

FAMILY NURSING CARE AT THE STAGE OF DEVELOPMENT OF SCHOOL-AGE CHILDREN: WITH COUNSELING INTERVENTION ON HAND WASHING

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ABSTRACT

Families with school-age children are a stage of family development starting from the first child being 6 years old and ending at the age of 12 years. At this stage, the family reaches its maximum number of members. School-aged children often do not pay attention to hand washing habits, especially in the school environment, so diseases such as diarrhea can spread. School-aged children need to be given knowledge about clean and healthy living behavior, one of which is by providing hand washing education. This case study aimed to determine the description of family nursing care at the developmental stage of school-aged children in the Gondangrejo Community Health Center area. This type of research is descriptive using a case study approach method. Data collection was carried out through interviews, observation, and documentation studies. The counseling uses the lecture method and poster media which contains about hand washing and the 6 steps for good and correct hand washing, accompanied by practicing how to wash hands well and correctly directly. The results of the activities showed that after the counseling was held, the level of knowledge and level of behavior increased, and children were able to understand the importance of washing their hands and implementing clean and healthy living behavior of washing their hands properly and correctly. Recommendation: Handwashing outreach intervention is important to increase knowledge and behavior of clean and healthy living in school-aged children.

Keywords: *Handwash, soap, behavior, healthy*

1. INTRODUCTION

The family plays a major role in teaching children about various emotional expressions that can be expressed when they experience an event (Iqoh and Alief, 2021). The age development stage of school-age children (families with school children), consists of father, mother, and school-age children 6-12 years. In this phase, families generally reach the maximum number of family members, so the family is very busy. Apart from school activities, each child has his activities and interests. Likewise, parents have different activities for their children, so families work together to achieve developmental tasks (Harlinawati, 2013).

The developmental task at the school-aged child stage is to help the child's socialization with the family, school, and environment. They are meeting the increasing needs and costs of life, including the need to improve the health of family members. At this stage children need to separate from their parents, giving children the opportunity to socialize in activities both at school and outside school (Duvall, 1997 Wahyuni et al., 2021).

School-age children are a valuable asset for the nation's progress, having great potential to contribute to future development. The school period is considered a critical period in forming quality human resources, which will have an impact on their quality of life in adulthood. In this phase, children are very responsive to stimulation and guidance, so it is the right time to provide advice and instill clean and healthy living habits (Lina, 2017). School-aged children are the largest age group (26%) of the total age group in the world (PRB, 2018). School-age children are also the largest age group in Indonesia, namely 22 million people out of the total population of 275.7 million in Indonesia (BPS, 2022).

In daily activities, children spend most of their time at school, learning to increase their knowledge and interacting with peers and various situations within the school community. However, it is important to remember that schools can also be a source of risk for the spread of disease if they are not managed well (Sugiarto et al., 2019). It is known that the rate of spread of diseases that can be transmitted through hand contact is still quite high, including diseases such as diarrhea, worms, flu, and coughs (Sumaiyah et al., 2019). According to the World Health Organization (WHO), diarrhea is the cause of death in around 5% of total disease cases worldwide, causing around 2.2 million deaths. The largest population affected are mainly children under five, especially in developing countries. In the Southeast Asia region, the death rate due to diarrhea reaches 8.5%, while in Africa, diarrhea is responsible for 7.7% of total deaths.

Globally, around 1.1 billion people experience the inability to access clean water sources, and around 2.4 billion people do not have basic sanitation facilities. In Indonesia alone, there were almost 1.1 million cases of diarrhea reported with the highest figure of 182,338 occurring in school-aged children (Riskesdas Ministry of Health of the Republic of Indonesia, 2018).

Hands and fingers are a medium for carrying germs that can be transferred from one human to another. One way to stop the transfer of germs is to wash your hands using running water and soap (Tussolihin, 2022). In Indonesia, washing hands has not yet become a culture practiced by the wider community. In everyday life, many people wash their hands only with water before eating, while washing their hands with soap is done after eating (Indonesian Ministry of Health, 2014).

