

CHILDREN'S CLEAN AND HEALTHY LIVING BEHAVIOR GUIDANCE IN WIDYA ASIH ORPHANAGE SINGARAJA DURING THE COVID-19 PANDEMIC

Hesteria Friska Armynia Subratha¹, Ketut Espana Giri², Ni Komang Sulyastini³, Made Bayu Oka Widiarta⁴, Luh Putu Lila Wulandari⁵

^{1,2,3,4} Fakultas Kedokteran, Universitas Pendidikan Ganesha; ⁵ Fakultas Kedokteran, Universitas Udayana
Email: armynia.subratha@undiksha.ac.id

ABSTRACT

Background: The application of clean and healthy living behavior is one way to prevent the transmission of COVID-19 in children. The service team feels the need to do community service to assist in clean and healthy life behavior for children in orphanages during the COVID-19 Pandemic.

Objectives: The objectives are: to increase knowledge of orphanage children's knowledge about clean and healthy living behavior; to improve the implementation of clean and healthy living behavior.

Methods: This mentoring activity is carried out in several stages: 1) preparation stage; 2) pre-implementation stage; 3) implementation of PHBS practice and assistance; 4) Completed execution .

Results: The average value of knowledge before and after health education increased by 40 points, indicating that the health education was effective in increasing the knowledge of health education participants.

Conclusion: The outcomes of clean and healthy living health education activities increased knowledge and implementation of clean and healthy living.

Keywords: PHBS, COVID-19 pandemic, Children, orphanage.

INTRODUCTION

Worldwide, it has been reported that more than 12 million children have tested positive for COVID-19 since the start of the pandemic in 2020. Reported cases of COVID-19 in the pediatric cohort jumped dramatically in early 2022 during the surge in the Omicron variant, to nearly 4.2 million cases. Children have been reported since early January worldwide. Currently, child cases are very high, even doubling compared to the peak of the Delta wave in 2021. The American Academy of Pediatrics and the Children's Hospital Association report that since the pandemic began, children represent 18.9% of the total accumulated cases. By early 2022, this figure had risen to 25.0% of weekly reported Covid-19 cases (American Academy of Pediatrics and the Children's Hospital Association, 2022). In Indonesia, there were 676 cases of COVID-19 in children on January 24, 2022.

Positive confirmed cases of COVID-19 that occurred in children continued to experience a fairly sharp upward trend. As of January 31, 2022, positive confirmation of COVID-19 in children in Indonesia increased to 2,775 cases and again increased significantly until February 7, 2022, when it reached 7,190 cases of COVID-19 in children (IDAI, 2022). According to the Minister of Social Affairs No. 30 of 2011, the orphanage or child social welfare institution (LKSA) is a child social welfare business institution that has the responsibility to provide social welfare services to neglected children (Ministry of Social Affairs RI, 2011). Orphanages are places where large numbers of children gather and live. This makes orphanages one of the places that are vulnerable to COVID-19 transmission (UNICEF Indonesia, 2020). During the pandemic, children are confronted with online schools, which forces orphanage

residents to participate in a variety of learning activities in the orphanage; however, given the large number of orphanage residents, the application of maintaining a distance between friends is difficult to implement. The government has been aggressively educating about the prevention of COVID-19 on various social media since Indonesia entered the era of adapting to new habits, but the level of awareness about caring for the prevention of COVID-19 for each individual has not been fully implemented in daily activities. Some COVID-19 prevention education is still considered boring and requires time to change lifestyle, such as the habit of wearing masks, washing hands with running water, and avoiding crowds (Anugrah Utami & Sani, 2021).

