

THE INFLUENCE OF STAKEHOLDER INVOLVEMENT ON IMPROVING SANITATION ACCESS IN KALIAWI BANDAR LAMPUNG VILLAGE

Fadlillah Ahmad *1, Vera Yuliani 2, Fitri Eka 3

1,2,3 Faculty of Public Health, Malahayati University, Indonesia

*1fadlillahahamd@gmail.com

ABSTRACT

The purpose of this research is to find out the role of government stakeholders in implementing the first pillar of STBM program in kalaiwi, as well as analyzing supporting factors and inhibition of STBM program. The method used in this research is qualitative with phenomenological design. Data collection techniques using in-depth interviews, observations of participants and document studies The results of the study showed that there are still many obstacles that occur in the sanitation of the first pillar in the babs, stakeholders have played their role in the implementation of the first pillar of STBM through the triggering and mentoring to the community, but still hampered by the community economy and the status of ownership of habitable land

Kata Kunci: Role, Stakeholders, Sanitation

INTRODUCTION

Health is one of the indicators to measure the welfare of society. The higher and guaranteed the health of a society, the higher the welfare. Health is also a human right, where every community deserves attention about its health, both public health and the environment. In Indonesia health is one of the problems that are always faced every day, ranging from public health to environmental health and even health supporting facilities and infrastructure. Masayrakat health is closely related to the environment because a healthy environment can support the health of the community and vice versa, when the community already cares about their health, then they will care about the environment.

Health development is an effort carried out by all components of the nation that has the aim to increase awareness, willingness, and ability to live a healthy life for everyone so that there is expected to be an increase in the highest degree of public health (National Health System, 2009). One of the government's efforts in improving the degree of public health is through the national program of Community-Based Total Sanitation.

Sanitation is an important part of regional development because it is related to public health services. Provision and management of good sanitation is a preventive



measure that must be taken to reduce the spread of infectious diseases due to poor sanitation. Currently public awareness is still low in participation in the management of sanitation facilities and infrastructure. Not all communities are aware of the importance of sanitation. In fact, sanitation is often considered a back affair so it is left to take care of other affairs. The misperception that sanitation matters are less important needs to be changed so that all parties can fully realize that sanitation sector affairs are important and quite vital.

Based on Regulation of the Minister of Health No. 3 of 2014 on STBM strategy, this program consists of five output indicators or pillars, namely: stop indiscriminate defecation (BABS) or open defecation free (ODF), hand washing using soap (CTPS), management of drinking water and household food (PAMMRT), household waste security (PSRT), and security of household liquid waste (PLCRT). Related to this, clean and healthy living behavior referred to in the five pillars of STBM has quite high implications with diarrhea cases, according to basic health research 2010 in (Ministry of Health, 2014), diarrhea is an environmentally based disease that is the number one cause of infant death in Indonesia, which is 42% of the total infant mortality rate aged 0-11 months.

Basically the Government has implemented various policies to deal with sanitation issues. (Praptiwi, 2011) sanitation policy that has been implemented in Indonesia can basically be categorized into two approaches. The first is the policy of top-down sanitation development by involving local agencies, agencies, and companies, the second is the policy of sanitation development with a community-based approach (bottom-up), where the community is placed as the main and decisive actors in the implementation of sanitation development.

In this modern era, there are still many people who practice babs. The development of technology, and the easy exchange of information are not guarantees in changing people's behavior, even in urban areas that quickly have internet access. (World Health Statistics - Monitoring Health For The SDGs," 2016).. Together with the World Institutes of Health (WHO) the Indonesian Ministry of Health has issued a regulation known as Community-Based Total Sanitation since 2008 (MCA-Indonesia & Health, 2015; Odagiri et al., 2017).

