Effectiveness Poskestren to Overcome Health Problems in Islamic Boarding School
A Systematic Review

Ulum Mab’uroh, Sulistiawati and Retno Indarwati
1 Faculty of Nursing Universitas Airlangga, Kampus C Mulyorejo, Surabaya, Indonesia
2 Faculty of Medicine, Universitas Airlangga, Kampus C Mulyorejo, Surabaya, Indonesia

Keywords: Poskestren, Islamic Boarding School, Health Problem.

Abstract: Various health problems often occur in boarding schools. Health facility in Islamic boarding school called Poskestren is one of the community based health units that involve in the empowerment of Islamic boarding school community members. Searching articles follows the PICO framework with population was health problems in boarding schools, intervention was poskestren, comparison of boarding school does not have poskestren, and the result of this research is knowledge, attitude, and behavior in facing health problems. Journal article collected through several databases such as Google Scholar, Pubmed, Science Direct, Atlantis Press, Plos One and limited in 2011 until 2017. The inclusion are 1) health problems in Islamic boarding school, 2) the intervention given by poskestren, 3) student in Islamic boarding school (santri) experiencing health problems. Result showed that most of the research explaining that poskestren is one of the health programs in boarding schools that are able to overcome health, able to improve health of the santri, and reduce the costs incurred for treatment. It can be conclude that poskestren can be used as a guideline to improve the health of santri in boarding school, able to overcome health problems in Islamic boarding school, and reduce expenses for medical treatment.

1 BACKGROUND

Islamic boarding school grows and flourishes serve various needs of society, as Indonesian Islamic cultural heritage (Ikhwanudin, 2013). Various health problems occur in Islamic boarding schools for example: abdominal worms, diarrhea, toothache, skin problems including scabies, malnutrition, upper respiratory infections (ISPA) and head lice (Susanto, et.al., 2016).

Karim et al, explained that hyperendemic incidence of scabies in Bangladesh. Prevalence in 2003 as many as 98% of 492 children from 6 Islamic boarding school affected by scabies. This is due to unclean conditions, lack of personal hygiene, no air vents, borrowed clothes and towels. The prevalence of reported scabies in India is 20.4% (Baur, 2013). The prevalence of scabies in Indonesia is highest in the Islamic boarding school cottage community (Nanda et al., 2016).

According to Yusnita et al, 2015, cases related to nutrition are also found in boarding schools such as indigestion (gastritis, diarrhea), obesity, and malnutrition. The application of balance nutrient in Islamic boarding school is a challenge because of the large number of “santri” and different needs.

Pediculosis capitis is also a common disease in boarding schools. Pediculosis of capitis in students in Thailand the prevalence from 12.26% to 29.76% (W. Rassami and M. Soonwera, 2012). Prevalence of pediculosis capitis in Malang Indonesia from preliminary studies on 20 students who alternated bedding suffered pediculosis capitis with 2 students (10%) experienced a second infection of pus and dry skin (Kristiawati et.al, 2017).

Poskestren is one of the community based health units in which poskestren activities also involve the empowerment of Islamic boarding school community members, so that people are able to recognize the health problems faced, plan, and make efforts to solve them. The general purpose of the establishment of poskestren is the realization of a...
healthy Islamic boarding school and care and responsive to health problems in the area of Islamic boarding school (Kemenkes RI, 2013). This research aims to explain the effectiveness of poskestren to overcoming health problems in Islamic boarding school.

2 METHODS

This review begins with searching for journal articles with the PICO framework, with the study population being health problems in Islamic boarding schools, interventions conducted in research are poskestren, comparison of boarding school does not have poskestren and interventions other have poskestren, and the result of this research is knowledge improvement, attitude, and behavior in facing health problems in boarding school. Keywords used are ‘Poskestren, boarding school, health problems in boarding school, health problem in Islamic boarding school’. Journal article submission is done through several databases such as Google Scholar, Pubmed, Science Direct, Atlantis Press, Plos One and this search is limited to start in 2011 until 2017.

From the search results obtained 26 journals, and selected 9 journals which meet inclusion and exclusion criteria. The inclusion criteria in this systematic review are 1) health problems in boarding school, 2) the intervention given by the poskestren, 3) the sample is the santri experiencing health problems. From the selected journal then conducted a review.

