



**DESCRIPTION OF CLEAN AND HEALTHY LIVING BEHAVIOR (PHBS)
STUDENTS/I D3 NURSING STUDY PROGRAM STIKES SANTA ELISABETH
MEDAN DURING PANDEMIC COVID-19 IN 2022**

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ABSTRACT

Coronaviruses are part of a large family of viruses that cause disease in animals or humans. Humans infected with the virus will show signs of respiratory tract infections ranging from flu to more serious ones. Prevention of COVID-19 transmission can be done starting from washing hands, using masks, social distancing, physical distancing, applying cough and sneezing etiquette, implementing a clean and healthy lifestyle, changing clothes, managing comorbidities, managing mental & psychosocial health and adapting new habits. carry out health protocols. The purpose of the study is to describe the behavior of students towards clean and healthy living behavior (PHBS) in the STIKes Santa Elisabeth Medan. This study uses a descriptive design with a sampling technique using a sampling of 95 respondents, how to collect data using a questionnaire and the data is analyzed in several stages, namely editing, coding, scoring, tabulating. The results show that the description of student behavior towards PHBS in STIKes Santa Elisabeth Medan is found to be "good" 33 people (34.7%), "enough" 62 people (65.3%). It is hoped that students can further increase awareness in implementing clean and healthy living behaviors (PHBS) recommended by the health department in their daily lives.

Keywords: nursing; phbs; students

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INTRODUCTION

Covid-19 is a disease caused by a new type of corona virus that first appeared in late 2019 in Wuhan, China, which is currently causing a pandemic in almost the entire world. The main symptoms of COVID-19 are cough, fever, and shortness of breath. Covid-19 infection also causes quite high mortality in various countries (Sari, 2020).

Indonesia was first identified as Covid-19 in Jakarta, which then spread to all provinces. The five highest provincial levels at the start of the Covid-19 case were Jakarta, West Java, Banten, East Java and Central Java. Meanwhile, in South Sulawesi, the presence of the Covid-19 virus was first identified in Makassar. Initially, the disease was called Wuhan pneumonia by the press because of its pneumonia-like symptoms. Since the end of 2019 until now the Covid-19 pandemic has not been resolved in various countries. Diseases that are transmitted through this virus can spread from human to human through droplets, so it is very risky for someone to make direct contact with other humans (Indrawati & Dwi, n.d.2020) Since the new coronavirus disease (Covid-19) emerged from China in late 2019, it has spread around the world rapidly causing significant morbidity and mortality. Covid-19 has emerged as a

global public health crisis. The first case of Covid-19 in India was reported on 30 January 2020. As of April 19, 2020, the number of confirmed Covid-19 cases has surpassed 2,160,000 worldwide, more than 82,000 cases have been confirmed and more than 4600 patients have died in China. Coronavirus Disease 2019 (Covid-19) is an infection caused by a new corona virus named severe acute respiratory syndrome coronavirus 2 (SARS-CoV2). The first case of Covid-19 infection was reported in December 2019 in Wuhan, China. Since then, the disease has been declared a pandemic, affecting more than 4,700,000 people and causing more than 300,000 deaths globally (Jaya et al., 2021).

Indonesia began to be exposed to the corona virus reaching 1,528 people and causing the death of 136 people. The first positive case of Covid-19 in Madura occurred in Pamekasan Regency on March 30, 2020 with an additional 1 patient under monitoring (PDP) and 128 people under monitoring (ODP), while in other districts in Madura namely Bangkalan there was 1 PDP, and 196 ODP. Sampang has 87 ODP and Sumenep Regency has 65 ODP (Sakti, 2020). Since Pamekasan Regency has a red zone status, it has caused some people to become restless and anxious, based on interviews with 11 Pamekasan residents who said that they would be more careful and adhere to health protocols such as washing hands and wearing masks. Clean and healthy living behavior (PHBS) that is carried out by a person to always pay attention to cleanliness, health, and healthy behavior. PHBS is carried out in various settings, such as student arrangements, a clean and healthy lifestyle as the basis for PHBS recommended by WHO by applying hand washing with soap and running water. (Nasution, 2021).

