

IMPLEMENTATION OF CLEAN AND HEALTHY LIVING BEHAVIOR IN SCHOOL-AGE CHILDREN IN TEMAJUK VILLAGE, WEST KALIMANTAN

Dodik Limansyah^{1*}, Ruri Virdiyanti², Fitriah³

^{1,2,3}STIKes Yarsi Pontianak

e-mail: limansyah1210@gmail.com¹, myruree@gmail.com², fitriahbaharuddin@gmail.com³

Abstrak

Desa Temajuk merupakan wilayah yang berada di perbatasan antara Indonesia – Malaysia, saat ini hanya memiliki satu fasilitas kesehatan berupa puskesmas dan rumah sakit berjarak yang cukup jauh dari pemukiman masyarakat. Anak usia sekolah merupakan kelompok yang berisiko terkena masalah kesehatan seperti penyakit diare, Ispa dan lain-lain. Periode anak usia sekolah merupakan titik awal pembentukan perilaku sehat sehingga menjadi sasaran strategis pendidikan kesehatan, Perilaku Hidup Bersih dan Sehat (PHBS) yang dipraktikkan atas dasar kesadaran sebagai hasil pembelajaran, yang menjadikan seseorang, keluarga, kelompok atau masyarakat mampu menolong dirinya sendiri secara mandiri dibidang kesehatan dan berperan aktif dalam mewujudkan kesehatan masyarakat. Hal ini yang mendorong dilaksanakannya pengabdian pada masyarakat tentang cuci tangan pakai sabun (CTPS). Metode yang digunakan dalam pengabdian benar. Hasil kegiatan pengabdian masyarakat ini adalah anak usia sekolah memahami dan mampu mendemonstrasikan masyarakat ini yaitu memberikan edukasi langsung melalui penyuluhan dan demonstrasi cara mencuci tangan yang 6 langkah cuci tangan pakai sabun dengan benar.

Kata kunci: Perilaku Hidup Bersih Dan Sehat, Anak Usia Sekolah, Pendidikan

Abstract

Temajuk Village is an area on the border between Indonesia - and Malaysia. It only has one health facility, a health center, and a hospital, which are far from residential areas. School-age children are a group that is at risk of health problems such as diarrheal diseases, respiratory infections, and others. The period of school-age children is the starting point for the formation of healthy behavior so that it becomes a strategic target for health education. Clean and Healthy Behavior (PHBS), which is practiced based on awareness as a learning outcome, allows a person's family, group, or community to help themselves independently in the health field and play an active role in realizing public health. This encourages the implementation of community service regarding hand washing with soap (CTPS). The method used in this community service is to provide direct education through counseling and demonstrations on adequately washing hands. This community service activity results in school-age children understanding and demonstrating the six steps for washing hands with soap properly.

Keywords: Clean And Healthy Living Behavior, School-Age Children, Education

INTRODUCTION

Improving clean and healthy living behavior is essential for well-being, especially in school-age children (Rexmawati & Santi, 2021; Suhadi et al., 2024). In the context of Temajuk Village in West Kalimantan, implementing such behavior is very important to ensure the younger generation's physical, mental, and emotional health. Clean and healthy living behavior includes various aspects such as personal hygiene, good nutrition, regular physical activity, and environmental cleanliness (Syamsiah & Suralaga, 2024). This behavior plays a vital role in preventing the spread of disease, improving physical fitness, and cultivating a positive mindset (Erfana & Kamsina, 2021). In the case of school-age children, adopting clean and healthy living behaviors contributes to their well-being. It has a broader impact on society by reducing the burden of healthcare costs and increasing overall productivity.

The PHBS program was developed based on the Minister of Health of the Republic of Indonesia Number 2269/MENKES/PER/XI/2011 regulation. In this guideline, several arrangements regulate efforts to increase PHBS, including household settings, health institution settings, public place settings, workplace settings, and educational institution settings (Hendrawati et al., 2020).

Based on the number of school-age children (6-12 years) in Indonesia, it ranks the highest at 26,504,160 people. Therefore, elementary school-age children are a strategic target for implementing health improvement programs in Indonesia. School-age children are included in the risk group because they are influenced by biological, behavioral, physical, and social-environmental risk factors. According to research conducted by Yulianti (2015), several factors cause students who do not carry out clean and healthy living behaviors. These factors include students having low knowledge about PHBS, PHBS indicators, PHBS benefits, and disadvantages of not PHBS.

