TRANSPUBLIKA INTERNATIONAL RESEARCH IN EXACT SCIENCES (TIRES)

ANALYSIS OF MANAGEMENT SYSTEMS IN MAINTENANCE OF FACILITIES AND INFRASTRUCTURE AT HEALTH CENTER SABEE KEC. KRUENG SABEE KAB. ACEH WORKS IN 2023

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Abstract

This research aims to determine the role of UKGS in improving dental and oral hygiene in elementary school students aged 7 to 9 years at SDN 2 Calang and MIS Cendikia Panton Makmur, Krueng Sabee District, Aceh Jaya Regency. This study is a quantitative descriptive research. The population in this study consisted of 339 elementary school students from SDN 2 Calang and MIS Cendikia Panton Makmur. The research sample was selected using a purposive random sampling technique, comprising 84 students aged 7 to 9 years. Data collection techniques included both primary and secondary data. The research instrument involved examining children's dental plaque using the PHP-M index, and the data were analyzed using chi-square analysis. The study found that schools with UKGS had 93% of students with good dental hygiene, compared to 64.3% in schools without UKGS. Chi-square analysis indicated a significant difference (p = 0.003), confirming the influence of UKGS on dental and oral hygiene. In conclusion, the School Dental Health Program (UKGS) positively impacts dental and oral hygiene among elementary school children, with better outcomes in schools implementing the program.

Keywords: *Children's Dental, Oral Hygiene, School Dental Health Business (UKGS), Health Center*

1. INTRODUCTION

Efforts to care for children's health, including caring for dental health in school-age children, are an achievement at the level of child development. The level of achievement of child development includes caring for personal hygiene and the environment. This is in line with school programs that support children's behavior to get used to healthy living (Nurmahmudah et al., 2018). Basic Health Research (RISKESDAS) shows that 93% of Indonesian children have caries. This means that only 7% of children in Indonesia are free from caries problems. For oral health, the 2018 Riskesdas recorded the proportion of oral and dental problems at 57.6% and those who received services from dental medical personnel at 10.2%. The proportion of proper tooth brushing behavior was 2.8%. Morbidity of dental problems based on the age of 10-14 years in Indonesia in 2018 showed a fairly high prevalence rate of 55.6%, while those who received treatment from dental medical personnel amounted to 9.4% (Riskesdas, 2020).

Based on the results of the survey of the Calang Health Center, Aceh Jaya Regency in 2020 in the UKS Activity Program, the oral health section in every elementary school and other equivalent schools recorded 60% of dominant children experiencing tooth decay, namely caries, and other dental diseases. And the results of the UKS survey on Dental and Oral Care for Elementary School Children in Fiscal Year 2021, after carrying out UKS activities, namely screening of dental care for elementary school students, 190

children out of 250 children in 3 elementary schools in Calang city, Aceh Jaya Regency, namely Calang 1 State Elementary School, Calang 2 State Elementary School, and Calang Inpres Elementary School, where the survey results are still many children who do not know about how to maintain good and correct oral hygiene, this can be seen from the occurrence of tooth decay, the presence of dental caries disease in these children.

As for the results of temporary observations made by the author at State Elementary School 2 Calang and MIS Cendikia, namely by interviewing the school, namely the class teacher and Principal and students of the School, then from the results of these interviews the author can conclude that dental and oral care at elementary school age is still very poor and not optimal. this can be seen from the children's knowledge in maintaining oral and dental hygiene is still lacking and how to brush and clean teeth is still not good and not done regularly (Subekti et al., 2019). Based on the description above, the authors are interested in researching "Analysis of the Successful Implementation of the UKGS Program on the Incidence of Dental Plaque in Primary School Students aged 7 to 9 Years (Study at SDN 2 Calang and MIS Cendikia Panton Makmur, Krueng Sabee District, Aceh Jaya Regency)".

2. RESEARCH METHODS

This type of research is quantitative descriptive research. The quantitative descriptive research method is a research method that uses numbers in the data process that produces structured information. Where this research aims to describe, describe, explain, explain and answer in more detail the problems to be studied by studying as closely as possible an individual, a group or an event (Setiyadi et al., 2020).