In the process of changing behavior, a person needs to be given information to increase knowledge, improve attitudes, and implement what is already known. So with increasing knowledge, good behavior will result (Tussolihin, 2022). When a person's knowledge about hand washing increases, their attitude towards implementing hand washing also tends to improve (Pauzan and Hudzaifah, 2017).

School-aged children often do not pay serious attention to hand-washing habits, especially in the school environment. Concerns continue to arise regarding the habit of washing hands with soap (CTPS) because there are still people who forget this practice (Tulak, Ramadhan, and Musrifah, 2020). Washing hands with soap (CTPS) is a sanitation action where hands and fingers are cleaned using water and soap. This action is carried out by humans to maintain cleanliness and break the chain of disease spread. Washing hands with soap is also recognized as a disease prevention measure (Merlina, 2021). Even though hand washing is one of the most effective and cheap ways to prevent various diseases, in reality, it is rarely practiced (Global Hand Washing Day, 2018).

Washing your hands regularly is crucial, especially before preparing food, after coming into contact with people who are sick, before and after caring for wounds, after cleaning children who use the toilet, after touching animals, cleaning up animal feed or animal waste, and after handling or touching rubbish (Centers for Disease Control and Prevention, 2012 in Ikasari & Anggana, 2020)

One step to instill the habit of washing hands is through education. Extension is an effort to change knowledge, attitudes, habits, and skills by providing assistance, influence, and motivation to the community. The goal is to improve their standard of living. Counseling functions as an educational process outside the school environment that is systematically organized (Avessina, Kustari, and Anisa, 2018).

The methods and media that can be used in outreach are lectures using posters. The use of poster media is more interesting than lectures alone in general, so the success rate of adding poster media is higher in changing attitudes and knowledge (Kusuma and Aprilia Nuryanti, 2023). The advantages of posters are their ability to attract the attention of readers with their charm, the language used is simple and the purpose is clearly understood,

the cost of making posters is affordable, the content of the poster can complement learning, the use of posters is not limited only to classrooms but can also be placed on notice boards and School Health Unit (UKS) (Wicaksana et al., 2020). Teaching how to wash hands properly aims to provide an understanding of the basic principles of living a healthy life, as well as forming healthy living habits. (Fitri, 2019). The purpose of this study was to determine the description of family nursing care at the school-age child development stage: with handwashing counseling interventions.

2. METHOD

The case study design used by the author is descriptive using a case study approach method. The subjects used in this case study are clients in the school-age child development stage, with the object of research being 1 child. The focus of this case study is a family with a first child at the developmental stage of school-age children with knowledge deficit problems regarding hand washing and health behaviors that tend to be at risk.

The place and time for taking the case study in the work area of the Gondangrejo Health Center, Karanganyar Regency, was carried out during 5 visits, namely from January 30 to February 3, 2024.

Data collection used interview, observation, and documentation study methods. The instruments used are informed consent sheets, 10 questions on the knowledge sheets, and 6 points on the observation sheets behavior that have been prepared by researchers and have been validated by the supervisor, and *Ethical Clearance* which has been approved by the Ethics Committee of the University of Kusuma Husada Surakarta under the ethics number 1991/UKH.L.02/EC/III/2024.

3. RESULTS

In this case, it was implemented during 5 visits and taught to wash hands properly and correctly.

1. Assessment

Based on the results of the study, it can be seen that during the initial assessment before taking action, subjective data was obtained: An. G said he didn't know about hand washing and the proper and correct steps for washing hands, as evidenced by An. G was only able to answer 7 questions correctly out of 10 questionnaire questions about hand washing knowledge. Objective data: An. G was unable to show how to wash his hands properly and correctly, as evidenced by An. G was only able to carry out 2 correct hand-washing steps out of the 6 hand-washing steps.

