of guidance and assistance with three patterns, namely: a) health education is training and counseling on clean and healthy living habits, the establishment of a Task Force for Larva Monitoring (Jumantik). Inauguration and Training of Larva Monitoring Task Force (Satgas), b) Health Protection is the socialization and implementation of Mosquito Nest Eradication (PSN), Community Counseling and Assistance on Early Disease

Detection, c) Prevention is health education about dangers of cigarette smoke and the establishment of smoke-free areas. Samples or targets in this trial were the community and posyandu cadres in Sumarambu Subdistrict, Palopo City which was held from June to September 2019. In this activity, the formation of a Task Force for Larva Monitoring (Jumantik) consisting of 10 residents 2 people representing every hamlet in Sumarambu Village. The form of this community service activity is in the form of material delivery, discussion, question, and answer, the Task Force. Then explained the duties and responsibilities of a Jumantik task force. The task of the Jumantik task force in monitoring the area is to check water reservoirs and provide larvicide powder such as abate, get rid of the presence of cloth/clothes hanging in the house, hoard used items, check water channels and fish ponds to be free from mosquito larvae, visit empty houses / uninhabited to check larvae. Each Jumantik Task Force is responsible for each hamlet. The results obtained are reported to the supervisor and then forwarded to the person in charge of the health promotion program at the Puskesmas especially for dengue fever for follow-up.

The speakers for this activity were Delta, S.Si, Apt, M.Si, Tanwir Djafar, SKM., M.Kes, a lecturer from STIKES Bhakti Pertiwi Luwu Raya, and St. Aisyah, S.Kep, Ns, M.Kes, Padang Lambe PKM Health Promotion Manager. The participants in this activity were 10 health cadres. The implementation of this community activity was carried out on 4 June - 10 September 2019 in Sumarambu Village, Palopo City.

4. RESULT AND DISCUSSION

The Community Partnership Program activities are carried out by implementing methods in the form of guidance and mentoring in three patterns, namely: a) health education, b) Health Protection, c) Prevention in Sumarambu Village, Telluwanua District, Palopo City, from June to September 2019.

a. Health Education

1) Coordination of Government Officials and Community Health Centers.

One of the important stages in the implementation of the Community Partnership Program (PKM) "Community Movement for a Healthy Life Against Dengue Hemorrhagic Fever (DBD)", is to coordinate with government officials and community health centers. On June 12, 2019, discussions were held to see the existing program of activities at the Puskesmas related to Dengue Fever including types of activities, targets, and dates of implementation. The schedule of activities

that have been prepared relating to the implementation of PKM is socialized to the Puskesmas to get compatibility with the Puskesmas program. Among them, counseling about dengue fever, the Eradication of Mosquito Nests (PSN) 3M Plus, and the recruitment of the Jumantik task force (Juru Monitoring Larik).



Picture 2: the coordination between village government apparatus and public health center officer
Source: Tanwir Djafar private documentation

2) Training and Counseling on Clean and Healthy Behavior

On Monday, July 8, 2019, training and counseling were conducted on clean and healthy living habits (PHBS) in children. This activity was attended by the local government represented by the Telluwanua Subdistrict Secretary and the Head of Sumarambu Urban Village along with parties from the Padang Lambe Community Health Center. Participants who attended that time totaled 34 children. In this activity, the children were given counseling on how to wash clean and soapy hands, how to brush their teeth properly, have to defecate in a latrine, efforts to keep houses free from mosquito larvae and to eat fruits and vegetables regularly every day. After being given counseling, the children were allowed to participate in a handwashing competition and how to brush their teeth properly and correctly. The participants were very enthusiastic and enthusiastic about participating in this activity. This can be seen when the participants can answer questions well and can practice how to wash their hands and brush their teeth properly. At the end of the event, an announcement was made for participants who had won the championship. To increase enthusiasm, all participants were also given gifts.



