

Description of Family Knowledge about Clean and Healthy Living Behavior in Tarowang Village, South Galesong District, Takalar Regency

Nurhijrani Nurhijrani¹, Asriani Bahar²
^{1,2} Universitas Syekh Yusuf Al Makassar Gowa

ARTICLE INFO

ABSTRACT

Keywords:

Knowledge, Clean, Healthy Living Behaviors

Based on data from Tarowang Village in 2020, the number of heads of families in Tarowang Village is 627. It is recorded that there is still a lack of public awareness of the importance of clean and healthy living behaviors. The aim of this research is to obtain an overview of family knowledge about clean and healthy living behavior in Tarowang Village, South Galesong District, Takalar Regency. The research method used is a descriptive research method where the research will describe the family's knowledge about clean and healthy living behavior in Tarowang Village, South Galesong District, Takalar Regency. The results of research conducted on 85 respondents showed that the number of respondents whose knowledge about clean living behavior was good was 56 (65.88%), while 29 (34.11%) had poor knowledge. The conclusion of this research is that family knowledge about clean and healthy living behavior in Tarowang Village, South Galesong District, Takalar Regency is quite good; out of 85 respondents, 56 (65.88%) have knowledge. The level of knowledge is good, and 29 respondents still have less knowledge, namely 34.11%. The inhibiting factors in the lack of knowledge about clean and healthy living behavior are mostly caused by a lack of public awareness and an inadequate educational background.

Email :

icci.rani@gmail.com

Copyright © 2023 Journal Eduhealth. All rights reserved is Licensed under a Creative Commons Attribution- Non Commercial 4.0 International License (CC BY-NC 4.0)

1. INTRODUCTION

In society, sometimes clean and healthy living behavior has not been achieved due to a lack of awareness, especially in families. According to *World Health Organization* (WHO) data related to clean and healthy living behaviors such as washing hands with soap and household members always washing their hands with clean, running water and using soap, The achievement target for household members washing their hands with soap in 2017 is 58%. The achievement of household members washing their hands with soap in 2001 was still low. problem: it has not been cultivated in the family or household (Deviyanti, 2018).

According to the 2018 Indonesian Health Profile, there were three main types of complaints in the last month of 2017. Namely cough (45%), cold (43.7%), and fever (36.6%). As many as 65% of the population who had these complaints apparently chose to seek treatment themselves, while the rest chose outpatient treatment. The most frequent location for outpatient treatment was the Community Health Center, reaching 33.9%. Based on the results of data collection in 2018, of the 814,889 households monitored, there were 490,088 who behaved in a clean lifestyle, or around 60.14%; this means that the program's achievements have not yet reached the Healthy Indonesia indicator target of 65% (South Sulawesi Health Office, 2018).

In 2018, the number of family heads in Tarowang Village, South Galesong District, Takalar Regency experienced an increase of around 627 family heads consisting of 145 family heads in Tarowang Hamlet, 113 family heads in Madallo Hamlet, 248 family heads in Bontoreya Hamlet, 127 family heads in Uweya Hamlet, and in 2019 Tarowang Village experienced an increase in latrine supplies of around 60.15% and only 25% remained who did not implement clean and healthy living habits and those who did not have a latrine only lived in houses that had a latrine, which did not have a well around 4.78% and some families in Tarowang Village still like to drink cold water that has not

been boiled, around 10% and those who don't have a trash can are 2.40% and the culture of hand washing has reached 60.20%, Weighing Toddlers Every Month 45%, Eating fruit and Vegetables 35%, Exclusive breastfeeding 56%, Delivery by Health Personnel around 65%, No smoking in the house around 10%. Diseases that local residents often suffer from are diarrhea caused by unboiled drinking water and fever caused by an unclean environment, and the culture of washing hands is often not implemented in the family. This proves that some families lack awareness of the importance of moving towards a healthy Indonesia far from disease. Based on the data above, the author is interested in researching the description of family knowledge about clean and healthy living behavior in Tarowang Village, South Galesong District, Takalar Regency.

2. METHOD

This type of research is done using the descriptive survey method. This research is intended to describe family knowledge regarding clean and healthy living behaviors and aims to look at several variables at a certain time. This research was conducted in Tarowang Village, South Galesong District, Takalar Regency. It was carried out in March. The population is the subject of research. The population in this study were all families in Tarowang Village, South Galesong District, Takalar Regency, with a population of 627 family heads. The sample is a portion or representative of those studied. The samples in this study were all families in Tarowang Village, South Galesong District, Takalar Regency. From calculations using the formula, a sample size of 85 heads of families was obtained.

