Empowerment Program In Improving Healthy Behavior In Students Throuh PHBS In State Elementary Schools (SD) 25 Ternate City

Hairudin La Patilaiya

Public Health Study Program, Faculty of Health Sciences, Muhammadiyah University of North Maluku * Corresponding Author: Email: <u>hairudinpatilaiya25@gmail.com</u>

Abstract.

Clean and healthy living behavior (PHBS) in schools is an activity to empower students, teachers and the community of the school environment to want to adopt a healthy lifestyle, thus creating a healthy school. School age children are a critical age, because at that age a child is vulnerable to health problems. Students in elementary schools are the right targets to be objects of counseling about clean and healthy living behaviors (PHBS) with the aim of increasing students' knowledge and understanding of clean and healthy living behaviors. The activity was carried out on January 7, 2020 at the 25 state elementary schools in Ternate City. The results of counseling were an increase in knowledge from the results of the pre-test 35.5% and the post-test 65.5% about PHBS from 27 students with 10 questions.

Keywords : Empowerment, Counseling, Healthy Behavior, Students

1. INTRODUCTION

Clean and Healthy Living Behavior (PHBS) is a set of behaviors that are practiced on the basis of awareness as a result of learning that makes a person or family who can help themselves in the health sector and play an active role in realizing their community.[1]. Until now, PHBS has become a special concern for the government. This can be seen from the placement of PHBS as an indicator of health improvement achievement in the 2015-2030 Sustainable Development Goals (SDGs) program. In the SDGs, PHBS is a prevention strategy with a short-term impact on improving health at three regional levels, namely schools, families and communities.[2]

As an educational institution, schools have a strategic role and position in health promotion efforts. School-age children, both at the pre-school and elementary school levels, are a child's age which is very different from adulthood. In this age period, there are many health problems that will determine the quality of children in the future. These health problems include general health, developmental disorders, behavioral disorders and learning disorders. Generally, these health problems will hinder student achievement in school [3]

PHBS in educational institutions is a set of behaviors that are practiced by students, teachers, and the community of the school environment on the basis of awareness as a result of learning, so that they can independently prevent disease, improve their health, and play an active role in creating a healthy environment. Nationally, there are 8 indicators used as a measure to assess and determine PHBS in educational institutions including washing hands with running water and using soap, consuming healthy snacks in the school canteen, using clean and healthy latrines, regular and measured exercise, eradicating mosquito larvae, do not smoke in school, throw garbage in the right place, weigh body weight and measure height [4]. Based on Law Number 36 of 2009 Article 79 concerning Health, it is emphasized that school health is held to improve the ability of students to live a healthy life in a healthy environment so that they can learn, grow and develop in harmony so that they are expected to become quality human resources[5].

School age children are a critical age group, because at that age a child is vulnerable to health problems. In addition to being prone to health problems, school-age children are also very sensitive to stimuli so that they can be easily guided, directed, and instilled in good habits, including habits of having a clean and healthy lifestyle. In general, children this age also have the nature of always wanting to convey what they receive and know from others [3]. Health problems that often arise at school age (ages 6-10) are behavioral disorders, physiological development disorders, learning disorders and general health problems. Various kinds of problems arise in school age children, but the problems that usually occur are general health problems. Common health problems that occur in school-age children are usually related to personal and environmental hygiene such as brushing teeth properly, personal hygiene, and the habit of washing hands with soap, and cleaning nails and hair [6]

School is an educational institution where children are given knowledge that can shape character, mindset and also traits towards a better direction. Apart from being a formal means, which is implemented outside the home as a means of education, a lot of knowledge and experience can be obtained there, one of which is an understanding of PHBS, in this case the education unit at the elementary school level. This clean and healthy lifestyle (PHBS) is very important because the age of children at the elementary school level is still young and still in development, this PHBS education must be implemented because when it is implemented early on, it will become a habit and become a life style. them and in the end gave birth to healthy Indonesian children. When Indonesian children are healthy and strong, our country will be more advanced. School children are the main capital in development for the future. Students at SD Negeri 25 Ternate City do not have a good clean and healthy lifestyle and are prone to being exposed to unhealthy food and snacks, this is the right target to be used as an object of education regarding clean and healthy living habits (PHBS).

II. METHODS

The methods used in this community service are counseling and simulation. The activity was held at SD Negeri 25 Ternate City on January 7, 2020. As the target group or partner of this activity, 27 students participated. Community service activities are carried out with various activities, namely: Conducting counseling to introduce and provide knowledge and understanding to students from an early age regarding clean and healthy living habits, accompanied by a simulation of how to wash hands properly and correctly.