Clean and Healthy Life Behavior (PHBS) is all behavior that is carried out with awareness so that family or family members can help themselves in the health sector and play an active role in health activities in the community. Prevention is better than cure, this health principle is the basis for implementing the PHBS program. The main objective of the PHBS movement is to improve the quality of health through the process of making the public aware of the knowledge that is the beginning of individual contributions in living a clean and healthy daily life behavior. The most important benefit of PHBS is the creation of people who are health conscious and have the knowledge and awareness to live life behaviors by maintaining cleanliness that meets health standards (RI & 2020), (2009) regarding Clean and Healthy Living Behavior in Communities in Rangkah Village, Surabaya City, respondents with good knowledge and have carried out PHBS are 55 people (24.2%) and 172 respondents who do not do PHBS (75.8%). Respondents who have sufficient knowledge and apply PHBS are 2 people (10%) and 18 respondents do not apply PHBS (90%).

Based on the results of Yuzlianti rivalni lase's research (2019) regarding the relationship between clean and healthy living behavior (PHBS) with environmental health at SDN No. 065013 Medan Selayang, it was found that the respondents had clean and healthy living behavior (PHBS) in the good category as many as 72 people (60.5%) because in general children are easier to remember and like to imitate what other people do so they are easier to teach about clean and healthy living behavior (PHBS). PHBS is sufficient category as many as 33 people (40.7%) because some students still lack awareness or are lazy in carrying out clean and healthy living behavior (PHBS) and rarely apply clean and healthy living behavior (PHBS) in daily life and in the school environment.

Research (Jaya et al., 2021), measuring knowledge about Clean and Healthy Life Behavior (PHBS) Health education of health cadres in the new normal era in Darungan village found that most of the health cadres had enough knowledge of 20 people (67%), while the rest had

good knowledge 3 people (10%) and 7 people (23%). Based on the results, it can be seen that the Clean and Healthy Behavior of the students of the Department of Sports Education UNY (State University of Yogyakarta) during the Covid-19 pandemic, in 425 students in the very high category there were 32 students (7.53%), in the high category there were 77 students (18.12%), enough category there are 161 (37.88%), low category there are 91 students (21.41%), and very low category 64 students (15.06%) (Jaka Sunardi, 2020).

From the results of research on the analysis of knowledge and attitudes of clean and healthy living behavior (PHBS) in Poltekes students of the Ministry of Health of Ternate, it shows that of 77 respondents who have good attitudes with good PHBS behavior as many as 72 (94%). While those who have a bad attitude with bad PHBS behavior are 5 (6%) (Hairudin 2019). The research by Sihite et al., (2019) showed that some respondents had sufficient behavior regarding PHBS, namely 68 respondents (71.6%), while good behavior regarding PHBS were 27 respondents (28.4%), from the results obtained, respondents in this study had sufficient behavior caused by one of the factors of education and the environment.

The researcher argues that one of the factors that influence the behavior of respondents regarding information on the importance of PHBS can be influenced by the number of sources of information, which can also be in the form of electronic media (mobile phones). This is in line with research conducted which says that someone who has easy access to information will gain knowledge more quickly. Advances in technology can affect people's knowledge which can give effect so as to produce changes or increase in knowledge which is expected to be able to influence actions (Indrawati & Dwi, 2019).

One of the solutions to prevent the spread of Covid-19 is to wash your hands with soap and running water (4). This activity is one of the activities of the Clean and Healthy Lifestyle (PHBS). Clean and Healthy Lifestyle (PHBS) that can prevent the transmission of Covid-19, namely the consumption of balanced nutrition, adequate rest, frequent hand washing with soap and running water, exercise or physical activity, not smoking, and maintaining environmental cleanliness (WHO 2020).

Based on this phenomenon, the authors are interested in conducting research with the title Description of clean and healthy living behavior (PHBS) for students of the D3m Nursing Study Program at STIKes Santa Elisabeth Medan during the Covid-19 pandemic in 2022. The researcher is of the opinion that even though students have received behavior regarding PHBS, in reality, students who behave poorly are still found to be less aware of the level of clean and healthy living behavior. D3 Nursing students at STIKes Santa Elisabeth Medan during the Covid-19 pandemic in 2022. This is possible because of differences in experience or capture power in understanding an information. This is supported by the research of Batubara, (2020) which says that the experience factor is one that affects one's knowledge, and also one's memory at the time of filling out the questionnaire. To find out the level of clean and healthy living behavior of D3 Nursing Students at STIKes Santa Elisabeth Medan during the Covid-19 Pandemic in 2022.

