

EVALUATION OF CLEAN AND HEALTHY PRIMARY SCHOOL PROGRAM IN BOGOR

Maulida Intan Akmla¹⁾, Sarkadi²⁾, Amalia Sapriati³⁾

^{1,3)}*Universitas Terbuka, Jakarta, Indonesia*

²⁾*Universitas Negeri Jakarta, Jakarta, Indonesia*

e-mail correspondence : maulidaakmla50@guru.sd.belajar.id

Abstract. The purpose of this study was to determine the effectiveness and achievement of the Clean and Healthy primary School Program in Bogor. The study used the CIPP qualitative descriptive method (Context, Input, Process and Product) to determine the overall program components. This implementation program evaluation research was carried out in the coverage area of Bogor. Research data were obtained from informants, field observations, as well as data obtained from school documents through instrument observation, document studies, interviews and questionnaires. The data was analyzed using Miles and Huberman's Interactive Model. The results of the evaluation of the context component related to the program's objectives show that most of the objectives have met the standards set. The results of the evaluation of the input components, namely the suitability of planning, program facilities and infrastructure, have mostly been carried out in accordance with established standards. The results of the evaluation of the process components are the conformity of the basic concepts of implementing activities, most of the standards have been met. The results of the evaluation on product components, namely the implementation of the Clean and Healthy Primary School Program in Bogor, is mostly in accordance with the standards. From these results, recommendations emerged that could be considered for the desired program.

Keywords: evaluation, clean, healthy, primary, program.

I. INTRODUCTION

The school ecosystem can affect the growth and development and enjoyment of student learning. Health problems become complex related to the school environment and are closely related to clean living behavior. Therefore the cleanliness and health of the school environment needs to be maintained. In other words, students need to have knowledge about health. Childhood stage is the optimal time to develop health literacy [1]. Besides, school policies related to health literacy need to be implemented in learning process because it can increase health literacy and healthy lifestyles [2]. The primary school level is an ideal place to support the development of health literacy. Good environmental quality has a positive influence on student learning outcomes [3]. The 2019 Indonesia Health Profile data shows that the coverage of Primary Schools providing health services in Indonesia in 2019 reached 86.15% [4].

Health services in schools are carried out through the School Medical Unit. The main objective of the School Medical Unit based on the Ministry of Education [5] is to develop and improve children's health in each educational unit. The aim of the School Medical Unit is to improve the quality of education and student achievement. The three principles of school medical unit are health education, health services and fostering a healthy school environment. This is reflected in a clean and healthy lifestyle, creating a healthy environment, thus enabling harmonious and optimal growth and development.

Clean and healthy lifestyle is a set of behaviors that practiced on the basis of awareness as learning outcomes that enable a person to help himself in the health sector and play an active role in realizing public health. The government issued a Clean and Healthy primary School program as an effort for schools to implement clean and healthy lifestyles

and through School Health Enterprises. The program is based on decree of the Minister of Health of the Republic of Indonesia number 1429/Menkes/SK/XH/2006 that concerning Guidelines for Implementing School Environmental Health and the regulation of the Minister of Health of the Republic of Indonesia number 2269/MENKES/PER/XI/2011 that concerning Guidelines for Promoting Clean and Healthy Behavior.

The government's attention and seriousness in empowering Clean and Healthy primary Schools began with the Joint Regulation of 4 Ministries, namely the Ministry of Education and Culture, Ministry of Health, Ministry of Religion and Ministry of Home [6] in fostering, developing, improving clean and healthy living behaviors for students carried out in a planned and responsible manner through educational programs namely curricular activities, extracurricular activities, and through other out of school efforts that support a clean and healthy behavior living. Then issued the Program guidelines, School Medical Unit guidelines and also clean and healthy lifestyle guidelines through the relevant ministries. The existence of the Healthy School Competition provides a challenge for each school to be selected as the best delegate from each region. Schools that are delegates must make programs and perform in realizing healthy schools according to predetermined criteria. This has an impact on the national program down to the regional and micro scales to continue developing healthy school programs, including Clean and Healthy Primary School.

The Clean and Healthy Primary School indicators listed in the Guidelines for Clean and Healthy primary Schools [6] can be reflected in several aspects, including (1) school policies; (2) school work program; (3) facilities and infrastructure that support clean and healthy lifestyle; (4) the behavior and character of school members. This program will be achieved

if schools carry out a culture of clean and healthy living behavior, building management, school environment and school program planning supported by school management, facilities and infrastructure, creating ideal conditions by involving various parties.

