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Factors Related to Clean and Healthy Living Behavior in State Elementary School Students in Padang City

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ABSTRACT

Over 90% of elementary school-age children and over 80% of children younger than secondary school-age children are enrolled in schools globally. Early school health promotion will benefit kids, their families, friends, and the community at large (WHO and UNESCO, 2018). According to the Padang City Health Office's annual report for 2021, Puskesmas Lapai has the lowest percentage of families with clean and healthy habits 6.7% of all sub-districts and puskesmas in Padang City. The aim of this study was to identify the variables linked to Padang City primary school kids' clean and healthy living practices. This type of research is quantitative with an analytic approach and cross sectional design. The population in this study were all students of SD totaling 192 people. The sample was taken as many as 85 respondents. The sampling method was purposive sampling. Data collection through interviews and observations. Data were analyzed univariately and bivariately using the chi square test. The results showed that 56.6% of respondents had poor hygiene behavior, low knowledge 65.9%, and poor teacher role 60.0%. There is a significant relationship between knowledge and clean and healthy living behavior (p-value=0.024) and there is no significant relationship between the role of the teacher and clean and healthy living behavior (p-value=0.562). Increase educational programs on clean and healthy living behaviors for the community as a whole, including increased knowledge. There is also a need to evaluate and improve the role of teachers in educating clean and healthy behaviors through better training and support.

Keywords: *Knowledge, Teacher's Role, Clean and Healthy Living Behavior*

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INTRODUCTION

More than 90% of children of primary school age and more than 80% of children under secondary school age are enrolled in schools worldwide. Promoting healthy behavior from an early age in schools will benefit children and their families, peers and the community as a whole (WHO and UNESCO, 2018).As stated in the Ministry of Health's Strategic Plan (Renstra) for 2010-2014, PHBS is one of the government's priority programs through community health centers and functions as an output tool in implementing health development. The target is not only hygiene; More broadly, targets include changes in the physical, biological and socio-cultural environment of society to create a healthy environment and clean living.

According to WHO, every year 100,000 children in Indonesia die from diarrhea because they do not practice PHBS at school. This happens because school children do not wash their hands properly or eat unhealthy food. This shows that children have not done PHBS. Apart from that, because they do not wash their hands with soap, many students at school suffer from worms (Lumongga & Syahrial, 2013).According to Lawrence Green's theory, there are three main factors that influence a person's health. The first is predisposing factors, which means things that make someone behave more easily, such as knowledge, attitudes, beliefs, beliefs, values, traditions, and demographic factors, such as age, gender, and socioeconomic status. The second is enabling factors, which means things that enable or facilitate someone's behavior or actions, such as.

A previous study on PHBS carried out by Yuandra and Ginting (2020) at SD Negeri 046579 Lau Panggunen Village, Karo Regency found that 63% of students did not do PHBS and 72% did not understand it. Indonesian School Sanitation Profile data for 2020 shows that 20.09% of elementary school education units do not have adequate water facilities; Basic access to water facilities at the elementary school level is much higher in urban areas (91%) than in rural areas (74%).Indonesian School Sanitation Profile data for 2020 shows that one in five elementary school education units does not have proper sanitation facilities, amounting to 20.09%. Basic access to sanitation facilities at the elementary school level is higher in urban areas (91%) than in rural areas (74%). Six out of ten elementary school education units do not have proper sanitation facilities, amounting to 13.60%.

Because Padang City is the capital of West Sumatra Province, guidance on clean and healthy living behavior (PHBS) is carried out in various places, such as households, schools, health institutions, offices, public places, places of worship and terminals. According to the annual report of the Padang City Health Service, in 2021, the percentage of households living a clean and healthy lifestyle according to all sub-districts and health centers in Padang City is 6.7%. Lapai Community Health Center is the lowest.Researchers want to investigate what is related to clean and healthy living behavior (PHBS) of Padang City State Elementary School students, based on initial surveys and previous research.

