

## Literature Review: Factors Related to the Implementation of School Health Programs (UKS) in Indonesia

Yuniar Kusuma Nugrahani<sup>1</sup>, Ayu Khoirotul Umaroh<sup>2\*</sup>

<sup>1,2</sup>Public Health Study Program, Faculty of Health Sciences, Universitas Muhammadiyah Surakarta

**Author's Email Correspondence (\*): [ayu.khoirotul@ums.ac.id](mailto:ayu.khoirotul@ums.ac.id)  
(+6283842454023)**

### ABSTRACT

*In general, the implementation of the School Health Program is hampered by low school awareness, lack of commitment, weak organization, lack of infrastructure, and the absence of a special budget. School Health Program (UKS) is a cross-program and sectoral effort to improve students' healthy living skills and behaviors in schools. The purpose of this article is to identify factors related to the implementation of the School Health Program. The method used is literature review on articles published online with Google Scholar, Science Direct, and PubMed databases. The results obtained were 5 articles that were studied showing several studies that knowledge has a significant relationship with the use of School Health Programs ( $p < 0.05$ ), although some are not related ( $p > 0.05$ ). Attitudes affect student and educator participation, but do not always have a direct effect on implementation. Competent human resources play an important role with significant relationships ( $p = 0.000$ ). Facilities and infrastructure are consistent with the implementation of the School Health Program, where adequate facilities increase the effectiveness of school health services. The conclusion of this paper is that the success of School Health Program is influenced by a combination of individual factors (knowledge and attitude) and structural factors (human resources and infrastructure). Comprehensive interventions are needed to improve the effectiveness of School Health Programs in schools.*

**Keywords :** UKS Implementation; Knowledge; Attitude; Human Resources; Facilities and Infrastructure

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## INTRODUCTION

The world's school-age population (6 – 11 years old) is estimated to reach 820 million in 2023 (1). According to the World Health Organization (WHO), about 13% of adolescents aged 10–19 years in the world have mental disorders. In some countries, the prevalence of mental disorders in children and adolescents is quite high, such as in Iran at 22.3%, Pakistan at 34.4%, and Tajikistan at 37.6% (2). In Indonesia, the 2023 Indonesian Health Survey (SKI) reported that 11% of children aged 5-12 years are underweight, while 19.7% are overweight or obese. Most children have poor eating habits, with 97% consuming less than five servings of fruits and vegetables per day, and 55% consuming sugary drinks daily. Physical activity is also low, with only 54% of 10-19-year-olds exercising for less than 30 minutes per day (3).

One of the strategic efforts to improve the quality of the Indonesian population through education and health. School-age children, who are between 7 and 19 years old, are the young generation who are valuable assets for the future of the nation. This group will be the productive age group during the demographic bonus in 2035 (4). More than 2.3 billion school-age children spend a third of their time in school. For many school-age children, school is the first and most accessible point of contact with health care (5). School health programs are an important element in the health care system, especially in developing countries. To maintain the health of school-age children and support their educational attainment. Through a series of coordinated activities, the program aims to improve the understanding, maintenance, and quality of school students' health (6).

Although most countries have School Health Program, their implementation is often not based on strong evidence or is less efficient in their implementation (7). In general, the implementation of School Health Programs is hampered by low school awareness, lack of commitment, weak organization, lack of infrastructure, and the absence of a special budget

(8). In this case, there is research related to the implementation of School Health Programs conducted at SMP Negeri 1 Pangkalan Kuras, Pelalawan Regency, explaining that the school has not been able to organize the School Health Program properly, there has not been good cooperation with related parties, and the availability of facilities and infrastructure is not optimal (9).

School-age children need adequate health services, one of which can be done through the School Health program. Decree of the Minister of Health Number 828/MENKES/SK/IX/2008 explains that the School Health Programs is an effort across programs and sectors to improve the ability and healthy living behavior of students in schools (10). The purpose of School Health Program is to improve the quality of education and learning achievement through clean living behaviors, both physical and mental. This supports the optimal growth and independence of students to become quality individuals. So, to realize the School Health Program, competent human resources are needed and have good knowledge (4). Directly, School Health Programs have an influence on improving student health, and students play a major role in the broader health degree improvement program successfully. Therefore, the School Health Programs in this case can be used as a forum for the implementation of various health programs, including: child and maternal health, nutrition, eradication of infectious diseases (P2M), environmental health, treatment, and health promotion (11).

