Efforts to Increase People's Knowledge Through Counseling in Realizing Healthy Homes

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Abstract
Healthy homes are characterized by a healthy environment and accompanied by supporting facilities such as the availability of good air sources, besides that the behavior of residents in creating healthy homes is also one of the most important factors. Tanobato Village and Pasar Lama are the locations for the 2022 PKM held by pharmacy, Garut University. One of the flagship programs carried out by the PKM team is to provide education through socialization on how to create a healthy home in order to create a society that is physically and mentally healthy. The activity was preceded by a pre-test, material debriefing both directly and virtual counseling, and post-test to find out the extent to which residents' knowledge of the material provided was increased. The results of the counseling and survey showed that as many as 84 (73.3%) houses belonged to the category of decent houses in terms of physical conditions, a total of 74 (64.9%) houses based on basic sanitation including healthy house criteria, and 84 (73.3%) residents have the behavior to create a healthy home. Through this activity, awareness of the community's awareness to create a healthy home is getting higher.

Keywords: Community service; Counseling; Healthy home.

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Introduction
The environment becomes a benchmark in assessing the condition of public health, in addition to other variables such as health services, genetics, and behavior. Thus the four variables are used as parameters in determining whether or not the level of public health in describing environmental conditions is good or bad. Several indicators related to public health, one of which is a healthy house (Dinas Kesehatan Prov Sumatera Utara, 2017). According to the National Center, a healthy home is housing that is designed, constructed, maintained and rehabilitated in a manner that is conducive to the good health of the occupants of the home. Healthy housing is important for everyone, whether it's self-owned or rented. Creating healthier homes promotes healthy growth and development of children and has the potential to save on health care costs. Everyone needs a healthy home and some of the most serious health problems for some citizens start at home.

According to WHO (World Health Organization), housing can be defined as a physical building that is used as a shelter, and is supported by the environment, facilities, services and equipment needed for physical and spiritual health. The optimal level of health can be pursued, one of which is through the realization of healthy and livable homes. According to BPS published through the Housing and Environmental Health Indicators 2020, the definition of a livable house meets 4 (four) categories, namely: 1. Having good drinking water facilities, 2. The building area of the house (sufficient living space) is at least 7.2 m² per capita, 3. Building resilience (durable housing) regardless of type 4. There is access to good sanitation.

According to research data from the Central Statistics Agency in 2020 in the province of North Sumatra, the number of RT (households) categorized as houses that meet the livable requirements is 67.44% (Kementrian Kesehatan Republik Indonesia, 2020) meaning that 32.56% of the people of North Sumatra still occupy houses that are not categorized as healthy houses and a few percent of them are located in the village area of Tanobato and Pasar Lama. Tanobato Village and Pasar Lama Village are one of the villages in North Sumatera, the number of RT (households) categorized as houses that meet the livable requirements is 67.44% (Kementrian Kesehatan Republik Indonesia, 2020) meaning that 32.56% of the people of North Sumatra still occupy houses that are not categorized as healthy houses and a few percent of them are located in the village area of Tanobato and Pasar Lama. Tanobato Village and Pasar Lama Village are one of the villages in North...
Sumatra. Most of the residents in the village work as household workers, farmers, and civil servants. Until now the conditions in the two villages themselves from the results of the field survey, there are still residents who live in places that are categorized as unhealthy and uninhabitable houses.

The formulation of the problem in this service is whether the understanding of the villagers of Tanobato and Pasar Lama towards the definition, characteristics, and behavior in realizing a healthy home can be realized in order to support the "Healthy Indonesia" program. In particular, it is hoped that in the future there will be no more residents who still occupy houses that are not suitable for habitation. Based on the problems above, the community service team from the Garut University Pharmacy wants to contribute significantly to providing counseling to residents regarding the problem of how the characteristics of a healthy home, coupled with the current Covid-19 pandemic conditions, maintain environmental health through awareness of creating healthy homes and Vaccination is very necessary (Lubis, et al., 2022) to create healthy homes in Tanobato and Pasar Lama villages to produce healthy people physically and mentally.