In reality there are still conditions that does not meet expectations. The number of primary schools that do not yet have latrines are 12.9% (19,123 primary schools) while primary schools that have proper, separate and in good condition latrines are 31.40% (46,458 schools) [7]. The determinants of clean and healthy lifestyle for primary school students in Deringo Subdistrict, Citangkil District, Cilegon City in 2019 show that as many as 49.5% of students have poor clean and healthy lifestyles, 36.4% have poor knowledge, 44.9% show a negative attitude, 42.1% of students stated that the role of the teacher was not good and 43.9% of students stated that the role of parents were not good [8].

In fact, there are still policies in the implementation of program that need to be reviewed. Based on research and preliminary observations made in several primary schools in Bogor, the number of latrines in schools are not in accordance with the ratio that should be. A study is needed regarding the implementation of clean and healthy living in schools.

To find out the effectiveness and achievement of the Clean and Healthy Primary School Program in Bogor, it is necessary to carry out an evaluation. Evaluation of school policy programs is very important to do, so that all elements contained in the program have a major contribution to achieving goals and the results of the evaluation deserve to be used as a basis for making follow-up policies for a program. The priority in evaluation is to help recommend program policy makers [9]. The evaluation can be used as a basis for other schools to adopt and implement the Clean Healthy primary School program. The results of this program evaluation can be a source of information for policy makers and a basis for making policies as a result of the program.

A program is a set of resources and activities directed at one or more common goals, usually under the direction of a single manager or management team. A program may consist of a limited set of activities within a single institution or a complex set of activities implemented in multiple locations by two or more levels of government and by a group of public, non-profit, and even private providers [9]. Evaluation is a process carried out in order to provide information that can be used as a consideration for determining prices and services based on the worth and merit value [10]. Evaluation or assessment can be carried out as support for improvement, accountability, dissemination and insight for various kinds of decision processes in various fields [11]. Program evaluation is a process of finding an information in order to make an assessment of a sustainable program within an organization, which in turn can be used as a recommendation for a policy.

The general objective of this research is to collect information related to the implementation of the program. The specific objective of this activity is to find out the context, input, processes and products of the Clean and Healthy Primary School Program in Bogor.

The implementation of this research uses a qualitative descriptive method or approach. The aim is to describe a particular variable, symptom, condition or social phenomenon. This research uses the CIPP model approach which is oriented to see the effectiveness of the program and the suitability of program results. It is in line with the previous research about the evaluation of the Healthy primary School Program using the CIPP model [12].

The CIPP evaluation model is a comprehensive evaluation model in framing and guiding program evaluation in a systematic manner [13]. The components of the CIPP model include context evaluation, input evaluation, process evaluation and product evaluation (context evaluation, input evaluation, process evaluation and product evaluation). CIPP focuses on improving program design, where the priority is given to planning and implementing improvement efforts. Communication is needed between evaluators and program administrators, to enable data collection, as well as further analysis and synthesis [11]. The CIPP evaluation model is used to evaluate comprehensively to guide the evaluation of programs and projects and can be used as material for consideration for program improvement.

From the descriptions a study is needed using the CIPP model. The aim is to evaluate the Implementation of the Clean and Healthy Primary School Program in Bogor.

II. RESEARCH METHOD

Schools that are the target of the evaluation are schools that have implemented the Clean and Healthy primary school program. The school in this study is a school with a minimum accreditation standard of A and has won at least a city level healthy school competition. The three schools that became the objects were SDN Kawungluwuk, SDN Bantarjati 9 and SDN Gunung Gede.

The data in this study are primary data and are directly obtained from sources, field observations, and school documents. The data sources used in this study were personal data, whose data were collected through written questionnaires and also orally through interviews. The data sources are school principals, sports teachers, curriculum teachers, infrastructure teachers and students. The second data is paper data, covering all media printed with letter and number symbols, using the documentation study method. In this study, the data sources referred to are data in the form of program documents, school data graphics and photos of activity documentation. The third data is data in the form of place, this type of data is taken by observing or direct observation. Researchers went directly to the field to see places that were categorized in facilities and infrastructure.