The School Health Program focuses on three main programs, namely health education, health services, and fostering a healthy school environment. If run optimally, the School Health program can improve health and reduce the number of student illnesses. School Health Programs have a role in shaping healthy behavior of students in particular and all school residents in general in a sustainable manner (12). Effective School Health Program Activities are carried out with a joint commitment between schools, parents, the community, and policymakers in a sustainable and sustainable manner (13).

This review aims to identify the existing literature review related to factors related to the implementation of the School Health Program. The factors that will be discussed are knowledge, attitudes, human resources and facilities and infrastructure. The data source used comes from the results of the review of related articles. This review is important because it can be desired to know the understanding of the level of knowledge and attitudes of stakeholders, such as teachers and students, it is important to assess the extent to which the program is understood and implemented. In addition, the limitation of competent human resources and the completeness of infrastructure facilities are crucial factors in determining the effectiveness of the implementation of School Health Programs. Therefore, this research is very necessary to identify obstacles and formulate more optimal strategies in increasing the success of the School Health Programs.

## METHOD

The research used in this study is *a literature review* using the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-analyses) method. The topic of this study is the factors related to the implementation of the School Health Programs. The keywords used use the Boolean Search strategy, which is a type of search to combine keywords with the operators used. The "DAN" and "AND" operators are placed between the keywords used to limit search results. While the "ATAU" operator "OR" is used to expand the search results.

Literature review searches were conducted using Google Scholar, ScienceDirect and PubMed databases. Databased was chosen because it provides broad access to quality scientific literature. Google Scholar covers a wide range of disciplines and diverse academic resources. ScienceDirect offers trusted journals with high peer-review standards, ensuring the validity and credibility of the information. PubMed focuses on the field of health and medicine. Keywords used to find literature in Indonesian are "*Program Usaha Kesehatan Sekolah*" ATAU "*Sekolah Promosi Kesehatan*" DAN "*Implementasi*" ATAU "*Pelaksanaan*" ATAU

*“Penerapan” DAN “Pengetahuan” DAN “Sikap” DAN “Sarana dan Prasarana” ATAU “Fasilitas” DAN “Sumber Daya Manusia”.* While the search in English is "School Health Business Program" OR "Health Promoting School" OR "School Health Services" AND "Implementation" OR "Implementation" OR "Application" AND "Knowledge" AND "Attitudes" AND "Facilities and Infrastructure" AND "Human Resources".

Article search is carried out with an approach Population, Intervention, Comparison, dan Outcome (PICO). The population of this study is school-age children, teachers, and health workers in the school environment with Intervention, namely knowledge, attitudes, human resources, and facilities and infrastructure with the Outcome, namely the implementation of the School Health Program. In this study, it did not identify the Comparison.

The inclusion criteria of this study include 1) articles using Indonesian or English, 2) accessible in the form of complete and free text, 3) research published between 2015 – 2024, 4) quantitative studies with a cross-sectional research design approach. Meanwhile, the exclusion criteria include 1) inconsistency between the title and the content of the article, 2) the article does not discuss variables such as knowledge, attitudes, human resources and facilities and infrastructure. After conducting the search process, the articles are grouped according to the inclusion and exclusion criteria that have been determined.

In this search, there are 5 selected articles. The article was then assessed with a critical appraisal checklist consisting of 8 questions. The results of the critical appraisal show that the first article got a score of yes 5 and unclear 3, the second article got a score of yes 4, no 2, and unclear 2, the third article got a score of yes 4, no 2, and unclear 2, the fourth article got a score of yes 4, no 2, and Unclear 2, the fifth article got a score of Yes 4, No 2, and Unclear 2. So that the five articles are suitable to be used as study materials in research. The literature selection process uses the following flow chart:



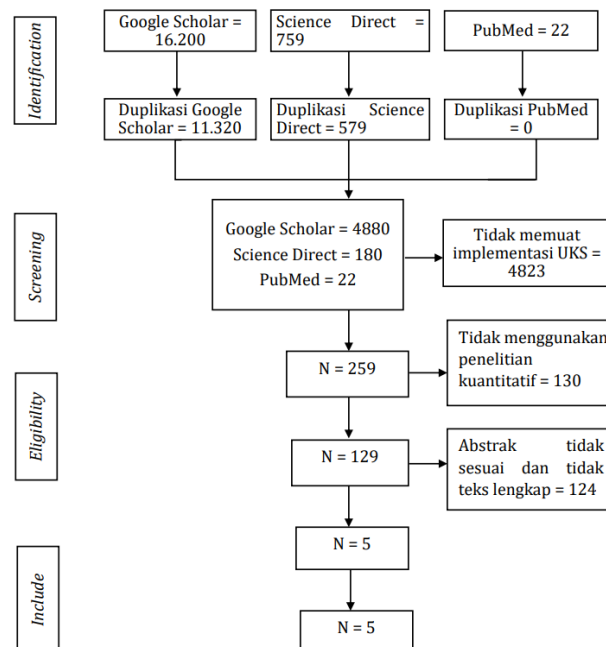


Figure 1. PRISMA flowchart

## RESULT

The results of the study showed that 3 articles discussed the implementation of School Health Programs and 2 articles discussed the use of School Health Programs.

**Table 1**  
**Article Review Results**

Num ber	Author and Year	Title	Sample	Research Results	Conclusion
1.	Novriani, B., Iqbal, W., & Kasra, K. (2023)	<i>Faktor yang Berhubungan Dengan Pemanfaatan Usaha Kesehatan Sekolah (UKS) Oleh Siswa SMA</i>	90 of the students of Adabiah 2 Padang High School class X and XII	There was a significant relationship between attitude and the use of School Health Program ( $p=0.005$ ), motivation ( $p=0.000$ ; $OR=12.6$ ), facilities	There are factors related to the use of School Health Program, namely attitude, facilities and infrastructure, and other factors, namely motivation.

		<i>Adabiah 2 Padang</i>		and infrastructure (p=0.000), there was no relationship between knowledge and the use of School Health Program (p=0.063)	There is no relationship between knowledge and the use of School Health Program. (14)
2.	Utami, P., Chotimah, I., & Parinduri, S. K. (2021)	<i>Faktor yang Berhubungan dengan Pelaksanaan Usaha Kesehatan Sekolah (UKS) Tingkat SD/MI di Wilayah Kerja Puskesmas Karanggen Kabupaten Bogor Tahun 2020</i>	Principals of SD/MI schools in the Kranggan Health Center Working Area and UKS teachers from 18 schools	The results of the bivariate analysis test showed that there was no relationship between knowledge and the implementation of School Health Program (P=0.183), attitude (p=0.264), but there was a relationship between facilities and infrastructure (p=0.026), human resources (p=0.000)	There are factors related to the implementation of School Health Program, namely facilities and infrastructure and human resources. The knowledge and attitude factors have no relationship with the implementation of School Health Program. (15)
3.	Tomasoa, J. (2018)	<i>Hubungan Pengetahuan dan Sikap Siswa dengan Pemanfaatan Pelayanan Usaha Kesehatan Sekolah (UKS) di SDN. 2 Saparua Kabupaten Maluku Tengah</i>	86 students at SDN 2 Saparua, Central Maluku Regency	The test results showed that there was a relationship between knowledge and the use of School Health Program (p=0.004), attitude (p=0.002)	There is a relationship between students' knowledge and attitudes and the use of School Health Program at SDN 2 Saparua.
4.	Wijaya, N. H. (2024)	<i>Pengaruh Pengetahuan dan Sarana</i>	50 students of SDN Plakaran	The results of the study showed that the knowledge factor	The relationship between knowledge factors