![Figure 1. Location Socialization](image)

**Method**

Community service is a non-experimental activity, namely direct research to panelists, namely the people of Tanobato and Pasar Lama villages who were taken as subjects randomly using a questionnaire instrument. This outreach activity begins with literature and field studies, inclusion and exclusion criteria, and making questionnaires. This method will provide an overview or object under study based on the data obtained from the questionnaire, then analyzed so that appropriate conclusions can be drawn. The activity was carried out in two stages, namely the preparation stage and the implementation stage which will be explained as below.

**Service Team Preparation Stage**

1. The Service Team from the Faculty of Pharmacy Uniga held a team coordination meeting for preparation.
2. The community service team coordinates with residents, for direct socialization and also discusses educational preparation related to the implementation date and determining the number of participants, which is planned for 120 people.

**Implementation of Activities**

The service method used is counseling with the aim of building education and increasing awareness and knowledge of the people of Tanobato and Pasar Lama, which is carried out in several stages.

1. As the beginning of the activity, an online pre-test and a manual questionnaire regarding knowledge about healthy homes were conducted.
2. Counseling is carried out by providing material in the form of brochures with the title 'Healthy Home Counseling' followed by direct discussion.
3. From the results of the socialization activities, an evaluation will be carried out on whether there is an increase in participants' knowledge through pre and post tests on the extension materials that have been given.
The socialization of healthy homes was held in June 2022, in the villages of Tanobato and Pasar Lama. This activity is a form of the PKM program organized by Uniga Pharmacy. Socialization is divided into several stages, one of which is direct door to door to residents’ homes or home visits. Direct counseling by Novriyanti Lubis in this PKM activity was held at the Madrasah Muhammadiyah recitation of the Padangsidempuan branch and virtual counseling by Riska Prasetiawati.

Base on the planned 120 people will be participant in this program, in fact only 114 people from Tanobato and Pasar Lama villages participated in the healthy home survey. The general Slovin $n = \frac{N}{1 + \frac{Ne^2}{N}}$ (Setiyanti, 2014) formula can be used if you want to know the minimum number of samples needed for pre & post tests. The results obtained: $n = \frac{114}{1 + \frac{114(0.05)^2}{114}} = 88.71$. Based on the data, the minimum number of panelists needed is 89 out of 114 total socialization participants. For the field survey, residents were given brochures with the theme “Healthy Home Counseling” as well as pre and post tests. It is hoped that through brochures, villagers can read information repeatedly, in addition, counseling equipped with brochures from several counseling sessions that have been held will be more effective in increasing residents’ knowledge (Lubis, Rosalia, Widia, et al., 2022). Opinions from education experts, that counseling through media such as brochures, videos will make it easier for residents to understand the content of the material from the socialization, this is because the appearance of the brochure is very attractive, not only that, residents can also read the information many times (Nurlila et al., 2016).
The results obtained in this PKM show that for 114 panelists who participated in the counseling conducted by the Uniga Pharmacy team, the most occupations were housewives by 52.6%. IRT is a figure who will be responsible for creating a healthy home.

**In your opinion, which are the general characteristics of a healthy home?**

114 responses

![Pie chart with percentages](image)

Before Socialization

| Percentage | Description |
|------------|-------------|
| 82.5%      | There is ventilation, the floor of the house is waterproof, good sanitation |
| 17.5%      | The walls of the house must not be made of wood, the floor of the house must be ceramic |

After Socialization

| Percentage | Description |
|------------|-------------|
| 81.6%      | There is ventilation, the floor of the house is waterproof, good sanitation |
| 18.4%      | The walls of the house must not be made of wood, the floor of the house must be ceramic |

**Figure 5. Percentage of Citizen Knowledge Base on Characteristic Healthy House**

After the socialization activity ended, the results of the pre-test and post-test were obtained, that before and after the socialization and on average more than 80% of the residents of Tanobato and Pasar Lama villages had known the characteristics of a healthy house.