The sampling technique in this study is Purposive Random Sampling, namely each individual in the population in each class must have a known opportunity to be clarified as an option in a study. If the number of respondents is more than 100, then the sampling is 10%-15% or 20%-25% or more (Arikunto, 2010). sampling in this study was 25% of the existing population, because the population exceeded 100, namely 339 students. Means 339 x 25%/100 = 84.7. So that from these calculations the sample used in this study amounted to 84 students aged 7 to 9 years. The number of samples at SDN 2 Calang was 42 students and MIS Cendikia Panton Makmur was 42 students (Notoatmodjo, 2022).

The data used are primary and secondary data. Primary data is obtained by structured interviews (indepth interviews) which means that researchers conduct interviews that contain questions posed to respondents (Moleong, 2007). Secondary data is a source that does not directly provide data to data collectors, for example through other people as intermediaries or documents, namely through census data, school archive data, and internet data related to research and the results of previous studies can also be supporting data for researchers.

3. RESULTS AND DISCUSSION

Dental and oral hygiene is one of the important things in maintaining the balance of body functions. The number of dental and oral diseases of children in schools is caused by a lack of public awareness in maintaining oral hygiene. To overcome the above, it is necessary to hold counseling on maintaining oral health behavior and examination of

dental plaque in elementary school students. This study aims to determine the difference in dental plaque between elementary school students who have UKGS and elementary school students who do not have UKGS in elementary schools in Krueng Sabee District (Sembiring, 2020). Data collection in this study was carried out by filling out questionnaires by students and clinical examinations. Questionnaire filling by students was carried out to determine student behavior about oral health.

While clinical examination was conducted to determine whether there was plaque on the teeth of children aged 7 to 9 years (Budiarti, 2021). The sample size in this study was 84 students consisting of 42 elementary school students who had UKGS and 42 elementary school students who did not have UKGS. The PHP-M value of elementary school students who have UKGS is 45.2 percent while schools that do not have UKGS are 54.8 percent. Based on the PHP-M index as a measure of oral hygiene, it can be seen that the results and level of oral hygiene of schools with UKGS are lower than schools without UKGS. In this study, it can be seen that schools that have UKGS have a smaller percentage of students who have plaque than the percentage of students who do not have UKGS.

According to the researcher's assumption, this is because in UKGS activities there is no surface protection filling on molar teeth, during dental and oral examinations none of the children's teeth were found to have fillings (Erwin, 2022). In addition, children's diet and snacks contain a lot of sugar and are not balanced with regular brushing of teeth at least 2 times a day. The presence or absence of UKGS at school is an external factor in the onset of dental plaque. The high prevalence of dental plaque, according to the researcher's assumption, is due to the UKGS activities carried out by primary schools in the Krueng Sabee sub-district working area, which are only counseling, oral health checks, mass toothbrushing, and referrals in case of emergency.

The frequency of implementation of counseling, oral health checks, mass toothbrushing is still not in accordance with the standard frequency of UKGS implementation according to the target of the Ministry of Health of the Republic of Indonesia in 2014, namely counseling is carried out once per quarter and mass toothbrushing activities are carried out every day in every school. Implementing personnel at the puskesmas only carry out UKGS activities in the form of counseling and dental and oral examinations once a year, namely every new school year and mass toothbrushing is not carried out every day and there is no evaluation of the program that has been carried out.

Whereas the standards of maintenance and dental health services in schools include preventive efforts in the form of filling with ART / test IX on newly erupted molar teeth, giving dental vitamins (CCPACP) to students who need it, efforts to improve nutrition so that the enamel in the teeth is perfect (Salikun et al, 2018). Until now, the implementation of UKGS in the working area of the Kreung Sabee sub-district still needs to be carried out to increase the stages in each primary school in the krueng sabee sub-district working area and to equalize the UKGS program for schools that have not implemented the UKGS program. UKGS activities in the krueng sabee sub-district working area have not been carried out optimally. There are still elementary schools that have not been reached by the UKGS program, this is due to limited implementation time, dental and oral health implementing personnel, inadequate facilities and infrastructure. The percentage

prevalence of primary school students who experience dental plaque is greater in primary schools that do not have UKGS compared to primary schools that have UKGS.

