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Defecation Behavior Households In Sumbertangkep West Hamlet Sumbersuko Sub District Malang District

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ABSTRACT

Defecation is all objects or substances that are not used again by the body and which must be removed by the body and which are released from the body in the form of feces. Latrine is a human waste disposal site equipped with sewage and water storage units for cleaning. The purpose of the study was to determine defecation behavior in housewives in Sumbertangkep West Hamlet, Sumbersuko Village. The design of the study was a qualitative approach and the informants were housewives in Sumbertangkep West Hamlet as many as 5 informants. The sample of this study is housewives who often defecate in the river. The sampling technique used was purposive sampling. The research instrument is the researcher himself. Data collection methods are in-depth interviews and observations and the tools used are mobile phones and documentation. In this study, the existing data will be tested for validity using the Triangulation technique (combined) using the Triangulation Source namely Health Officer. The results showed that defecation behavior in housewives in Sumbertangkep West Hamlet, Sumbersuko Village, still defecated on the river, this was because it had become a habit of housewives in Sumbertangkep West Hamlet. In this study the problem encountered was to change the behavior of housewives in Sumbertangkep West Hamlet, Sumbersuko Village to stop the habit of defecating in the river.

Keywords: Housewives, Latrines, Defecation Behavior

INTRODUCTION

In the national health system it is stated that the goal of health development is to increase awareness, willingness, and ability to live a healthy life for everyone in order to realize an optimal degree of public health (MOH, 2015). According to the Indonesian Ministry of Health (2014), health status is influenced by many factors. These factors originate from the health sector as well as from non-health sectors. The health sector such as health services and the availability of health facilities and infrastructure while the non-health sectors such as economic factors, education, social environment, heredity and behavior. In addition, according to H. L Blum in Nona (2013) the degree of health is a concept that is influenced by four factors, namely: behavior, environment, genetics, and health services. Of the four factors, behavioral factors are the factors that have the greatest influence and role on the level of public health.

The future condition of Indonesian society or the vision to be achieved through health development is formulated as: "Healthy Indonesia 2025". In Healthy Indonesia 2025, the expected strategic health development environment is an environment conducive to the realization of a state of physical, spiritual and social health, namely an environment free from social and cultural vulnerability and pollution, the availability of drinking water and adequate environmental sanitation facilities, housing and settlements that are adequate healthy, health-oriented regional planning, and the realization of community life that has social solidarity by maintaining the nation's cultural values.

Riskesdas (Basic Health Research) 2013 collected 10 single indicators of Clean and Healthy Behavior (PHBS) consisting of eight individual indicators and two household indicators. Individual indicators include childbirth by health workers, weighing infants and toddlers, giving exclusive breastfeeding, washing hands with clean water and soap, using healthy latrines, doing physical activities every day, consuming vegetables and fruits every day, not smoking at home. Household indicators include the use of clean water and combating mosquito larvae.

One example of healthy behavior in PHBS, is using family toilets to remove human excrement or feces. By using family toilets in the disposal of human excrement or feces, it will protect families and communities from the threat of environmental-based infectious diseases such as diarrhea, skin diseases and worms, where these environment-based diseases are one of the causes of high morbidity and mortality in Indonesia. This is closely related to inadequate environmental conditions (MOH, 2013).

Stop open defecation is a community empowerment program in the field of sanitation where the activities are directed at changing behavior from open defecation (BABS) to a certain place that meets health requirements such as latrines / latrines. It aims to control environmental-based diseases, for example, 3 diarrheal diseases which are the most common illnesses in outpatient visits in Puskesmas Care and Regional Hospitals (Sholikhah, 2014).

In 2014 the Republic of Indonesia Minister of Health Regulation No. 03 concerning Community-Based Total Sanitation (STBM) was launched, as a form of government commitment to strengthen efforts to clean and healthy living, prevent the spread of environmental-based diseases, and improve access to drinking water and basic sanitation (Qudsiyah et al., 2015).

