Clean and Healthy Behavior in Early Childhood During Covid-19 Pandemic

Aisah Karunia Rahayu¹ Ocih Setiasih²

¹Early Childhood Education Studies Program School of Postgraduate, Indonesia University of Education. Bandung, Indonesia
²Early Childhood Education Studies Program School of Postgraduate, Indonesia University of Education. Bandung, Indonesia
Email: aisah@upi.edu

ABSTRACT
This study is about clean and healthy behavior in early childhood during COVID-19 Pandemic in Panyileukan District, Bandung City. The method used is a qualitative with a case study design by three children participants three children who aged 5-6 years. Data were collected through interviews and documentations in the form of photos of clean and health behavior in early childhood. The analysis was carried out based on four indicators: washing hands, disposing of trash in place, physical activity, consumption of fruits and vegetables. Data shows that children’s clean and healthy behavior in early childhood is quite low, especially in indicators of disposing of rubbish in place and consuming fruits and vegetables. The recommendation from this research is necessary to involve parents and the environment in maintaining and supervising children to get used to clean and healthy behavior. In addition, parents also act as role models in order to provide understanding to children about the dangers caused if they do not get used to clean and healthy behavior from an early age.

Keywords: Clean and Healthy Behavior, Early Childhood

1. INTRODUCTION
Clean and healthy behavior is a series of activities in the field of health. Clean and health behavior is a means that has the goal of making the community an agent of change, so that it can improve clean and healthy living behavior [1]. [2]. Clean and healthy behavior can also improve health from good habits as part of a clean and healthy community. Further, clean and health are expected to create a society that has an understanding, awareness will be the importance of healthy behavior. To achieve the goal of clean and healthy behavior, it is necessary to organize a community that starts from the activities of daily life, namely family, community, and school environment.

Empowerment of clean and healthy communities requires good cooperation in every community structure. At the community level, hygiene and health standards can be met by: health workers who assist in childbirth, exclusive breastfeeding, weighing babies regularly and washing hands with soap and clean water [3]. House as the closest child environment is recommended to use clean water, hygiene toilets, eradicate mosquito larvae, eat fruits and vegetables in a balanced, sports, and don’t smoke in the house [4]. While it is, clean and healthy behavior in the school environment can be achieved by washing hands with soap before and after eating, exercising, eating healthy snacks, providing enough bins, and rendering no service to the school community [5]. When the COVID-19 pandemic continues to increase, PHBS in the community and schools is currently limited so that more children do clean and healthy behavior at home.

With the emergence of a new variant (delta), the spread of COVID-19 in Indonesia is increasing. It is known that the delta variant spreads more easily and quickly [6], [7]. Bandung is the capital city of West Java Province which in 2021 will become the second highest COVID-19 case area in West Java [8]. Bandung Government is working hard to deal with COVID-19 in implementing clean and health behavior by providing sinks and hand sanitizers in various public facilities. Since 2007, clean and healthy behavior has been promoted both domestically and abroad [9], but awareness of the behavior of the Indonesian people in living clean and healthy is still very low. Based on the 2018 basic health research, the government’s efforts to socialize clean and healthy behavior have exceeded the target, which is 70.62 percent of the 70 percent target. This figure shows that 70.62 % of districts/cities support the plan. Data shows that at least
38% of families practice clean and healthy behavior in their daily life. Several other studies also show that community clean and health behavior is still low on various indicators, such as: proper hand washing, use of clean water, brushing teeth, and littering [10], [11] and [12]. Lack of public awareness can also affect the low awareness of clean and healthy behavior in children aged prematurely.

Infections rates in children age early are very small, but that doesn’t mean they do not get exposed to the COVID19 virus. Chairman of the Indonesian Pediatrician Association, Aman Bhakti Pulungan [13] stated that the child mortality rate due to COVID-19 in Indonesia is the highest in the world, at 3% to 5%. Of the total positive cases so far COVID 19, 12, 5 % were in early childhood or 25 219. Most hospitals do not have a special pediatric ward for the ICU (Intensive Care Unit). Kids age early are very susceptible to COVID-19 have no experience and lack understanding of health protocols.

Clean and healthy behavior plays an important role in improving the health of children aged prematurely. Clean and healthy behavior can balance nutrition and nutrition according to children's needs. Suitability is considered based on the type of food, body weight, age and physical activity. [14] shows that balance consists of adjusting the input and output of nutrients by weighing regularly. According to basic health research Ministry of Health (2018) [15], the percentage of clean and healthy behavior children aged early is still less than 50%. This insignificant number has an impact on the health of children under five, which is marked by a stunting rate of 27.6% in Indonesia which increases the obesity rate of children under five by 10.8% in 2019 [16].