METHODS

This type of research is descriptive quantitative research. This research design uses the methodcross secsional to see the relationship between the independent variable (level of knowledge) and the dependent variable (PHBS).According to Notoatmodjo (2018), the population is all the research subjects studied. This research involved 192 students from Padang City Elementary School. According to Sugiyono (2018), the purposive sampling method was used to calculate the number of research samples using several considerations according to the desired criteria. This research involved 85 students from Padang City State Elementary Schools who were in grades 4 and 5.

Univariate analysis is used to see the frequency distribution of both the independent variable (clean and healthy living behavior) and the dependent variable (level of knowledge, role of teacher). Bivariate analysis was carried out to see the relationship between two variables, namely the independent variable (clean and healthy living behavior) and the dependent variable (level of knowledge, role of teacher) using statistical testsChi Square with a confidence level of 99%. To see the results, the significance is 0.1 so that if the p value ≤ 0.05 then statistically it is said that there is a relationship between the independent variable and the dependent variable, otherwise if p > (0.05) then there is no significant relationship between the variables.

RESULTS

1. Univariate Analysis

a. Implementation of PHBS

Table 1. Frequency Distribution of Respondents Based on the Implementation of Clean and Healthy Living Behavior (PHBS) among Padang City State Elementary School Students

Clean and Healthy Living	F	%
Not Good	48	56,5
Good	37	43,6
Total	85	100

Based on Table 1, it is shown that the majority of students have not implemented Clean and Healthy Living Behavior (PHBS) properly, with 48 students (56.5%) categorized as "not good," while 37 students (43.5%) are categorized as having good PHBS. This indicates that the implementation of PHBS among elementary school students in Padang City is still relatively low.

b. Level of Knowledge

Table 2. Frequency Distribution of Respondents Based on Level of Knowledge About Clean and Healthy Living Behavior (PHBS) in Padang City State Elementary School Students

Level of Knowledge	F	%
Low	56	65,9
Height	29	34,1
Total	85	100

Table 2 shows that most respondents have a low level of knowledge regarding PHBS, with 56 students (65.9%), while only 29 students (34.1%) have a high level of knowledge. This finding suggests that students' knowledge about PHBS still needs to be improved.

c. Teacher's Role

Table 3. Frequency Distribution of Respondents Based on the Role of Teachers in Clean and Healthy Living Behavior (PHBS) in Elementary School Students in Padang City

Teacher's Role	F	%
Not Good	51	60,0
Good	34	40,0
Total	85	100

Furthermore, Table 3 indicates that the role of teachers in supporting PHBS is mostly categorized as "not good," with 51 students (60.0%), compared to 34 students (40.0%) who reported a good teacher role. This implies that the contribution of teachers in promoting PHBS among students is not yet optimal.

2. Bivariate Analysis

a. Relationship between Knowledge Level and Clean and Healthy Living Behavior (PHBS) in Padang City State Elementary School students

Table 2. Relationship between Knowledge Level and Clean and Healthy Living Behavior (PHBS) among State Elementary School Students in Padang City

Work Load	Clean and Healthy Living Behavior						P
	Not Good		Good		Total		
	n	%	n	%	N	%	*Value*
Low	37	66,1	19	33,9	56	100	
High	11	37,9	18	62,1	29	100	0,024
Amount	48	56,5	37	43,5	85	100	

Based on the analysis of the relationship between knowledge level and PHBS among elementary school students in Padang City, the p-value obtained is 0.024 ($p \leq 0.05$). This result indicates that there is a statistically significant relationship between knowledge level and Clean and Healthy Living Behavior (PHBS). Students with higher knowledge levels tend to demonstrate better PHBS practices compared to those with lower knowledge. Therefore, knowledge is an important factor influencing PHBS implementation.

b. The Relationship between the Role of Teachers and Clean and Healthy Living Behavior (PHBS) in Padang City State Elementary School students