METHOD

This research uses a descriptive method. The population in this study were students of STIKes Santa Elisabeth Medan D3 Nursing Study Program. The sampling technique used was total sampling 95 respondents. The PHBS behavior questionnaire consists of 39 statements. In collecting data the researchers used google form which was carried out in May 2022. The statistical test used univariant analysis.

RESULTS

This research was conducted by giving a questionnaire regarding PHBS behavior through google form, and giving informed consent to 95 respondents. After all respondents filled out the questionnaire, then data processing was carried out using excel and SPSS applications to see the description of the respondent's PHBS behavior.

Tabel 1.
Distribution of Frequency and Percentage of Respondents Regarding the characteristics of PHBS respondents (n=95)

| Characteristics of Respondents | f | % |
|--------------------------------|----|-------|
| Gender | | |
| Man | 22 | 23.2 |
| Woman | 73 | 76.8 |
| Total | 95 | 100.0 |
| Education | | |
| Semester 2 | 35 | 36.8 |
| Semester 4 | 32 | 33.7 |
| Semester 6 | 28 | 29.5 |

Tabel 2.
Distribution of Frequency and Percentage of Respondents Regarding the characteristics of PHBS respondents (n=95)

| Category | f | % |
|------------|----|------|
| Well | 33 | 34.7 |
| Enough | 62 | 65.3 |
| Not enough | 0 | 0 |

DISCUSSION

Based on research conducted at STIKes Santa Elisabeth Medan in 2022, regarding the clean and healthy living behavior of D3 nursing students of STIKes Santa Elisabeth Medan during the COVID-19 pandemic in 2022, it showed that at most were in the sufficient category as many as 62 people (65.3%) and good category as many as 33 people (34.7%). This is in line with research (Sihite et al., 2021) which shows that some respondents have sufficient behavior regarding PHBS, namely 68 respondents (71.6%) because they are influenced by education and environmental factors.

This is supported by research (Jaka Sunardi, 2020), that the behavior of Clean and Healthy Living students of the Department of Sports Education UNY (Yogyakarta State University) during the Covid-19 pandemic, 425 students were in the very high category, there were 33 students (7.76%).), in the high category there were 79 students (18.59%), in the moderate category there were 126 (29.65%), in the low category there were 89 students (20.94%), and the very low category was 126 students (29.65%).

Research (Jaya et al., 2021), measuring knowledge about Clean and Healthy Life Behavior (PHBS) Health education of health cadres in the new normal era in Darungan village found that most of the health cadres had enough knowledge of 20 people (67%), while the rest had good knowledge 3 people (10%) and 7 people (23%).

This is not in line with Yuzlianti rivalni lase's research (2019) regarding the relationship between clean and healthy living behavior (PHBS) with environmental health at SDN No. 065013 Medan Selayang, where 72 people (60.5%). people (40.7%) because some students still lack awareness or are lazy in carrying out clean and healthy behavior (PHBS) and rarely apply clean and healthy living behavior (PHBS) in daily life and in the school environment. From the results of research on the analysis of knowledge and attitudes of clean and healthy living behavior (PHBS) in Poltekkes students of the Ministry of Health of Ternate, 72 (94%). While those who have a bad attitude with bad PHBS behavior are 5 (6%) (Mulyandi & Patilaiya, 2020)

Research on Clean and Healthy Living Behavior in the Community in Rangkah Sub-District, Surabaya City, respondents with good knowledge and have done PHBS are 55 people (24.2%) and 172 respondents who do not do PHBS (75.8%). There are 2 respondents who have sufficient knowledge and apply PHBS (10%) and 18 respondents do not apply PHBS (90%) (Wati & Ridlo, 2020) Based on the results of the study using a questionnaire with 39 statements, it was found that student behavior was quite due to PHBS behavior that was not implemented by students, namely there were students who did not wash their hands before eating, and after activities/sports and changing bed linen every 3 months. Then, good behavior was also obtained because some students had carried out PHBS, namely students flushed the toilet cleanly after use, and never left a pile of clothes for more than 2 weeks.

CONCLUSION

The results showed that the majority of respondents were female as many as 73 people (76.8%) and the most were in semester 4 as many as 37 people (40.0%). The results showed that the behavior of students in implementing PHBS at STIKes Santa Elisabeth Medan was obtained enough as many as 68 people (71.6%) and good as many as 27 people (28.4%). This happened because of the lack of understanding of students about washing hands before eating and after activities/sports and students changing bed linen every 3 months.

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