3. RESULTS AND DISCUSSION

Research regarding the Description of Family Knowledge of Clean and Healthy Living Behavior in Tarowang Village, South Galesong District, Takalar Regency from April 1 to 30, 2023 Data was obtained through questionnaires distributed to respondents to assess family knowledge regarding clean and healthy living behaviors. The overall research sample obtained when the research was carried out was 85 respondents using the technique of purposive *sampling*. This research is descriptive. After data collection, data processing is then carried out by editing, coding, and tabulation. To obtain the results of this research, the data was processed manually and then presented in the form of a frequency distribution table and narrative, which included the characteristics of the respondents (initials, education, and occupation) and the variables studied (family knowledge about clean and healthy living behavior). Based on the research results, the research data obtained is presented as follows:

Respondent characteristics

Respondent's Gender

Table 1 Distribution of Respondent Characteristics Based on Gender in Tarowang Village, South Galesong District Takalar Regency.

Gender	n	Percentage%
Man	49	57.64%
Woman	36	42.40%
Total	85	100%

Source: Primary Data 2023

From table 1 above, it can be seen that the gender of respondents in Tarowang Village, South Galesong District, Takalar Regency, namely 49 people (57.64%) were male and 36 people were female (42.40%).

Respondent's Education

Table 2 Distribution of Respondent Characteristics Based on Education in Tarowang Village, South Galesong District Takalar Regency

Pendidikan	N	Percentage %
No School	2	2.40%
Graduated From elementary school		
Graduated from middle school	40	47.10%
Graduated From Senior High School	16	18.80%
College	5	5.88%
Total	85	100%

Source: Primary Data 2023

From table 2 above, it can be seen that the highest education level of respondents in Tarowang Village, South Galesong subdistrict, Takalar Regency is elementary school graduates, namely 47.10%, or as many as 40 heads of families, while the lowest respondent education is tertiary education, at 5.88%, or 5 people.

Distribution of Respondents Based on Occupation

Table 3 Distribution of Respondent Characteristics Based on Occupation in Tarowang Village, South Galesong District Takalar Regency

Pekerjaan	N	Percentage %
Trader	10	11.76%
Farmer	60	70.58%
Laborer	5	5.88%
Self Employed	4	4.70%
Civil Servant	3	3.52%
Household matters	3	3.52%
Total	85	100%

From table 3 above, it can be seen that the occupations of the respondents in the largest sample were 10 traders, namely (11.76%), 60 farmers, namely (70.58%), 5 workers, namely (5.88%), 4 entrepreneurs, namely (4.70%), 3 civil servants, namely (3.52%), and 3 domestic workers, namely 3.52%.

Variables Studied

Knowledge

Table 4 Distribution of Respondents' Knowledge Regarding Clean and Healthy Living Behavior in Families in Tarowang Village South Galesong District, Takalar Regency

Knowledge	n	Percentage (%)
Good	56	65.88%
Less	29	34.11%
Total	85	100%

From the table, it can be seen that respondents with knowledge based on good knowledge, namely, 56 respondents (65.88%) were categorized as having poor knowledge regarding Clean and Healthy Living Behavior, 29 respondents (34.11%)

Discussion

Family knowledge about clean and healthy living behaviors

Based on Table 4, the distribution of respondents' knowledge about clean and healthy living behavior among families in Tarowang Village, South Galesong District, Takalar Regency is depicted as 56 respondents with good knowledge (65.88%) and 29 respondents with fairly good knowledge (34.11%). From the research results, it was found that the majority of respondents had good knowledge, namely 65.88%. As for people with less knowledge, namely 34.11%, Lack of family knowledge about clean and healthy living behaviors in households is due to their education being quite low. In this research, it was found that the majority of families had basic education, namely 40 people (47.10%), whereas there were 16 families with junior high school education (18.80%) and 22

people with high school education (25.88%), and there were also families with tertiary education, as many as 5 people (5.88%). The respondents who have jobs are 11.76% traders, 70.58% farmers, 5.88% workers, 4.70% entrepreneurs, 3.52% civil servants, and 3.52% domestic workers.

