

## Improving Child Safety Through Health Education *Underwear Rules*, Growth Monitoring, And Disaster Preparedness

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### ABSTRACT

Schools are part of a community unit consisting of students, teachers, principals, and other employees. Elementary students and teachers, as well as employees, will spend a lot of time at the school. Many problems can be helped to solve in schools, such as preventing sexual violence through underwear rules, monitoring growth and development, and disaster preparedness. All of these activities can be carried out in a series of community service activities at an elementary school (SD) in the city of Tasikmalaya. Community service activities are applications of research results conducted by lecturers at the Nursing Study Program, Department of Nursing, Poltekkes, Ministry of Health, Tasikmalaya. The method of activities carried out included the provision of health education about underwear rules, measuring the weight and height of elementary school children, and how to manage disaster mitigation in the Tasikmalaya area. The facilities and infrastructure used are laptops, in focus, body scales, height measurements, and disaster simulation tools. The results of the activity include an increase in the knowledge and skills of participants or elementary school children about underwear rules and disaster mitigation. Most elementary school children have growth that is by their age

**Keywords:** disaster preparedness; child growth; underwear rules

### INTRODUCTION

Monitoring of growth and developmental disorders of children is a reference for health workers working in basic/primary health care facilities, professional groups, educators, family planning field officers, social workers associated with fostering child growth and development, professional organizations, and relevant stakeholders. growth, development, and developmental disorders of children (REGULATION OF THE MINISTER OF HEALTH OF THE REPUBLIC OF INDONESIA NUMBER 66 OF 2014 CONCERNING MONITORING OF GROWTH, DEVELOPMENT, AND DISORDERS OF CHILD GROWTH, DEVELOPMENT, 2014). Monitoring the growth and development of children is directed to improve the health and nutritional status, cognitive, mental, and psychosocial of children. Monitoring the growth and development of children is not only the responsibility of health workers but is a cross-sectoral task including school teachers.

Elementary school-age children are children who often miss the monitoring of growth and development because it is considered no longer necessary for continuous monitoring. Even today, there are still many children who experience growth and development disorders, so they are not following their age. Few parents and teachers do not yet understand the mechanism to trigger the development of elementary-aged children (Roebers et al., 2019). Child growth can be assessed from changes in physical size. The implicit meaning of the anthropometric examination results can be known from the child's health history such as cultural problems, parental attention, nutrition, parents' social background, childhood parenting patterns in the family environment, and social environment (Situmorang et al., 2019). Other problems that are often encountered in children include the lack of consuming varied foods because children tend to like only certain types of food (Xue et al., 2015). In addition, the problem of obesity that occurs in children usually begins with a birth weight above normal and the consumption of formula milk in newborns (Weber et al., 2014).

Indonesia is suspected to be still very vulnerable to being victims of violence, both physical and sexual. According to the Director of Child Health Development at the Ministry of Health, this case requires the support of many parties in the form of comprehensive, holistic, and integrated handling by various related sectors, including the government, NGOs, the private sector, and

the community including families, relatives, and practitioners (Wahyudi, 2017; Ministry of Health & Unicef, 2007). The impacts that can arise on children who are victims of sexual violence include disrupting the growth and development of children and placing children at risk for various mental and emotional disorders. These disorders may include anxiety (eg panic disorder, OCD and PTSD), depression, anger, cognitive distortions, posttraumatic stress, dissociation, identity disorders, affect dysregulation, interpersonal problems, substance abuse, self-mutilation, bulimia, unsafe sexual behavior or dysfunctional, somatization, aggression, suicidality, and personality disorders (Carson et al., 2014). Therefore, efforts to prevent sexual violence are needed. Puskesmas as primary health care facilities do not yet have a special program for preventing sexual violence against children (Kartilah et al., 2018). If public health center has a special program in preventing sexual violence, it can be included in the SD or equivalent School Health Business (UKS) program. This can be done as an effort to prevent sexual violence in school children.

Effective prevention efforts include providing sex education in the form of counseling on the prevention of sexual harassment and violence, and early understanding of reproductive health for children, parents, and teachers through the *underwear rules* (Budiyono, Ramadani, & Mahrosi, 2018; Persada & Ayuningtyas, 2018). 2015; Ramadani & Budiyono, 2018; Wijhati & Suharni, 2018). The *underwear rules* are expected to make children protect themselves from people who will intend to commit sexual crimes so that children can prevent and protect themselves (Nurbaya & Qasim, 2018; Andriani & Nahdliyah, 2018).