The knowledge of primary school students who have UKGS and primary schools that do not have UKGS shows that both are in the moderate category (59.5% and 47.6%) (Budiman, 2013). According to the researcher's assumption, this is because some students already know how to maintain oral health. Based on the questionnaire, there are still students who do not know how to brush their teeth properly, use toothpaste that contains fluoride (Khasanah et al., 2019). The correct way to brush teeth is to prepare a toothbrush and toothpaste containing fluoride. The entire tooth surface is brushed in a back and forth, short and circular motion. Repeat the same movements for the outer and inner surfaces of all upper and lower teeth (Gerung et al., 2021). For the inner surfaces of the front mandibular teeth, tilt the toothbrush then clean the teeth with the correct brushing motion. Clean the chewing surfaces of the upper and lower teeth with short, gentle movements back and forth repeatedly (Sardjono et al., 2012). Examination of student plaque scores in elementary schools that have the highest UKGS is 28 people (67%). While elementary schools that do not have UKGS are 22 people (52%), both of which are in the moderate category.

Based on the questionnaire, the respondents' attitude regarding cavity treatment is still lacking, there are still some children who do not brush their teeth before going to bed. Cavities can be filled to prevent extensive tooth structure (Fusfitasari & Eliyanti, 2020). Checking dental health once every 6 months is part of the preventive measures against cavities (Ramadhan, 2010). The behavioral picture of dental health status obtained based on questionnaire data is good because most students already understand and understand the information provided by dental health workers, children already understand how to brush their teeth properly and already know the foods that can damage teeth and those that nourish teeth. They have obtained this dental health knowledge since they were in first grade through counseling and mass toothbrushing conducted by health workers from the Puskesmas.

In contrast to primary schools that do not have UKGS, children do not get knowledge about oral health from teachers or health workers at all but children obtain information about dental health from various other media such as radio, magazines, newspapers, television and the internet. This is also supported by H.I. Bloom's opinion that a person's behavior consists of three important domains or domains, namely knowledge, attitudes and actions. To be able to realize behavior, attitudes do not stand alone, and must be supported by other factors, as stated in the theory that in its development attitudes are influenced by the environment, norms or groups (Ardianto, 2011).

In this case in the school environment through the UKGS forum, teachers and health workers play a very important role in influencing changes in behavior and dental health status of elementary school students. Knowledge about oral health determines a person's oral health status in the future, but knowledge alone is not enough, it needs to be followed by the right attitude and action. There are external factors (external factors) as predisposing and inhibiting factors that are indirectly related to the occurrence of dental caries, including age, gender, geographical location, economic level and attitudes and behavior towards maintaining oral health.

The success of children's dental care cannot be separated from the cooperation of various parties, in this case health workers, teachers and parents (Sinaga et al., 2020). This is in line with research conducted by Barus et al (2014) where the results of oral health counseling through the UKGS program can provide effective results in increasing elementary school students' knowledge of the importance of oral health. For this reason, it is necessary to take serious handling from health workers in the Kreung Sabee sub-district working area of the UKGS program that has been implemented, which is expected to be able to reduce the number of school children experiencing dental and oral diseases, especially the presence of dental plaque to be lower, and behavior about maintaining children's oral health is getting better.

4. CONCLUSION

Based on the results of research conducted in May - June 2023 in two schools in Krueng Sabee District, Aceh Jaya Regency, it was found that there were differences in plaque prevalence in schools that had UKGS with schools that did not have UKGS and there were significant differences in knowledge and attitudes in oral health between elementary schools that had UKGS and those that did not have UKGS, with several results that could be found. Based on the chi square test analysis, the p value is 0.003<0.005, meaning that there is a significant effect of the success of the UKGS program on the incidence of dental plaque in elementary school children.

Children's knowledge about maintaining oral health in primary schools that have the UKGS program is better than the knowledge of primary school students who do not have the UKGS program, which is 59.5 percent in the good category. There is a comparison of the frequency level of plaque scor examination results in schools that have UKGS (SDN 2 Calang) which is 93% with a good category compared to schools that do not have UKGS (MIS Cendikia) which is 64.3% and schools that do not have UKGS (MIS Cendikia) there are 15 people, which is 35.7% with a bad category while schools that have UKGS (SDN 2 Calang) 7 percent with a bad category. Based on the PHP-M index, schools that have UKGS, 44% of students have dental plaque and schools that do not have UKGS, 56% of students have dental plaque, it can be concluded that schools that have UKGS students have better oral health.

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