Abdimas Umtas: Jurnal Pengabdian Kepada Masyarakat LPPM-Universitas Muhammadiyah Tasikmalaya

Volume: 7, Issue:1, January, 2024; pp: 336-344

E-ISSN: 2614 - 8544

Community Service Program: Hygiene and Sanitation of Tempeh Production Houses

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ABSTRACT

Efforts to develop the level of public health are significant to achieve a better standard of living. Most of the people of Jatimulya sub-district RT 03 RW 08 make their living as Tempeh entrepreneurs. Based on observations related to the sanitary hygiene of Tempeh processing workers, it is still not good, almost all workers do not use gloves or waterproof shoes. One method to achieve this level of public health is by providing the community with understanding, knowledge, and awareness to implement a clean and healthy lifestyle starting from themselves, their families, the school environment, and the wider community. This effort aims to increase people's knowledge and understanding to have selfawareness and potential to maintain health through learning Clean and Healthy Living Behavior (PHBS). The implementation method is by; counseling about PHBS practices at the household level, and Tempeh business outreach about PHBS at the sub-district level, teaching the community about correct hand washing practices, and empowering the community with activities to keep the environment clean. This activity involves the entire community. The results of research activities show that there is a change in attitudes regarding clean and healthy living behavior and a change in people's behavior regarding PHBS and the entire community has been able to wash their hands properly, posters, leaflets and videos with the message of the importance of personal hygiene at work use a rational approach to ensure The target is to gain new knowledge so that it can increase knowledge of the attitudes and practices of processing workers related to the importance of personal hygiene at work

ARTICLE INFO

Article History:

Submitted/Received 17 Jan 2024 First Revised 29 Jan 2024 Accepted 30 Jan 2024 First Available online 30 Jan 2024 Publication Date 31 Jan 2024

Keyword:

Phe Clean and Healthy Living Behavior Hygiene and Sanitation Tempeh Production House

INTRODUCTION

Clean and Healthy Living Behavior (PHBS) is a behavior carried out by a person to always pay attention to cleanliness, health, and healthy behavior. The PHBS program has been implemented since 1996 by the Community Health Extension Center which is currently called the Health Promotion Center. The PHBS program is implemented in various settings, such as household settings, market settings, and so on. The pattern of implementing clean and healthy living is a form of behavior based on awareness as a form of learning so that individuals can help themselves with health problems or participate in creating a healthy society in their environment. The Clean and Healthy Living Behavior (PHBS) implementation program is a form of effort to provide lessons in the form of experiences to each individual, family member, group, and the general public. Lessons can be done through communication media, providing news, as well as education so that there can be an increase in knowledge, changes in attitudes and behavior through approaches from leaders, building an atmosphere, and also carrying out self-empowering movements in community groups (Wati & Ridlo, 2020).

Community empowerment is a very important part and can even be said to be the foundation for health promotion. This empowerment will be more successful if it is implemented through partnerships, groups, mutual cooperation, and using appropriate methods and techniques (Regation of the Minister of Health of the Republic of Indonesia Number 1096/Menkes/Per/VI/2011, 2011). The health promotion mission is an effort to empower individuals, families, and communities to live healthy and clean lives through community empowerment programs. Thus, the target of health promotion can be through individual empowerment, family empowerment, and group or community empowerment (Kruahong et al., 2023). Meanwhile, health education is a method that can be applied through preventive measures to remind the public of the importance of maintaining health. Thus, through the outreach method, maintaining public health can start with the awareness of each individual, family, group, and wider community (Purnomo et al., 2021; Siregar et al., 2022). Direct outreach activities to the community, especially communities that are still far from the reach of information media or health facilities, will be able to help the community obtain health information, so this community service activity can support the health information literacy rights of every individual (Team group 2).

Hygienic is related to or by health science which means clean and free from disease (Akishin et al., 2022; Kuzmin et al., 2022). Meanwhile, sanitation is an effort to foster and create a good condition in the health sector, especially health and the environment in the community. The way to create a healthy living environment is to pay attention to the physical environment such as land, water, and air (big Indonesian dictionary). One of the targets of this community empowerment activity is the neighborhood around JatiMulya RT 03/RW 08 and the Tempeh production house. A Tempeh production house is a house where soybean seeds are processed which are used as snacks in the form of Tempeh. So the hygiene and sanitation of the Tempeh production house is an effort to foster and create a clean and disease-free condition in the house that processes soybeans into Tempeh. In Jatimulya Village RT 03/RW 08, there are 47 Tempeh production houses. Observation results related to hygiene Sanitation for Tempeh processing workers is still not good, almost all workers do not use gloves, waterproof shoes, masks, and aprons in any Tempeh processing production chain. From the results of a short interview, with one of the Tempeh production companies, That as a sub-district that produces Tempeh, most of the residents of Jatimulya sub-district, Bekasi Regency work in the trade sector, namely the MSME trade sector, in the household Tempeh business industry (Jatimulya, 2023).

