



Clean And Healthy Lifestyle Behavior Education Program to Improve Personal Hygiene in Elementary School

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ABSTRACT

Clean and Healthy Living Behaviors (PHBS) are about all health practices used due to individual awareness for the family and its members to assist themselves in health and play a significant role in community activities. Such activity can protect against several illnesses, including infections. This activity aims to teach the students of SD Negeri 1 Karang Agung village about the meaning of PHBS and how it is applied. This exercise involves PHBS education, including using excellent and appropriate toothbrushes, the WHO six-step hand washing procedure, and disease information. The activities indicated that many SD Negeri 1 Karang Agung students still do not understand personal hygiene. Promoting the PHBS program at the school level and replicating similar activities in other villages or sub-district is recommended.

Keywords: PHBS, Health Education, personal hygiene, Ogan Komering Ilir Regency

INTRODUCTION

Clean and Healthy Living Behavior (PHBS) is a set of behaviors that are practiced based on awareness as learning outcomes, which make a person, family, group, or community able to help themselves (independently) in the health sector and play an active role in realizing public health (Kouakou et al., 2021). The program for implementing Clean and Healthy Behavior (PHBS) is a form of effort to provide lessons in the form of experience for each individual, family member, group, and the general public. Classes can be through communication media, providing news, as well as

education so that there is an increase in knowledge, changes in attitudes, and behavior through approach methods from the leadership, fostering an atmosphere, and also carrying out self-efficiency movements in community groups (Dwi et al., 2020).

The government has launched the PHBS Development Program for a long time, but in fact, the success of the program still needs to reach the target (Direktorat Pendidikan Anak Usia Dini Kementerian Pendidikan, Kebudayaan, Riset, dan Teknologi, 2021). The percentage of PHBS

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implementation in family arrangements climbed from 50.1% in 2010 to 53.9% in 2011; it was 56.5% in 2012 before falling to 55% in 2013. Therefore, family members who have used PHBS must continue to improve. Because according to the achievements in 2013, it was 65%, while the target for 2014 was 70%. Healthy living habits have become a major priority, particularly for the government. The 2015-2030 Sustainable Development Goals (SDGs) initiative uses PHBS as a benchmark for increasing health coverage. PHBS in SDGs is a form of prevention effort that has a short-term impact on improving health in three places, including the scope of family members, the general public, and schools (Kementerian Kesehatan Republik Indonesia, 2016). The achievement of PHBS in 2013 still needs to be higher. The Ministry of Health also stated in 2011 that these achievements were still below the achievement indicators set out in the Strategic Plan policy for 2010-2014. The target achievement for homes that have carried out clean and healthy living behaviors in their daily lives for 2014 is 70% (Kementrian Kesehatan Republik Indonesia, 2011).

Reported PHBS indicators to the South Sumatra Provincial Health Office were washing hands at 88.11%, physical activity at 83%, eating fruit and vegetables every day at 84%, using clean water at 87%, and there was a change in smoking behavior by 65% not smoking in the house (Dinas Kesehatan Provinsi Sumatera Selatan, 2021).

MATERIAL AND METHODS

The activity was carried out on Thursday, 16 February 2023, 07.00-11.00 at SD Negeri 1 Karang Agung Village Jejawi Sub-district Ogan Komering Ilir District. This activity involved students, teachers, and employees of SD Negeri 1 Karang Agung. The schedule began in the second week of the UMP 59 KKN. The member of Post 306 carried out the preparation of the activity framework, division of committee tasks, and PHBS facilities at schools, such as obtaining permits from the school principal and asking the school about PHBS, both at school and personal hygiene students.

Implementation and Evaluation Stages undertaken to improve partner issues include: 1. Inviting students, teachers, and employees of SD Negeri 1 Karang Agung to PHBS activities; 2. Socialization regarding PHBS, to students and teachers, and employees to be given education and socialization regarding the importance of PHBS in improving personal hygiene; 3. The practice of implementing PHBS, accompanied by a committee; 4. PHBS facilities for practice, tools, and materials are provided, such as four barrels filled with water and four bottles of hand-washing soap. Students are asked to bring brushes and toothpaste; containers/bottles/cups filled with mineral water for tooth brushing activities for students; 5. Evaluate students by giving games/quiz activities with prizes to recall what has been explained by the committee.