Picture 3: PHBS counseling
Source: Tanwir Djafar private documentation

3) Establishment of a task force for larva monitoring (Jumantik)

The formation of a task force for larva monitoring (Jumantik) consists of 10 residents, 2 people representing each hamlet in Sumarambu Village. After obtaining data on the 10 residents who served as the Jumantik task force, then an explanation was given about the duties and responsibilities of the Jumantik task force. In addition to being coordinated regarding residents who are ready to become the jumantik task force, the service team also coordinates regarding the honorarium for the jumantik task force which will be formed later. This coordination was carried out with the Puskesmas and also the Sumarambu Urban Village Government officials. The honorarium for the jumantik task force is IDR 400,000 per/person per/year. After coordination with the Puskesmas and also the Sumarambu Urban Village Government of Palopo City, it was agreed that the following year the Palopo City Government would follow up with the honorarium for health cadres / Jumantik Task Force, which was IDR 400,000 per/person per / month.

In addition to the formation of the jumantik task force, coordination was also carried out regarding the program to be carried out, namely the Eradication of Mosquito Nests (PSN) by the jumantik task force and health workers from the Padang Lambe Tourism Health Center. PSN activities will be carried out after the official inauguration of the task force which is scheduled to be held on July 9, 2019. The Puskesmas and also the Sumarambu Village Government welcomed the plan to form a jumantik task force, this can be seen from the efforts of the Puskesmas which directly coordinate the people who will be acting as the jumantik task force under the responsibility of the DHF program holder, namely Mrs. St. Aisyah Nur S. Kep Ners.

- 4) Inauguration and Training of the Task Force (Satgas) for larva observers (Jumantik)
 After coordinating with the Padang Lambe Community Health Center and the Head of the Sumarambu Urban Village, on July 9, 2019, the Jumantik Task Force was inaugurated by the Sumarambu Urban Village and the Head of the Padang Lambe Puskesmas, represented in this case by Mrs. St. Aisyah Nur S. Kep Ners as the person in charge of health promotion programs in general. In this activity, counseling on Tuberculosis was also carried out in collaboration with the Puskesmas.



Picture 5: Inauguration and Training of the *Jumantik* Task Force
 Source: Tanwir Djafar private documentation

The Jumantik Task Force which was inaugurated was 10 people. The tasks of the Jumantik Task Force in monitoring the area are:

- a) Check water reservoirs and places that can be flooded with clean water, whether there are larvae and whether they are tightly closed. For places where water is difficult to drain, a larvicide powder such as abate is given.
- b) Get rid of the presence of clothes hanging in the house.
- c) Hoarding used goods.
- d) Check waterways and fish ponds so they are free from mosquito larvae.
- e) Visit an empty/uninhabited house to check larvae.

Each Jumantik Task Force is responsible for each hamlet. The implementing task force is tasked with checking the presence of mosquito larvae in each resident's house periodically every month. The results obtained are reported to the coordinator. Then in the future, the data from the coordinator will be reported to the supervisor and forwarded to the person in charge of the health promotion program at the Puskesmas especially for dengue fever for follow-up.

b. Health Protection

1) Socialization and Counseling on Mosquito Nest Eradication (PSN)

After the inauguration and training of the Jumantik Task Force, the Socialization to Eradicate Mosquito Nests on Tuesday, July 16 2019 was carried out in the form of counseling on the implementation of PSN which included prevention, treatment, and treatment of Dengue Hemorrhagic Fever (DHF) which was attended. by residents of the Sumarambu sub-district and the Padang Lambe sub-district and health center. The residents of Sumarambu sub-district are invited to move one house and one larva observer who will later be coordinated and supervised by the task force in each hamlet.



Picture 6: socialization and eradication of mosquito nests
Source: Tanwir Djafar private documentation

PSN is carried out jointly by the jumantik task force and also the person in charge of the Puskesmas for the health promotion program. PSN is carried out by checking every house in the Sumarambu village for the presence of mosquito larvae. Apart from the bath, the inspection was also carried out in places where there was stagnant water, such as used tires, cans, coconut shells. In addition to checking for mosquito larvae, giving abate powder in each house was also carried out and also providing health education on the prevention of dengue fever for residents who get mosquito larvae at home. For the next stage, the Task Force is given the task to carry out activities to eradicate mosquito nests every three months in collaboration with the public health center.



