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Literature Study: The Relationship between Phbs and Diarrhea in School-Age Children

Ibrahim Paneo¹, Rosmin Ilham¹, Nirmala Bilale²

¹Lecturer in the Department of Nursing, University of Muhammadiyah Gorontalo Indonesia ²Nurse Profession Student, Muhammadiyah University of Gorontalo Indonesia Email: <u>ibrahimpaneo17@gmail.com</u>

Abstract. Diarrhea is still one of the main diseases in children that can cause morbidity and mortality. One of the prevention of this diarrhea is the implementation of Clean and Healthy Behavior (PHBS). This study aims to determine the relationship between PHBS and the incidence of diarrheal disease in school-age children. This type of research is a literature study, literature searches using google scholar databases and IOS. The inclusion criteria were in the form of 2016-2020 publications, in full text Indonesian and themed PHBS and diarrhea. The literature was then extracted and analyzed for 10 literatures. The results showed that there was a significant relationship between PHBS and the incidence of diarrheal disease in school-age children. It was concluded that diarrhea often occurs in school-age children, especially if they do not have good clean and healthy living behavior, which further increases the risk of getting diarrhea. The intended link is if this is not done or rarely done, the potential for diarrheal disease will be greater. It is recommended for school children to carry out PHBS in a good school setting to create a health climate and avoid diseases that originate from unhealthy behaviors such as diarrhea.

Keywords: : PHBS, Diarrhea, School Age Children

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INTRODUCTION

Diarrhea is still one of the main diseases in infants and children in Indonesia. Diarrhea is defined as inflammation of the mucous membranes of the stomach and small intestine which is characterized by defecating more than three times a day, vomiting which results in fluid and electrolyte loss that causes dehydration and electrolyte balance disorders (Simbolon, 2019).

Diarrhea is a major cause of child morbidity and mortality in the world. Globally, in 2017 there were nearly 1.7 billion cases of diarrheal disease and it killed 525,000 children every year (WHO, 2017). According to Global Health Estimates, the death rate from diarrhea decreased by nearly one million between 2000 and 2018, but still caused 1.4 million deaths (WHO, 2018).

In Indonesia, diarrheal disease is one of the main public health problems, especially in children. The Health Profile of the Republic of Indonesia shows that the diarrhea morbidity rate served in 2019 was 4,485,513 people (61.7%) while for toddlers there were 1,591,944 children (40.0%). In Gorontalo Province in 2019 the diarrhea morbidity rate served in 2019 was 21,860 people (67.3%) while in toddlers there were 9,727 toddlers (51.0%) (Kemenkes RI, 2020).

There are several factors related to the incidence of diarrhea, namely inadequate supply of clean water, water contaminated with feces, lack of hygiene facilities, unhygienic disposal of feces, poor personal and environmental hygiene, and improper food processing and storage. Many factors can directly or indirectly be a driving factor for diarrhea, consisting of contact with sufferers, environment and behavior. Host factors that cause increased susceptibility to diarrhea include not breastfeeding for two years, malnutrition, measles, and immunodeficiency. The most dominant environmental factors are the means of providing clean water and disposal of feces, these two factors will interact together with human behavior. What if environmental factors are not healthy because they are contaminated with diarrhea germs and accumulate with unhealthy human behavior, then diarrhea transmission can easily occur? (Mas, 2017). Human behavior in the health sector is stated in the Clean and Healthy Life Behavior (PHBS)

Clean and Healthy Living Behavior (PHBS) is divided into five arrangements, namely: household arrangements, school settings, workplace arrangements, health facilities arrangements and public places. The Clean and Healthy Behavior Program in its development shows different types and indicators, in each region in line with the implementation of special autonomy (Kemenkes RI, 2011b).

One of the prevention of diarrhea is the application of Clean and Healthy Behavior (PHBS). Based on the decision of the Minister of Health of the Republic of Indonesia. Number 2269/MENKES/PER/XI/2011. Clean and Healthy Living Behavior is a government program that aims to create conditions for individuals, families and community groups to increase knowledge and behavior and are aware, willing and able to practice PHBS. This can be done by means of information communication or through education (Mas, 2017).

PHBS in the school setting is a set of behaviors that are practiced by students, teachers and the school environment community on the basis of awareness as a result of learning. It can independently prevent disease, improve health, and play an active role in creating a healthy environment (Nugraheni et al., 2018).