![Images of village before and after socialization](image)

**One of the recommended facilities to realize a healthy home?**

114 responses

![Pie chart with percentages](image)

Before Socialization

| Percentage | Description |
|------------|-------------|
| 78.9%      | Clean water available, garbage disposal |
| 21.1%      | Water must come from PDAM, garbage must be burned |

After Socialization

| Percentage | Description |
|------------|-------------|
| 63.2%      | Clean water available, garbage disposal |
| 36.8%      | Water must come from PDAM, garbage must be burned |

**Figure 6. Percentage of Citizen Knowledge Base on Facilities Healthy House**
The category regarding water facilities that can support the realization of healthy homes before socialization, residents chose PDAM 21.1% after socialization to 36.8% this shows the awareness of residents to switch to PDAM water sources, and there is an increase in knowledge.

Figure 7. Percentage of Citizen Knowledge Base on Definition Healthy House

The question points about how people know about the definition of a healthy house, before and after socialization. 45.6% of residents prefer the definition of a healthy house to be a house that is free from germs. In general, there has been an increase in the number of people who have understood, although not significantly. This result is a pretty good achievement, because it can be assumed that this socialization was successful because the residents understood the contents of the brochure and the information that was directly conveyed.

Figure 8. Percentage of Citizen Base on Several Factors

The physical condition of the house to be categorized as a healthy house and those that meet the requirements are 73.7%. Decree of the Minister of Health of the Republic of Indonesia Number 829/MENKES/SVUI/1999 for the ceiling must be in a clean condition, the walls must be permanent, if the boards must be waterproof, the floor must be plastered, made of tiles or ceramics and boards, windows must be present and functioned properly, ventilation must exist and the area of permanent ventilation is >10% of the floor area (Rosalina et al., 2014).

The basic sanitation for houses categorized as healthy and that meets the requirements is 64.9%. According to WHO, in developed countries, water needs are 60-120 liters per day per individual, for developing countries like Indonesia, 30-60 liters/day for each person. WHO also recommends that the disposal of fecal water should not contaminate the soil surface in the latrine area and also not pollute the surrounding surface water and the distance from the water source is ± 10 meters (Herdiani et al., 2021).

One of the most important or main behaviors to create a healthy home is seen from how residents dispose of their garbage, especially during the current Covid 19 pandemic, the waste produced is disposable masks where the disposal process requires certain treatment, such as having to be torn up first, then thrown into the bin, garbage and other means (Lubis, Rosalia, Sution, et al., 2022). Residents are advised not to arbitrarily dispose of the waste to avoid misuse and pollute the environment. Another behavior is being given...
education on how to manage waste into manure, garbage around the house can be handled through garbage disposal at predetermined locations or by piling garbage in garbage pits (Wibisono & Huda, 2014).

The final result or expected output from this PKM activity is an increase in the knowledge of residents about the characteristics and ways to create a healthy home so that the occupants are also physically and mentally healthy. A brief discussion session was also held on health education so that residents stay healthy. The next suggestion that can be conveyed to the speakers who will come if one day they want to hold counseling in the village of Tanobato can choose a theme regarding “Healthy Eating Patterns” residents should be given information that they should avoid eating patterns with bad habits, including consuming too much food high in salt, sugar, salt, and fatty foods, and high in purines (Prasetiawati et al., 2022). So that in the future it can help the government program “Healthy Indonesia”.

The following are some documentation of PKM activities that have been carried out by Uniga Pharmacy lecturers. In general, the overall implementation of the counseling was successful and smooth and the villagers of Tanobato and Pasar Lama expressed their gratitude for the socialization that had been initiated by the Uniga Pharmacy lecturer team.

Conclusion

The PKM program carried out by the Uniga Pharmacy lecturer team has been successfully implemented by involving as many as 114 residents in the villages of Tanobato and Pasar Lama. PKM runs smoothly starting from socialization, door to door surveys, pre and post tests, to discussions. The results of counseling and surveys showed that 73.7% of residents’ houses were categorized as decent houses in terms of the physical condition of the house, 64.9% based on basic sanitation of healthy homes, and 73.7% of residents were grouped as houses that had the requirements and behaviors to make it happen. as a healthy home. The activity was also filled with the implementation of pre and post tests to see the extent to which residents' knowledge about the definition and characteristics of healthy homes was increased, the results obtained were an increase in residents' knowledge, although not too significant.

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