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Forming student character through clean and healthy life behavior in schools

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Abstract

Aim: Everyone in the school community, including students, teachers, and parents, has a role in promoting a healthy environment. Students are expected to acquire the background they need to advocate for healthy lifestyle choices and independently implement preventative measures against illness. Schools can only succeed with UKS (School Health Business) initiatives that promote healthy eating and exercise as part of a broader focus on promoting positive health behavior among students. This paper aims to shed light on the significance of school health efforts in inspiring students to form and keep up with lifestyle choices that are good for their own and the community's health.

Methodology: In the context of the secondary school system in Serang City, a total of 300 participants were analyzed by regression analysis. **Findings:** Students who took part in school health efforts were found to be more likely to adopt healthier behaviors. There are many benefits to promoting education on healthy and clean lifestyles in schools, including broadening teachers' horizons, increasing teachers' motivation and output at work, and reducing tension in teachers' interactions with their students.

Implications/Novel Contribution: This study will provide light on the significance of health education programs in schools and how they affect healthy lives and the formation of strong moral character.

Keywords: Clean and healthy behavior, health education, lifestyle, motivation, school community.

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INTRODUCTION

The concerted school of resources from infancy through old age aims to keep people healthy. In line with this goal is Article 1 of Law No. 36 of the Republic of Indonesia 2009, which defines health as "a state of well-being of body, soul, and society that enables everyone to be productive in social and economic life." It's not just the absence of disease that constitutes health; a sound mental and emotional state is as crucial.

Considering the frequency and severity of infectious disease outbreaks that have evolved into global pandemics, adopting more hygienic practices in daily life has become an urgent issue (Atmaja, Astra, & Suwiwa, 2021). Clean and healthy living awareness programs must begin with the government-mandated five sets of behaviors, which cover the home, the classroom, the workplace, the medical environment, and the public sphere (Kadiyono & Harding, 2019). To achieve the goals of national development in the health sector, it is necessary for all parties involved, not just the government but also the general public, health workers, and academics, to work together to raise public awareness and behavior for a clean and healthy lifestyle.

In addition to the risk of the spread of the virus that cannot be detected, the low willingness of the people to live cleanly and healthily can lead to a low health status, which in turn makes the quality of life of human resources in Indonesia to be low. One of the motivations for organizing health-related events in the academic sphere is this.

For students to learn, grow, and develop into valuable community and workforce members, they must have the tools they need to lead healthy lives (Apriani & Gazali, 2018; Jam et al., 2011). A key strategy for achieving this goal is the promotion and growth of school health businesses (UKS) as an education and health program that is

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carried out in an integrated, conscious, planned, directed, and responsible manner in instilling, growing, developing, and guiding students to live up to, enjoy, and implement the principles of daily healthy living (Lina, 2016; Somantri, Alfiyana, & Putri, 2022).

The way a country handles pediatric health issues is a barometer of its future prosperity, according to historical evidence. This is because children represent the nation's future, and if their health issues are not addressed, it may threaten future generations' standard of living (Inayah, Arfajah, & Aini, 2018; Irwandi, Ufatin, & Sultoni, 2016; Romadonika, Purqoti, Wasliah, & Soliha, 2021). This is why initiatives like School Health Business (UKS), the little doctor program, the implementation of School Children's Immunization Month (BIAS), and others have been developed to promote children's health in the school environment.

A pilot study conducted among Serang City's high school students has shown that, thus far, the School Health Program (UKS) still needs to be successfully implemented. Current health education activities focus primarily on theoretical learning and do not include hands-on experience. Even though this must be grounded in everyday relevance, we've chosen to focus on pragmatics. Moreover, health education programs in schools that focus on the physical, mental, and social environment are at odds with health service programs, which typically include promotional, preventive, curative, and rehabilitative initiatives. Another issue is the need for well-established, cross-level coordination of program implementation by the School Health Business Development Team (UKS).

Student character is developed over time through the practice of clean and healthy lifestyle habits, which are influenced by several factors. Knowledge, culture, religion, environment, habits, and parenting styles are all factors that have been found across studies to affect children (Ataqwa, 2020; Fridayanti & Prameswari, 2016; Irwandi et al., 2016; Kirana, Wahyuni, Puteri, & Ingelia, 2022; Lamen & Asiyah, 2021; Mulazimah, Ikawati, & Nurahmawati, 2021; Sasmitha & Sutria, 2020). There was also a significant correlation between the influence of parents and teachers on children's health behavior development (Ervina, Tahlil, & Mulyadi, 2018; Rexmawati & Santi, 2021; Rompas, Ismanto, & Oroh, 2018). For this reason, it is important to instill in children the knowledge and practice of healthy lifestyle habits from an early age so that they may grow up physically, psychologically, and mentally healthy adults.