Schools are targets for PHBS, so it is necessary to implement better behavior. This is because there is a lot of data showing that most of the diseases that often suffer from school-age children (ages 6-10) are related to PHBS. In addition, the lack of PHBS implementation in the school environment can cause other impacts, namely a less comfortable learning atmosphere due to a dirty classroom environment, decreased student achievement and enthusiasm for learning, and can make the school image bad (Lina, 2016).

The implementation of PHBS at the elementary school (SD) level can be carried out using the School Health Business (UKS) approach, health education through school children is very effective in changing behavior and healthy living habits in general. Educational institutions are seen as a strategic place to promote school health. Schoolage children have the potential as agents of change in promoting PHBS in schools, families, and communities where the behavior of children instilled in school will be brought by them to their homes and is expected to influence the behavior of their families (Nugraheni et al., 2018).

Study results of Ariani (2020) states that there is a relationship between clean and healthy living behavior with the incidence of diarrhea. The environment can influence a person's habits that will shape behavior. Unhealthy environmental conditions with the students' Clean and Healthy Lifestyle Behavior (PHBS) that are still lacking can be the cause of the transmission of diarrheal diseases.

Research by Saputro (2013) showed that there was a relationship between PHBS in school children and the incidence of diarrhea, analyzed by chi-square test p-value (0.000) <0.05. The value of Odds Ratio (OR) = 0.081 (0.030 to 0.218) means that children's PHBS is a protective factor for diarrheal diseases. Elementary school children who had diarrhea were 0.081 times more likely to be elementary school children who did not do PHBS compared to elementary school children who did PHBS at a 95% confidence level.

The application of clean and healthy living behavior in schools is an effort to empower students, teachers and the school community so that they know, are willing and able to practice clean and healthy living behaviors and play an active role in realizing healthy schools.

RESULTS AND DISCUSSION

Based on the selection of literature there are 10 literature that meet the criteria of inclusion are:

Relationship of The Implementation of Clean and Healthy Living Behavior in the School Order with Diarrhea Incidence in State Elementary School Children 007 Samarinda Seberang (Mountia, 2017). Relationship of Clean and Healthy Living Behavior (PHBS) with Diarrhea Incidence in Elementary Students 1 Padangmatinggi Padangsidimpuan City 2017 (Juliana, 2017). Relationship of Clean and Healthy Living Behavior (PHBS) to The Incidence rate of Acute Diarrhea in Santri (Hadi, 2017).

Relationship of Clean and Healthy Living Behavior (PHBS) with Diarrhea Incidence in Children in Geselema Health Center Area of Nduga Regency (Wandik, 2018). Relationship of Cutting Nails and Hand Washing Using Soap (CPTS) in School with Diarrhea Incidence in Class IX Students in SMPN 36 Rapak Village In Samarinda Seberang (Nurdin, 2018). Relationship of Clean and Healthy Living Behavior (PHBS) and Snack Habits with Diarrhea Incidence in Students in State Elementary School 1 Kemiri Boyolali (Ni'mah, 2019). Clean and Healthy Living Behavior (PHBS) and Acute Diarrhea in SMP Plus Pesantren Baiturrahman Bandung (Nurul et al., 2019)

Relationship of Clean and Healthy Living Behavior with Diarrhea Incidence in Students Grade III, IV and V at North Kuin State Elementary School 4 Banjarmasin (Mariani, 2019)

Relationship of Knowledge, Clean and Healthy Living Behavior (PHBS) and Snack Habits with Diarrhea Incidence in SDN Semangat in 2 Districts alalak Barito Kuala Regency 2020 (Novanto et al., 2019). Relationship of Clean and Healthy Living Behavior (PHBS) with Diarrhea Incidence in Class VII Students at State Junior High School 15 Banjarmasin year 2020 (Ariani, 2020)

CONCLUSION

Diarrhea often occurs in school-age children, especially if the school-age children do not have good clean and healthy living behaviors which further increase the risk of getting diarrhea. All PHBS indicators are closely related to the incidence of diarrheal diseases. The intended link is if this is not done or rarely done, the potential for diarrheal disease will be greater. PHBS indicators that have a very large effect on preventing diarrhea are: Washing hands with running water and using soap and cutting nails.

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