The principle adopted in the STBM is without subsidies, not patronizing, not coercing, and not promoting latrines. An indicator of the success of the STBM approach is the achievement of the Open Defecation Free (ODF) condition which is marked by the presence of the whole community having defecated in the toilet (Ambarwati, 2015). The important steps in an STBM approach are to prioritize health risk risk reduction initiatives including awareness of the causes, followed by strategic planning by the community aimed at identifying and combating risks associated with health problems that can occur at any time. This makes the community the main actor in the success of achieving a program (Baye et al., 2012).

Based on WHO data in 2015 it was estimated that 892 million people or 12.1% of the world's population still defecate in open areas, from the data above amounted to 31.4% of the population who defecate openly (BABS) and Indonesia as the second largest country public defecation was found in open areas (WHO, 2015).

The 2013 Riskesdas results on the proportion of households based on the use of defecation facilities. The national average bowel behavior in latrines is (82.6%). The five provinces with the highest percentage of households behaving correctly in defecation include DKI Jakarta (98.9%), DI Yogyakarta (94.2%), Riau Islands (93.7%), East Kalimantan (93.7%), and Bali (91.1%). While the five lowest provinces were West Sumatra (29.0%), Papua (29.5%), South Kalimantan (32.3%), North Sumatra (32.9%) and Aceh (33.6%). Central Java ranks 15th with the population behaving in the toilet, which is 82.7% of several provinces in Indonesia (Ministry of Health, 2014).

According to the type of defecation used, most households in Indonesia use goose neck type 84.4%, plengsengan 4.8%, cemplung / cubluk / hole without floor by 7.2%, and cemplung / cubluk / hole with a floor of 3.7%. Based on the place of disposal of feces, based on the results of Riskesdas 2013, 66% of households in Indonesia use septic tanks as a place

of disposal of feces. Households that use the Final Sewerage Site (SPAL) by 4%, ponds / paddies by 4.4%, rivers / lakes / sea by 13.9%, potholes by 8.6%, beaches / terrain / gardens by 2.7% (MOH RI, 2013).

In Malang Regency, according to Malang Regency profile data, the coverage of family latrines in 2016, amounting to 57%, stated that septic tanks are where the discharge of feces ends and 33.7% stated cubluk / pits are where the disposal of final feces disposal and distribution of final feces discharges are in rivers / lake / beach, which is 4.5%. The target of owning latrines of the family has not been achieved yet, because the community has not chosen to use latrines to clean water. The choice of housewife subject is because it is considered to be more aware of the behavior and habits of family members in using latrines as a means of defecating.

METHODS

The design of the study was a qualitative approach and the informants were housewives in Sumbertangkep West Hamlet as many as 5 informants. The sample of this study is housewives who often defecate in the river. The sampling technique used was purposive sampling. The research instrument is the researcher himself. Data collection methods are in-depth interviews and observations and the tools used are mobile phones and documentation. In this study, the existing data will be tested for validity using the Triangulation technique (combined) using the Triangulation Source namely Health Officer.

RESULT Characteristics of Subjects

characteristics of Subjects	
Informant	Information
number	
1.	A mother who does not have a toilet and often defecates in the river
	who lives in Sumbertangkep Barat Hamlet, Sumbersuko Village.
2.	A mother who does not have a toilet and often defecates in the river
	who lives in Sumbertangkep Barat Hamlet, Sumbersuko Village.
3.	A mother who has a toilet and defecates frequently in a river that lives
	in Sumbertangkep Barat Hamlet, Sumbersuko Village.
4.	A mother who does not have a toilet and often defecates in the river
	who lives in Sumbertangkep Barat Hamlet, Sumbersuko Village.
5.	A mother who does not have a toilet and often defecates in the river
	who lives in Sumbertangkep Barat Hamlet, Sumbersuko Village.

