



FACTORS RELATED TO CLEAN AND HEALTHY LIVING BEHAVIOR (PHBS) IN STUDENTS

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ABSTRACT

Clean and healthy living behavior (PHBS) is essential for achieving optimal health. School-age children are in a crucial period for initiating PHBS, enabling them to become health promoters for their families, school environment, and society. Implementing PHBS in schools can raise public awareness, encouraging clean and healthy living. This research aims to identify factors related to PHBS among students. The study employs a quantitative, cross-sectional design. The population consists of 298 students, with a sample of 89 respondents selected based on inclusion criteria, specifically fifth and sixth graders registered at SD Negeri 066650 Medan, using the Lameshow formula. Conducted at SDN 066650 Medan from January to March 2024, the research utilizes a questionnaire distributed directly to students. Examined variables include knowledge, attitudes, infrastructure, and the role of teachers. Data analysis involves Univariate and Bivariate methods, processed with the chi-square test using SPSS version 20. Results indicate significant relationships between knowledge ($p=0.033$), attitudes ($p=0.033$), infrastructure ($p=0.035$), and teacher roles ($p=0.019$) with PHBS implementation in schools. The study concludes that low levels of knowledge, attitudes, infrastructure availability, and active teacher involvement contribute to inadequate student behavior in practicing PHBS effectively at school.

Keywords: attitude; infrastructure; knowledge; phbs; teacher's role

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INTRODUCTION

Clean and healthy living behavior is the essence and human right to maintain its survival. This is in line with what is covered in the constitution of the World Health Organization agreed among others that obtaining the highest degree of health is a fundamental right for everyone regardless of race, religion, politics adopted and socioeconomic level (JohanaTomasoa, 2018). According to WHO (2019), several health behaviors that can reduce the possibility of infection or spreading disease by implementing PHBS include washing hands, consuming healthy snacks, disposing of garbage in its place, and using healthy latrines. Health efforts in young people are emphasized on disease promotion and prevention efforts (WHO, 2012). Data collected by WHO in 2011-2012 from 120,000 students in 28 countries in the world, with the average respondent aged 7-12 years showed 68.4% had carried out clean and healthy living behaviors well. Developed countries account for 80%, developing countries are in the range of 40.6% and countries below with coverage of clean and healthy living behavior of 31.4 (WHO, 2012).

According to the Ministry of Health of the Republic of Indonesia (Kemenkes RI) in 2011, Clean and Healthy Living Behavior (PHBS) is a set of behaviors practiced on the basis of awareness as a result of learning, which makes a person, family, group or community able to help themselves (independently) in the health sector and play an active role in realizing public health. (Sari, 2019) The Minister of Health of the Republic of Indonesia made guidelines for the Development of Clean and Healthy Living Behavior contained in the Regulation of the Minister of Health of the Republic of Indonesia Number: 2269 / MENKES / PER / XI / 2011 which regulates efforts to improve clean and healthy living behavior or abbreviated as PHBS throughout Indonesia with reference to PHBS management patterns. This behavior is expected to be applied to all groups of society, especially school-age children. (Karuniawati & Putrianti, 2020) Health problems arise as a result of unhealthy living behaviors and poor environmental sanitation. Therefore, it is necessary to carry out the Healthy Community Movement (GERMAS). The goals of gernas are to reduce the burden of disease, increase population productivity, strengthen health systems through a life cycle approach. One of the priorities for the implementation of GERMAS at the elementary school level, especially in physical activity, environmental cleanliness and consuming vegetables and fruits. (Ambarwati & Prihastuti, 2019)

According to (Astuti & Suarjana, 2020) The GERMAS movement in elementary schools is based on the existence of facilities in the form of sinks, soap, and hand cloths as support in carrying out the PHBS movement. Then counseling was carried out using video media so that the message sticks in the students' memories. According to the Ministry of Health (2016) stated that there are several indicators of the implementation of PHBS in schools, including washing hands with running water and using soap, consuming healthy snacks in the school cafeteria, using clean and healthy latrines, regular and measurable exercise, eradicating mosquito larvae, not smoking at school, weighing and measuring height, and disposing of garbage in its place. The successful implementation of clean and healthy living behavior (PHBS) in schools cannot be separated from the active role between teachers and students. Five basic messages for a healthy way of life in the school environment, including washing hands and brushing teeth cleanly, consuming nutritious foods, maintaining the cleanliness of the school environment, doing regular exercise, and managing rest periods well. (Syaukani et al., 2023)