Table 3. Relationship between Knowledge Level and Clean and Healthy Living Behavior (PHBS) among State Elementary School Students in Padang City

Work Load	Clean and Healthy Living Behavior						
	Not	Good	Good		Total		P
	n	%	n	%	N	%	*Value*
Low	27	52,9	24	47,1	51	100	
High	21	61,8	13	38,2	34	100	0,562
Amount	48	56,5	37	43,5	85	100	

On the other hand, the analysis of the relationship between the role of teachers and PHBS shows a p-value of 0.562 (p > 0.05), indicating that there is no statistically significant relationship between teacher roles and students' PHBS. However, the role of teachers remains important as a supporting factor in encouraging and reinforcing healthy behaviors among students, even though it was not found to be significant in this study.

DISCUSSION

1. Univariate Analysis

a. Implementation of Clean and Healthy Living Behavior

A study conducted on 85 students who behaved in a clean and healthy lifestyle showed that 48 of the 85 respondents, or 56.5%, did not do so. Clean and healthy living behavior (PHBS) is a collection of actions that are practiced with awareness resulting from learning that enables someone in a family, group or community to help themselves (independently) in terms of health and participate actively in realizing public health (Ministry of Health, 2011).

Suryani's (2017) study found that 53.3% of students at SDN 37, Tapan District, Pekanbaru City had poor PHBS implementation behavior at school. This result is in line with Mardhatillah's (2021) study, which found that 67% of students performed PHBS poorly.

According to the researcher's assumption that there is a lack of PHBS in State Elementary Schools, schools must implement more PHBS programs in schools properly through regular counseling, considering how important PHBS indicators are in schools to maintain student health and prevent disease. The Clean and Healthy Living Behavior (PHBS) data collected shows that schools must implement more PHBS programs in schools as they should.

b. Level of Knowledge

According to research conducted on 85 students, it was found that 56 out of 85 respondents, or 65.9 percent, had low knowledge about clean and healthy living behavior. Ferdi's (2020) research results show that 87.8 percent of respondents do not know what clean and healthy living behavior is, and Sarah's (2020) research found that 70.0 percent of respondents know what clean and healthy living behavior is.Researchers think several things: many students do not know about waste sorting,

which causes them not to put it in its place; and the role of teachers in informing students about the importance of implementing PHBS indicators in schools. Schools must do more to teach students about Clean and Healthy Living Behavior (PHBS). They also have to work together with Community Health Centers to promote PHBS in schools, so that students don't know much about it.

c. Teacher's Role

A study conducted on 85 students showed that 51 out of 85 respondents, or 60.0% of the participants, thought teachers were not responsible for clean and healthy living behavior. The results of this research are in line with research by Santoso (2021), which shows that the role of teachers is not good at 39.1%, and research by Nasiatin (2019), which shows that the role of teachers is not good at 42.1%.Teachers who are not good at encouraging students to apply PHBS have a negative impact on student behavior because teachers are respected people at school, so students tend to follow what teachers say or do Notoatmodjo (2014).

The research results showed that 51 of the 85 people who answered (60.0%) had a poor teacher role in terms of clean and healthy living behavior. Researchers make assumptions about the role of teachers because teachers do not understand the importance of implementing PHBS by students at school. Apart from that, teachers' attitudes towards students' violations or accepting that they are still children, shows that teachers are not doing enough to encourage the implementation of PHBS in schools. When they made observations, researchers found that some teachers only reminded students to wash their hands before eating, throw rubbish away and clean the toilet after using it. Furthermore, researchers found that teachers tended to tolerate and not reprimand students who ate without washing their hands or threw rubbish carelessly and left the toilet without flushing even though the teacher knew that the students were doing it. The teacher said that because the student was still a child, it would take a long time to change for the better. Because this can have a negative impact on students and weaken the school's efforts to instill student character in implementing PHBS, the school must reprimand and remind all teachers to prevent students from violating PHBS indicators at school.