In Indonesia, many researchers have conducted research on clean and health behavior, especially at the basic education level [17], [18], [19], [20] and [11] found that the clean and health behavior of elementary school age children is still not optimal so that it requires guidance, assistance, and appropriate treatment to recognize clean and health behavior. At the early childhood level there are also several but with different goals, namely to find out the understanding and role of parents and how to apply it [21] [22]. But until now there is still no studies that describe the condition of clean and healthy behavior children ages early in the pandemic COVID-19. In addition to different destinations, the locations are also different, namely in Pekalongan and West Sumbawa in a research of [23] Tabiin and Ibrahim[24] but not yet in the city of Bandung. Compared to previous research, the research I did aims to find out clean and healthy behavior in early childhood during the COVID-19 pandemic with the method and design of a case study in the city of Bandung.

2. RESEARCH METHODS

This study uses a qualitative method. Qualitative methods aimed at understanding the phenomenon of a social perspective of the participants in understanding the implementation of clean and healthy behavior for children ages early during the pandemic COVID19 [25]. The research design used is a case study that focuses on individuals (Creswell in [26]). This case study explores attachment and diversity through data collection to understand clean and health behavior children age prematurely. The data collection technique used is interviews with three participants whose names have been disguised as participants one, two and three aged 5 -6 years who attend Kindergarten in Panyileukan District, Bandung City. In addition, the researcher also completed the data by conducting interviews with the mothers of the three participants regarding their children's clean and healthy behavior. The data analysis technique uses thematic analysis, it is identified from the phenomenon [27]. This study uses inductive analysis to outline clean and healthy behavior children ages early in the pandemic period COVID-19.

3. RESULTS AND DISCUSSION

3.1. Washing Hands Before and After Eating

Clean and healthy behavior is a must that is taught during the pandemic. The first and third participants explained that they always wash their hands before and after eating every day. While the second participant stated that he had not been able to get used to washing his hands before eating. Based on the statement given by the mother of participant two, her child is very active so that the mother of participant two does not know when the child eats without washing his hands. It is proven from the following interview results:

"After eating like, but before eating sometimes".

(Interview with participant two, 26 June 2021)

"My child is a child who keeps playing, I don’t like to see if he washes his hands or not, sometimes at home when he wants to eat he forgets to wash his hands, after eating I often remind him because his hands are dirty after eating ".

(Interview with the mother of participant two, 27 June 2021)

The results of the interviews were corroborated by the researcher's observations while at school, participants one and three were diligent in washing their hands not only after or before eating but also every time they entered and left the classroom. Meanwhile, participant two needs to be reminded to wash their hands frequently. The habit of washing hands needs to be done early because it can have an effect later on. It is proven by several studies finding
that someone with poor hand washing habits has a greater risk of experiencing COVID-19 transmission ([28], [29] and [30]). Lack of the habit of washing hands can also cause diseases, such as: skin diseases, diarrhea and intestinal worms ([31], [32] and [33]). Washing hands using soap and running water is one of the simple behaviors that have been proven to prevent infectious diseases. However, it turns out that in the field there are still many children who do not understand it (Brilliant, A., 2016; [34]).

3.2. Put Trash in Its Place

All participants stated that they still often litter. Participants one and three are often disposing of the packaging waste they place dine. While participant two often put trash anywhere, especially while playing. This is confirmed by one of the results of interviews between researchers and participants as well as between researchers and mothers from the following pan participants:

"I like to throw trash in its place, but sometimes I forget to throw it here (points to where he is sitting)"

(Interview with participant one, 26 June 2021)

"A boy I was lazy to dispose of waste into place. Let's be alone outside when playing, at home we are still lazy. In our environment there are also janitors so people don't care about waste, including my child."

(Interview with the mother of participant one, 27 June 2021)

The interview results are in line with several studies which found that there is still a high habit of littering in the community ([35], [36] and [37]). In addition, it is also corroborated by the results of observations that researchers have done while at school, that there is still trash scattered around the school without the teacher knowing when the child throws it away. So before going home from school, the teacher asked the students including participants one, two and three to pick up the trash in the classroom and throw it in the trash. The reason why children still often litter is because parents and teachers are less able to monitor children when playing, especially outside the house or during breaks. In addition, there are also janitors who clean the environment every day so that residents don't have to worry about the behavior of children who still often litter. That way, the environment is also involved in getting children used to put trash in its place [38] and [39].

3.3. Eating Fruits and Vegetables

Participants two and three answered that they liked some fruits and vegetables. The second Participant said that he likes carrots, spinach, cauliflower, pumpkin and squash while the third participant likes carrots, kale, and leaves of cassava. However, based on a statement from participant one, it showed that participant one did not like vegetables or fruit. His favorite fruit is bananas. It is corroborated by the following interview results:

"I don't like vegetables, if I like fruit, I like bananas. At home, I like to eat noodles, nuggets and fried chicken."