		<i>Prasarana terhadap Pelaksanaan Usaha Kesehatan Sekolah (UKS) di SD Negeri Plakaran Bantul Yogyakarta 2024</i>	Bantul Yogyakarta	had a value (p=0.006) and the facilities and infrastructure factor (p=0.047) showed that there was an influence on the implementation of School Health Program	and infrastructure facilities shows that there is an influence in the implementation of School Health Program at SDN Plakaran. (16)
5.	Farihah, R., Nasution, A., & Nasution, A. S. (2022).	<i>Faktor Faktor yang Mempengaruhi Pelaksanaan Usaha Kesehatan Sekolah (UKS) dengan PHBS di SMPN 12 Kota Bogor</i>	66 grade VIII students at SMPN 12 Bogor City	There is an influence between knowledge and the implementation of School Health Program (p=0.010; OR= 4.667) facilities and infrastructure (p=0.001; OR= 7.286). There was a relationship between the implementation of UKS and PHBS (p=0.01; OR= 38.88)	There are knowledge, facilities and infrastructure factors that can affect the implementation of School Health Program. (17)

## DISCUSSION

The implementation of the School Health Program has an important role in improving the healthy living ability and health degree of students in creating a healthy environment that allows for harmonious and efficient growth and development to produce Indonesian students who are physically healthy, mentally, and spiritually (18).

Based on the results of the literature review, several factors related to the implementation of the School Health Program in various schools were found including knowledge, attitudes, human resources, motivation, and facilities and infrastructure. Of



these factors, the factors that will be discussed by the researcher are knowledge, attitudes, human resources, and facilities and infrastructure.

### **Knowledge factors for the implementation of School Health Program**

Knowledge plays an important role because it can influence a person's behavior in daily life. Knowledge is needed by school-age children to support the implementation of healthy behaviors both at school and at home (19). There is 1 study related to the knowledge factor on the use of School Health Program services, namely Tomasoa (2018) showing a relationship between knowledge and the use of School Health Program services. As many as 75.6% of students who make good use of School Health Program, have good knowledge. There are 2 research articles where knowledge is related to the implementation of School Health Program, namely Wijaya (2024) in schools students who carry out School Health Program have good knowledge, as many as 45.9% of students in the category know how to carry out School Health Program well, have good knowledge (16). Farihah (2022) research shows that in schools students who carry out School Health Program have good knowledge, as many as 26.7% of students carry out School Health Programs well and have good knowledge (17).

Knowledge has an important role in the utilization or implementation of School Health Program, because with knowledge, students can form attitudes that then encourage actions in increasing the use of health services, especially School Health Programs. The use and implementation of a good School Health Program can be supported by providing appropriate information about School Health Program services and healthy ways of living to increase student knowledge (19).

Meanwhile, there is 1 study that is not related to knowledge and the use of School Health Program, namely Novriani (2023) as many as 57.5% of students have high knowledge in utilizing School Health Program (14). There is 1 study that is not related to

knowledge and the implementation of School Health Programs, namely Utami (2021). In schools, the majority of educators have good knowledge of the implementation of School Health Program, as many as 56.5% of educators have good knowledge, but not many carry out School Health Programs well (15).

The implementation of the School Health Program can run effectively if the health knowledge provided can be applied in real action. Therefore, the implementation of a good School Health Program must be supported by the delivery of appropriate and applicable health knowledge. Teachers' knowledge of School Health Program does not always affect its implementation in schools. To improve the implementation of School Health Program, health workers need to provide approaches and education so that teachers with good knowledge are more supportive of the program, while teachers with less knowledge can understand the importance of School Health Program and improve their understanding (20).

### **Attitude factors towards the implementation of School Health Program**

Attitude is an internal response that is not directly visible, but plays an important role in shaping behavior. Students' attitudes towards School Health Program can influence their healthy behaviors, which ultimately determines the level of health and quality of future generations (21). There are 2 studies related to attitude factors towards the use of School Health Program services. In the research of Novriani, et al (2023) that students have a positive attitude towards the use of School Health Program, as many as 58.5% of students who make good use of School Health Programs, have a positive attitude (14). Research by Tomasoa, J. (2018) that students have a positive attitude towards the use of School Health Program services, as many as 74.4% of students who make good use of School Health Program services and have a positive attitude. Attitude is a form of behavior that cannot be seen directly by the eye, but is formed through experience and will influence future

behavior (22). Indirect attitudes are manifested in the form of actions, but require additional factors such as facilities and support from other parties. Behavior in utilizing School Health Programs can be influenced by attitudes, which are based on the concept of Interpersonal Communication (KAP). Before students use School Health Program, they first have a certain attitude (23).