In addition, the number of babs in urban areas, especially Tanjung Karang District, Bandar Lampung City Center is still a lot of babs. The difficulty of ODF achievement in urban areas is not only due to the lack of public awareness of the importance of latrines, but also due to the status of land ownership and latrines. Meanwhile, based on the report of the Public Health Center (Puskesmas) Palapa Bandar Lampung in 2019 the number of cases shows a decrease in diarrhea cases both directly and the comparison between an event and the number of residents / incident rate (IR). This is certainly positive related to the implementation of the STBM program, one of the objectives is to reduce the number of disease transmission due to poor sanitation conditions. Related to this, the implementation of stbm program at the regional level becomes a benchmark of stbm success at the regional level. The monitoring and evaluation data (money) stbm program in the area of Puskesmas Palapa Bandar



Lampung

The supporting factor of STBM program is the support and commitment of government and community bureaucracy. Factors inhibiting the program are public information access to surveillance mechanism programs, and economic limitations of the community. Implementing programs related to sanitation involving the community, there are many factors that influence the implementation of the program ranging from local government, program implementing agencies, availability of resources, community participation, to environmental, economic and socio-political factors. This research focuses more on the implementation of the first pillar of STBM at the level of sub-district and district government as the owner of legitimacy in the community. The purpose of this research is to evaluate the role of the government in the implementation of stbm program pillar 1 in the working area puskesmas. (Muaja et al., 2020)

Based on the results of data obtained by researchers through pre-research with the coordinator of environmental health programs in the working area of the Puskesmas Palapa Bandar Lampung ladder 20 April 2020 that there are still obstacles in the achievement of ODF in kaliawi village. However, the triggering began in November of 2019 in kaliawi village in odf achievement. Committees are formed from local villagers and are responsible for follow-up in the process of implementing ODF village achievements. Obstacles that are still difficult to form ODF village is the tradition that is still attached, the habits that must be changed, the cost factor of the community that is more concerned with other needs compared to the establishment of ODF village. Coordinator of environmental health program in Puskesmas Palapa monitoring developments in ODF village every month however, the progress achieved is still slow so that there are still 169 families who do babs in kaliawi village

FRAMEWORK

The framework in this case provides to analyze the influence of stakeholder involvement from various stakeholders (formal and informal) on the implementation of improving access to sanitation which has the role of Regulators, Distributors, and Facilitators for local communities who do not have access to communal latrines sanitation. Therefore, it is necessary to have cooperation between sectors and sanitation stakeholders towards the citizens through the triggering carried out by cross-sectors.

Community-Based Total Sanitation

STBM contained in the kepmenkes emphasizes the change in community behavior to build basic sanitation facilities by going through sanitation efforts including not indiscriminate defecation, washing hands with soap, managing drinking water and food safely, managing waste by properly managing household waste water safely nationally. The main feature of this approach is the absence of subsidies to infrastructure (family latrines), and not specifying latrines that will be built by the community. Basically this STBM program is "empowerment" and "does not talk about the issue of subsidies". That is, the community that is used as a "teacher" by not



providing subsidies at all (Kepmenkes RI No.852 / Menkes / SK / IX / 2008).

Community Based Total Sanitation (STBM) is an approach, strategy and program to change higine behavior and sanitation through community empowerment by triggering methods. Higine and sanitation behaviors in question include not defecating indiscriminately, washing hands with soap, managing inum water and safe food, managing samoah properly and managing household liquid waste safely. The sheen is a pillar of STBM. These five pillars are a matter of activity but it is necessary to prioritize which pillars are most urgent. Priority based on criteria (1) The extent of the consequences (impacts) caused by the behavior, (2) The ability of masayarakt to overcome, (3) The urgency to be addressed (4) Urgency, the consequences that will arise if the problem is not immediately addressed (Minister of Health of the Republic of Indonesia, 2018)

The method used by STBM is the triggering method. This method of triggering is carried out by a team of facilitators by triggering the community in the community first to improve sanitation facilities so that the goal is achieved in terms of strengthening the culture of clean and healthy behavior in the community and preventing environmentally free diseases. Factors that must be triggered by other anatra disgust, shame, fear of pain, aspects of religion, privacy and poverty. After the peivuan factor was carried out, the committee was completed in the community. The committee was set up so that the action plan of the triggered community could run well. In addition, monitoring from the facilitator team must also be applied. Activities continue to be carried out until environmental conditions are achieved free of large water indiscriminately (ODF /Open Defection Free) (Directorate General of PP and PL 2011).