(Interview with participant one, 26 June 2021)

"My son c uma like bananas wrote, especially brown and the tomatoes do not like really. I like fast food."

(Interview with the mother of participant one, 27 June 2021)

The results of the interviews from the three participants were corroborated by the results of the researchers' observations when the children were at school. During the break, the children brought their lunch. The children of participant two often had vegetables compared to the participants one and three. Participant one prefers moist cake or food supplies such instant noodles. Meanwhile, participant three occasionally supplies vegetables, but more often they also provide instant food when their mother doesn't have time to cook vegetables. This incident is supported by the results of research by (Sari & Anggarayni, 2019) found that there are still many young children who do not like fruits and vegetables, especially vegetables. Children also often say they don't like it because it is bitter and doesn't suit their tongue [41]. Therefore, one participant did not like fruits and vegetables because he preferred fast food which tasted better. In addition, participant one is used to eating fast food because his parents are busy so they rarely cook vegetables for him.

3.4. Doing Physical Activity

Physical activity is needed to maintain health both inside and outside the home with health protocols [42]. Based on the results of the interviews, participants one and three stated that they only did physical activity three times a week. This is because participants one and three have spent three hours playing with gadgets and watching television for four hours a day. However, three times a week participants one and three also did physical activities both at home and outside the home such as free play and cycling. While the second participant is active in doing physical activity every day. While at home he played with his sister and sometimes helped his mother. However, participant two more often did physical activities outside the home such as playing, cycling and walking to the mosque for congregational prayers. Due to the density of physical activity, participant two can only play gadgets and watch television for one and a half hours. It is proven by the following interview results:

"I often play out of the house, at home playing with my sister and helping mom."

(Interview with participant two, 26 June 2021)
“My son is very active, his son can play up to three hours a day, sometimes playing, cycling or walking to the mosque for congregational prayers. He already doesn’t have time to play on his cellphone, at most one hour, then half an hour watching TV.”

(Interview with the mother of participant two, 27 June 2021)

This statement was corroborated during observation, researchers could see that participant two was very active in playing physical games. Meanwhile, participants one and three preferred to chat with their friends because they did not like physical games such as chasing. The amount of physical activity is good especially for children aged early, but in the future this pandemic child should also use medical protocol. Often children play outside the house without wearing a mask or washing their hands every time they enter and leave the house. When playing, children also cannot keep their distance from each other.

The three mothers of the participants stated that the cause of the lack of use of health protocols was because children did not understand the dangers of spreading COVID-19 and the benefits of the health protocols themselves. The mother of the participant is also still confused about explaining to the child, because the community in the participant's environment is still not aware of the importance of using health protocols. The cause of the lack of public awareness that affects children aged early to use the health protocol according to (Sari, 2021) is a financial reason and apathetic behavior. Meanwhile, [44] found that the lack of trust in the government in issuing inconsistent policies was also the cause of the lack of public awareness of health protocols.

4. CONCLUSION

Clean and health behavior of children in the aspect of washing hands before and after eating, put trash in its place, consuming fruits and vegetables and doing physical activity is still low seen from the data obtained from the three participants. The indicators that children rarely do are put trash in its place and eat fruits and vegetables. Meanwhile, the indicators of washing hands before and after eating and doing physical activities need to be re-instilled considering the increasingly widespread spread of the COVID-19 virus. Children still need guidance and the role of parents in maintaining and supervising to familiarize children with clean and healthy behavior, including teaching, reminding, guiding and facilitating consistently. Attractive methods and media become recommendations in instilling clean and health behavior from an early age.

REFERENCES


[38] D. T. Utami, “Pengaruh Lingkungan Taman
Sebaya terhadap Perilaku Sosial Anak Usia 5-6 Tahun,”

Beragama pada Anak di Lingkungan Keluarga,”
Edunesia J. Ilm. Pendidik., vol. 2, no. 1, pp. 162–170,
2021.

[40] A. M. Sari and M. Anggarayni, “Peningkatan
Kosumsi Sayur pada Anak Melalui Kegiatan Menanam

[41] N. L. Widani, “Penyuluhan Pentingnya Konsumsi
Buah dan Sayur pada Remaja di Sos Desataruna Jakarta,”

Masa Pandemi Covid-19,” J. Ilmu Keolahragaan

Warga terhadap Penerapan Protokol Kesehatan 3M di
Masa Pandemi Covid-19 (Studi Kasus Pelanggar
Protokol Kesehatan 3M di Ciracas Jakarta Timur),”

[44] A. Aquarini, “Pengaruh Kebijakan Politik
terhadap Kepatuhan Physical Distancing Mencegah