Based on the profile of Jatimulya sub-district RT 03/RW 08 of 2023, it shows that the majority of the people make their living as Tempeh craftsmen, the Jatimulya sub-district is also called Tempeh sub-

district. The Bekasi Village area, especially the Tempeh produced by the Jatimulya sub-district is very well known. Jatimulya sub-district is a village in the Bekasi district area and under the working area of the Jatimulya District Health Center. Bekasi. In the home industry sector, Jatimulya Village has a superior product, namely Tempeh (RT Jatimulya, 2023). Based on the results of a survey of several household-scale Tempeh craftsmen in Jatimulya Village in December 2023, it is known that most of the craftsmen process their Tempeh without using PPE, without paying attention to cleanliness in various processing places and still using traditional methods and relying on employees. In one week, on average, each Tempeh home industry produces six working days. Observation results related to sanitation and personal hygiene of Tempeh processing workers are still not good, almost all workers do not use gloves, waterproof shoes, masks, and aprons in every Tempeh processing production process. Based on the results of an interview with one of the heads of the Jatimulya Village Tempeh craftsmen, it was stated that there had never been any socialization or counseling related to sanitation hygiene regarding PHBS in producing food from the local Health Service or Community Health Center.

The formulation of the problem from several previous health research reports shows that only 38.7% of households have implemented PHBS, which shows that the figure is not optimal. Likewise, in the UKM area for Tempeh craftsmen or workplace agencies, not only, even in public places and health facilities, PHBS practices have not been implemented as they should. Based on the situation analysis based on the data above, the writing team carried out this community service program activity to strengthen the community's movement and participation in implementing PHBS practices in the household setting, especially in the Tempeh production business area in Jatimulya Village in the Bekasi Regency area. with health facilities such as community health centers right in Jatimulya, Bekasi Regency. Health services are generally provided at the Jatimulya Community Health Center. Most of the community's main income is from Tempeh craftsmen. Considering that Jatimulya Village is a Bekasi Regency area bordering Tambun District, which means that access to health information literacy is still limited, it was used as a target for carrying out community service. It is hoped that this PHBS outreach activity can improve the health status of the local community, especially for Tempeh SME entrepreneurs.

So that efforts to overcome this problem carried out outreach and guidance activities for the residents of Jatimulya sub-district to increase awareness and improve behavior and knowledge and understanding of the community regarding PHBS behavior at the household level and PHBS in the UK area producing Tempeh, by practicing correct hand washing at home. community, the importance of using PPE for Tempeh entrepreneurs, and not littering to avoid infectious diseases and empowering the Jatimulya sub-district community to maintain environmental health.





FIGURE 1. The environment is dirty and rubbish is thrown anywhere

METHOD

This service activity was carried out in the Jatimulya Community Health Center Work Area, Bekasi Regency. The method used is the action research method (Action Research) through a participatory action program approach (Participatory Action Program). The targets of this activity are Tempeh craftsmen and the Jatimulya Village community. This activity consists of preparation, implementation, and evaluation stages (Figure 2).

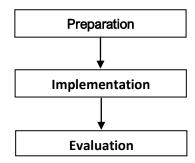


FIGURE 2. Community service activity

The preparation stage includes identifying problems using interview and observation techniques, preparing materials, and preparing outreach media in the form of presentations via Power Point (PPT). The implementation stages are carried out using lecture methods and demonstrations, namely the delivery of survey results and outreach materials in the form of PHBS socialization, mentoring and guidance. The evaluation stage includes follow-up to the agreed intervention. Evaluation (assessment) uses the community's commitment that they want to carry out interventions based on what was mutually agreed upon after receiving counseling. This activity was carried out using a method adapted to the environmental conditions of the community in Jatimulya Village, namely: Carrying out interactive counseling and questions and answers with the Jatimulya Village community. Carrying out outreach in the community by introducing and providing understanding to the community, especially for Tempeh craftsmen and workers, regarding clean and healthy lifestyles accompanied by the practice of correct hand washing for each community member. Organizing community service days for environmental cleanliness with the community as a form of social service and community empowerment to maintain and improve the quality of the environment where they live and maintain hygiene and sanitation in their Tempeh production business.

RESULT

Respondent Characteristics

TABLE 1. Frequency Distribution of Respondents' Homes and Environment

Home and Environment	No	Of
Work waste is thrown into the river	57%	43%
Air pollution / Smoke	60%	40%
Does not have TOGA or first aid kit	28%	72%
Don't have livestock	20%	80%
Disposal of bathroom waste into the river	6%	94%

Table 1 shows the Frequency distribution based on home and environment of respondents who most often answered Yes to the question of Not having TOGA and First Aid at 72% and disposing of bathroom waste into the river at 94%.