Another problem that is often faced by the city of Tasikmalaya is earthquakes. Indonesia is located in a circle of fire and is often hit by tectonic earthquakes Earthquakes are disasters that can occur suddenly without being detected beforehand. Earthquakes can happen anytime, anywhere, and hit anyone. Therefore, preparedness is an important element and part of disaster management. Schools are one of the key stakeholders responsible for building preparedness. In addition to being a source of knowledge, schools have several strategic roles in building preparedness, such as being a source of disseminating disaster knowledge, becoming a center for participatory education for the community, providing practical guidance on what to prepare before a disaster, and actions to be taken during and after a disaster (Sujarwo et al. al., 2018). Therefore, there is a need to provide knowledge about earthquake disaster mitigation, especially in elementary schools, and to cultivate a "Culture of Safety" in schools (Winarni & Purwandari, 2018; Nurdin, Rafliana, Hidayati, Oktari, & Djalante, 2017).

Various problems can occur in schools, so we overcome them through community service activities with the theme 'Improving Child Safety Through Underwear Rule Health Education, Monitoring Child Growth, and Disaster Preparedness in Tasikmalaya Elementary School'

## METHOD

Community service activities are carried out at Babakan Kadu Elementary School, Tasikmalaya. The target of the activity is 4th, 5th, and 6th-grade students, class teachers, and UKS officers. Activities carried out include monitoring children's growth by measuring children's height and weight, providing health education about *underwear rules*, and disaster preparedness, as well as measuring pretest and post-test knowledge. The tools used in this community service activity include laptops, *in focus*, body scales, height measurements, and disaster simulation tools. The purpose of community service activities is to increase knowledge and skills in preventing sexual violence in children through *underwear rules*, monitoring the growth of elementary school children, and disaster preparedness for elementary school students.

## RESULTS

Outcomes achieved in community service activities include:

**Table 1.** Distribution of respondents based on respondent characteristics (n=60)

Variable	n	%
Gender		
Female	28	46.7

Variable	n	%
Male	32	53.3
Class degree		
4th	19	31.7
5th	21	35
6th	20	33.3

**Table 2.** Distribution of respondents by age and growth (n=60)

Variable	Mean	Min-max
Age	10.9	9 - 13
BB	34.86	24-59
TB	130.1	94-144

**Table 3.** Distribution of respondents based on level of knowledge

Knowledge	Pretest		Posttest	
	n	%	n	%
Good	8	13.3	57	95
Enough	40	66.7	3	5
Less	12	20	0	0

## DISCUSSION

Children are a vulnerable group. Vulnerable to incidents of sexual violence, prone to growth delays, and vulnerable to natural disasters. Many dangers can lurk in children wherever they are, such as disasters or sexual violence. Healthy children are national assets.

Children can spend most of their time at home and school. Schools substantially determine the welfare and future economic productivity of the nation. Health Education is an interactive component of the School Health Business (UKS) program (Kolbe, 2019; Birch & Auld, 2019). Therefore, the school environment can provide information on the prevention of sexual violence and disaster preparedness (Februant et al., 2020; Hafida, 2018; Hayudityas, 2020).

Health education has a positive impact on one's health behavior (Vahedian-Shahroodi et al., 2021). Health education as a health intervention is one way to improve students' physical health outcomes and change behavior that can be done by the UKS teacher (Fitzpatrick & Allen, 2019).

The implementation of community service activities in the form of Health Education can increase the knowledge of elementary school students in preventing sexual violence. With increased knowledge, students are expected to be able to apply the knowledge that has been obtained as behavior to prevent sexual violence. In addition, providing information such as disaster preparedness can increase students' knowledge of what to prepare before, during, and after a disaster occurs. Students are expected to be able to apply all the knowledge that has been obtained when a disaster occurs to reduce the risk of post-disaster trauma (Sumaryana et al., 2018).

The growth and development of children are influenced by social, nutritional, and environmental factors at home, at school, and in the community (Rodriguez-Martinez et al., 2020). Measurement of height and weight in children is one way to detect early growth delays in children. This is expected to speed up action/treatment from the existing detection results.

## CONCLUSIONS AND RECOMMENDATIONS

The implementation of health education can increase the knowledge of elementary school students about the prevention of sexual violence and disaster preparedness. In addition, measurement of TB and BB is one way of early detection of delays in child growth

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## APPENDIX



**Figure 1.** health education for students



**Figure 2.** pretest and posttest