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THE FACTOR SHARE INFLUENCING ACCESS TO THE HEALTH FACILITY IN VILLAGE OF CARÁ, VILLAGE LACO MESAC, ADMINISTRATIVE POST OF LACLO, THE MUNICIPALITY OF MANATUTO TIMOR-LESTE, 2023.

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Abstract

Introduction: According to WHO (2022), The Health Facility is to reflect the full scope of this effort will provide important resources and support to help countries provide access to health services for all populations. Based on the Meeting of the Council of Ministers of May 10, 2016, on the Decree-Law amending Decree-Law no. 11/2012, on the Hospitals of the National Health Service, Municipal Health and Regional Health, has the National Hospital Guido Valadares Dili, Referral Hospitals total 5, Health Center 71, Health Post 325.

Objective: To know and identify about the common characteristics, distancing factor and environment that give influence to the community for access in the health facility.

Methodology: Utilize quantitative method with descriptive *cross-sectional* approximation and probability sampling technique (*Probability Sampling),* with the type the Simple Random Sampling (*Simple Random Sampling)* with sample is 69 respondents. We use collect with the question and analyze using the computer program SPSS (*Statistical Package for the Social Sciences*) version 20.

Result: And there is a strong relationship between the factor Distance and Environment of the community for access in the health Faith the result analyzes tests statistics *Spearman Rank*. It means the value of the coefficient, correlation the factor distance with the ease of health with the value 0.665 and the environmental factor of the community with the health with the health withthe value 0.623.

Conclusion: Through the result of the research the factor distance too far 65.3% for access in the ease of health and environment factor insufficient 66.7% conclude there is a strong relationship between distance factor and environment of the community with the ease of health.

Keyword: Factor influence (Distance and Environment), Community Village Cara-Suco Laco Mesac, Facility Health Post Laclo.

INTRODUCTION

Health facility or can also be called health service facility, Health is a tool or place used in carrying out health service efforts, both in terms of promotion, prevention, treatment, as well as rehabilitation (Ministry of Health, 2018). According to WHO (2022), the World Health Organization's new Global Health Facilities Data Base initiative (now called the *Geolocated Health Faciliteis Data* initiative to reflect the full scope of this effort) will provide important resources and support to help countries provide access to health services for all populations. At first, it hosted data from 46 countries representing 40% of the world's population with the goal of including all 194 WHO Member States. The publication was produced with support from the Community of Portuguese Speaking Countries (CPLP) with the World Health Organization (WHO) in the year 2018 to 2022, says that the report estimates that between 20% and 40% access to health facility of all health expenditures are currently wasted by inefficiency, and points to 10 specific areas where better policies and practices can increase the impact of spending, sometimes dramatically. Investing these resources more intelligently can help countries get closer to universal coverage without increasing spending.

Based on Ministry of Health data, (2018) Indonesian Povo there were 8,841 Clinics, consisting of 924 Main Clinics and 7,917 Primary Clinics. The province with the most Main Clinics is DKI Jakarta Province with 207 Main Clinics and there are four provinces for which no data are available, namely North Kalimantan, South East Sulawesi, West Sulawesi and North Madness. Meanwhile, for Primary Clinics, with the largest number of primary clinics, North Sumatra Province with 959 clinics, Central Java with 919 clinics and West Java with 850 clinics. The province with the lowest number of Primary Clinics is North Kalimantan, which is 1 clinic. (ASEAN, 2022). According to the Constitution Republic of Timor-Leste in article 57, the Ministry of Health of Timor-Leste is committed to providing and regulating quality health service for all people, to promote community participation in stakeholders. Based on the Meeting of the Council of Ministers of May 10, 2016, on the Decree-Law amending Decree-Law no. 11/2012, on the Hospitals of the National Health Service, Municipal Health and Regional Health, has the National Hospital Guido Valadares Dili, Referral Hospitals total 5, Health Center 71, Health Post 325.

National Health Sector Strategy Plan 2011-2030 (PENSS 2011-2030) give support to Development Strategy Plan (PED 2030) as the aspiration of the Timor-Leste people for "the country has medium-

high income with Education and healthy population in the year 2030", National Health Sector Strategy Plan is based on the expansion of the country's health service. Started in the Year 2019 until 2022 the Ministry of Health of Timor-Leste manages to Build the Health Facility in the National Territory with total Health Facility 639, Composed of the Health Center 71, Health Post 325, Maternity 50, Mini Maternity 3, minilaboratory 12, Medical Residency 156, total Covid-19 isolation 12, 1 Dili National Laboratory, Covid-19 Laboratory total 10. Total Facility of the Municipality of Manatuto 26, Health Center 6, and Health Center 20, the health facility of Administrative Post of Laclo Municipality of Manatuto are 5, One (1) health center and 4 current health post.

