

The Relationship Of Knowledge And Defection Habits With Healthy Latrine Ownership In The Working Area Of Puskesmas Lempur, Kerinci Regency, 2023

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Abstract. Healthy environmental sanitation is related to the ownership of healthy latrines in each house. In the Lempur health center working area, 66.26% have access to healthy latrines. The target of healthy latrine ownership in the Lempur Health Center Working Area is 100%. This research aims to determine the relationship between knowledge and defecation habits in the work area of the Lempur Community Health Center, Kerinci Regency in 2023. Type of quantitative research with a cross sectional design, using questionnaire instruments and observation sheets with interview and observation methods. The research sample was 100 respondents in the working area of the Lempur health center. The results of this study of 100 respondents there are 68% who do not meet the requirements of healthy latrines and there are 22% meet the requirements of healthy latrines. There is a relationship between the variables Knowledge, defecation habits, which are significantly related to the ownership of healthy latrines in the Lempur Community Health Center Working Area, Kerinci Regency. The public is advised to be aware of the importance of using good and healthy latrines

Keywords: Knowledge; Defection Habits; Sanitation; Latrine Ownership

INTRODUCTION

Public health is influenced by environmental health as it relates to sanitation. The goal of environmental sanitation is to create a healthy environment by managing aspects of the physical environment, especially those that negatively impact human life and physical development. The ownership of latrines is included in the basic sanitation facilities that must be owned by every household. Having a healthy toilet for the family is one of the signs of a healthy home, and is as important as any other indicator. Besides serving as a place to dispose of human waste, a healthy latrine also prevents odor and pollution of water sources. Besides being convenient, having a healthy toilet also helps maintain and improve the health of family members and the surrounding community.

The 2017 WHO-Unicef Joint Monitoring Program (JMP) data states that Indonesia's decent sanitation ranking is still the second lowest among G20 countries and Asean countries. There are still many people defecating in fields, shrubs, forests, gutters, roads, rivers, and other open places, as many as 25 million Indonesians do not have access to healthy latrines. This situation must be improved, considering that Indonesia has committed to achieving the SDGs goal of ensuring that every community has access to clean sanitation facilities by 2030.

A household is considered to have access to proper sanitation if it has a gooseneck

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latrine, where the final disposal of feces is into a septic tank or earth pit, and the sanitation facility is used by the household itself, along with several other households, or communal MCK, according to BPS published through Statistics Indonesia 2022. One of the initiatives undertaken by the government to end open defecation is community-based total sanitation (STBM). The goal of STBM is to increase community capacity and achieve the national goal of improving access to drinking water and basic sanitation. In order to achieve Open Defecation Free (ODF) conditions in villages or communities, STBM uses triggering mechanisms to change the behavior of community groups.

According to Lawrence Green, a person's behavior in terms of their health actions is influenced by three factors: predispositions, reinforcers, and drivers, predisposing factors include habits, education, attitudes, and knowledge. Reinforcing factors consist of income and availability of clean water. Support from community leaders and the role of health workers are the driving factors. The level of knowledge and habits have a very significant effect on ownership of healthy latrines as stated by previous research Kholilah(2019).

Kerinci Regency is one of the regions or districts included in the scope of the Jambi province of 11 districts and cities, Kerinci Regency is located in the westernmost part of Jambi Province, has 16 sub-districts and 287 villages with a population of 235,735 people. Taken from BPS data in 2022, Kerinci Regency is ranked last in having access to proper sanitation from 11 districts in Jambi Province, recorded at 68.10% and 31.9% have access to improper sanitation including latrines that do not meet health requirements. Gunung Raya sub-district is one of the sub-districts in the eastern part of Kerinci district. It has 1 puskesmas, Lempur, which is located in the fertile highlands. Puskesmas Lempur oversees 1 village and 7 villages which means Keluran Lempur Mudik, Desa Lempur Tengah, Desa Lempur Hilir, Desa Dusun Baru Lempur, Desa Manjuto Lempur, Desa Perikan Tengah, Desa Selampaung, and Desa Masgo.

Based on data from the Kerinci District Office in 2022, Gunung Raya sub-district has a presentation of proper sanitation facilities which is 81.9% and improper sanitation (latrines do not meet the requirements) 18.1%. Judging from the data of Puskesmas Lempur in 2022 from 1773 houses that were examined as many as 1675 households counted who used Permanent Healthy Latrines (JSP) as much as 66.26%, who used Permanent Healthy Latrines (JSSP) as much as 9.31%, who hitchhiked to healthy latrines as much as 9.79% and there were 14.98% of homes that had access to unhealthy latrines. Puskesmas Lempur has a target of 100% ownership of healthy latrines in the Lempur puskesmas working area.