2. Bivariate Analysis

a. Relationship between Knowledge Level and Clean and Healthy Living Behavior (PHBS)

The statistical test results show a p-value (0.024), which shows a significant relationship between the level of knowledge and Clean and Healthy Living Behavior. It was found that the proportion of respondents who showed poor clean and healthy living behavior but with a high level of knowledge was 37 people (66.1%), compared to 11 people (37.9%) who showed poor clean and healthy living behavior. .

The results of this research are in line with research by Santoso (2022) which found a relationship between the level of knowledge and PHBS at SDN Mekarjaya 7 Depok (p-value = 0.000). Another research conducted by Hardiyanti (2019) found a significant relationship between knowledge and clean and healthy living behavior in grade 5 students at SDN Sugutamu, Depok City (p-value = 0.003).

Knowledge is a very important domain for changing behavior. Knowledge is obtained from the experiences of the individual concerned. Education level according to (Notoadmodjo, 2012). States that knowledge is influenced by 3 main factors, namely predisposing factors (predisposing factors), enabling factors (enabling factors), reinforcing factor (reinforcing factors).

The research results show a significant relationship between knowledge and Clean and Healthy Living Behavior (PHBS). Researchers are of the opinion that schools should implement more PHBS in their schools than they already do. Schools must do this by providing regular training that reminds them of the importance of PHBS indicators to prevent students from contracting diseases.

Researchers argue that student knowledge influences PHBS because good knowledge will lead to better behavior overall. Knowledge can be obtained from parents, teachers and the surrounding environment, such as posters about indicators of clean and healthy living behavior. There is a relationship between knowledge and the implementation of clean and healthy living behavior (PHBS) in schools because knowledge is everything that can be known through the five senses.

b. The Relationship between the Role of Teachers and Clean and Healthy Living Behavior (PHBS)

For Plymouth City Public Elementary School students, there was an insignificant relationship between the role of teachers and clean and healthy living behavior (PHBS). It was found that there were more respondents with poor teacher roles, namely 27 people (52.9%), than respondents with good teacher roles, namely 21 people (61.8%).The results of the research are also in line with research conducted at SDN 2 Tataran, South Tondano District, Minahasa Regency in 2023. The p-value = 0.310 was obtained, meaning that there is no relationship between the role of teachers and clean and healthy living behavior (Chyntya L, 2023).

The role of teachers in schools is also very determining for students and their students. Therefore, the success of students in implementing PHBS at school depends on the attitudes and actions of teachers who are examples for their students. Every student is required to maintain school health according to the example of their teacher. Therefore, the presence of teachers in schools not only teaches and educates students, but must also provide examples that students can emulate. According to Kanro (2019), if teachers always teach good habits related to PHBS to their students, their students will automatically find it easier to do PHBS. Apart from that, teachers are expected to always have control over how their students apply PHBS (Kanro, 2019).

Researchers believe that teachers do not properly understand how important it is for students to use PHBS at school. In addition, the fact that teachers accept student violations or admit that students are still children shows that teachers do not have a significant role in helping schools implement PHBS. When they made observations, researchers found that some teachers only occasionally reminded students to wash their hands before eating, throw rubbish away and clean the toilet after using it.

CONCLUSIONS

Based on the results of the study on factors related to Clean and Healthy Living Behavior (PHBS) in Elementary School students in Padang City, it was found that the majority of respondents stated that the implementation of PHBS among students was still poor (56.5%). In addition, most respondents also stated that their level of knowledge about PHBS in SDN 01 and 03 Padang City in 2023 was quite high (65.9%). However, the role of teachers in supporting clean and healthy living behavior was considered still poor by 60.0% of respondents. Statistical analysis showed a significant relationship between the level of knowledge and the implementation of PHBS, with a p value of 0.024. On the other hand, no significant relationship was found between the role of teachers and PHBS behavior, as indicated by a p value of 0.562. These findings indicate that student knowledge is an important factor in the implementation of PHBS, while the role of teachers has not shown a significant influence.

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