



Implementation and Utilization of Family Latrines in Allu Hamlet, Minasa Baji Village, Bantimurung Sub-district, Maros Regency

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Abstract

Based on data obtained from local agencies, it was recorded that there were 155 family heads in Allu Hamlet, Minasa Baji Village, Bantimurung District, Maros Regency, but only 60% of family heads had family latrines that met the requirements or health standards, thus there were still 40% of family heads who did not have family latrines that met the requirements, this could be a big problem if not immediately addressed, because it could be the cause of environmental pollution which in turn could cause various diseases. The purpose of the study was to determine the utilization of family latrines in Allu Hamlet, Minasabaji Village, Bantimurung District, Maros Regency. This type of research is "Descriptive" research to determine the utilization of family latrines. Then the following conclusions can be drawn: 1). Respondents with less knowledge have a greater chance of not utilizing a qualified family latrine, namely out of 33 respondents with less knowledge there are 27 who do not utilize a qualified family latrine. 2). Respondents with poor attitudes have a greater chance of not utilizing qualified family latrines, namely out of 37 respondents with poor attitudes there are 25 who do not utilize qualified family latrines. 3). Respondents with less income have a greater chance of not utilizing eligible family latrines, namely out of 26 respondents with less income there are 17 who do not use eligible family latrines.

Keywords: Implementation, Utilization, Family Latrines in Allu Hamlet

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1. Introduction

A latrine is one of the basic sanitation facilities needed in every home to support the health of its inhabitants as a human waste disposal facility, which consists of a squat or seat with a gooseneck or without a gooseneck equipped with a sewage collection unit and water for cleaning it (Proverawati, 2012).

One of the efforts to improve the degree of public health is the existence of environmental health facilities that meet health requirements, including the availability of family latrines (Junaidi Herman, 2002). The absence of family latrines, or the unavailability of qualified family latrines in an area, is caused by several things such as the lack of knowledge of residents, about the benefits that will be felt if they have qualified family latrines, the second reason is the lack of income or economic factors, because it takes large funds to make qualified family latrines.

Latrines are very useful for humans and are part of human life, because latrines can prevent the breeding of various diseases caused by human feces that are not managed properly. On the other hand, if the disposal of feces is not good and haphazard, it can result in contamination of water, soil, or become a source of infection, and will bring danger to health, because diseases classified as water borne diseases such as diarrhea, cholera, and skin will easily outbreak (Chandra, 2007).

The utilization of family latrines is strongly influenced by the level of knowledge and habits of the community. The goal of the JAGA (family latrine) program is not to dispose of feces in the open but to build latrines for oneself and one's family. A good use of latrines is that the incoming feces should be flushed with enough water, this is always done after defecating so that the feces are no longer visible. According to Ehler and Steel (2000), latrines should not be located less than 10 meters from the source of drinking water. If the soil is limestone or clay, the minimum distance is 15 meters, because of the possibility of cracks in the soil, so that bacteria can move freely in the soil through the cracks. In addition, for areas where the land is sloping, the latrine should be located at a lower level than the drinking water source.

2. Research Method

This type of research is "Descriptive" research to determine the utilization of family latrines in Allu Hamlet, Minasa Baji Village, Bantimurung District, Maros Regency. In this study, the population was all heads of families in Allu Hamlet, Minasa Baji Village, Bantimurung Subdistrict, Maros Regency, totaling 155 heads of families. Data processing





was carried out by electronic means using the SPSS Version 16.0 computer program and presented in tabular form and accompanied by explanations.

3. Results And Discussions

a. Result

This research was conducted in allu hamlet, minasabaji village, bantimurung sub-district, maros district.

Respondents who were interviewed were the Heads of Households in the research area as many as 61 people.