There is 1 study that is not related to the attitude and implementation of School Health Program, namely the research of Utami P., et al (2021). The majority of schools have a positive attitude towards the implementation of School Health Program, as many as 57.7% who implement School Health Programs well, have a positive attitude. However, having a positive attitude does not necessarily mean that the implementation of School Health Programs can run without the support of the health center (15).

The attitude of teachers is not one of the influences on the implementation of the School Health Program, the support of the principal, awards for School Health Programs coaching teachers, and the availability of facilities and infrastructure also play an important role. Without this support, the implementation of the School Health Programs is still at risk of not running optimally. Collaboration between teachers, students, and other components, such as the little doctor, is necessary to respond effectively to teachers' positive attitudes (24).

### **Human Resource Factors for the Implementation of School Health Programs**

Quality human resources are the main key in building the reputation of individuals, organizations, and countries. Therefore, improving the quality of human resources, especially in the school environment, is an important challenge that every country must face (25). There is 1 study related to the human resource factor for the implementation of School Health Program, namely Utami, et al (2021) showing the relationship between human resources and the implementation of School Health Program. As many as 81.8% of people

who carry out School Health Program well, have good human resources (15). The implementation of School Health Program requires competent human resources in the health sector and adequate financial support. Cooperation with health workers from health centers and funding from the government, community, and other sectors needs to be optimized so that the School Health Program can run well (26).

### **Facilities and infrastructure factors for the implementation of School Health Program**

Facilities and infrastructure are important factors in the success of the School Health Program in schools. The availability of adequate facilities supports the effectiveness of activities and ensures that the program runs as planned, so that it becomes the main resource in supporting the success of the School Health Program (27). There is 1 study related to facilities and infrastructure factors to the use of School Health Program services, namely Novriani, B, et al (2023) showing the relationship between facilities and infrastructure and the use of School Health Program services. As many as 66% make good use of School Health Programs services, have optimal use of facilities and infrastructure (14). There are 3 research articles where facilities and infrastructure are related to the implementation of School Health Program, namely Utami, P., et al (2021), as many as 63.6% have very good facilities and infrastructure, have good School Health Program implementation (15). Wijaya 's research (2024) shows that as many as 41.1% have complete facilities and infrastructure, implementing School Health Programs well (16). Farihah, R., et al (2022) as many as 27.3% have the availability of good facilities and infrastructure, implementing School Health Program well (17).

The success of school health services is highly dependent on the School Health Program and the availability of supporting infrastructure. These two aspects complement each other, where adequate infrastructure facilities help the implementation of the program, especially in providing first aid or early prevention of injuries and diseases.

Complete facilities also make it easier for teachers, health workers, and students to handle health problems at school. The optimal use of facilities and infrastructure will provide high results for the use of School Health Program (28).

## CONCLUSIONS AND SUGGESTIONS

Based on the results of the literature review of 5 national articles, it can be concluded that the implementation of the School Health Program is influenced by four main factors including knowledge, attitudes, human resources, and facilities and infrastructure. The results of the research of Tomaso (2018), Wijaya (2024), and Farihah (2022) ( $p=0.004$ ;  $p=0.006$ ;  $p=0.010$ ) show that knowledge has an influence on the implementation of School Health Program. However, Novriani (2023) and Utami (2021) did not find a significant relationship ( $p=0.063$ ;  $p=0.183$ ), indicating the existence of other influencing factors. Student attitudes also play a role, as found by Tomaso (2018) and Novriani (2023) ( $p=0.002$ ;  $p=0.005$ ), but Utami (2021) shows that the positive attitude of educators alone is not enough without the support of facilities and health workers ( $p=0.264$ ). Adequate human resources are proven to be related to the implementation of School Health Program based on Utami (2021) research ( $p=0.000$ ), which emphasizes the role of health workers and coaching teachers. Facilities and infrastructure also play an important role, as evidenced by the research of Novriani (2023), Utami (2021), Wijaya (2024), and Farihah (2022), which shows a significant relationship with the implementation of School Health Program ( $p=0.000$ ;  $p=0.026$ ;  $p=0.047$ ;  $p=0.001$ ). Thus, human resources and infrastructure have the strongest influence, while knowledge and attitudes support increasing students' awareness and motivation in utilizing School Health Programs.



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