The research results obtained are supported by the theory of Wawan A. and Dewi M. (2016), who say that "there are several factors that influence knowledge, namely education and employment, where it can be seen that research was carried out in 2016 regarding clean and healthy living behavior in Tarowang Village, South Galesong subdistrict, Takalar Regency proves that low education and low employment will affect a person's knowledge with the data that has been obtained that the elementary school level reached 47.10% and employment as a farmer reached 70.58%, so that family knowledge about clean and healthy living behavior is still less, namely 34.11%. This is the case with the theory according to Notoatmodjo S. (2014), who explains that according to the green theory, one of the factors that influences a person's health behavior is predisposition, which includes a person's knowledge, beliefs, values, and perceptions of health behavior. The WHO working team also analyzed that health behavior is influenced by thoughts and feelings, namely knowledge, beliefs, attitudes, perceptions, and assessments of a person's health. Education is an influential factor in shaping a person's knowledge, attitudes, perceptions, beliefs, and assessments of health. So it can be concluded that the higher a person's level of education, the more aware and concerned they will be about personal hygiene and their environment.

This is supported by the research results of Kusumawati et al. (2012), who explain that there is a relationship between environmental health knowledge and clean and healthy living behavior, and also by the research results of Resminawati (2015), which explain that there is a relationship between the knowledge of the head of the family and the clean and healthy living behavior of the head of the family, but this is not in accordance with the results of Effendi's research et al. (2010), who explain that there is no significant relationship between knowledge and clean and healthy living behavior.

However, from the results of the research on the description of family knowledge about clean and healthy living behavior in Tarowang Village, South Galesong District, Takalar Regency, it was also found that respondents who had a low level of education still had a low level of knowledge about clean and healthy living behavior in the family. This is because each person's personality is sometimes indifferent to something, so they are too lazy to find out more in depth about information that can increase their knowledge. Apart from that, researchers also see that nowadays many people only think about finishing things quickly. Their education is not based on a genuine intention to learn, so many highly educated people do not have broad insight according to their level of education. Apart from the two factors above, the lack of socialization about clean and healthy living behavior in households is also one of the factors that causes the level of public knowledge about clean and healthy living behavior to be low.

4. CONCLUSION

Based on research regarding the description of clean and healthy living behaviors in households, it can be concluded that. Family knowledge about clean and healthy living behavior is still lacking, namely 34.11%, and those who have good knowledge regarding family knowledge about clean and healthy living behavior are only 65.88% of respondents who have good knowledge. Of the 85 respondents studied, the data illustrates that there are still families who are lacking. know about the importance of clean and healthy living behaviors and a family.

REFERENCES

- [1] Departemen Kesehatan Republik Indonesia. Rumah Tangga Sehat Dengan Perilaku Hidup Bersih dan Sehat. Jakarta, 2012.
- [2] Deviyanti, "Gambaran Perilaku Cuci Tangan Perawat Sebelum dan Sesudah Melakukan Tindakan Keperawatan", Makassar, 2014
- [3] Dinas Kesehatan Provinsi Sulawesi Selatan. Profil Kesehatan Sulawesi Selatan. Profil Kesehatan Sulawesi selatan 2017.
- [4] Gaster, " Gambaran Karakteristik Keluarga tentang Perilaku Bersih dan Sehat Volume8, 2013

- [5] Kusumawati, Hubungan Pengetahuan Kesehatan Lingkungan dengan Perilaku Hidup Bersih dan Sehat, Surabaya, 2016
- [6] Nursalam., Dasar & Metodologi Penelitian Ilmu Keperawatan. Edisi 2 Jakarta: Salemba Medika, S013.
- [7] Maryuni A, "Perilaku Hidup Bersih dan Sehat" Jilid1 Jakarta, TransInfoMedia 2013
- [8] Notoatmojo, S. "Ilmu Perilaku Kesehatan, Jilid2" Jakarta, 2014
- [9] Resminawati "Hubungan Pengetahuan Kepala Keluarga dengan Perilaku Hidup bersih dan Sehat" Yogyakarta. 2017
- [10] Proverawati A " Perilaku Hidup Bersih dan Sehat. Yogyakarta, Nuha Medika, 2016
- [11] Sugiyono, " Metode Penelitian" Bandung, Alfabeta 2012
- [12] Setiadi, "Konsep dan Praktik Penulisan Riset Keperawatan" Yogyakarta: Graha ilmu, 2013.
- [13] Wawan A dan Dewi M, "Pengetahuan Sikap dan Perilaku Manusia", Yogyakarta 2011