Goals

General Objective

To know about the factor that gives influence to the community for access in the health facility in Aldeia de Cará, Suco Laco Mesac, from the Administrative Post of Laclo, from the Municipality of Manatuto, 2023

Specific objectives are:

- To identify the common characteristics, distancing factor and environment.
- To identify the health facility in the service coverage provided by the Health Center.

THEORETICAL FRAMEWORK

According to (Ministry of Health, 2018), establishments to the health facility in the health service is an on-site instrument that used to carry out the efforts in the health services, both in terms of proportional activities of preventive, protection and also rehabilitation carried out by the Central Government, Municipal Government and Local Government Authority.Started in the Year 2019 until 2022 the Ministry of Health of Timor-Leste manages to Build the Health Facility in the National Territory with total Health Facility 639, Composed of the Health Center 71, Health Post 325, Maternity 50, Mini Maternity 3, mini Laboratory 12, Medical Residency 156, total Covid-19 isolation 12, 1 Dili National Laboratory, Total Covid-19 Laboratory 10. Total Facility of the Municipality of Manatuto 26, Health Center 6, and Health Center 20, the health facility of Administrative Post of Laclo Municipality of Manatuto are 5, One (1) health center and 4 current health post.

Health care facilities have 3 levels of following:

- The facilities of first-level health care that focus on providing the basic health services of the population.
- Second-level health facilities focus on providing health services in specialization.
- Third-level health facilities focus on providing the health services of subspecialists.

In research journals on the factors that influence service selection decisions (Ditasari S. et al., 2019), there are several factors that are a determinant of decision-making in the community of choice of health care services, some of which are service rates or prices, ease of care, hospital facility and distance. There are also factors of the community itself that use health services namely: education, socioeconomic situation in the community, income and employment. From the results of the investigation conducted by Ditasari, Sutriningsih and Ahmad (Ditasari S. et al., 2019), it can be concluded that the factor of

cost or prices of service, health facilities and also the distance that influence the decision-making of the community in the choice of health service providers. The need for health in the community is determined by characteristics of society itself. An indicator that can be used Find out if a Health Center is developing or not is a state of affairs the number of patients who use the services in the Health Center s and complementary facilities for Health Center (Nova Dela, 2013).

According to the research conducted by (Tipótono, 2012), there is a positive relationship between distance and the use of health services, where the greater the distance from health facility, the more reluctant the public will be to come to the health center. This has an impact on the price or costs of gettingto health facilities. Thus, it can be concluded that the distance factorhas a positive influence on the selection of health system establishments.

Society (especially social and environmental issues) and the environment around the service facilities plays an important role and have a great impact on the company. If the company does not consider these factors, then the survival of the company could be threatened.

METHODOLOGY

It uses quantitative method with descriptive *cross-sectional* approximation and probability sampling technique *(Probability Sampling),* with the type Simple *Random Sampling* with sample is 69 respondents with the beginning of the study on July 10 to 14, 2023. We used to collect with the questionnaire, the data analysis technique are univariable analysis to explain or describe the characteristics of each research variable (gender, age, marital status, level of education). Generally objective of univariate analysis to obtain results of distribution, frequency and percentage of each variable and bivariate analysis to perform between two variables that are thought to be related or correlated. Statistical test use *Spearman Rank* α=0.05, the significant level with 5% with rules like p< a (0.05) means there is a relationship and how much $p>a$ means there is no relation. In this study, it conducts data entry using the computer program SPSS (*Statistical Package for the Social Sciences*) of version 20.

RESULT AND DISCUSSION

Table 1. Frequency Distribution of Respondents Based on Age

Ages	Frequency (n)	(%)
59-79	15	21.7
38-58	18	26.1
17-37	36	52.2
Total	69	100

Sources: survey data, 2023

Table 2. Respondent Frequency Distribution Based on Gender

Sex	Frequency (n)	(%)
M	31	44.9
F	38	55.1
Total	69	100

Dand according to table 1. above sample that most respondents aged 17-37 years with frequency 36 (52.2%) and Minority age 59-79 years with frequency 15 (21.7%), of the study. D and according to table 4.2 above sample that the majority of respond-

ents of Female with frequency 38 (55.1%) and Minority Male with frequency 31 (44.9%), in the survey result, 2023.