The implementation of activities according to Lawrence Green theory can be seen from the behavior of officers in carrying out their duties to be able to achieve the success of the program, namely seen from (1) Predisposition Factor consisting of elements of knowledge, attitude, trust in value and perception. (2) The reinforcing factor consisting of the elements of supervision, the role of cadres, religious leaders and community leaders. (3) Possible factors consisting of infrastructure elements, resources, policies, and training. (Green, 2000)

Financing in the implementation of STBM in the guidelines for the technical implementation of STBM (2012:30), In general, the principle of financing the STBM approach is directed to explore and encourage the existing potentials of the relevant sector and existing resources in the community, including the potential of collective social activities in the community such as gotong royong to realize public access to the facilities of all pillars. Adequate, stable and sustainable financing plays an important role in the implementation of STBM approach. Budget sources can be obtained through government and non-government funds used for socialization activities, capacity building, operational support of regional coverage, promotion and other software activities in an effort to support the development of STBM approach.

The purpose of monitoring and evaluating STBM program is to be able to measure



changes in program achievement and identify learning that can be learned during implementation. Information management system from the monitoring results to be developed and instituted in local government agencies at least meet the principles of diabtaranya, the community is important to be involved in monitoring progress and evaluating the impact, together with local governments and also accurately, which is intended is that the information submitted must use the correct, appropriate and accountable data

Stakeholder Role

Role is a concept of what individuals can do that is important for the social structure of society, the role includes norms developed with the position or place of a person in society, the role in this sense is a series of rules that guide a person in community life (Soekanto, 1990). Another opinion is that the role is a series of disorderly behaviors, arising from a particular position. The role of answering the question of what a person actually does in carrying out his obligations. In fact the role arises because one understands that he cannot work alone (Thoha, 2002)

The function of the government in relation to empowerment is to direct the independence of the community and carry out development for the creation of prosperity, not necessarily charged by the community. There needs to be an optimal and in-depth role of the government to build the community, the role of the government referred to by Rashid in (Labolo & Hamka, 2012) among others as facilitators, regulators and dynatators

The government as a regulator is preparing the direction to balance the implementation of development through the issuance of regulations. As a regulator, the government provides basic reference to the community as an instrument to regulate all activities of empowerment

The role of the government as a dynamator is to drive community participation in case of constraints in the development process to encourage and maintain the dynamics of regional development. The government plays a role through providing guidance and direction intensively and effectively to the community. Usually the provision of guidance is realized through extension teams and certain bodies to provide training

The government as a facilitator is creating conditions conducive to the implementation of regional development. As a facilitator, the government is engaged in mentoring through training, education and skills improvement as well as in the field of funding or desecration to empowered communities. The role of the government is all actions and policies carried out by the local government in carrying out its duties, authorities and obligations in this case are all actions and policies carried out by the village government in providing assistance to the STBM program involving community participation and financial support from the business sector as well as NGOs / NGOs considering that the principle of the STBM program is the absence of subsidies from the central government. Therefore, the involvement of three components ranging from the village government, business sector and community becomes very important so as to accelerate the construction of quality



basic sanitation facilities for the community itself.