School is a place to educate children to have knowledge that can help them in survival in their social environment. School children are the next generation for the future of the nation who must be maintained, protected and improved their health. The degree of public health can be achieved by ordering clean and healthy living behavior. Health problems that are usually experienced by school-age children are basically very complete and diverse. (Rembet et al., 2023) The implementation of clean and healthy living behavior in schools must be based on knowledge, attitudes and completeness of facilities and infrastructure. Student knowledge and attitudes about clean and healthy living behavior are very important, because high student knowledge of healthy living behavior will be a driver for students' conscious efforts to maintain and improve their health through healthy clean living behavior. Knowledge is the most important domain for the formation of one's actions. Behavior based on knowledge will be better than behavior that is not based on knowledge. (Cahyaningrum, 2016)

In the implementation of clean and healthy living behavior (PHBS) in schools, infrastructure facilities are needed such as hand washing stations with running water and soap, separate trash cans between dry and wet waste, healthy canteens are available and so on. In addition to the need for infrastructure facilities in schools, students also need a very important role for

teachers to determine students or for their students, so that the success of a student in implementing clean and healthy living behavior (PHBS) in the school environment will not be separated from various attitudes and actions of teachers who are examples for their students. Every student is required to maintain school health according to what is exemplified by their teachers at school. Therefore, the presence of teachers in schools not only teaches and educates their students, but teachers also need to set an example that students can emulate. If teachers always teach good habits related to clean and healthy living behavior (PHBS) to their students, automatically their students will be easy to do PHBS and teachers are expected to always control their students in implementing PHBS. Clean and healthy living behavior is a step that must be implemented in order to achieve optimal health. The proportion of children aged 0 to 17 years in Indonesia reaches 30% of the total population. School-age childhood is a golden period to initiate PHBS so that students can become agents of change and health promoters for their families, school environment, and their own communities. The implementation of clean and healthy living behavior (PHBS) at the kindergarten and elementary school levels is still very low. Meanwhile, instilling awareness about the importance of healthy behavior will be more optimal if carried out in students' early childhood and it will be more appropriate if the knowledge can be obtained by students in the school environment as the school is the basis for the acquisition and development of student knowledge. (Jasmine et al., 2023)

This study uses the theory according to Lawrence Green that health behavior is influenced by 3 main factors, namely predisposing factors, namely factors that facilitate the occurrence of one's behavior, including knowledge, attitudes, and demographic factors (age, gender), enabling factors are factors that allow or facilitate behavior or action, including facilities and infrastructure (facilities), reinforcing factors (factors) are factors that encourage or reinforce the occurrence of teacher-like behavior. (Lado et al., 2024) A healthy school is a school that has the ability to maintain, maintain and improve the degree of health so that it is able to manage its own health. Clean and Healthy Living Behavior (PHBS) in the school environment is an activity that empowers students and education staff to lead a healthy lifestyle in order to create a healthy school environment. PHBS in the school environment has benefits in creating a clean and healthy environment, and improving the results of the teaching and learning process, as well as maintaining the health of students, teachers, and the surrounding community. Based on the above problems, researchers are interested in examining factors related to clean and healthy living behavior (PHBS) in students of SD Negeri 066650 Medan City in 2024. The aim of this research was conducted on elementary school students because the elementary school age group is a group that is always curious and wants to try new things. Elementary school students are also considered to be of productive age who can be trained from an early age to implement clean and healthy living behavior (PHBS) in their daily lives.

METHOD

In this study using quantitative methods by design Cross Sectional. The location of this research was carried out at SDN 066650 Medan, this research was conducted in January-March 2024. The population in this study was 298 students of SDN 066650. The sample in this study was 89 people, the sample calculation used the Lameshow formula, and the sampling technique was carried out by Non probability sampling (Purposive Sampling). By meeting the inclusion criteria, namely students of grades V and VI and students registered at Sd Negeri 066650 Medan. Data on research using primary data. Data collection techniques use questionnaires, and the instruments in this study use questionnaires that are distributed directly. The questionnaire used had several questions including hand washing, healthy

