IMPLEMENTASI KEBIJAKAN PENANGGULANGAN DEMAM BERDARAH *DENGUE* (DBD) DI DESA KARANGNANAS KECAMATAN SOKARAJA

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ABSTRAK

Implementasi kebijakan penanggulangan Demam Berdarah *Dengue* (DBD) merupakan upaya penting dalam menekan tingginya angka kasus DBD di Indonesia. Desa Karangnanas, Kecamatan Sokaraja, Kabupaten Banyumas tercatat sebagai desa dengan jumlah kasus DBD tertinggi di Kecamatan Sokaraja pada tahun 2024. Penelitian ini bertujuan untuk mengetahui implementasi kebijakan penanggulangan DBD di Desa Karangnanas. Penelitian menggunakan metode kualitatif dengan pendekatan deskriptif. Pengumpulan data dilakukan melalui observasi, wawancara, dan dokumentasi. Informan penelitian terdiri atas pemerintah desa, petugas puskesmas, kader kesehatan, dan masyarakat yang dipilih menggunakan teknik purposive sampling. Hasil penelitian menunjukkan bahwa implementasi kebijakan penanggulangan DBD di Desa Karangnanas secara umum telah berjalan cukup baik berdasarkan aspek komunikasi, sumber daya, disposisi, dan struktur birokrasi menurut teori George C. Edward III. Komunikasi dilakukan melalui penyuluhan kesehatan, kegiatan Pemberantasan Sarang Nyamuk (PSN), serta koordinasi antar pelaksana. Sumber daya didukung oleh tenaga kesehatan, kader, fasilitas, dan anggaran, meskipun masih terdapat keterbatasan sarana dan partisipasi masyarakat. Disposisi pelaksana ditunjukkan melalui komitmen dan tanggung jawab dalam pelaksanaan program, sedangkan struktur birokrasi didukung oleh standar operasional prosedur dan pembagian tugas yang jelas. Faktor pendukung implementasi meliputi koordinasi lintas sektor, dukungan pemerintah desa, keterlibatan kader kesehatan, dan media edukasi masyarakat. Adapun faktor penghambat meliputi rendahnya partisipasi sebagian masyarakat, luasnya wilayah pengawasan, keterbatasan tenaga pelaksana, serta tingginya beban kerja kader kesehatan.

Kata kunci: Implementasi Kebijakan, Demam Berdarah *Dengue* (DBD), Pemberantasan Sarang Nyamuk (PSN), Partisipasi Masyarakat.

ABSTRACT

The implementation of the Dengue Hemorrhagic Fever (DHF) control policy is an important effort in suppressing the high number of DHF cases in Indonesia. Karangnanas Village, Sokaraja District, Banyumas Regency was recorded as the village with the highest number of DHF cases in Sokaraja District in 2024. This study aims to determine the implementation of the DHF control policy in Karangnanas Village. The study used a qualitative method with a descriptive approach. Data collection was carried out through observation, interviews, and documentation. Research informants consisted of village government, health center officers, health cadres, and the community selected using a purposive sampling technique. The results of the study indicate that the implementation of the DHF control policy in Karangnanas Village has generally been running quite well based on aspects of communication, resources, disposition, and bureaucratic structure according to the theory of George C. Edward III. Communication is carried out through health education, Mosquito Nest Eradication (PSN) activities, and coordination between implementers. Resources are supported by health workers, cadres, facilities, and budgets, although there are still limitations in facilities and community participation. Implementer disposition is demonstrated through commitment and responsibility in program implementation, while the bureaucratic structure is supported by standard operating procedures and a clear division of tasks. Supporting factors for implementation include cross-sector coordination, village government support, the involvement of health cadres, and community education media. Inhibiting factors include low community participation, the vastness of the monitoring area, limited implementing personnel, and the high workload of health cadres.

Keywords: *Policy Implementation, Dengue Hemorrhagic Fever (DHF), Mosquito Nest Eradication (PSN), Community Participation*