Maintaining health is very important to start early on, especially during the COVID-19 pandemic. This is important because children are susceptible to disease because their immune systems are not as strong as adults in general (Malaka et al., 2020). In addition, children usually put their hands in their mouths, whatever objects are held, and then they try to eat them, so they don't know if it's dirty or not. They don't know. That is the danger if children are not taught and accustomed to healthy living (Tabi'in, 2020). The application of clean and healthy living behavior (PHBS) in children is one way to prevent the transmission of COVID-19 in children. PHBS includes all behaviors that aim to provide education for individuals and groups to increase knowledge and behavior so that they are aware of and able to practice PHBS. Through PHBS, it is hoped that the community can recognize and overcome their own problems and can apply healthy ways of living by maintaining, maintaining and improving their health (Ministry of Health, 2016). According to Razi et al. (2020), the behavior of implementing PHBS in Based on the problems described above, the service team feels the need to do community

preventing the COVID-19 virus can be in the form of how to wash hands properly and correctly, how to apply cough etiquette, how to do physical distancing (maintaining physical distance), and how to maintain personal hygiene.

The results of the preliminary study were carried out by the community service team at LKSA Widhya Asih Singaraja by conducting observations and interviews with children and LKSA managers. From the observations, it was also found that the facilities for washing hands, which is one of the criteria for preventing COVID-19, already exist, but they have not implemented the correct way of washing hands. The results of interviews conducted randomly with children at LKSA Widhya Asih Singaraja showed that most of the children did not know how to implement clean and healthy living behavior (PHBS), which is the protocol for preventing COVID-19. From the results of interviews with LKSA managers, it was obtained that 42 of the children being cared for and living in this orphanage came from groups of orphans, orphans, and orphans, as well as children from underprivileged families. The results of the interview also show that during the current COVID-19 pandemic, children really need education and assistance in implementing clean and healthy living behaviors during the pandemic. Children in orphanages should be given special instruction on how to prevent and spread COVID-19. It's just that the limited sources of information both from parents, companions, or other media make them still need to get guidance to implement clean and healthy living behavior (PHBS), which is the protocol for preventing COVID-19. So the LKSA manager hopes for assistance in clean and healthy life behavior for children at LKSA Widhya Asih Singaraja during this COVID-19 Pandemic.

service to provide assistance in clean and healthy life behavior for children in

orphanages. The objectives of the implementation of this service are: 1) increase knowledge of orphanage children's knowledge about clean and healthy living behaviors, which is the protocol for preventing COVID-19; 2) improve the implementation of clean and healthy living behaviors (PHBS), which is the protocol for preventing COVID-19 in orphanage children.

METHOD

The implementation of this community service activity was carried out by the orphanage Widhya Asih Singaraja children's service team regarding education and the application of clean and healthy living behavior in children during the COVID-19 Pandemic using the following activity methods:

In the preparation stage, it begins with a meeting between the Service Team and the orphanage manager, Widhya Asih Singaraja, to explain the aims, objectives, and objectives of the activity. Furthermore, the intention is to obtain a permit to carry out activities. A review of the place that will be used as a place for PHBS assistance is carried out, as well as the available facilities and infrastructure.

Pre-implementation stage. Before the activity begins, an initial evaluation (pretest) is carried out to assess the participants' knowledge of PHBS. Furthermore, in educational activities for Clean and Healthy Life Behavior in Children During the COVID-19 Pandemic by delivering material in the form of lectures, namely providing education to the audience related to PHBS in the form of understanding PHBS, benefits of PHBS, description of PHBS, and efforts to implement PHBS in the prevention of transmission of COVID-19 in children,

Implementation of practice and mentoring of clean and healthy living behaviors, which is the protocol for preventing COVID-19 in orphanage children. The documentation for

the implementation of the activities is as follows:



Figure.1

Final execution A final evaluation (posttest) was carried out to determine the ability of the participants regarding the implementation of Clean and Healthy Lifestyle for Children During the COVID-19 Pandemic.

