

DENGUE FEVER DISEASE PREVENTION EDUCATION IN THE RIFAHIYATUL BILAD BAITURRAHIM IN JAMBI CITY

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Abstract

Dengue fever is a deadly disease that attacks children and adults today. In Indonesia, dengue fever is still a health problem because there are still many areas where it is endemic. Dengue fever or DHF is a disease transmitted through mosquitoes that occurs in tropical and subtropical areas of the world. Common symptoms of dengue fever are high fever and flu-like symptoms. Meanwhile, in severe dengue fever, this condition can cause serious bleeding, a sudden drop in blood pressure (shock) and even death. Millions of cases of dengue hemorrhagic fever infection occur throughout the world every year. Dengue fever occurs most often in Southeast Asia, the western Pacific islands, Latin America and Africa. But now the disease has spread to new areas, including local outbreaks in Europe and the southern United States. The best way to prevent infection is to avoid mosquito bites and take steps to reduce mosquito populations. Dengue hemorrhagic fever (DHF) is still a problem for most Indonesian people. Concerns about contracting diseases that originate from mosquito bites increase when the rainy season arrives. Early detection and late treatment result in an increase in cases ending in death.

A. INTRODUCTION

Dengue fever (DBD) is a health problem in Indonesia. Which amount the sufferer tend increase And its spread is increasingly widespread. DHF is an infectious disease that mainly attacks children. (Nadesul Hendrawan, 2007) In Indonesia disease dengue fever Still is problem health Because Still Lots area Which endemic. Area endemic dengue fever on generally is a source of disease spread to other areas. Every extraordinary event (KLB) of DHF generally begins with an increase in the number of cases in the area. To limit distribution disease dengue fever required movement continuous mosquito nest eradication (PSN), fogging, and larviciding. (Nadesul Hendrawan, 2007).

Dengue fever has a very rapid course and is often fatal because many patients die due to late treatment. Dengue hemorrhagic fever (DHF) is also called *dengue hemorrhagic fever* (DHF), *dengue fever* (DHF), *fever dengue* (DD), And *dengue shock syndrome* (DSS). (widoyono, 2005).

The increase and spread of dengue fever cases is likely caused by high population mobility, urban development, climate change, changes in population density and distribution and other epidemiological factors. In addition, the increase

in dengue fever cases each year is related to environmental sanitation conditions. Which Lots availability of breeding places for female mosquitoes like Which containing water clear (tub) bathe, can used And place other water reservoirs). This condition is exacerbated by the community's lack of understanding about DHF and also very low community participation. Various efforts to control dengue fever (DHF) have been implemented including: health promotion on mosquito nest eradication, prevention and control of risk factors and cross-program and cross-sector cooperation related to the village/sub-district level to eradicate mosquito nests. The main problem in efforts to reduce DHF morbidity is the suboptimal efforts to mobilize community participation in eradicating DHF mosquito nests. Therefore, community participation in eradicating DHF mosquito nests needs to be increased, including periodic and continuous examination of larvae and mobilizing the community in eradicating DHF mosquito nests. Dengue fever (DBD) is a health problem in Indonesia. Which amount the sufferer tend increase And its spread increasingly widespread. Dengue fever is an infectious disease that mainly attacks children. (Nadesul Hendrawan, 2007).

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B. METHODS

The health education method provided is in the form of material presentation and Q&A discussion. Which material delivery is useful for increasing the knowledge and insight of family members. The Q&A discussion method is to clarify participants' understanding of problems that are still not understood regarding relapse and its prevention. The target of this community service activity is the children of the Rifatul Bilad Baiturrahim Foundation Orphanage and Orphanage in Jambi City. After completing the counseling, each participant is given a leaflet as reading material to review. learn material Which Already delivered, so that knowledge This can be applied in everyday life in the residential environment.

C. RESULTS

Respondents in this health education activity were children from the Rifatul Bilad Baiturrahim Foundation Orphanage and Home for Orphans in Jambi City. During the implementation of the activity, the participants were enthusiastic in participating in the activity with several questions from the participants and the participants were active in asking questions and answering questions raised by the resource person or the Q&A, there was a positive response from the participants during the activity, namely that no participants left the counseling room during the

activity and the participants listened carefully while the material was being delivered.

D. CONCLUSION

From the results of health education on prevention of dengue fever in orphanages and orphanages The Rifahiyatul Bilad Baiturrahim Foundation in Jambi City can conclude that this activity can increase knowledge and broaden respondents' insights. Education on prevention of dengue fever in orphanages and orphanages The Rifahiyatul Bilad Baiturrahim Foundation in Jambi City should be carried out continuously so that respondents are always motivated to help prevent dengue fever.

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Attachment documentation activity