Since students represent a community that can make a significant difference in the world, focusing on and enhancing their capacity for healthy living is crucial. The purpose of this student is to learn how health education programs at schools shape students' attitudes and habits toward healthy lifestyles and the school of good moral character.

THEORETICAL STUDIES

Health Education Program in the School Environment

A school is where people of different backgrounds and ages come together to learn (Warman & Effendi, 2019). It's important to pay attention to students' health issues because the school community is relatively isolated from the larger community. Students should be mentally and emotionally stable before taking any course load (Fridayanti & Prameswari, 2016). When students are ill or otherwise not feeling well, they are less likely to engage in their studies fully and benefit from the information presented to them (Lamen & Asiyah, 2021).

Following Paragraph IV of the Preamble to the 1945 Constitution of the Republic of Indonesia, the purpose of health education in schools is to realize the goals of national education, namely to educate the nation's life and develop a complete Indonesian human being. Therefore, school health education programs must be shaped to fit within the educational framework. School Health Efforts (UKS) is a health education program that aims to increase students' knowledge, skills, and motivation to make healthy lifestyle choices; enhance access to quality healthcare; and promote a culture of health in the school community (Warman & Effendi, 2019).

School health business guidance and development should be integrated, planned, directed, and responsible for helping students learn, grow, and apply healthy living principles in their daily lives (Farooq, Akhtar, Hijazi, & Khan, 2010; Simbolon & Simorangkir, 2018; Somantri et al., 2022). Simbolon and Simorangkir (2018) notes that the School Health Business (UKS) offers three main programs related to the health of school-aged children: health education, health services, and the promotion of a healthy school environment.

1. Health Education

They prepare students for their roles in society and the world by providing them with the direction, instruction,



and/or training they need to flourish physically, socially, and environmentally. By teaching students how to make positive choices for their health and the health of their communities, health educators hope to inspire a lifetime of positive behavior change. Individual and group lessons are used to teach people about health. Health education strategies include but are not limited to group work, homework, discussions, lectures, and individual study.

2. Health Services

Under the direction of the School Health Business Supervisor teacher. (UKS) and the technical guidance and supervision of the local Puskesmas health services in schools emphasize improving (promotive), preventing (preventive), treating (curative), and recovering (rehabilitative) in a harmonious and integrated manner for students in particular and school residents in general. Every effort is made to ensure that students and the entire school community benefit from this health service.

3. Development of a Healthy School Environment

The term "healthy school environment" refers to an environment that encourages positive school development, behavior, and resistance to outside influences. Improvements to the school's physical facilities directly impact students' ability to learn in class. A wholesome neighborhood, for example, will positively affect the school's cleanliness and safety. Students' motivation, engagement, and commitment to their education are all impacted by their school environment. Their school environment profoundly impacts children's physical and spiritual development.

Clean and Healthy Behavior in Schools

A school's health promotion program encourages students, faculty, and the surrounding community to learn about and adopt healthy lifestyle habits, as well as take an active role in maintaining a safe and welcoming learning environment (Julianti, Nasirun, & Wembrayarli, 2018). Definition of Clean and Healthy Living Behavior in Schools: Students, Teachers, and the School Community Engage in a Set of Behaviors Based on Awareness as Learning Outcomes to Prevent Disease, Improve Health, and Play an Active Role in Creating a Healthy Environment.

School-aged children (ages 6 to 10 years) are a prime target for several infectious diseases, making it imperative that students adopt healthful lifestyles and promote them among their peers (Vionalita & Kusumaningtiar, 2017). Promoting healthy lifestyles empowers individuals and communities to make informed decisions about their health and well-being and to create the healthiest possible environments for themselves and their loved ones.

The National Policy for Health Promotion establishes three basic strategies for health promotion and Clean and Healthy Behavior, namely:

1. Empowerment Movement

It is a process of continuously providing information so that the target changes from knowledge, attitude, and practice. The main targets of empowerment are individuals, families, and community groups.

2. Building the Atmosphere (Social Support)

Efforts to create a social environment that encourages individual members of society to want to carry out the introduced behavior.