RESULTS AND DISCUSSION

Health education activities will be held on Tuesday, July 5, 2022, from 14.00 to 18.00 Wita at the orphanage Widhya Asih Singaraja. The team put up banners aimed at letting the target know the purpose of this event, and they will always remember what the team has given so that it will be useful for the long term. There were 42 participants in attendance. Before the health education was conducted, the pretest was carried out first, then the material was given, and finally the posttest was finally carried out. The materials provided were PHBS indicators in schools, such as washing hands using soap and running water, consuming healthy snacks, using clean and healthy latrines, exercising regularly and measurably, eradicating mosquito larvae, not smoking and measuring weight and height every six months. and throw the trash in its place. The results of service activities are in the form of an analysis that describes the average value of knowledge before and after health education is carried out on clean and healthy living behavior. The results of the activities are presented in Table 1.

Table 1. Increasing Knowledge About Clean and Healthy Life Behavior in Orphanages Singaraja Widhya Asih (n:42)

Category	Mean	Min	Max
Knowledge			
Pretest	50	30	60
Posttest	90	80	100

Based on the table, it shows that the average value of knowledge before and after health education has increased by 40 points, which means that the health education carried out has an impact on increasing the knowledge of health education participants at the orphanage Singaraja Widhya Asih.

The increase in the average value of knowledge is possible because health education uses appropriate methods and media, such as lectures, discussions, and demonstrations with video screenings. Media leaflets, posters, and flipcharts also help students to easily remember the material. Accurate use of health education methods and media can increase participants' understanding of absorbing the information obtained. This is in accordance with the research conducted (Nurfajriah & Erianef, 2018) that the use of lecture, discussion, and demonstration methods greatly determines the success of health education activities. A person's behavior is influenced by the knowledge they have. The amount of information obtained will increase one's knowledge. This happens because information is an important way to increase students' knowledge. One's knowledge can be obtained through print or electronic media. Taking this into account, the orphanage should be equipped with various media as sources of information. Sources of information can be in the form of posters, leaflets, or flipcharts. This is an effort to increase information because it is feared that if they lack information, it will cause health problems. Children at the orphanage Widhya

Asih Singaraja have received health education provided by several health workers but with minimal media. Of course, with improvised methods and media, not much information is obtained by students. Aro et al. (2019), health problems can be caused by the lack of information obtained. Another condition that supports the success of health education is a very harmonious situation when health education is carried out. The presentation of the material went smoothly, and the participants seemed to be focused and paying attention to what was being demonstrated. The use of lecture, discussion, and demonstration methods makes participants free to share. Participants can interact with the presenters without any obstacles. After the material has been delivered, it is followed by a question and answer session which aims to find out the extent to which the participants' knowledge has changed from before and after being given health education. The service team gave rewards to participants who were able to answer questions correctly and also gave prizes to participants who were willing and able to demonstrate the correct hand washing steps. This is intended to express gratitude to those who took the risk and paid close attention to the activities. This is in line with the results of research (Kusyairy et al., 2018), which states that giving rewards can improve learning outcomes.

Increased knowledge from this activity is a positive start in instilling healthy living habits in children. According to the theory of health behavior (Green Judith M Ottoson, 2005) which states that there are 3 factors that influence a person's health behavior. Because PHBS is a health behavior, its implementation can be determined by predisposing factors, enabling factors, and reinforcing factors. Predisposing factors include knowledge, attitudes, beliefs, enabling factors consist of infrastructure. While the reinforcing factor is manifested in the attitudes and behavior of the characters. Taking into account the theory, the

knowledge already possessed by the residents of the orphanage is a good potential for the basic capital for the implementation of PHBS. Especially with the strong commitment of the orphanage manager. The manager can be an example and role model for the residents of the orphanage in carrying out healthy living habits. This is in accordance with research conducted by (Lisneni Dewi, 2022) that there is a relationship between knowledge and attitudes with school PHBS actions. In order for the knowledge of the residents of the orphanage to be a positive influence on the behavior of clean and healthy living, it is very necessary to have efforts that are routinely carried out in the orphanage. These efforts include the implementation of routine health education both by the manager of the orphanage and by the health center. So that the orphanage managers have the same perception about clean and healthy living behavior, it is necessary to train the orphanage managers about PHBS. According to Green's theory, managers or figures are reinforcing factors for the formation of health behaviors. To increase the understanding of orphanage residents, orphanage managers should cooperate with local health centers to conduct training on healthy living for all residents of the orphanage. The involvement of puskesmas in familiarizing clean and healthy living behaviors in nursing homes needs to be increased. If so far, the puskesmas has not played a role in guiding the residents of the orphanage to a healthy life, after the health education, the manager of the orphanage must cooperate with the puskesmas to routinely carry out health education. One of the efforts to increase one's understanding is by providing health education. The puskesmas that have limitations in providing guidance can cooperate with other institutions such as universities, health offices, education offices, and other related institutions. The involvement of health centers, related agencies, and nursing home managers,