RESULTS AND DISCUSSIONS

The activities went smoothly, and the students were enthusiastic about participating in the program from the beginning to the end. The total number of people in SD Negeri 1 Karang Agung is 117 people consisting of class 1 (19 people), class 2 (21 people), class 3 (10 people), class 4 (16 people), grade 5 (21 people), grade 6 (20 people), as well as teachers and employees (10 people). On the day of the activity, two teachers and employees could not participate, then 115 people received the PHBS education program (Figure 1).

Before starting the educational event, students, teachers, and employees are introduced to what will be done at school so that the activities and education provided are focused and easier to understand. PHBS education is in Figures 2 and 3. Figures 4 and 5 show the media and activities for

WHO's 6-step hand washing with soap and brushing toothbrush. The correct six steps of washing hands according to WHO are as follows (Sumaiyah et al., 2019): 1. Pour liquid hand rub or soap on palms, then wipe and rub palms gently in a circular direction; 2. Wipe and rub the back of both hands alternately; 3. Rub between fingers until clean; 4. Clean fingertips alternately with interlocking positions; 5. Rub and rotate the thumbs alternately; 6. Place fingertips in palms and rub gently. Brushing teeth is good thrice daily, such as after breakfast, lunch, and bed (Santi & Khamimah, 2019).

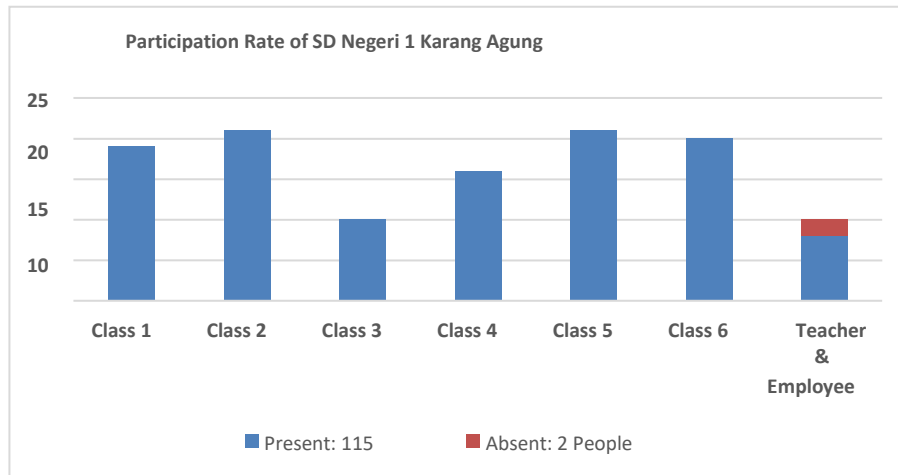


Figure 1. Participation Rate of SD Negeri 1 Karang Agung in Program Activities PHBS



Figure 2. Announcement and Introduction from the Principal and the Committee.



Figure 3. PHBS Education (Hand-washing, Toothbrushing, Illness) for Students, Teachers, and Employees of SD Negeri 1 Karang Agung



Figure 4. The Practice of Handwashing with Soap 6 Steps WHO.

Table 1. Percentage of Knowledge About PHBS in SD Negeri 1 Karang Agung

No.	Public	Assessment Aspect	Number of people
1.	Students	11	21
2.	Teachers and employees	13	23

Tables 1 showed that the number of students who understand PHBS numbered 65 people out of 107; meanwhile, teachers and employees who understand PHBS have ten out of 10 people. In the series of evaluations, the committee summoned 6 out of 107 students from each class representative to be able to repeat the explanation and practice of PHBS for washing hands and brushing their teeth correctly. If they were correct, the student would receive a prize (Figure 6).



Figure 5. Toothbrush Practice and Explanations from the Committee.



Figure 6. Evaluation as well as Break and Games/Quiz and Distribution of Prizes

CONCLUSIONS AND RECOMMENDATIONS

PHBS is critical in remote villages, especially for elementary school students. Teachers should continue to educate children so that they become good habits for the future of children and the surrounding community. Promoting the program and making similar activities in other villages or sub-district is recommended. The government can promote this PHBS program at a broader community level and make PHBS a life habit to improve personal hygiene for the village community.

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Conflict of Interests

The authors declared that no potential conflicts of interest with respect to the authorship and publication of this article.

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