TABLE 2. Frequency Distribution of Behavior of Respondents' Family Members

Family Member Behavior	No	Of
Open the window in the morning	13%	87%
Clean the house every day	8%	92%
Exercise every day	62%	38%
Throw garbage in its place	4%	96%
Defecate in the toilet	8%	92%
Brushing your teeth at least 2 times a day	39%	61%
Wash hands with soap	23%	77%
Family members smoke	29%	71%

Table 2 shows the frequency distribution of the behavior of family members of respondents who most often answered No exercising every day at 62% and those who answered Yes to family members who smoked at 71%

TABLE 3. Frequency Distribution of Respondents' Work Environment

Work environment	No	Of
Processing work waste is discharged into the river	67%	33%
There is noise	55%	45%
Sufficient ventilation	25%	75%
The description is pretty clear	32%	68%
Cool workspace Tempehrature	78%	22%
There are Beasts roaming around	83%	17%
APAR tubes are available	76%	24%
There is air pollution	48%	52%

Table 3. shows the frequency distribution of the work environment of respondents who most often answered No to a work room Tempeh rature that was not cool at 78%, those who answered that there were no APAR cylinders available in the work environment were 76%, and those who answered Yes there was air pollution in the work environment at 52%

TABLE 4. Frequency Distribution of Respondents' Occupational Health

Occupational Health	No	Of
Using PPE	71%	29%
Exercise regularly	84%	16%
Spacious work area	54%	46%

Table 4 shows the frequency distribution of the occupational health of respondents who most often answered that they did not use PPE at 71%, those who answered that they did not exercise regularly were 84% and those who answered that they did not use a workplace that was not spacious was 54%.

DISCUSSION

The results of community empowerment activities by providing outreach on PHBS knowledge to the community in the Jatimulya sub-district show that outreach can increase knowledge about hygiene and sanitation standards for Tempeh processing as well as community PHBS behavior. This is illustrated by the evaluation results which measure the influence of the level of community behavior regarding PHBS at the household level, especially in the Tempeh production business through counseling and demonstration methods. With extension activities, it can increase people's knowledge about PHBS in households by 37.2% as shown in Figure 3. The extension method has a significant influence on people's behavior and will and the insights they have can be applied in everyday life (Anggoro et al., 2018) including application in achieving good health.



FIGURE 3. 6-step hand washing practice



FIGURE 4. Presentation of PHBS material



FIGURE 5. Intervention discussion

Outreach activities followed by interactive discussions were carried out among community groups in Jatimulya Village, including an introduction to the concept of PHBS and the importance of implementing PHBS at the individual household level. In this activity, the community is convinced of the benefits of implementing PHBS at the household level. If PHBS is implemented well, it can provide direct benefits to the family, namely improving the family's standard of living because it can reduce medical expenses so that household expenses can be more focused on fulfilling family nutrition. If a family can run a Tempeh production business that maintains hygiene and sanitation and fulfills PHBS, it will automatically increase consumer interest, in other words, family income will increase. Apart from that, because each family member's health improves and does not get sick easily, children will grow up healthy and intelligent and the work productivity of each family member will increase. From the results of interactive discussions, the community agreed to the information and direct benefits of implementing PHBS in their respective families. After outreach activities to the community, we continued with the practice of washing hands properly. Before being taught how to wash hands properly, people generally practice how to wash hands properly. By teaching how to wash hands correctly, the whole community can practice washing hands properly. During the extension activities, the community actively interacted with the extension team and was interested in practicing correct hand-washing behavior and throwing rubbish in the right place. The community service implementation team made Jatimulya residents the target of PHBS behavioral intervention with the consideration that PHBS behavioral practices must be introduced and improved in the community so that they can change and want to improve their clean and healthy living behavior. school.

Community empowerment is an effort to build power by encouraging, motivating, and raising awareness of the potential they have and trying to develop it and also strengthen the potential the community has (Minarni et al., 2017). Community empowerment activities in Jatimulya sub-district to maintain and improve environmental health are a very important part and can even be said to be the spearhead for health promotion in the community. This is to research results (Amanvermez et al., 2023) that health communication in various forms such as advocacy media, mass media, entertainment media, and the internet can shape attitudes and change individual behavior by increasing awareness and increasing knowledge about health issues, health problems, and health solutions to improve and maintain health status. The results achieved from the outreach activities on PHBS practices in the community carried out in the community's living environment show that there has been a change in community behavior. Extension activities are one of the media for conveying health information, especially in locations that are still far from the reach of information media through access to health information literacy (Prasanti & Fuady, 2017).