especially teachers in the orphanage, will determine success in familiarizing clean and healthy living behaviors. A study shows that there is a relationship between knowledge and the teacher's role in the implementation of PHBS. To increase students' knowledge, continuous guidance is needed in the form of counseling so that students can understand how to live clean and healthy behaviors (Kundaryanti, 2022). The impact of the inculcation of clean and healthy living habits will be that the residents of the orphanage will avoid health problems such as diarrhea, skin diseases, and others. Besides that, clean and healthy living habits will also have an impact on the comfort of children's learning, which in time will improve their learning achievement.

CONCLUSIONS

Health education activities about clean and healthy living behaviors at the orphanage Widhya Asih Singaraja increased knowledge and implementation of clean and healthy living. Knowledge increased by 40 points after health education was implemented. In the implementation of a clean and healthy life, participants were able to wash their hands and brush their teeth according to health requirements. In the process of implementing health education, Widhya Asih Singaraja's orphanage children looked enthusiastic. Participants participated in the activities happily because health education was carried out in a fun way. Participants also actively participated in answering questions asked by the presenters. During the demonstration, the participants looked very enthusiastic and participated in demonstrating what had been demonstrated. The results of the mentoring of clean and healthy living behavior for children in this orphanage can be seen at this time. The children have implemented positive behavior in maintaining their health. Children are used to washing their hands properly using soap

and running water; children are more selective in choosing snacks in the school canteen; children are used to throwing garbage in its place; participating in sports activities at school; weighing and measuring height every 6 months; staying away from cigarette smoke;

eradicating mosquito larvae; as well as urinating and defecating in school toilets.

DAFTAR PUSTAKA

- American Academy of Pediatrics and the Children's Hospital Association. (2022). *Children and COVID-19: State Data Report*.
- Anugrah Utami, F., & Sani, F. (2021). *Gambaran Perilaku Hidup Bersih dan Sehat (PHBS) di Era Pandemi Corona Virus Disease (COVID-19) di Indonesia* (Vol. 1).
- Aro, T., Eklund, K., Eloranta, A. K., Närhi, V., Korhonen, E., & Ahonen, T. (2019). Associations Between Childhood Learning Disabilities and Adult-Age Mental Health Problems, Lack of Education, and Unemployment. *Journal of Learning Disabilities*, 52(1), 71–83. <https://doi.org/10.1177/0022219418775118>
- Green Judith M Ottoson, L. W. (2005). *A Framework for Planning and Evaluation: PRECEDE-PROCEED Evolution and Application of the Model PRECEDE-PROCEED Model*. McGraw-Hill. <http://www.inspq.qc.ca/jasp>.
- Kementerian Kesehatan RI. (2016). *PHBS*.
- Kementerian Kesehatan RI. (2020). *PANDUAN ADAPTASI KEBIASAAN BARU*.
- Kementerian Sosial RI. (2011). *PERATURAN MENTERI SOSIAL REPUBLIK INDONESIA*.
- Kundaryanti, R. (2022). *Evaluation To Clean And Healthy Living Behavior (Phbs) On Students In Sdn Sukalila Serang City-Banten* (Vol. 5, Issue 2).
- Kustanti Moerad, S., Susilowati, E., Dian Savitri, E., Gusti Made Rai, N., Wayan Suarmini, N., Mahfud, C., & Widyastuti, T. (2019). *Pendampingan Pelaksanaan Program Perilaku Hidup Bersih dan Sehat (PHBS) Anak Usia Dini-Pos PAUD Terpadu Melati Kelurahan Medokan Ayu-Rungkut Surabaya*.
- Kusyairy, U., Fakultas Tarbiyah, S., Keguruan, D., & Makassar, A. (2018). MENINGKATKAN HASIL BELAJAR PESERTA DIDIK MELALUI PEMBERIAN REWARD AND PUNISHMENT. *Jurnal Pendidikan Fisika*, 6(2), 2355–5785. <http://journal.uin-alauddin.ac.id/index.php/PendidikanFisika>
- Lisneni Dewi. (2022). LITERATUR REVIEW: HUBUNGAN PENGETAHUAN, SIKAP TERHADAP PERILAKU HIDUP BERSIH DAN SEHAT DI SEKOLAH DASAR. *Jurnal 'Aisyiyah Medika*, 7(2).
- Malaka, H. M., Hajrul Malaka, M., Denok Rafhisya, Z., Fadli, M., Ihsan, S., Ode