It is the responsibility of the government as an organization that has a community mandate to address these basic needs, including the local government as a party that directly interacts with the villagers. Given that the stbm principle is no subsidy for the construction of basic sanitation facilities for households or individuals, the government is required to be able to manage resources effectively and efficiently through the role of the village government related to its function in community empowerment, namely as a regulator, dynamator and facilitator. Through empowerment, it is expected that there is a public awareness in behaving in maintaining health and being able to encourage the construction of basic sanitation facilities of the community. STBM consists of five pillars, namely stop defecation arbitrarily (BABS)

STBM in Palapa Health Center is still on the first pillar. But as a program consisting of five pillars, other pillars in this program must also get attention for the government to be implemented so as to produce output in accordance with the objectives of the program, namely menicptakan ODF village. Therefore, the importance of the role of the government in this case the village government, to improve the quality of STBM program in the village of Kaliawi Bandar Lamapung, as well as recognize what factors support and inhibit the achievement of stbm pillars, so as to bring the success of the five pillars of the STBM program

METHOD

The design of the research used in this research is phenomenology As for the strategy used in this research is phenominology because the research is a social phenomenon. Social phenomy is not outside of individuals, but in the form (interpence) of individuals. Poewaondari (2011:32) phenomenology is a research strategy in which researchers identify the nature of the human experience of a particular phenomenon. Crewsell (2012:20) in this process penelti try to describe the symptoms as the symptoms manifest themselves in the experience, meaning researchers dig into the data presented through the experiences of the subject.

Data collection techniques are systematic and standard procedures to obtain the necessary data, data collection techniques by researchers, namely: interviews, observations and documentation Sugiyono (2008:34). through direct questioning with the informant. In addition, by using document studies, namely looking at and researching school documents. Before all that, the researchers conducted observations of participants aimed to complete the required data and to find out the actual condition of the study subjects.

Data analysis in this study using qualitative data analysis method, there are four activities that occur simultaneously, namely: Data Collection, Data Reduction, Data View, and Conclusion / Verification Images. Checking the validity of research data can be done in several steps, following the division of four aspe validity or quality of qualitative research Guba (2001) as stated qualitative terms: credibility, transferability, dependency, and confirmation. Examining the validity of the data,



researchers used credibility. Credibility is also related to the process of writing research findings, in which case researchers need to perform the following criteria: Members examine, extend the research process, peer Q&A, and triangulate data.

RESULTS AND DISCUSSIONS

In the empowerment of the community the government has a responsibility in directing the independence of the community and carrying out development for the creation of prosperity. The development in question is not necessarily charged by the community but there needs to be an optimal and in-depth government role to build the community. But for the government's point of view that it is his duty and responsibility to direct the community in the development process from all fields is no exception in the field of sanitation.

Through the implementation of STBM can be said also as implementor of STBM program in addition to the presence of other stakeholders involved such as health services through health centers, sub-district governments, community empowerment agencies and others. In addition, in the concept of community empowerment remains that the community is the actor and the determinant of development.

1. The role in the regulatory aspect is quite impactable for changes in the behavior of indiscriminate defecation of citizens. But for residents who do not have basic sanitation facilities, it is difficult to comply with the regulation because there is no development cost and is hampered by the availability of leased land and which has land also prohibits people from building communal latrines.

Based on interviews with residents in kalaiwi village that they are not directly involved in supervision and evaluation. With the concept of empowerment that aims to provide awareness that is able to foster the ability of the community to understand and overcome sanitation problems, especially in indiscriminate defecation behavior, of course there is a need for direct community participation in every STBM kegitan. Researchers see the need for regulations that not only regulate the implementation of the first pillar of STBM, but need supervision from the community itself to maintain the environment where they live and regulations that cover all pillars as a step to accelerate changes in people's behavior in sanitation issues. In the relationship between levels of government, the village government has a function as an extension of the government's duties on it. This is certainly an opportunity to create synergy between the levels of government.