snacks, healthy latrines, exercise, eradicating mosquito larvae, not smoking, weighing and measuring height, and disposing of garbage in its place using sheets that were distributed directly to students to find out students' knowledge and attitudes about clean and healthy living behavior (PHBS). The variables studied in this study include age, gender, knowledge, attitudes, infrastructure, and the role of teachers. The validity used in this study used the Pearson correlation. The test results obtained a value of <0.05 can be said to be valid. The reality used in this study is using Cronbach alpha with the test results obtained a value of >0.6 can be said to be realistic. The data analysis used is univariate analysis, which describes the frequency distribution of characteristics, then bivariate analysis using the Chi-Square Test, which is to find out whether there is a relationship between independent variables, namely (Knowledge, Attitudes, Infrastructure, and Teacher Roles) and dependent variables (Clean and Healthy Living Behavior). Variable scale measurement using the Middle Value (Median), using the JAPS application (Jeffrey's Amazing Statistical Program).

RESULTS

Table 1.
Results of Univariate Analysis of Factors Associated with
Clean and Healthy Living Behavior in Students at Public Elementary

Variabel	Kategori	f	%	Total
Age	10 Year	9	10,1	100.0
	11 Year	68	76,4	
	12 Year	12	13,5	
Gender	Man	48	53,9	100.0
	Woman	41	46,1	
Clean and Healthy Living Behavior	Not Good	41	46,1	100.0
	Good	48	53,9	
Knowledge	Low	65	73,0	100.0
	Tall	24	27,0	
Attitude	Negative	53	59,6	100.0
	Positive	36	40,4	
Infrastructure	Not good	40	44,9	100.0
	Good	49	55,1	
Teacher's Role	Not Playing an Active Role	62	69,7	100.0
	Play an Active Role	27	30,3	

Tabel 1 on the distribution table of respondents' characteristics, it is known that there are 9 students aged 10 years (10.1%), 11 years old there are 68 students (76.4%), and those aged 12 years there are 12 students (13.5%). And it can be seen the characteristics of respondents from gender, namely men as many as 48 students (53.9%) and women as many as 41 students (46.1%). Based on the distribution table of clean and healthy living behavior, it is known that students who have good PHBS are 48 students (53.9%), and students who have PHBS are less good by 41 students (46.1%). Based on the knowledge distribution table, it can be seen that students who have low knowledge are 65 students (73.0%) and students who have high knowledge are 24 students (27.0%). Based on the attitude distribution table, it shows that out of 89 students, as many as 36 students (40.4%) have a positive attitude, and 53 students (59.6%) have a negative attitude.

Based on the distribution table of infrastructure facilities obtained from 89 students, the variable results of facilities at SD Negeri 066650 obtained good results of 49 (55.1%) and less good results of 40 (44.9%). It can be interpreted that the level of facilities at SD Negeri 066650 is declared good. Based on the teacher role distribution table of 89 students, the results of the variable role of teachers in SD Negeri 066650 obtained the results of playing an active role of 27 (30.3%) and not playing an active role of 62 (69.7%).

Table 2.
Results of Bivariate Analysis of Factors Associated with Clean and Healthy Living Behavior in Public Elementary School Students

Variable	Clean and Healthy Living Behavior						p.value
	Not Good		Good		Total		
	f	%	f	%	f	%	
Knowledge							
Low	25	28,1	40	44,9	65	73,0	
Tall	16	18,0	8	9,0	24	27,0	0,033
Total	41	46,1	48	53,9	89	100,0	
Attitude							
Negative	19	21,4	34	38,2	53	59,6	
Positive	22	24,7	14	15,7	36	40,4	0,033
Total	41	46,1	48	53,9	89	100,0	
Infrastructure							
Not good	13	14,6	27	30,3	40	44,9	
Good	28	31,5	21	23,6	49	55,1	0,035
Total	41	46,1	48	53,9	89	100,0	
Teacher's Role							
Not Playing an Active Role	23	25,9	39	43,8	62	69,7	
Play an Active Role	18	20,2	9	10,1	27	30,3	0,019
Total	41	46,1	48	53,9	89	100,0	

Based on the relationship of knowledge with the implementation of clean and healthy living behavior, it was found that students who have high knowledge have clean and healthy living behavior, less good there are 16 students (18%) and good there are 8 students (9%). The results of the chisquare-test obtained with a p value = 0.033 or ($p < 0.05$) mean that there is a relationship between knowledge and the implementation of PHBS, it can be concluded that knowledge has an influence on the implementation of PHBS. Based on the relationship between attitudes and clean and healthy living behaviors, it was found that students who had good attitudes had clean and healthy living behaviors, less good there were 22 students (24.7%) and good there were 14 students (15.7%). The results of the chisquare-test obtained p value = 0.033 ($p < 0.05$) This means that attitude has an influence on the success of PHBS implementation.