According to the results of researchers conducting an initial survey in the working area

of Puskesmas Lempur, there are still many people for latrines that do not meet health standards. The results of a simple interview survey conducted with 11 respondents in the Lempur Puskesmas working area, namely 5 of the 11 respondents are farmers. 4 respondents who did not have septic tanks said that the location of the settlement was directly on the river. In addition, 2 more respondents said that it costs a lot of money to build a septic tank, 3 other respondents said they had met the requirements for healthy latrines/have proper sanitation and 2 more respondents said they did not know about the consequences of having improper sanitation. The purpose of the study was to determine the factors associated with ownership of healthy latrines in the Lempur Puskesmas working area.

RESEARCH METHODE

This study used a cross sectional design and was an analytic observational study. The population of this study was the entire population living in the working area of Puskesmas Lempur. People who live in the working area of Puskesmas Lempur became the sample, which was selected using proportional random sampling technique. The minimum number was determined by calculating the minimum sample using Lemeshow's formula. Chi-square was used to test the hypothesis after descriptive analysis of the research data was completed.

RESULTS AND DISCUSSION

Table 1. Results of statistical analysis of the relationship between independent variables and the dependent variable in the Lempur Health Center working area in 2023

No	Variabel	Owner of a healthy latrine		<i>p-value</i>	95 % CI	
		Qualified	Not eligible		Lower	Upper
1	Knowledge					
	Not good	16 (21,3%)	59 (78,7%)	0,000*	1,279	3,734
	Good	16 (64,0%)	9 (36,0%)			
4	Defecation Habits.					
	Not Good	3 (7,1%)	39 (92,9%)	0,000*	1,857	2,434
	Good	29 (50,0%)	29 (50,0%)			

Based on table 1 in the working area of Puskesmas Lempur there is a relationship between knowledge and ownership of healthy latrines in the community, which is indicated by the knowledge variable. According to research conducted in Pesawahan Village, Bandar Lampung City by Zelda DR, et al. (2022), the p value of 0.004 indicates that there is a relationship between knowledge and ownership of healthy latrines in Pesawahan Village, Bandar Lampung City. The results of the Chi-Square statistical test in the same study conducted

in Jatibarang District by Laeli et al. (2019) showed a p value of 0.014 indicating a substantial correlation between the level of knowledge of respondents and the use of household latrines.

Research shows that most respondents without healthy latrines do not have sufficient information, as evidenced by this finding. The low level of awareness among the respondents is a result of the lack of exposure to information regarding environmental sanitation, specifically ownership of a healthy latrine and how it is considered a healthy latrine. Based on the interviews, a number of respondents knew that defecating in the wrong place was bad, but during the observation, it was found that many houses did not have latrines and had latrines that did not meet healthy latrine standards.

Based on the interviews, it was found that despite having good knowledge, It is not certain that the use of latrines meets health standards due to low income. To increase community awareness of the need to have a healthy latrine, through counseling on environmental sanitation, health workers distributed brochures explaining the importance of having a clean latrine, what constitutes a clean latrine, how to stop the spread of disease through feces, and the effects of not having access to sanitation, especially latrines that do not meet health regulations and the community can also obtain information found from electronic media.

The chi-square statistical test showed that there was a relationship between the characteristics of defecation habits and ownership of healthy latrines in the working area of Puskesmas Lempur. The results of Kholilah's (2019) study in Tanjungpinang, which found a p-value of 0.001 association between ownership of healthy latrines and practices, are in line with the conclusions of this investigation. Most of the people in the Lempur Puskesmas working area, the majority have poor habits. This is due to the lack of ownership of healthy latrines, which leads to a high habit of defecating in latrines that do not have septic tanks and are still accustomed to defecating in the river.

The utilization of latrines is strongly influenced by the level of knowledge and habits of the community. Utilization of latrines by the community is not as expected, because there are still those who defecate in places that are not in accordance with health principles, for example rivers, gardens, or rice fields. This is due to habits (lifestyle) or facilities that are not fulfilled as well as the knowledge, attitudes and behavior of the community itself and lack of information that supports the utilization of family latrines. The habit of people who do not want to use latrines is a major factor in the spread of disease. The habit of people who prefer to defecate in any place makes them reluctant to build latrines in their homes.

CONCLUSIONS AND RECOMMENDATIONS

Based on research using the chi-square statistical test, ownership of healthy latrines in the Lempur Health Center working area is related to variables of knowledge, defecation habits. It is expected to increase public awareness and health, counseling and guidance on the use of healthy latrines provided to the entire community and improve better health status. Work with the local government to plan training on how to build healthy latrines that are cost and resource efficient.

It is recommended that communities maintain and repair latrines to ensure that they are healthy and clean for human use, thus stopping the spread of disease. It is expected that the community can understand the importance of using healthy latrines and change their attitude from using unhealthy latrines to using healthy latrines.

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