Table 3. Frequency distribution of respondents based on Education Level

Education Level	Frequency (n)	(%)
Illiterate	23	33.3
Primary	12	17.4
Pre-Secondary	18	26.1
Secondary	13	18.8
University	3	4.3
Total	69	100

Table 4. Frequency distribution of respondents based on the factor Distance in the Community

The Distance	Frequency (n)	(%)
Too Long	45	65.3
Long	24	34.8
Total	69	100

Table 5. Distribution Frequency of respondents based on the Environment in the Community factor.

Environments	Frequency (n)	(%)
Good	5	7.3
Sufficient	16	23.2
Insufficient	48	69.6
Total	69	100

Table 6. Frequency distribution of respondents based on Community Health Facility

Ease of Health	Frequency (n)	(%)
Good	5	7.3
Sufficient	18	26.1
Insufficient	46	66.7
Total	69	100

Data according to table 3 above sample that the majority of respondents of illiterate education level with frequency 23 (33.3%) and minority of education level of university with frequency 3 (4.3%), of the study. Basicly with according to table 4 above sample that the majority of respondents distance factor is good on go with frequency 45 (65.3%) and minority factor distance long with frequency 24 (34.8%), of the study. And according to table 5. above sample that the majority of respondents insufficient environment factor with frequency 48 (69.6%) and minority factor environment distance very good with frequency 5 (7.3%), of the survey result. And according to table 6. above sample that the majority of respondents Insufficient Health Facility with frequency 46 (66.7%) and minority Very Good Health Facility with frequency 5 (3.7%), the survey result, 2023.

Table 7. Test Distribution Correlation between the factor Distance and Ease of Health Center.

			The Distance	The Health Facility
Spearman's rho	The Distance	Correlation Coefficient	1.000	.665**
		Sig. (2-tailed)	.	.000
		N	69	69
	The Health Facility	Correlation Coefficient	.665**	1.000
		Sig. (2-tailed)	.000	.
		N	69	69

Correlation is significant at the 0.01 level (2-tailed).

Table 8. Test Distribution Correlation between the Environment factor and the Health Facility

			The Environment	The ease of health
Spearman's rho	The Environment	Correlation Coefficient	1.000	.623**
		Sig. (2-tailed)	.	.000
		N	69	69
	The ease of health	Correlation Coefficient	.623**	1.000
		Sig. (2-tailed)	.000	.
		N	69	69

**. Correlation is significant at the 0.01 level (2-tailed).

According to Table 7. above result analyzes tests statistical *Spearman Rank* sample that the value of the significant coefficient or *pearson (p)* = 0.000 means that less than the value 0.05, It means the value of the coefficient correlation between the distance with the ease of health and result correlation value with r = 0.665, belongs in the strong category between the value 0.60-0.79, with correlation Positive (+). And according to the table 8 above result analysis test statistic *Spearman Rank* sample that the value of the significant coefficient or *pearson (p)* = 0.000 means that less than the value 0.05, It means the value of the coefficient correlation between the environment with the ease of health and result value correlation with r=0.623, belongs in the strong category between the value 0.60-0.79, with correlation Positive (+).

CONCLUSION

The distance factor from the community for access in the Health Facility is Very Long with frequency 45 of percentage (65.3%), the environment is Insufficient with frequency 48 of percentage (69.6%) and the community access in the Health Facility is insufficient with frequency 46 of percentage (66.7%). The result analyzes statistical tests *Spearman Rank* sample that the value of the significant coefficient or *pearson (p)* = 0.000 means that less than the value 0.05, It means the value of the coefficient correlation between the distance with the ease of health and result correlation value with r=0.665, belongs in the strong category between the value 0.60-0.79, with correlation Positive (+). According to the result analyzed tests statistical Spearman *Rank* sample that the value of the significant coefficient or *pearson (p)* = 0.000 means that less than the value 0.05, It means the value of the coefficient correlation between the environment with the ease of health and result correlation value with r = 0.623, belongs in the strong category between the value 0.60-0.79, with Positive (+) correlation cited by (Tilman CB. & Santos O., 2023).

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