Based on the analysis of the relationship between infrastructure facilities and clean and healthy living behavior, it was found that Shiva who had good infrastructure had clean and healthy living behavior, less good there were 28 students (31.5%) and good there were 21 students (23.6%). The results of the chi-square test obtained a p value = 0.035 or ($p < 0.05$) meaning that there is a relationship between infrastructure facilities and the implementation of PHBS in schools. Based on the analysis of the relationship between the role of teachers and clean and healthy living behavior, it was found that students who had the role of teachers who played an active role both had clean and healthy living behaviors, less good there were 18 students (20.2%) and good there were 9 students (10.1%). The results of the chi-square test obtained a p value = 0.019 or ($p < 0.05$) meaning that there is a relationship between the role of teachers and clean and healthy living behavior.

DISCUSSION

The relationship between knowledge and the implementation of PHBS in Schools

Based on the results of the research conducted, data from 89 respondents showed that most of the knowledge of respondents with knowledge of clean and healthy living behavior was high, namely with a percentage of 27.0% 24 respondents and knowledge of clean and healthy living behavior of respondents was low 73.0% 65 respondents. In this study, the proportion of respondents who had low knowledge was more than the proportion of respondents who had

knowledge about clean and healthy living behavior. Respondents' low knowledge may be because they do not know what clean and healthy living behavior (PHBS) is and there is still a lack in their environment about what PHBS is. Smoking knowledge is very important given to students, this is because cigarettes contain chemicals that can harm health. All people in the school environment are not allowed to smoke. This desire to smoke arises because students imitate the behavior in their environment and they think that smoking is a symbol of maturity. The results of this study show that there is a significant relationship between knowledge and clean and healthy living behavior. This meaningful relationship is in line with the research of Febri, et al (2019). The provision of information will increase one's knowledge and knowledge will make a person have awareness so that he will behave in accordance with the knowledge he has. Knowledge is an facilitating factor for the implementation of Clean and Healthy Living Behavior (PHBS). Thus this factor becomes a trigger for behavior that is the basis or motivation for his actions due to traditions or customs, beliefs, educational level and socioeconomic level.

The results of this study are also in line with research (Yuandra & Ginting, 2021) With the results of the data analysis carried out, the value of $p = 0.046$ shows that there is a significant relationship between the relationship between basic sanitation knowledge and the PHBS actions of students at SD Negeri 046579 Lau Peranggunen Village, Karo Regency, this condition is caused by there are still many students who do not know basic clean and healthy living behaviors and do not take PHBS actions. Knowledge is the result of the ability / knowledge possessed by a person and can be used on oneself or others.

The relationship between attitudes and the implementation of PHBS in schools

The results of the study of 89 respondents, where there were negative and positive category variables. The frequency distribution of respondents was negative 7 students (7.9%) and positive 82 students (92.1%). The results of statistical analysis of the relationship between attitudes and the implementation of PHBS found that there were 53 students with negative attitudes (59.6%), and with positive PHBS implementation 36 students (40.4%). The results of the chi-square test were obtained $p = 0.03$ or a value of $p < 0.05$ meaning that there is a significant relationship between attitudes and the implementation of PHBS in schools. In this study, the proportion of respondents who have a negative attitude is more than the proportion of respondents who have a positive attitude about the implementation of clean and healthy living behavior. Negative attitudes of students are found in healthy snacks in the school cafeteria, regular BB and TB measurements, and eradicating mosquito larvae in schools. Consuming healthy snacks in the school cafeteria is a habit that must be instilled in students. This is an effort so that students avoid the chemical content contained in food that is sold freely outside the school cafeteria. The food in the school must also be supervised by the teacher, so that the food is maintained cleanliness and nutritional content. Healthy food must contain substances needed by the body, so that it can help the process of growth and development of students optimally.