3 RESULTS

The result of the journal review on various health problems that exist in boarding school include: research conducted by Nanda M, 2016 about factors that influence the occurrence of dermatitis that is personal hygiene. The cleanliness of the towel and the bed is a very influential factor on the incidence of dermatitis in the Islamic boarding school.

The most common disease incidence in Islamic boarding schools is scabies (25.5%). This is due to the condition of personal hygiene of the less good santri and environmental sanitation is not good (Ardiansyah AA, 2017).

The result of research by Kristiawati, Setyowati R, Rachmawati PD, 2017, shows that knowledge, behavior, environment and health factors also have a significant relationship in preventing Pediculosis Capitis in Islamic boarding school. Health workers at Islamic boarding school lodge are a very influential factor in the prevention of Pediculosis Capitis.

Research conducted by Nanda FD, Murti B, and Dharmawan R (2016) shows that knowledge, myths, finances, are indirectly related to the incidence of scabies. It is also supported by the lack of maintaining personal hygiene in boarding schools.

Prevalence of scabies before intervention 61% in the intervention group and 62% in the control group. After intervention in the form of prevention of scabies and health education. The program demonstrates useful programs and cost effective ways to control scabies in madrasah. After intervention the incidence of scabies decreased in the intervention group by 5% and 50% in the control group (Talukder K et al., 2013).

The results of a study conducted by Susanto T, et al. (2016) show that there is a significant difference in the improvement of knowledge about clean and healthy life behavior related to health education. Health promotion programs in schools provide a positive change in health and its relationship to Islamic knowledge. The level of education also affects the process of receiving information in accordance with the development of the child's age. Schools can develop health education programs to increase students' knowledge of school health.

4 DISCUSSION

Poskestren in facing health problems in Islamic boarding school. Various health problems that often occur in Islamic boarding schools are scabies, dermatitis and pediculosis capitis. Many of these factors affect the event. The most important factor in increasing the occurrence of health problems is the factor of personal hygiene or hygiene that is less awake.

The result of research done by Kristiawati, Setyowati R, Rachmawati PD (2017) indicate that health officer at Islamic boarding school very influence to prevention Pediculosis Capitis in Islamic boarding school. The student who receive responsibility to run poskestren is usually called by the health cadre who is part of the health post at the boarding school (Poskestren).

Ministry of Health has issued about Guidelines for Implementation and Development of Islamic Boarding School Health Posts (Poskestren) and
suggest Poskestren to always live clean free from disease (Kemenkes RI, 2013).

Poskestren is one form of community-based health effort in boarding school environments, with the principle of, by and for the boarding school cottage residents who prioritize promotive, preventive services without ignoring the curative and rehabilitative aspects with the local Puskesmas (Kemenkes, 2013).

Health volunteers perform their duties by visiting each room to assess students who have health problems, room hygiene observation including the bathroom, remind the students to dry towels outside and prohibit the use of towels in turn, maintain personal hygiene, do sports together the santri every Friday, do first aid in the accident, if santri there is sick then taken to the nearest health service facility.

The research that supports the poskestren conducted by Wahyudin U and Arifin H.S. (2015) stated that the socialization of sanitation and the environment through poskestren in the high category, it means they more quickly receive health information that was received by poskestren. They are more inclined to change the habits that originally did not behave clean and healthy to be living clean and healthy.

The results of research conducted by Sanny, 2015, shows that the incidence of scabies in Islamic boarding school who have poskestren 2.3% while in pondok pesantren who have no poskestren of 40.45%. This shows that poskestren have a big influence in overcoming of disease in boarding school.

5 CONCLUSIONS

Most of the research reviewed explaining that poskestren is one of the health program in islamic boarding school which is able to overcome health problems in boarding school, able to improve health status, and reduce expenses for medical treatment.

Summary of research conducted by researcher poskestren is a design that uses observational or intervention, in the form of disease enforcement program, improvement of health degree and health education either through Islamic boarding school who have poskestren or who do not have poskestren.

REFERENCES


Kementrian Kesehatan Republik Indonesia, 2013. Pedoman Pemenuhan Pelayanan Pos Kesehatan Pesantren (Posksten), Jakarta: Depkes RI.