The impact of not carrying out clean and healthy living behaviors will cause several diseases, including worms, diarrhea, toothache, skin pain, malnutrition, and other diseases, which ultimately result in the low degree of health in Indonesia and the low quality of life of Indonesian resources (Sukmawati et al., 2021). The study's results showed that if the school environment is dirty, it will cause discomfort in the learning atmosphere, decrease student achievement, and make the school's image terrible.

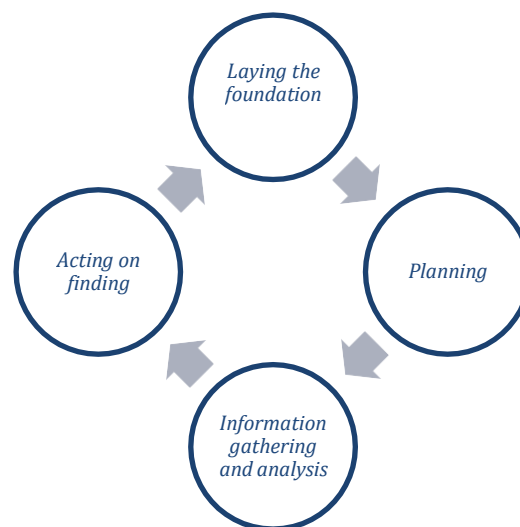


Figure 1. Implementation Method

The impact of not implementing PHBS is one of the government's bases in launching programs that aim to change unhealthy behavior to be healthy, so schools are expected to continue to keep their environment clean and teach PHBS to all students (Lolowang et al., 2017). In making efforts to prevent these impacts, cross-sectoral cooperation is needed, in this case, the role of health workers, in particular, is required nurse.

By paying attention to the above problems, it is necessary to carry out this community service program to increase knowledge, attitudes, and behaviors of clean and healthy living so that students always keep the environment healthy and change unhealthy behavior to healthy. In this case, the LPPM STIKES YARSI Pontianak TEAM, in collaboration with the government of Temajuk Village, Sambas Regency, made an activity, "Implementation of Clean and Healthy Living Behavior in School-Age Children."

METHOD

The method used in Community Service activities is community development with counseling methods using lectures, questions, answers, discussions, and simulations to improve the knowledge and skills of school children about PHBS, namely hand washing with soap (CTPS). The material provision is carried out by discussion and demonstration methods that are packaged systematically to be enjoyable for participants. The speaker tries to deliver the material in a language that participants easily understand. After the material was given, the training activity continued with discussions and simulations between participants. This discussion was carried out warmly so that participants could understand the material well.

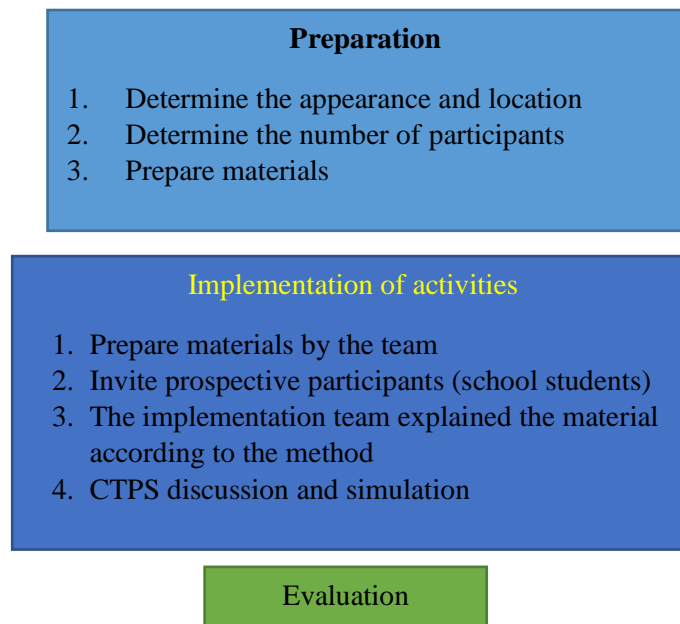


Figure 2. Stages of activity

The implementation was conducted at the Temajuk Health Center Hall, Sambas Regency, attended by 30 participants. The counseling began with a pre-test on CTPS, which was intended to see the level of knowledge and skills of participants, then continued with the provision of material for 30 minutes and then continued with a demonstration of how to wash hands with a 6-step method using soap practiced by each child.