1. Characteristics of Respondents

a. Age Group

Table 1
Distribution of Respondents by Age Group

Age Group (Year)	Total	Persen (%)
34 – 37	4	6.5
38 – 41	7	11.4
42 – 45	6	9.8
46 – 49	1	1.6
50 – 53	8	13.1
54 – 57	11	18.0
58 – 61	9	14.7
62 – 65	7	11.4
66 – 69	5	8.1
≥ 70	3	4.9
Total	61	100.0

Table 1 shows that the highest age group was in the age group (45-57 years) as many as 11 people (18.0%) and the lowest age group was at the age (≥ 70 years) as many as 3 people (4.9%).

b. Occupation of Respondents

Table 2
Distribution of Respondents by Occupation

Type of Work	Total	Persen (%)
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Civil Servant	3	4.9
Private	21	34.4
Farmer	22	36.1
Motorcycle taxi driver	15	24.6
Total	61	100

Table 2 shows that respondents with jobs as farmers were more numerous, namely, 22 people (36.1%) and the least were respondents with jobs as civil servants, namely, 3 people (4.9%).

2. Characteristics of research variables

a. Univariate Analysis

1) Knowledge Level

Table 3
Distribution of Respondents According to the Level of Knowledge in Allu Hamlet
Minasa Baji Village, Bantimurung District, Maros

Knowledge Level	Total	Persen (%)
Enough	28	45,9
Less	33	54,1
Total	61	100

Based on table 3, it shows that respondents who have sufficient knowledge are 28 people (45.9%).

2) Attitude

Table 4
Distribution of Respondents According to Attitudes in Allu Hamlet
Minasa Baji Village, Bantimurung Sub-District, Maros Regency

Attitude	Total	Persen (%)
Enough	24	39,3
Less	37	60,7
Total	61	100

Based on table 4, it shows that respondents who have a moderate attitude are 24 people (39.3%) and a poor attitude as many as 37 people (60.7%).

3) Income Level

Table 5
Distribution of Respondents According to Income Level in allu Hamlet
Minasa Baji village, Kac. Bantimurung Kab. Maros

Income Level	Total	Persen (%)
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Enough	35	57,4
Less	26	42,6
Total	61	100

Based on table 5 shows that respondents who have sufficient income are 35 (57.4%) and less income as many as 26 people (42.6%).

4) JAGA Location

Table 6

Distribution of Respondents According to JAGA Utilization in Allu Hamlet
Minasa Baji Village, Bantimurung Sub-district, Maros Regency

JAGA Utilization	Total	Persen (%)
Utilizing JAGA is eligible	19	31.1
Not Utilizing JAGA Eligible	42	68.9
Total	61	100

Based on table 6, it shows that 19 (31.1%) respondents who use JAGA meet the requirements, while 42 (68.9%) respondents who do not use JAGA meet the requirements.

b. Bivariate Analysis

1) JAGA Utilization Based on Knowledge

Table 7

Distribution of JAGA Utilization Based on Knowledge in Allu Hamlet,
Minasa Baji Village, Bantimurung District, Maros.

Knowledge	JAGA Utilization		Total
	Utilizing JAGA is eligible	Not Utilizing JAGA Eligible	
Enough	13	15	28
Less	6	27	33
Total	19	42	61

Table 7 shows that based on the level of knowledge, out of 28 respondents with sufficient knowledge who utilize family latrines meet the requirements as many as 13 people while out of 33 respondents with less knowledge who utilize family latrines meet the requirements as many as 6 people.

2) JAGA Utilization Based on Attitude

Table 8

Distribution of JAGA Utilization Based on Attitude in Allu Hamlet
Minasa Baji Village, Bantimurung Sub-district, Maros Regency





Sikap	JAGA Utilization		Jumlah
	Utilizing JAGA is eligible	Not Utilizing JAGA Eligible	
Enough	7	17	24
Less	12	25	37
Total	19	42	61

Table 8 shows that based on attitudes, out of 24 respondents with sufficient attitudes who utilized family latrines met the requirements as many as 7 people while out of 37 respondents with poor attitudes who utilized family latrines met the requirements as many as 12 people.

b. Discussion

1) Utilization of Family Latrines Based on Knowledge

Based on the results of the study in table 3 in general, it shows that respondents who have sufficient knowledge are 28 people (45.9%) and less knowledge as many as 33 people (54.1%), thus the number of respondents who have sufficient and less knowledge is almost the same. The knowledge they get is not in the form of formal education such as in schools but they learn by listening to news on the radio, reading newspapers, or counseling from the local health center. The results of the cross tabulation show that based on the level of knowledge, out of 28 respondents with sufficient knowledge who utilize family latrines meet the requirements as many as 13 people while out of 33 respondents with less knowledge who utilize family latrines meet the requirements as many as 6 people.