DISCUSSION

A. Individual Perception of Defecation Behavior in Housewives

Based on the results of interviews with all informants, the writer can describe that defecation behavior in housewives in Sumbertangkep Barat Hamlet, Sumbersuko Village, Dampit District, Malang Regency has become a habit. This can be seen from the results of the interviews of the five informants. Of the five informants, one informant stated that they often defecated in the river even though they already had their own toilet at home. As for those who say that they often defecate in the river because they do not have their own toilet and there is no place in their house to build a toilet. The informants said that they often defecated in the river because it had always been a habit before having a family toilet. As for those who say defecating in the river because they just want to walk or exercise because they are sick.

The informants also know the consequences if frequent defecation in the river is very detrimental because it can pollute the environment and is not good for health but they still

defecate in the river because it has become a habit before before having their own latrines at home so after having their own latrines at their house still defecates in the river. Of the five informants, one of them had a toilet at home but still defecated frequently in the river because he was accustomed to defecating in the river.

Based on the statement of the informant above, it is not in line with Notoatmodjo's theory (2007) that defecation behavior in housewives in Sumbertangkep Barat Hamlet, Sumbersuko Village, Dampit Subdistrict, Malang Regency is strongly influenced by predisposing factors (facilitators), enabling factors (supporters), and factors reinforcement (amplifier). From the facts obtained about the behavior of defecating in the river from several informants who said that defecating in the river because they are accustomed to or become a habit since they do not have a family toilet so even though they already have a family toilet the community still often defecates in the river.

Defecation behavior of housewives in Sumbertangkep Barat Hamlet, Sumbersuko Village, Dampit Subdistrict, Malang Regency is caused by predisposing factors, which are factors that facilitate one's behavior. Factors that facilitate the occurrence of one's behavior results in the behavior of housewives who defecate in the river. One informant said that defecating in the toilet drains a lot of water and is not accustomed to defecating in the family toilet so even though he already has a family toilet at home he still defecates in the river.

According to Simbolon (2009) said that community attitudes will also determine the success of toilet use participation. The attitude of the community as said by some informants that they already have a family toilet but still often defecate in the river because they are used to defecating in the river even though they already have a family toilet. The same thing was reported by Widaryoto (2003) that community attitudes were proven to be related to participation in toilet use.

The reinforcing factor is also one of the factors that causes bowel movements in the river, namely the availability of facilities. There are no facilities available, in this case family toilets because there is no land to build latrines in his house as an informant said that he defecated in the river because there was no land to build latrines in his house.

From the description above, the writer can describe that defecation behavior in housewives in Sumbertangkep Barat Hamlet, Sumbersuko Village, Dampit Subdistrict, Malang Regency. In predisposing factors, the influencing factor is the behavior of housewives in defecating in the river. The community is less aware of the importance of family toilets to protect and avoid diseases caused by defecation in open areas such as rivers.

People defecate in the river because it has become a habit and accustomed to defecating in the river. They are accustomed to defecating in the river because first before having a toilet at home, the place to defecate is in the river. So that the habit of defecating in the river is still carried away until now even though now it has its own latrine in the community's house, it still defecates in the river because it has become a habit.

B. Individual Perception of Supporting Situations Regarding Defecation in Housewives

Based on the results of interviews with all informants, the writer can describe that the situation that supports bowel behavior in housewives in Sumbertangkep Barat Hamlet, Sumbersuko Village, Dampit District, Malang Regency does not have a family toilet at home. This can be seen from the results of the interviews of the five informants. Of the five informants, one informant stated that he already had a family toilet at home and another four stated that there was no family toilet at his house.

Factors that influence people's behavior about the use of latrines according to Nevdi Chandra (2012), are influenced by age and education. From the results of the study indicate that with increasing age, maturity in thinking is getting better so that it will be motivated in using or using latrines. Conversely, the younger, the more do not understand the importance of defecation in the toilet as an effort to prevent the occurrence of diarrhea caused by defecation big in any place. And education about using good and healthy latrines is a process of changing personality, attitudes, and understanding of healthy latrines so as to create cultural patterns in using latrines properly and correctly without coercion from any party. Guided by the educational goals it is estimated that the more education that is achieved by the majority of the population, the more it helps to facilitate the importance of using the toilet.