- Muhammad Fitrawan, L., Fristiohady
Fakultas Farmasi Universitas Halu
Oleo, A., Hijau Bumi Tridharma
Anduonohu, K., & E A Mokodompit
Kendari, J. H. (2020). *Aktualisasi
Perilaku Hidup Bersih dan Sehat
pada Siswa Sekolah Dasar di
Kecamatan Kambu dan Poasia* (Vol.
1, Issue 1). [https://jurnal-
pharmaconmw.com/jmpm](https://jurnal-pharmaconmw.com/jmpm)
- Maulidia, A., & Hanifah, U. (2020). Peran
Edukasi Orang Tua terhadap PHBS
AUD selama Masa Pandemi Covid-
19. *Musamus Journal of Primary
Education*, 35–44.
[https://doi.org/10.35724/musjpe.v3i1.
3078](https://doi.org/10.35724/musjpe.v3i1.3078)
- Nurfajriah, S., & Erianef, L. (2018).
PENGARUH METODE
DEMONSTRASI DAN MINAT
BELAJAR TERHADAP HASIL
BELAJAR SISWA MATA KULIAH
KESEHATAN MASYARAKAT
DAN PROMOSI KESEHATAN. In
*Jurnal IMJ: Indonesian Midwifery
Journal* (Vol. 2, Issue 1).
- Safitri, H. I., & Harun, H. (2020).
Membiasakan Pola Hidup Sehat dan
Bersih pada Anak Usia Dini Selama
Pandemi Covid-19. *Jurnal Obsesi :
Jurnal Pendidikan Anak Usia Dini*,
5(1), 385.
[https://doi.org/10.31004/obsesi.v5i1.5
42](https://doi.org/10.31004/obsesi.v5i1.542)
- Tabi'in, A. (2020). PERILAKU HIDUP
BERSIH DAN SEHAT(PHBS)
PADA ANAK USIA DINI
SEBAGAI UPAYA PENCEGAHAN
COVID 19. *JEA (Jurnal Edukasi
AUD)*, 6(1), 58.
[https://doi.org/10.18592/jea.v6i1.362
0](https://doi.org/10.18592/jea.v6i1.3620)
- UNICEF Indonesia. (2020). *COVID-19
dan Anak-Anak di Indonesia*.
[https://www.unicef.org/press-
releases/un-launches-global-](https://www.unicef.org/press-releases/un-launches-global)
- WHO. (2020). *Considerations for
implementing and adjusting public
health and social measures in the
context of COVID-19*.
- Zukmadini, A. Y., Karyadi, B., & Kasrina,
K. (2020). Edukasi Perilaku Hidup
Bersih dan Sehat (PHBS) dalam
Pencegahan COVID-19 Kepada
Anak-Anak di Panti Asuhan. *Jurnal
Pengabdian Magister Pendidikan
IPA*, 3(1).
[https://doi.org/10.29303/jpmp.v3i1.4
40](https://doi.org/10.29303/jpmp.v3i1.440)