2. Nursing Diagnosis

The results of priority scoring of nursing problems showed a diagnosis of a knowledge deficit regarding on hand washing (D.0111) and health behavior that tends to be risky (D.0099). Based on the scoring results, there is a knowledge deficit about hand washing (D.0111) with a scoring result of 4.6, and health behavior tends to be risky (D.0099) with a scoring result of 3.6. Scoring result obtained using a diagnostic prioritization scale in family nursing.

3. Intervention

The general objective after carrying out nursing actions during 5 is to diagnose a knowledge deficit regarding hand washing. It is hoped that the level of knowledge will increase with the criteria for the results of hand washing behavior increasing, the ability to explain hand washing knowledge increasing, the ability to describe previous experience increasing, and behavior by knowledge increasing. When diagnosing health behavior that tends to be risky, it is hoped that health behavior will improve with the criteria that acceptance of changes in health status will increase, the ability to take action to prevent health problems will increase, the ability to improve health will increase, and the achievement of health control will increase.

Specific objectives refer to the 5 functions of family health care which are described as follows:

- a. Families can recognize handwashing health problems, with interventions to identify readiness and ability to receive information.
- b. The family can make decisions, with intervention allowing the family to ask questions about this problem.
- c. Families can care for sick family members by scheduling counseling interventions according to an agreement and providing counseling materials and media using lecture methods and poster media.
- d. Families can modify the environment with interventions teaching clean and healthy living behavior, and washing hands with soap (CTPS).
- e. Families can utilize existing health facilities with interventions to encourage the use of nearby health service facilities.

4. Implementation

Implementation was by what had been planned during 5 home visits with the following exposure results: On the first visit, explaining to the family about hand washing (understanding, the impact of not washing hands, and the 6 steps for good and correct hand washing), and measuring the level of knowledge and behavior, the results were:

Table 1. Results of the level of knowledge and observation of hand washing An. G before and after providing hand washing education using the lecture method and poster media.

	Action	Pre	Post	Number of assessments
Knowledge level	Question	7	9	10
Handwashing ability	Observation	2	6	6

5. Evaluation

The evaluation results after being given 3x counseling showed subjective data: Mrs. D and An. G said he already understood hand washing and the steps for washing hands properly and correctly, An. G also said he was willing to implement clean and healthy hand-washing behavior in everyday life. Objective Data: An. G and his family seem to understand hand washing and the steps for hand washing, An. G was able to answer 9 questions correctly from the 10-question questionnaire regarding hand washing knowledge and An. G was able to practice the 6 steps for washing hands sequentially and correctly based on the observation results. Assessment: The function of family care is fulfilled, such as recognizing family health problems, namely a lack of knowledge about, washing hands and health behavior that tends to be risky, making decisions regarding appropriate health actions for the family, caring for sick family members, modifying the environment by cleaning the house together using health facilities, namely use the clinic as a treatment. Planning: Collaborate with the family to implement clean and healthy living habits, and wash your hands with soap regularly before and after carrying out activities outside and inside the home.

4. DISCUSSION

Based on the results of the study on families with school-age children, the family is a nuclear family consisting of the husband, Mr. A, and his wife Mrs. D. The development stage of school-age families is families that have children aged 6-12 years. Based on the results of this case study, it shows that the development of Mr. A is a family at the stage of development of school-aged children.

According to Friedman, (2010) The family development stage of school-aged children begins when children enter school at the age of 6 years and ends when they reach the age of 12 years. In this period, the family reaches its maximum number of members, so the family is very busy. Apart from activities at school, each child has his activities and interests, in line with the activities of parents who are different from their children. Therefore, cooperation within the family is essential to achieve the necessary developmental tasks.

The results of the study with An. G found that An. G doesn't know about hand washing and how to wash hands properly. An. G and his family have not received information about hand washing and hand washing steps. Before giving hand washing education, a pre-test questionnaire An was given. G only got a score of 7 correct out of 10 knowledge questions and 2 correct scores from the results of the 6-step hand washing behavior observation sheet, and after receiving hand washing counseling using the lecture method and poster media he got 9 correct scores out of 10 knowledge questions and 6 correct scores from the results. hand washing behavior observation sheet.