This is in line with the results of previous research conducted by Triana, et al (2020) showing a significant relationship between attitudes and the implementation of clean and healthy living behaviors. Attitude is a reaction or response of someone who is still closed to a stimulus or object. Attitude is readiness or willingness before acting, as a reaction or response that is still closed to a stimulus or object such as an invitation to implement PHBS. Therefore, student attitude is one of the internal factors from within students to enable the implementation of PHBS (Kemenkes RI 2011). According to (Novika, 2022) In order for the purpose of forming students with character to succeed, one of which is able to implement PHBS, there must be

great attention to the formation of positive student attitudes. The results of this study are also in line with research (Usoh & Kandou, n.d.) with the results of data analysis conducted using the chi-square test on the relationship between attitudes and PHBS actions got a value of $p = 0.002$ or $p < 0.05$ which showed a significant relationship between attitudes and PHBS actions in SD Negeri Tumbak, Pusomen District, Southeast Minahasa Regency.

The Relationship of Infrastructure Facilities with the Implementation of PHBS in Schools

The results of the study of 89 respondents, where there were good and bad category variables. As for the frequency distribution, there are 49 (55.1%) good infrastructure facilities and 40 (44.9%) less good facilities. The results of the chi-square analysis show that there is a significant relationship between infrastructure facilities and Clean and Healthy Living Behavior (p -value = 0.035). This is in line with research conducted by (Ernyasih & Sari, 2021), namely there is a significant relationship between infrastructure facilities and clean and healthy living behavior in Santri MTS at Pondok Pensantren Al-Amanah Al-Gontory. Schools should provide complete and qualified infrastructure to support and carry out PHBS activities. If this infrastructure is available, students will be encouraged to implement PHBS, and if school infrastructure is incomplete, it will understand the implementation and implementation of healthy behavior by students. In each room there must be a trash can equipped with a lid, there are polling stations from all rooms to facilitate the transportation of waste, laying temporary landfills / garbage collections. Facilities are supporting PHBS somewhere. Without the support of adequate health facilities, PHBS is very difficult to implement. The results of this study are also in line with research (Saputra & Suryani, 2021) With the results of this study shows that means have a very significant relationship with clean and healthy living behavior (p value = 0.000).

The Relationship between the Role of Teachers and the Implementation of PHBS in Schools

Based on the results of the research conducted, data from 89 respondents showed that most of the roles of teachers who played an active role were 27 students (30.3%) and which showed that the role of teachers who did not play an active role was 62 students (69.7%). Based on the results of the chi-square statistical test, there is a relationship between the role of teachers and the implementation of PHBS with a p value = 0.019 ($p < 0.05$), so it was found that there is a meaningful relationship between the role of teachers and the implementation of PHBS in schools. The role of the teacher as a companion figure in his life every day at school is to wash his hands before and after doing activities, remind students to throw garbage in its place, and set an example for students not to smoke in the school environment. This role makes a very dominant influence and determines the quality of life of a child in the future, so it is very important for them to understand and know the problems and health problems that are quite extensive and complex.

The results of this study are in line with research conducted by (Novika, 2022) That is, there is a relationship between the role of teachers and the implementation of PHBS at SDN 141 Palembang City in 2023 with a p value of 0.029. This is because the teacher is a companion figure when children carry out their daily life activities at school. Their role is very important and greatly determines the quality of life of children in the future. The role of teachers in schools is also very decisive for students or for their students, so that the success of a student in implementing PHBS in the school environment will not be separated from the various attitudes and actions of teachers who become role models for their students (Hardiyanti, 2019). Teachers who support the role of clean and healthy living behavior will make students

carry out clean and healthy living behaviors at school because teachers are substitutes for the role of parents at school and people who know best how children are in school compared to their parents. The results of this study are also in line with (Nasiatin & Hadi, 2019) with the results of this study shows that the role of teachers has a very significant relationship with clean and healthy living behavior (PHBS) in elementary school students (p value = 0.000). In schools, teachers are figures exemplified by students, so one of the driving factors for good PHBS in students is the teacher. This is because teachers are examples to their students of clean and healthy living behavior at school. In addition to providing examples, teachers also play a role in supervising and controlling students in implementing clean and healthy living behaviors at school.

CONCLUSION

Based on the results of research on factors related to clean and healthy living behavior (PHBS) in students of SD Negeri 066650 Medan City in 2024, there is a significant relationship between knowledge and the implementation of PHBS with a value of 0.033, which means a probability sig value of <0.05 . There is a significant relationship between attitude and PHBS implementation with a value of 0.033 which means a probability sig value of <0.05 . There is a relationship between good infrastructure and the implementation of PHBS with a value of 0.035 which means a probability sig value of <0.05 . And there is also a relationship between the role of teachers who play an active role and the implementation of PHBS with a value of 0.019 which means a probability sig value of <0.05 .

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