CONCLUSIONS AND RECOMMENDATIONS

This Community Service Program is intended to have a positive impact on increasing the level of health of the Jatimulya RT community. 03, RW. 08 especially for Tempeh production entrepreneurs regarding PHBS behavior to maintain hygiene and sanitation in the importance of using PPE in the Tempeh-making process, the Jatimuliya community knows the importance of PHBS and can practice good hand washing behavior and use PPE to avoid various diseases, community service programs with various PHBS practice outreach activities can be continued to be introduced or oriented in the Tempeh production work area, as well as in the community environment, such as in public facilities, health service facilities, households and within certain agencies. It is a strategic place that will be a means of developing and practicing PHBS to improve the level of health in Indonesia. Thus, this activity can be implemented in other sub-districts, especially in locations that are still difficult to reach by the media, so that it can obtain community behavior with literacy. With more adequate health information, similar activities will be prioritized in sub-districts or villages that still lack literacy and health information and are far from health facilities.

The message that will be conveyed through the media of posters, leaflets, and videos is an effort to implement hygiene and fenestration, to provide the latest knowledge, to improve the mindset of clean and healthy living, as well as work practices in Tempeh processing. hygiene and synergy are fulfilled, and individual hygiene is fulfilled.

REFERENCES

- Akishin, S. V., Dementiev, A. A., Kharitonov, V. I., Zdolnik, T. D., Lyapkalo, A. A., & Kazaeva, O. V. (2022). HYGIENIC ASSESSMENT OF NUTRITION AND INCIDENCE OF INDIVIDUAL DISEASES OF STUDENT'S SECONDARY PROFESSIONAL EDUCATION IN MODERN CONDITIONS. *Problems of Social Hygiene, Public Health and History of Medicine, 30*(5), 776–781. https://doi.org/10.32687/0869-866X-2022-30-5-776-781
- Amanvermez, Y., Rahmadiana, M., Karyotaki, E., de Wit, L., Ebert, D. D., Kessler, R. C., & Cuijpers, P. (2023). Stress management interventions for college students: A systematic review and meta-analysis. *Clinical Psychology: Science and Practice*, *30*(4), 423–444. https://doi.org/10.1111/cpsp.12342
- Anggoro, S., Harmianto, S., & Yuwono, P. D. (2018). Upaya Meningkatkan Kemampuan Pedagogik Guru Melalui Pelatihan Pembelajaran Tematik Sains Menggunakan Inquiry Learning Process Dan Science Activity Based Daily Life. *JPPM (Jurnal Pengabdian Dan Pemberdayaan Masyarakat)*, 2(1), 29. https://doi.org/10.30595/jppm.v2i1.1844
- Regulation of the Minister of Health of the Republic of Indonesia Number 1096/Menkes/Per/VI/2011, Pub. L. No. 1096/Menkes/Per/VI/2011 (2011).
- Kruahong, S., Tankumpuan, T., Kelly, K., Davidson, P. M., & Kuntajak, P. (2023). Community empowerment: A concept analysis. *Journal of Advanced Nursing*, *79*(8), 2845–2859. https://doi.org/10.1111/jan.15613
- Kuzmin, S. V., Kuchma, V. R., Rakitskiy, V. N., Sinitsyna, O. O., & Shirokova, O. V. (2022). Role of scientific institutions of hygienic profile in the scientific substantiation of the national system of sanitary and epidemiological well-being, health risk management and improvement of the quality of life in the Russian population. HEALTH CARE OF THE RUSSIAN FEDERATION, 66(5), 356–365. https://doi.org/10.47470/0044-197X-2022-66-5-356-365

- Purnomo, B. G., Rohmantoro, D., Yoanita, Y. V., Permana, M. P., & Amiruddin, M. (2021). Awareness Implementation of The Prevention of Health Protection of Covid-19. *Journal of Physics: Conference Series*, *1823*(1), 012061. https://doi.org/10.1088/1742-6596/1823/1/012061
- Siregar, K. N., Nasir, N. M., Baequni, Darmawan, D., Kurniawan, R., Retnowati, Prabawa, A., Darmawan, E. S., Ariyanti, F., Daniah, Bahar Nur, R. J., & Handayani, Y. (2022). Increasing Community Awareness on Covid-19 Prevention in Jakarta, Indonesia: An Outreach Program for Urban Poor. *Asia Pacific Journal of Public Health*, *34*(4), 443–445. https://doi.org/10.1177/10105395221084931
- Wati, P. D. C. A., & Ridlo, I. A. (2020). Hygienic and Healthy Lifestyle in the Urban Village of Rangkah Surabaya. *Jurnal PROMKES*, 8(1), 47. https://doi.org/10.20473/jpk.v8.i1.2020.47-58