In this qualitative research, data collection was carried out in a natural setting. The preparation of the instruments and techniques used are observation, document study, interviews and questionnaires. To guarantee data validity, four principles are used namely credibility, transferability, dependability and confirmability [14]. Data analysis while in the field used the Miles and Huberman Interactive Model, through data analysis activities, through the stages of data collection, data reduction, data display, and conclusion drawing/verification [15].

In this study, three guidelines were used to evaluate and at the same time serve as standard benchmarks both in terms of context, input, process and product. The three guidelines are Guidelines for Clean and Healthy primary Schools issued by the Ministry of Education and Culture, Directorate General of primary Education, Directorate of Primary School Development in 2013, as in [6], as well as Guidelines for a Clean and Healthy Lifestyle from the Ministry of Health, issued in 2011 [16], and Guidelines for School Health Efforts published the latest from the Directorate General of Primary and Secondary Education Kemdikbud in 2019, as in [5].

III. FINDING AND DISCUSSION

A. Context Evaluation

In the Evaluation Research on the Implementation of the Clean and Healthy Primary School Program in Bogor, the first problem formulation was evaluating the objectives of the Clean and Healthy Primary School Program. Data from the questionnaire results in general on the context component: 69.44% of the objectives of the healthy school program have been implemented and are included in the healthy school program in Bogor. Meanwhile, 27.78% stated that most of it was implemented and only 2.78% said that a small part of it was implemented. For the statement that 0% has not been implemented, this means that the school where all programs refer to the objectives set out in the SDBS Guidelines, School Mwdical Unie Guidelines and PHBS Guidelines. It's just that there are still things that have not been fully implemented.

Referring to the results of the questionnaire, in more detailed SDBS objective indicators there are 5 standards that have been met 100%. This is supported by interview data from the research site school which shows that the Principal as the main manager at the school already understands the goals of Healthy Schools in accordance with the guidelines used as a reference. From the results of interviews with sports teachers, it shows that the teacher's understanding of the objectives is still not in accordance with the program documents prepared. From follow-up interviews, the problems that arose due to the pandemic were explored.

The results of document analysis at the research school are in line with the results of the questionnaire. Most of the program objectives are listed in accordance with established standards. As for the program forms, including the Healthy Schools program, School Health Business and Clean and Healthy Lifestyle, programs were found to be integrated with each other.

The results of the research were compared with references, namely the Healthy School Guidelines published by the Ministry of Education and Culture, the Directorate General of Basic Education, the Directorate of Primary School Development in 2013, as in [6], the Healthy Clean Lifestyle Guidelines from the Ministry of Health, published in 2011 [16], and the latest published School Health Business Guidelines from Directorate General of Primary and Secondary Education, Ministry of Education and Culture in 2019, as in [5]. The goals have been reflected in the integrated school program starting from the School Curriculum, the

Clean and Healthy Primary School Program and the School Health Business Program. School program objectives are general targets or achievements that are expected to be realized in the future. The healthy school program has a positive influence on student academic achievement in primary schools [17]. Therefore, a healthy school program will have a big impact if it is created with objectives that meet the set standards.

B. Input Evaluation

The input component is used to view program preparation which includes implementation planning, program facilities and infrastructure. The measurement of program achievement is seen from three indicators, namely the healthy school work program, room standards and building construction standards that support preparations for program implementation in schools. The results of the component questionnaire show that 73.27% of program preparations have been carried out which include implementation planning, program facilities and infrastructure. Meanwhile, 25.48% of respondents stated that most of the program preparations had been carried out. Only 0.49% stated that preparations had not been carried out and 0.76% had not made preparations for implementing the program.

The results of the questionnaire show that the work program has been sustainable with the aim of a healthy school program, included aspects of health education, health services and school environment development, there has been a plan for involving the active participation of school residents, included an activity budget that supports the program in the activity plan document and The school budget plan, contains the UKS Trias, contains programs that empower clean and healthy lifestyles, foster an atmosphere for a Clean and Healthy Lifestyle and advocacy is carried out in school institutions.

The results of interviews show that the program contains environmental maintenance activities, habits and sustainable plans. Based on the results of document analysis, it has been shown that the work program contains programs related to Trias UKS. The results of the interview with the sports teacher above are in accordance with the first and second UKS Trias, namely implementing health education in schools, providing health services in schools. But the third point of the UKS Trias has not yet emerged, namely creating a healthy school life environment.