3. Advocacy

Planned efforts to gain support from related parties (stakeholders). These related parties can be formal community leaders who play a role as government policymakers and funders. In addition, informal community leaders such as religious leaders, business leaders, and so on can act as unwritten policymakers in their field or as non-government funders.

Realizing clean and healthy schools protect students, staff, and the broader school community from various disturbances and disease threats, which is why such efforts significantly benefit student health (Suryani et al., 2020).

RESEARCH METHODS

This school employs a quantitative method to examine whether or not health education programs at schools lead to more students developing good hygiene and eating habits, two factors that contribute to the student of sound character (Sugiyono, 2013). The variables in the study can be broken down into two categories: independent and dependent. Independent variables include school-based health education programs like School Health Enterprises (UKS). In the meantime, the dependent variable is the formation of habits that promote clean and healthy lifestyles.



Serang City, high school students, served as the study's focus, and 300 agreed to participate in the survey. Questionnaires were distributed to investigate issues associated with the routine practice of clean and healthy lifestyle habits at school, and preliminary observations were made. Using the SPSS 25 software, we automatically analyze the data using a bivariate model based on multiple linear regression strategies.

RESULTS AND DISCUSSION

Instrument Validity and Reliability Test

Validity shows that measuring instruments can measure what is to be measured (Ghozali, 2018). The validity test in this study was carried out using the Pearson correlation approach, which was obtained as follows:

Table 1: Validity test results

Variable	Item	r_{count}	r_{table}	Ket.
School Health Enterprises (UKS)	X.1	0,555	0,222	Valid
	X.2	0.431	0.222	Valid
	X.3	0.238	0.222	Valid
	X.4	0.542	0.222	Valid
	X.5	0.752	0.222	Valid
	X.6	0.556	0.222	Valid
	X.7	0.431	0.222	Valid
	X.8	0.663	0.222	Valid
	X.9	0.555	0.222	Valid
	X.10	0.700	0.222	Valid
	Y.1	0,651	0,222	Valid
	Y.2	0.556	0.222	Valid
	Y.3	0.340	0.222	Valid
	Y.4	0.558	0.222	Valid
Class and Healthy Living Dahavior (DUDS)	Y.5	0.778	0.222	Valid
Clean and Healthy Living Behavior (PHBS)	Y.6	0.707	0.222	Valid
	Y.7	0.641	0.222	Valid
	Y.8	0.545	0.222	Valid
	Y.9	0.613	0.222	Valid
	Y.10	0.589	0.222	Valid

Table 1 shows that at the 5% significance level, the correlation coefficient values (r count) for all instruments on both X and Y are more significant than the critical value (r table). X.3 has a correlation coefficient of 0.238, lower than the r table's 0.222.

The extent to which a measuring device can be relied upon is indicated by its reliability. Cronbach's alpha (α) was used as the reliability measure.

Table 2: Reliability test results

Variable	Alpha Cronbach's	Information
School Health Efforts (X)	0.917	reliable
Clean and Healthy Living Behavior (Y)	0.935	reliable

As can be seen in Table 2, all of the study's variables have been declared to be highly reliable. The Cronbach alpha for the School Health Effort variable is 0.917, the lowest of the variables.

Normality Test

The normality test of this study was carried out through the One-Sample Kolmogorov-Smirnov test. The data is declared normally distributed if the significance level or asymp sig (2-tailed) is obtained, which is more significant



than 0.05 (5%) (Ghozali, 2018). Based on the results of data processing, the One-Sample Kolmogorov-Smirnov test results were obtained as follows:

Table 3: Kolmogorov Smirnov one sample test

		-	
		School Health Efforts (X)	Clean and Healthy Behavior (Y)
N		300	300
Normal Parameters a,b	Mean	78.28	79.23
	Std. Deviation	8.566	9.122
Most Extreme Differences	Absolute	.138	.141
	Positive	.138	.141
	Negative	065	067
Kolmogorov-Smirnov Z		1.223	1.246
Asymp. Sig. (2-tailed)		.200	.105

a. Test distribution is Normal.

The normality test results showed that the One-Sample Kolmogorov-Smirnov significance value for the two variables was more significant than 0.05. This figure means that the two research variables, namely School Health Efforts (X) and Clean and Healthy Behavior (Y), are stated to have normal data distribution. The variable with the lowest asymp sig (2-tailed) value is the clean and healthy lifestyle variable of 0.105.