From the results of the assessment, a diagnosis of a knowledge deficit regarding on hand washing was found (D.0111), and health behavior tends to be risky (D.0099). The priority nursing diagnosis taken based on the scoring results is knowledge deficit about hand washing (D.0111) with a scoring result of 4.6 and health behavior tends to be risky (D.0099) with a scoring result of 3.6 as proven by subjective data: Mrs. D and An. G said he didn't know about hand washing and how to wash his hands properly and correctly. Mrs. D and An. G has not received any information about hand washing and how to wash hands. Objective data obtained by An. G has not been able to show how to wash his hands properly and correctly and when to wash his hands, based on An's observations. G is only able to do 2 steps to wash his hands properly and correctly.

The nursing intervention in this case study focuses on nursing diagnoses, namely knowledge deficit about, hand washing (D.0111), and health behavior that tends to be risky (D.0099). Based on the scoring formulation, the author determines the nursing plan according to the diagnosis that has been determined.

Implementation with a diagnosis of Knowledge Deficit regarding on hand washing (D.0111) and health behavior that tends to be risky (D.0099) is carried out by assessing hand washing knowledge and behavior and discussing the causes of not understanding hand washing, then deciding on the action to be taken, implementation Next, provide education on hand washing with soap using lecture methods and poster media.

Based on the diagnostic data that emerged, the author took one health education action using the lecture method and poster media. The health education action using the lecture method and poster media provided interest to school-aged children because the delivery of the material used poster media so it was not boring and

monotonous. Apart from that, posters also have colors, images, and interesting elements. The advantages of posters are their ability to attract the attention of readers with their charm, the language used is simple and the purpose is clearly understood, the cost of making posters is affordable, the content of the poster can complement learning, the use of posters is not limited only to classrooms but can also be placed on notice boards and School Health Unit (UKS) (Wicaksana et al., 2020).

The lecture method is a pursuit approach that involves conveying information and knowledge orally to several students, who generally participate in educational activities passively. This method is considered the most economical way of transferring information and the most effective way to overcome the limitations of reference materials or literature (Fifadhillni, 2022).

Posters are a publication medium that combines writing, images, or both to provide information to the public. Its function as a medium or intermediary allows the delivery of messages, both general and specific in the learning context (Suharyanto, Trisianto, and Persada, 2022).

This counseling was given in 3 meetings. The nursing intervention uses 5 family nursing functions, including the family being able to recognize problems regarding hand washing, making decisions regarding appropriate health actions, caring for sick family members, modifying the family environment, and utilizing surrounding health facilities. After carrying out the intervention, the author then implemented it during 5 visits on January 30 – February 3, 2024.

The results of the evaluation of Mr. A and An. G on January 30 – February 3 2024 regarding nursing actions that have been carried out based on progress notes using the SOAP method, namely with results S (Subject): Mrs. D and An. G said he already understood hand washing and the steps for washing hands properly and correctly, An. G also said he was willing to implement clean and healthy hand-washing behavior in everyday life. O (Object): An. G and his family seem to understand hand washing and the steps for hand washing, An. G was able to answer 9 questions correctly from the 10-question questionnaire regarding hand washing knowledge and An. G was able to practice the 6 steps for washing hands sequentially and correctly based on the observation results. A (Analysis): The function of family care is fulfilled, such as recognizing family health problems, namely knowledge deficits and health behavior that tends to be risky, making decisions regarding appropriate health actions for the family, caring for sick family members, modifying the environment by cleaning the house together, utilizing health facilities, namely use the clinic as a treatment. P (Planning): Collaborate with the family to implement clean and healthy living habits, and wash your hands with soap regularly before and after carrying out activities outside and inside the home.

5. CONCLUSION

Providing education on hand washing using the lecture method and poster media can have a positive impact on the level of knowledge and behavior, it is hoped that clients and families can understand the importance of washing hands, so that clients can implement clean and healthy living habits, washing hands with soap (CTPS) after activities. outdoors or indoors.

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