The results of the analysis of SDN Kawungluwuk and SDN Bantarjati 9 documents program have been made completely. However, there were findings from one of SDN Gunung Gede documents that it still used an adoption program from outside, not created by the team itself, so that the specifics of the school program were not listed in accordance with the school's conditions. However, if viewed from the aspect of the content of the school documents, it has been fulfilled in accordance with the standards set out in the standards.

The management theory that supports program development according to the potential and characteristics of the school is the School-Based Management theory. Program

management cannot be carried out completely as determined by the government, but educational institutions or schools can make their own decisions regarding implementation in accordance with the principles of School-Based Management. There are 4 principles in implementing SBM, namely school autonomy, flexibility, participation and school quality [18]. So, the development of the Healthy Schools program can be implemented while still paying attention to the main principles and objectives of the government program.

The results of the questionnaire there are still room standards that have not been met. Based on observations, the room standards that have not been fully met are the School Health Business, canteen and toilets. The room standards have not been met, according to the results of observations of facilities and infrastructure carried out by researchers. There are still school health businesses that do not have dental examination equipment and canteens that do not fully use closed ready-made food displays. What is very visible and urgently needed is the availability of separate toilets according to gender which is still insufficient compared to the number of students. The ratio for male students should be 1:60 and for female students is 1:50 [18]. The availability figures from research results in the field are still below the ratio set by the standards. The quality of a school can be reflected in physical evidence shown by the appearance and smell of the toilets at school [19]. So standards are needed to show the quality of schools and the implementation of the Healthy Schools program, not just the availability of toilets in schools.

From the questionnaire, what was not fulfilled was stairs, lightning rods and water sources. This is also in accordance with the results of field observations which show that at School A the research site only has one floor, so there is no need for stairs that comply with standards. Apart from that, the school does not have a lightning rod. Furthermore, the standard for healthy school water sources states that there are water sources that can come from groundwater, surface water and rainwater. Two of the three schools in the research, namely SDN Gunung Gede, only have one source of water at school, namely using facilities from the regional water company. So when the water source experiences problems it can disrupt activities related to healthy schools.

C. Process Evaluation

There are 6 indicators set to evaluate process components, namely program management, provision of facilities and infrastructure, clean and healthy education, creation of ideal conditions, involvement of various parties and stages of program implementation activities. The results of the process component questionnaire show that on average 66.45% of the process has been implemented. Then 31.67% of respondents stated that the program implementation process had mostly been carried out. There were no respondents who stated that preparation had not been carried out or had not implemented the program.

Based on the questionnaire, the principal has carried out and fulfilled the management set by the standards, namely the 2013 Clean and Healthy Primary School Development Guide, as in [6]. The results of interviews and document analysis

show that several strategies have been implemented in implementing the Clean and Healthy Primary School Program, namely by forming a team. implementation to facilitate cross-sectoral coordination and carry out tasks in accordance with the main tasks and functions. Implementation of the program involves external parties, namely Community Health Centers under the Health Service, Environment Service and Education Service. Planning has used the school budget and monitoring has been carried out by the Education Department. To maintain and improve good implementation management, regular monitoring and evaluation activities are required, or what is usually called supervision. The function of supervision is an evaluation to improve by coordinating and optimizing all school components through creative efforts to integrate educational goals and improve the abilities of school personnel, as in [18].

In terms of the provision of facilities and infrastructure, the school has provided school facilities that are healthy and child-friendly. The school has also made efforts to carry out operations and maintain facilities. The results of the analysis of school budget documents show that the school has allocated maintenance and operational funds to support the clean and healthy school program. The results of observations of facilities and infrastructure in the field are also in accordance with the questionnaire filled out. The provision of healthy school facilities and infrastructure has been met according to standards. The quality of facilities in the form of sturdy buildings and access to basic services such as water, sanitation, waste disposal, electricity and communications in schools can increase and optimize students' opportunities to attend school and stay healthy at school and the teacher remained in his profession as a teacher at the school [20].

The results of the questionnaire show that clean and healthy education has been fully implemented in the research school. Analysis of activity documentation shows that the research school has involved students as the main actors in the activities. Other findings from SDN Bantarjati 9 documents show that several schools have made visits to adopt various activities related to healthy schools and activities related to the environment. The results of field observations found that clean and healthy education activities included education by placing slogans and appeals regarding cleanliness and health. Another finding is the existence of greening in schools that involves students. Students have also reduced waste and eaten nutritious food by bringing provisions from home.