2. Efforts to encourage community participation to care about sanitation conditions around them are carried out *by stakeholders* by providing socialization as a dynatator of the importance of clean and healthy living. Such as not throwing large water indiscriminately (the first pillar of STBM) carried out by *the stakeholders* along with sanitarian and stbm teams at the sub-district level through triggering and monitoring activities. In an effort to mobilize the community, it is actually something that the village government should do, especially in some important activities, namely that the community is important to be involved in monitoring progress and evaluating the impact, together with the local government. The findings of the field



data have relevance to what is disclosed.

The provision of guidance is realized through triggering and monitoring activities carried out across sectors of village-level government. The *role of* stakeholders in promoting a clean and healthy lifestyle is assisted by sanitarian health from upt puskesmas, so that it will raise public awareness through triggering methods. However, related to how citizens should maintain clean and healthy living behaviors that are included in the pillars of STBM is not well known by the community. In achieving community-based total sanitation conditions, awareness activities at the triggering become very important because at this stage the conditions that place the community as decision makers and responsible in order to create / increase the capacity of the community to solve various problems related to efforts to improve quality of life, independence, welfare, and ensure its sustainability.

Based on the results of the study, it is known that from the information of all sources from the citizens as the target group of the program, that they do not know how it should be as individuals and communities to apply the principles of behavior in the pillars of STBM. Because, in this problem is also still a lack of public awareness in the attachment of clean environmental and health problems, they masi many who engan for a healthy lifestyle. Through the habits that have been done for a long time become a daily routine and not a taboo thing to do. It is necessary to apply the intended based as the community as decision makers and responsible in order to create / increase the capacity of the community to solve various problems related to efforts to improve quality of life, independence, welfare, and ensure its sustainability.

3. In its role as facilitator, *stakeholders create* conditions conducive to the implementation of development. As facilitators, *stakeholders are* engaged in mentoring through training, education and skills improvement as well as in the field of funding or desecration to empowered communities. With the triggering aims to raise awareness of citizens for how to work themselves, families and the environment free from indiscriminate defecation behavior. At the mentoring stage engaged in training, education and improving the knowledge of the target group, *the role of stakeholders* in managing human resources needs to involve other parties.

Funding / desecration to the community in Kaliawi Village so far there is no special funds given for the problem of sanitation of communal latrines because there are still many residents of Kaliawi Village precisely in Mount Bantahan, still occupying land that has a lease is not private property. Landowners also do not give permission to the community to build septiteng or communal latrines buildings that they have are also semi-permanent. Assistance from the government has its own regulation with clear ownership status and private property because, every anggran issued must be clear including its ownership status. The government also has a home surgery program that works with PUPR that can be submitted by residents themselves to the Perkim office but with private land ownership staust. The local government has also provided public toilets that are built for use by the surrounding communities that do not have communal latrines but, the condition is quite



concerning because of the lack of awareness of the community in the maintenance of public sanitation. There is still a lack of public awareness about the isihan of the surrounding environment because of the habits that have been in place for so long that they are considered not a big problem.

The main factors that influence the success of community empowerment are: the behavior of government bureaucracy, the support of local government bureaucracy to social development, the level of public education, and public access to program information. Some of the research findings have relevance to the theory above, including the pekon government in implementing the STBM program through empowerment by conducting triggering strategies, namely methods / strategies to encourage the public to realize the importance of clean and healthy living behavior

CONCLUSION

This study discusses the total community-based sanitation in kaliawi village of Bandar Lampung. This research uses qualitative method to obtain in-depth information about the role of the principal in the first pillar of STBM Data analysis techniques in this research are used to answer four research questions, including several components of analysis, namely: data reduction, and conclusion drawing. This study identifies the total sanitation of the community on the first pillar, namely stop indiscriminate defecation