It can be said that almost all respondents who have sufficient knowledge have used family latrines that meet the requirements, although there are still respondents with sufficient knowledge but have not used JAGA to meet the requirements, in this study there are still 15 respondents who do not use family latrines that meet the requirements, but have sufficient knowledge, this can happen because everyone who has knowledge about something, is not certain to be able to carry it out or have a positive attitude towards it, therefore knowledge alone is not enough but it also needs to be realized in the form of attitudes or actions which of course come from the awareness of each person to carry it out. Based on direct interviews with respondents, one of the reasons is that they do not have the money to make a JAGA that meets the requirements, they think that many household needs are very urgent and important, so sometimes their income feels insufficient. A community will adopt and utilize facilities if they know the benefits of these facilities for their interests, in this case sufficient knowledge is needed to know this.





2) Utilization of Qualified Family Latrines Based on Attitude

Based on the results of the study in table 4, it shows that respondents who have sufficient knowledge are 24 people (39.3%) and attitudes are less as many as 37 people (60.7%). In general, it can be said that in the study area most of the population has a poor attitude towards the utilization of eligible JAGA. This is not only due to lack of knowledge but also supported by the lack of monthly income of each family head, because most of the family heads in Allu Hamlet, Minasa Baji Village, Kac. Bantimurung Kab. Maros work as farmers and motorcycle taxi drivers, they stated that there is no money to make a JAGA that meets the requirements.

From the results of cross tabulation table 8 shows that based on attitude, out of 24 respondents with sufficient attitude who utilized family latrines met the requirements as many as 7 people while out of 37 respondents with less attitude who utilized family latrines met the requirements as many as 12 people. It can be seen that a lack of attitude greatly influences the respondent's decision to use a qualified JAGA. However, in the study area there were still 12 respondents with insufficient attitudes but they utilized eligible JAGA, while there were 17 respondents who had sufficient attitudes but they did not utilize eligible JAGA, they reasoned that it cost a lot of money to make JAGA.

3) Utilization of Qualified Family Latrines Based on Income.

Based on the results of the study table 5 shows that respondents who have sufficient income are 35 (57.4%) and less income as many as 26 people (42.6%). It can be explained that respondents with sufficient income are almost the same as respondents with less income. The results of the cross tabulation explained in table 9 show that based on income, out of 35 respondents with sufficient income who utilize family latrines meet the requirements as many as 14 respondents while out of 26 respondents with less income there are 5 respondents who utilize JAGA meet the requirements. This shows that the most basic reason for respondents in this study who did not use eligible JAGA was due to lack of income. In the study there were 21 respondents who had sufficient income but did not utilize a qualified JAGA, this could be because they did not have sufficient knowledge about qualified JAGA and its benefits, there were also those who argued that they often spent their monthly income to shop for household needs that they considered far more important, such as shopping for clothes, or household furniture. With the fulfillment of family latrine facilities that meet health requirements, it will





minimize cases of environment-based diseases, especially cases related to family latrines. Conversely, if there are still many household heads who do not have family latrine facilities, it will provide greater opportunities for the breeding of environmentally-based disease vectors.

4. Conclusion

According to the results of the research that has been conducted on the utilization of family latrines in Allu Hamlet, Minasa Baji Village, Bantimurung Kec. Maros, the following conclusions can be drawn:

1. Respondents with less knowledge have a greater chance of not utilizing a qualified family latrine, namely out of 33 respondents with less knowledge there are 27 who do not utilize a qualified family latrine.
2. Respondents with poor attitudes have a greater chance of not utilizing qualified family latrines, namely out of 37 respondents with poor attitudes there are 25 who do not utilize qualified family latrines.
3. Respondents with less income have a greater chance of not utilizing eligible family latrines, namely out of 26 respondents with less income there are 17 who do not utilize eligible family latrines.

5. Compliance with ethical standards

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Disclosure of conflict of interest

This research collaboration is a positive thing for all researchers so that conflicts, problems and others are absolutely no problem for all writers.

Statement of informed consent

Every action we take as authors is a mutual agreement or consent.

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