From the results of research on individual perceptions about the situation that supports defecation behavior in housewives in Sumbertangkep Barat Hamlet, Sumbersuko Village, Dampit District, about the availability of latrines from five informants who had been given interviews, four of them stated that there were no family latrines in his house. While one informant stated that he already had a toilet in his house. And the results of interviews regarding latrine assistance from the relevant Government namely from the five informants four of them said that there had never been assistance from the Government concerned, while one of them had been assisted but had not yet been carried out.

Situations that support bowel behavior in housewives in Sumbertangkep Barat Hamlet, Sumbersuko Village, Dampit District, Malang Regency are caused by enabling factors, which are factors that enable or facilitate individuals to behave. The enabling factor in the unavailability of facilities also causes defectation in the river because there is no land to build latrines in his house so that he often defecates in the river.

C. Individual Perception of Access to Information Ever Received Regarding the Benefits of Latrines and Defecation Behavior in Housewives

Based on the results of interviews with all informants, the writer can describe that access to information that has been received about the benefits of latrines and bowel behavior in housewives in Sumbertangkep Barat Hamlet, Sumbersuko Village, Dampit District, Malang Regency has been provided counseling by local health officials. This can be seen from the results of interviews of the five informants, from the four informants stating that counseling has been given about the benefits of latrines by local health officials.

According to Nevdi Chandra (2012), the factor of information exposure also affects the use of latrines, as seen from interviews with respondents revealed that respondents acknowledged the lack of information about the use or benefits of latrines for health.

The function of the Puskesmas as a center for community health development in its working area, also fosters community participation in its working area in order to improve the ability to live healthy lives (Hatmoko, 2006 in Ernilawati, 2008). The main activities of the Puskesmas include environmental health and community health education, where the implementation of these main activities is directed at families as the smallest family unit. Therefore, in the case of the use of family latrines, the activities carried out by Puskesmas officers include providing regular counseling on the benefits and requirements of healthy latrines, as well as providing guidance to the people living in their working area to increase public awareness and willingness to own and using a family toilet. In addition, the role of the Puskesmas is to work closely with relevant agencies and provide feedback to the community to recognize the problem and determine priority issues that need to be addressed according to the ability of community self-help (Erlinawati, 2008). Meanwhile, according to research Fauzi (2002), it was found that respondents who had never received instructions from officers, had the risk of not wanting to use the toilet when compared to respondents who had received instructions from officers.

Counseling about defecation behavior in housewives who do not have a toilet is still seen to be less than optimal in Sumbertangkep Barat Hamlet, Sumbersuko Village, Dampit District, Malang Regency. From the results of the research that has been done is that almost all informants gave a statement that there was only one counseling from the local health center.

CONCLUSION

- 1. The behavior of defecating in the river by housewives in Sumbertangkep Barat Hamlet which the writer observed in general that housewives often defecate in the river because it has become a habit and is accustomed to defecating in the river. They are accustomed to defecating in the river because before they had toilets at home where they defecated in the river, so the habit of defecating in the river is still carried out until now even though they now have their own toilet at home, river because it has become a habit.
- 2. A supportive situation regarding defecation behavior in housewives in Sumbertangkep Barat Hamlet which the authors observed in general that of the five informants one of them had a family toilet at home and four other informants still did not have a family toilet at home. This is because the land is narrow in the house so it can not make a family toilet at home. For assistance in the construction of latrines in Sumbertangkep Barat Hamlet, Sumbersuko Village, of the five informants, one of them stated that there had been assistance from the Puskesmas but it had not been implemented until now and the other four informants stated that there had never been assistance from the local health department.
- 3. Access to information that was received about the benefits of latrines and bowel behavior in housewives in Sumbertangkep Barat Hamlet, Sumbersuko Village, the writer observed in general that from several informants stated that there had been a one-time counseling from the local Puskesmas, but the housewife in the Sumbertangkep Barat sub-village, they have not yet implemented the advice from the health workers not to defecate in the river and have yet to carry out to make a family toilet at home.

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