Picture 7: Implementation of the Mosquito Nest Eradication Program
Source: Tanwir Djafar private documentation

2) Community Counseling and Assistance on Early Disease Detection

On Monday, August 5, 2019, at the Sumarambu Urban Village office, counseling was conducted on early detection and prevention of disease to residents of Sumarambu sub-district in the hope that Sumarambu urban residents can detect the disease early and carry out an examination as early as possible. After the counseling, it was continued with the delivery of medical devices to the Padang Lambe Community Health Center. Medical equipment was handed over to check blood sugar, cholesterol, and uric acid along with strips, weight scales, and thermometers.

After that, it was continued with free health checks for residents of Padang Lambe sub-district. The health checks carried out include checking blood pressure, checking blood sugar levels, checking blood cholesterol levels, and checking uric acid levels in the blood. The health education and health checks were supported by the Sumarambu Urban Village Government and the Padang Lambe Puskesmas. Besides, residents of Sumarambu sub-district also gave good responses to the implementation of this activity. This can be seen during the implementation of community outreach, actively asking and answering questions that the community service team gave. Besides, residents also seemed eager to have their health checked. This can be seen from the number of residents who came as many as 41 people.



Picture 8: Community Counseling and Assistance on Early Disease Detection
Source: Tanwir Djafar private documentation

3) Prevention

a) Health Education on the Dangers of Cigarette Smoke and the Establishment of Non-Smoking Areas

The next program of activities to be carried out is to provide health education about the dangers of cigarette smoke for children and the establishment of Smoke-Free Areas. This activity was carried out at SMP 12 Sumarambu, Palopo City. This activity was carried out on Friday, August 30, 2019. Participants in the extension were 30 students of SMP 12 Sumarambu Palopo City. The topic of counseling was the Dangers of Cigarette Smoke for Early Childhoods. Students of SMP 12 Sumarambu, Palopo City were very enthusiastic when participating in counseling about the dangers of cigarette smoke for early childhood, this can be seen from the number of students who asked questions related to extension topics and also students could answer questions well, which were given as a form of evaluation.



Picture 9: Health Education About the Dangers of Cigarette Smoke
Source: Tanwir Djafar private documentation

5. CONCLUSION

Implementation of the Community Partnership Program through the Healthy Living Community Movement (GERMAS) Anti Dengue Fever which was held in Sumarambu Village, Telluwanua District, Palopo City, from June to September 2019. The results of the activities are as follows:

- a. Conducting training and counseling on clean and healthy living behaviors (PHBS) for children and communities on Monday, July 8, 2019.
- b. Formation and Inauguration of the Larva Monitoring Task Force (SatGas) on July 9, 2019, consisted of 10 Health Cadres, 2 representing each hamlet in Sumarambu Village. After obtaining data about 10 residents who served as Jumantik Task Force.
- c. Socialization and Counseling for the Eradication of Mosquito Nests (PSN) on Tuesday, July 16 2019 was carried out in the form of counseling on the implementation of the

- PSN, which included prevention, handling, and treatment of Dengue Hemorrhagic Fever (DBD) which was attended by residents of Sumarambu sub-district and the village and Puskesmas Padang Lambe.
- d. Community Counseling and Assistance on Early Detection of Diseases on Monday, August 5, 2019, at the Sumarambu Urban Village office was carried out to residents of the Sumarambu sub-district with the hope that Sumarambu sub-district residents can detect the disease early and carry out examinations as early as possible such as ispa disease, dengue fever, typhoid, heart disease, cancer, etc. so that public awareness of disease prevention and early detection increases.
 - e. Health education about the dangers of cigarette smoke for children and the establishment of Smoke-Free Areas. This activity was carried out at SMP 12 Sumarambu, Palopo City. This activity was carried out on Friday, August 30, 2019. Participants in the extension were 30 students of SMP 12 Sumarambu Palopo City. The topic of counseling was the Dangers of Cigarette Smoke for Early Childhoods.

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