RESULTS AND DISCUSSION

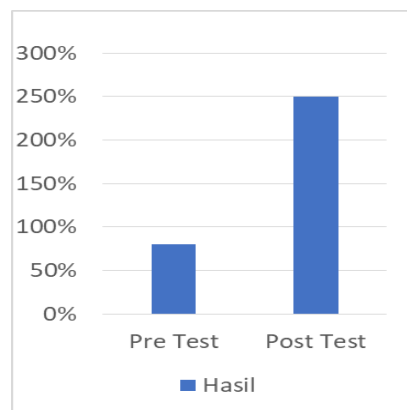
Before choosing the service location, the team surveyed and selected the location of Temajuk Kab village. Sambas with various considerations, including conformity with the institution's road map, namely maritime areas. The team then conducted location exploration, situation analysis, and initiation, sought approval from the local village head, and entered into a cooperation contract with the head of the puskesmas and school principal to discuss what activities would be carried out in community service activities. Counseling materials are made as power points equipped with exciting images and displayed through the Projector Screen (LCD). During the activity, the students were very enthusiastic about receiving the material we provided and doing a 6-step handwashing demonstration, and they demonstrated how to wash their hands properly.

We also share with parents, puskesmas officers, health cadres, and teachers so that they can support each other and remind their students to wash their hands with soap and carry out clean and healthy living behaviors both in the school environment and at home.

Table 1. Target Achievement Expectations before and after CTPS education program

No	Event Name	Information
1.	Knowledge of school children about PHBS in Temajuk village	Pre-test and post-test were used to educate participants about healthy living behavior (CTPS) in 6 steps.
2.	Skills	Demonstration of how to wash hands with soap (CTPS)

(Source: primary data, 2023)



Graph 1. Pre and Post-test results



Figure 3. Community Service Activity Process

Despite its importance, implementing clean and healthy living behavior in school-age children in Temajuk Village faces several challenges. This can include limited access to clean water and sanitation facilities, lack of awareness regarding good nutrition, and lack of recreational space for physical activity. In addition, cultural beliefs and practices can also influence the acceptance and application of clean and healthy living behaviors. Understanding these challenges is critical in developing effective strategies to encourage and sustain such behavior in society.

Implementing clean and healthy living behaviors requires a multilateral approach to overcoming challenges. Collaborative efforts involving local governments, schools, healthcare providers, and community leaders are essential. Introducing educational programs in schools that emphasize the importance of personal hygiene, healthy eating habits, and regular exercise can significantly impact a child's behavior. In addition, infrastructure improvements such as water and sanitation facilities, as well as the creation of safe and accessible spaces for recreational activities, can contribute to the successful implementation of clean and healthy living behaviors.

Involving the community in improving clean and healthy living behavior is paramount. Involving parents, caregivers, and local leaders in discussions can help overcome cultural barriers and rally support for implementing positive change. Empowering communities to take ownership of their health and well-being fosters a sense of responsibility and accountability. For example, building community gardens to promote organic produce and local sources encourages healthy eating and fosters a sense of community participation.

In conclusion, implementing clean and healthy living behavior in school-age children in Temajuk Village, West Kalimantan, has an essential meaning for the community's welfare. Sustainable change can be achieved by addressing challenges through collaborative efforts, promoting community engagement, and empowering individuals. The long-term benefits of instilling clean and healthy living behaviors in children go beyond physical health, encompassing social and economic aspects. It's essential to recognize the value of such implementation and work to create a supportive environment where children can thrive and lead healthy lives.

CONCLUSION

Community service activities were conducted at the Temajuk Village Pusekmas Hall, attended by school students, parents, and health workers. The results of the activity in the form of CTPS

education and demonstrations and evaluations with pre-test and post-test, the results showed that there was an increase in the knowledge and skills of elementary school students in grades 4 and 5 about the importance of getting used to handwashing with soap (CTPS) for personal hygiene and prevention of infectious diseases. Hopefully, this service activity can continue as an effort to empower the community to improve its optimal health status.

ACKNOWLEDGMENTS

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