Correlation Coefficient Test

Test the correlation coefficient in this study using the Pearson Correlation Product Moment formula as follows:

Table 4: Correlation coefficient test

		School Health Efforts (X)
Clean and Healthy Behavior (Y)	Pearson Correlation	.919**
	Sig. (2-tailed)	.000
	N	78

^{**.} Correlation is significant at the 0.01 level (2-tailed).

From this output, the correlation coefficient (r) $X \rightarrow Y$ is obtained, namely 0.919 in the interval from 0.8 to 1, indicating a strong relationship. Thus, the School Health Effort has a very strong relationship with student character formation in clean and healthy living behavior.

Hypothesis Test Results

Hypothesis testing in this study was carried out using the t-statistical test. At a significance level of 1%, the *t*-table value is 2.642. Meanwhile, at a significance level of 5%, the value of the *t*-table is 2.003 (df = 300-2, two-party test).

Table 5: Hypothesis test results

Hypothesis	Correlation Coefficient (r)	t Count	Sig.	t Table		Ket.
				1%	5%	-
X -> Y	0.919	4.142	0.035	2.642	2.003	Accepted

Table 5's data reveals a correlation coefficient of 0.919, evidencing the high degree of association between X and Y. The t statistic for this test came out to be 4.142, with a significance level of 0.035. The t-table was then used to analyze the data, and the results showed that the t count (4.142) was more significant than the t-table (2.003) at the 5% level of significance (0.05). Therefore, the hypothesis is true through testing. This study's findings support the idea that health education in the form of School Health Enterprises (UKS) is significantly associated with the



b. Calculated from data.

student of positive character traits among students. According to these findings, students are more likely to engage in healthy character habits and clean behaviors when they perceive a positive school environment. The findings of this study are consistent with those of (Ataqwa, 2020), which showed that schools' infrastructure and school backing are essential in promoting healthy lifestyles and hygiene.

DISCUSSION

According to the findings, senior secondary schools that have made an effort to improve school health have made available a variety of health services, such as:

- 1. To serve, treat, and aid students who experience mild illness, the school, is trying to provide medicines (P3K), soap, wind oil, places to wash hands, and trash cans in the UKS (School Health Business) room. The school is making a school like this to help its students learn how to live healthier lifestyles. Because every year, for three months, schools administer immunizations, measure students' height and weight, treat them for worms and give them blood-school supplements. The counseling process takes place daily during morning assembly, where an appeal is made to students to keep the school and themselves clean and healthy so that the UKS can fulfill its school of promoting the development of lifestyle habits that are beneficial to student's physical and mental well-being.
- 2. Schools always have clean water available for students to use for whatever they need, including ablution water containers, increasing students' likelihood of engaging in healthful behaviors. Clean and healthy behaviors are needed and recommended to enhance the standard of living in educational institutions, and this begins with the simple act of washing one's hands with clean water. Intramural and extracurricular activities, as well as regular physical education classes, can help schools make a positive impact on students' health.

Students are always expected to make an effort to live a healthy lifestyle that will result in a healthy body and mind. Collaboration between teachers and school professionals is essential in the Puskesmas environment. In addition to its importance in everyday school, teaching students how to maintain a clean and healthy lifestyle is a top priority for educators everywhere. This is in line with the theory that proposes the School Health Effort was established to boost teaching quality, academic students, and the prevalence of healthy lifestyle choices among students (Astuti et al., 2020; Kirana et al., 2022). Additionally, this section works to enhance the health of students and other school members (teachers, staff, etc.) and foster a healthy environment to promote optimal and balanced development toward the end of creating a whole human being. Thus, the school health business (UKS) is one of the school's forms and efforts to create a healthy living culture and behavior for school members, with the ultimate goal of bettering the health status of students and other school members. An organized school health strategy (UKS) is implemented to foster a positive environment conducive to learning and development among the school body.

CONCLUSION

According to the research findings, the standard of the health facilities offered within the school environment directly affects how well the students adapt to leading a clean and healthy lifestyle. The accessibility of health infrastructure facilities within educational institutions is a significant factor that significantly supports the implementation of the habituation of clean and healthy ways of living. This suggests that students perceive the condition of the school environment to be very supportive in fostering the development of clean and healthy lifestyle habits to facilitate their educational experience. Suppose schools are outfitted with full-scale hygiene and health infrastructures and make these facilities available to students. In that case, it will encourage all parties to get used to healthy living behaviors, such as putting trash in the appropriate receptacle and flushing the toilet after use.

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