The counseling and simulations given to students are carried out in three stages, namely the planning, implementation and monitoring and evaluation stages. At the planning stage, namely coordinating with the principal and the teacher council, applying for an implementation permit, preparing facilities such as places, tools, materials, banners, questions and schedules. Furthermore, at the implementation stage, it is carried out including transferring information about clean and healthy living habits (PBHS) and simulating proper and correct hand washing. For material briefing to students, (Nurul Fatimah) as presenters at the counseling, (Anisa Tamrin, and Mozza Virani Moksin) as the makers of pretest and posttest questions and share them during counseling, (Wulandari N Mustafa, and Yeyen Djobubu Dailangi) made material socialization, (Nurul AJ Hakim,) Delivered a letter for outreach, (Srinatun Masud and Fahlia Jainudin) the documentation section (Aditya Nasrun), and as a companion to the PHBS Simulation is Putri Ruslan, as a companion lecturer in the PKIP Basics course (Health Promotion and Science Behavior), namely Mr. Hairudin La Patilaiya SKM. M.Kes. After receiving the material, students then deepen the material using the simulation method. In the simulation session students are asked to practice how to wash their hands properly and correctly after being simulated by the presenters. At the evaluation stage, questionnaires were distributed to measure the level of knowledge before (Pre-Test) and after (Post-Test) counseling.

III. RESULT AND DISCUSSION

Before the extension material was delivered to students, the ibM team distributed pretest sheets about PHBS to test students 'knowledge, and after doing counseling, the ibM team re-tested students' knowledge about PHBS by distributing posttest sheets to students with a total of 10 questions. The documentation of outreach activities is described in the following figure:



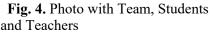
Fig.1 Delivery of PHBS Materials



Fig. 2. PHBS simulation







To find out the level of knowledge the Extension Team provides sheets (Pre-Tets and Post-Test), it can be seen in the table below:

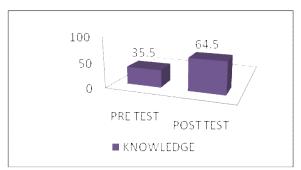


Table 1. Outreach measurement results (pretest and posttest)

Based on the results (pretest and posttest), the above shows an increase in the knowledge of students about PHBS at SD Negeri 25 Kota Ternate before and after counseling can be seen from the results (35.5% pretest and 64.5% posttest) of 27 students / students

From the results of the counseling activities above, it shows that there is an increase in the knowledge of students about PHBS in SD Negeri 25 Ternate City, before and after counseling. This can be seen from the results (pretest 35.5%) and posttest 64.5%) of 27 students with 10 questions.

This result is in line with Rusdiaya research showing that the level of students' knowledge about PHBS before education was in the moderate category with an average of 7.0188, after education was in the good category with an average of 9.4844 and there was an effect of education on knowledge of clean and healthy living habits for fifth grade students of SDN Cindai Alus. 1 Banjar Regency, namely the probability value of 0.000 (sig <0.05). means that Ha is accepted or there is an educational effect on PHBS knowledge in schools. According to Sarwono (2014) Knowledge is cognitive elements, which are related to themselves, their behavior and their surroundings. With the knowledge obtained by elementary students after educational activities about

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PHBS, it will have an impact on changing behavior according to the knowledge they have. Changes in behavior towards a positive direction in terms of PHBS will continue to be a habit from elementary school to adulthood [7].

So education is very effective in increasing student knowledge, so it is very important for continuous coaching. PHBS guidance to elementary students can be through outreach by schools and health workers by using media posters, screening videos about the importance of PHBS or power points about PHBS.

Therefore, face-to-face PHBS counseling is very influential on increasing students' knowledge, because before the socialization material was delivered they had not received PHBS information, and after being given counseling material they were able to find out information about PHBS, therefore it is hoped that students can adopt a clean and healthy lifestyle

IV. CONCLUSION

After attending the counseling, there was an increase in knowledge from the results of the Pre-Test 35.5% and Post-Test 65.5% about PHBS from 27 students with 10 questions.

V. ACKNOWLEDGMENTS

I would like to express my gratitude to the principal and the Board of Teachers and students of SD Negeri 25 Kota Ternate, thank you also to the students of the Public Health Study Program, Faculty of Health Sciences, Muhammadiyah University on behalf of Nurul Aj. Hakim, Nurul Fatimah, Aditya Nasrun, Srinatun Masud, Anisa Tamrin, Fahlia Jainudin, Mozza Virani Moksin, Putri Ruslan, Wulandari N. Mustafa and Yeyen Djobubu Dailangi.

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