Clean and healthy education can be seen from the results of observations of sport class 4 semester 1 learning at the 24th meeting on. Observation results show that the learning material is related to clean and healthy living education. In Competency learning, students can implement a healthy living culture through Basic Competencies, getting used to throwing away rubbish in its place has been achieved at the end of learning. The results obtained in learning observation activities show that all indicators are visible in clean and healthy education. The implementation of clean and healthy living behavior at school cannot be separated from the guidance and role of teachers at school [21]. Apart from that, learning outcomes are also related to external factors that

influence learning success, that teachers, teaching methods, curriculum and programs are things that can influence student learning outcomes [22].

The interview explains in detail the external parties involved in implementing the program. Apart from cross-sectoral externals, the involvement of parties closest to the school is very closely related to the involvement of the entire school community, including parents, namely the School Committee. In the implementation activity stage, the school has carried out stages through the Implementation Team which is approved through the Principal's Decree.

D. Product Evaluation

Evaluation of product components is used to see student behavior regarding clean and healthy education. The results of the questionnaire related to student behavior show perceptions of clean and healthy living behavior. In terms of student behavior indicators, an average of 87.43% has been achieved, 11.03% has mostly been achieved, 0.77% has achieved a small portion of the goals and 0.77% has not been implemented, 5 standards have been met 100%, but there are still 3 points that need attention, namely eradicating mosquito larvae, exercising regularly and in a measured manner, disposing of segregated waste, and consuming healthy food.

From the results of the interviews, students already have the behavior and understand how to wash their hands with running water and soap. Apart from that, there are standards with a fairly large percentage of them, including students stating that they keep their hair clean and neat, exercise regularly and in a measured manner, students use clean and healthy toilets, students consume healthy food, students weigh themselves and measure their height regularly keep nails short and clean.

From the results of interviews, students still do not dispose of segregated waste because they are not used to it. In the indicator of eradicating mosquito larvae, it was also found that students were not used to participating and did not have concern. Eradicating mosquito larvae in primary schools requires special attention because from the results of questionnaire analysis and student interview answers it has not yet been fully implemented. There was a significant relationship between students' knowledge before and after training a program for students who become mosquito larvae examiners at school [23]. Apart from that, after routine inspection of mosquito larvae, it was found that the Larval Free Rate had increased. The indicators for students disposing of separated organic and inorganic waste are still not fully met. From the results of the analysis of interviews with students, it was found that students still do not have awareness and cultivation of the lifestyle of disposing of waste separately and in a segregated manner.

It is very important to educate future generations to change to sustainable lifestyles as early as possible [24]. This design provides knowledge to increase public awareness, especially primary school students, to participate effectively in educational activities in implementing waste management systems through interesting learning media that suits the characteristics of primary school students. With fun learning,

students do not feel pressured and are forced to dispose of waste separately. Forcing rules regarding waste sorting will reduce students' motivation in terms of practicing waste sorting [25]. However, giving awards is the most effective approach to encourage the waste sorting movement.

IV. CONCLUSIONS

After going through the data presentation and discussion stages, it can be concluded that the evaluation of the implementation of the Clean and Healthy Elementary School Program in Bogor City using the CIPP model has largely been carried out according to the established standards. The results of the evaluation on the context component related to the program's objectives show that most of the objectives have met the standards set. The results of the evaluation of the input components, namely the suitability of planning, program facilities and infrastructure, have mostly been carried out in accordance with established standards. The results of the evaluation of the process components are the conformity of the basic concepts of implementing activities, most of the standards have been met.

Furthermore, the schools where the research was conducted, namely SDN Kawungluwuk, SDN Bantarjati 9 and SDN Gunung Gede, can continue the program and are recommended to become examples for other schools that wish to implement the Clean and Healthy Primary School program, provided that (1) teachers must truly understand the objectives of the program in accordance with established standards; (2) maintenance of facilities and infrastructure must continue to be carried out to facilitate the program; (3) there needs to be increased education and inspection of mosquito larvae, such as a program for students to become mosquito larva inspectors at schools for mosquito eradication activities; (4) there is a need to increase fun learning and real action for disposing of waste separately between organic and inorganic; and (5) follow-up to carry out outreach to other schools regarding the Clean and Healthy Elementary School program.

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