- 1. The role of stskeholder in creating the implementation of STBM consists of: triggering the prohibition of babs behavior provides counseling and socialization and waste disposal behavior indiscriminately, can do arisan for communal latrines
- 2. Implementation of STBM, the role of stakeholders is carried out through its role as regulator, dynamator and facilitator. But these three roles have not been carried out continuously and support each other..
- 3. The role of *stakeholders* is more prominent in the regulatory aspects in regulating and conditioning the implementation of the first pillar of STBM. But it has not effectively encouraged the growth of initiatives and self-help for the implementation of STBM pillars.
- 4. Factors supporting and inhibiting the implementation of STBM program in Kaliawi Village: knowledge level, income level, central government support as well as health centers, geographical conditions and community participation in every STBM activity
- 5. The factors inhibiting the success of the STBM program stem from limited access to public information on the program, the lack of involvement of citizens in the mechanism of supervision, public financial problems, problems of land ownership rights with rental status, monitoring and evaluation, limited government budget in encouraging public personal sanitation facilities, and lack of government ability to understand standards of health care behavior in accordance with the five pillars of STBM.



DAFTAR PUSTAKA

- Creswell, J. W. (2014). A concise introduction to mixed methods research. SAGE publications.
- Ministry of Health. (2008). Decree of the Minister of Health of the Republic of Indonesia Number: 129/Menkes /Sk/Ii/2008 concerning Minimum Service Standards of hospitals of the Minister of Health of the Republic of Indonesia. In *Addition To State Glue Number 4355 Supplemental Number Of Government Gazette Number 4400*.
- Director General of PP & PL, K. R. (2011). Indonesia Health Profile 2011. In Ministry of Health Republic of Indonesia.
- Green, L. W. (2000). Health Promotion Planning an Education and Environment. Aproach Se. Toronto: May Field Publising Company Montain View.
- Ministry of Health. (2014). Indonesia Health Profile Year 2013. In *Jakarta: Ministry of Health RI*. https://doi.org/351.770.212 Ind P
- Labolo, M., & Hamka, M. A. (2012). Reconsidering the indirect elections for the head of region, response towards the current direct democration mechanism system in Indonesia. *Asian Social Science*. https://doi.org/10.5539/ass.v8n13p1
- MCA-Indonesia, & Health, K. R. I. (2015). Guidelines for Implementation of Community-Based Total Sanitation. *Millennium Challenge A Count Indonesia*, 21,16.
- Minister of Health of the Republic of Indonesia. (2018). Regulation of the Minister of Health of the Republic of Indonesia Number 4 of 2018 concerning Hospital Obligations and Patient Obligations. *Procedia Computer Science*. https://doi.org/10.15439/2019F121
- Muaja, M. S., Pinontoan, O. R., & Sumampouw, O. J. (2020). The Role of the Government in the Implementation of Community-Based Total Sanitation Program Stop Defecation Indiscriminately. *Indonesian Journal of Public Health and Community Medicine*, 1(3), 28–34.
- Odagiri, M., Muhammad, Z., Cronin, A. A., Gnilo, M. E., Mardikanto, A. K., Umam, K., & Asamou, Y. T. (2017). Enabling factors for sustaining open defecation-free communities in rural Indonesia: A cross-sectional study. *International Journal of Environmental Research and Public Health*. https://doi.org/10.3390/ijerph14121572
- Poerwandari, E. K. (2007). *Qualitative approach to human behavior research*. LPSP3 Faculty of Psychology, University of Indonesia.
- Praptiwi, H. E. (2011). Community-Based Drinking Water and Sanitation Provision Program (PAMSIMAS) in ChangingCommunity Behavior in order to Reduce Diarrhea in Temanggung Regency (in Purwodadi village, Tembarak District, and Bengawan Solo Village). Master Program ILmu Environment.



Soekanto, S. (1990). Sociology An Introduction, Issue IV. In Jakarta, Rajawali Publisher.

Thoha, M. (2002). Organizational Behavior:Basic Concepts And Applications. In *Jakarta: Raja Grafindo Persada*. https://doi.org/10.1017/CBO9781107415324.004

World Health Statistics - Monitoring Health For The SDGs. (2016). In *The World Health Organization*. World Health Organization. https://doi.org/10.1017/CBO9781107415324.004