



IMPLEMENTATION OF HEALTH SCHOOL PROGRAM (UKS) IN ELEMENTARY SCHOOL

Yeny Kusumawati

Stikes Satria Bhakti Nganjuk

Email: yenykusumawati.sbn.ngk@gmail.com

ABSTRACT	Keywords
<p>Background:The Health school program (UKS) is an effort to develop healthy life habits with three main programs which include: health education, health services, and fostering a healthy lifestyle in school. This research describes the implementation of the health school program and determines factors that influence the implementation of UKS. Method: Qualitative research design and descriptive. Determination of informants using purposive sampling. The research subjects included the headmaster, homeroom teachers (I, III, VI), sports teachers, and UKS teachers. The data collection technique was an observation, interviews, and documentation. The validity of the data was checked with the triangulation technique. Qualitative data analysis used an interactive model, that consists of communication, resources, dispositions, and bureaucratic structures. Result: The health school program hasn't been implemented optimally, especially in the resource. The facility for UKS isn't complete and the number is insufficiency. There is no special budget for the health school program's implementation. The supporting factor is communication; there is three health school program that are always communicated to school member. Disposition factor; there is a good understanding of health school program implementers. Bureaucratic structure factor; there is SOP's existence in implementing the health school program. Conclusion: Implementation of health school program has not been maximized, so all factors (communication, resources, dispositions, and bureaucratic structures) need to support this implementation.</p>	<p>Implementation, Health School Program, UKS</p>

INTRODUCTION

One of the welfare factors that must be realized is health, which is a human right. Health school is organized to improve the ability of students to healthy living in a healthy environment so that students can learn, grow, and develop harmoniously and as high as possible to become quality human resources (UU RI, 2009). Health School Program (UKS) are efforts to foster and develop healthy living habits that are carried

out in an integrated manner through three main programs (Trias UKS) which include: health education, health services, and fostering a healthy school environment (Rubrianto, 2020).

Based on the observations of the central UKS Guidance Team, it turns out that the implementation of UKS is still not as expected (Candrawati, 2015). School sanitation conditions also worsen the health status of students. Sanitation of the school

environment, such as the condition of school bathrooms and toilets that are not maintained, so that can cause pollution or contamination of students who are undergoing the teaching and learning process at school. In addition, the behavior of littering also results in the cleanliness of the school environment is not maintained (Tulangow, Ralfi R., Febi Kolibu, 2019). The student is very vulnerable to nutritional and health problems, such as the habit of washing hands with soap, cutting nails, brushing teeth, and littering (Saryono, Dian Rahmawati, 2007).

It is deemed necessary to empower the UKS structure at every level to strengthen the implementation of UKS. To support the implementation of the UKS main program, requires manpower, funding, infrastructure, research, guidance, and UKS development. The UKS team consists of: the central UKS team, the provincial UKS team, the district/city UKS team, and the sub-district UKS team, UKS builder team at school (Nurhayu, Maryam Alifia, 2018). UKS has direct benefits for improving the health of students and has great potential for the success of the wider health promotion program. UKS should be able to improve the ability to live healthily and the health status of students as early as possible.

METHOD

This study employs a qualitative approach with a descriptive research methodology. According to Bogdan and Taylor, the qualitative technique is a research method that generates descriptive information from the person in the form of written or spoken words, as well as recognizable behavior (Moleong, 2013). Using a purposive sampling strategy, identify informants, which the selected informants are the people who are considered to know and understand the problems in this research. Supported by Spradley, the informant

should have criteria that have to be considered: a) the informant has worked for a long time and understands the activities of target research; b) the informant is active in the environment and activities of target research; c) the informant has decent time and chance to be asked for information. Criteria of informants during this research were: 1) willing to be respondents in the research; 2) have activities related to information sources; 3) give information related to research focus; 4) willing to give time or chance to be interviewed, 5) have information about health school program. The informant of this research included the headmaster, homeroom teachers (I, III, VI), sports teachers, and UKS teachers in SDN 1 Mangundikaran Nganjuk.

The research was conducted at SDN 1 Mangundikaran Nganjuk in June 2021. Based on Lofland and Lofland, qualitative research has main data sources that are words and actions, the remainder is additional data like documents et al (Moleong, 2013). Data collection techniques in this research used observation, interviews, and documentation. Observation is an effort to collect empirical phenomena and direct observation to obtain truly accurate data in the place of the research. In this research, interviews used an "interview guide" with the hope the interview could be controlled based on the direction and objectives of the research. The researcher first explains the aims and objectives of this research before conducting the interview. The researcher uses additional questions or probing if the answers from the informants are unclear or too general. So the researcher tries to guide the answer of the informants to be more accurate and all problems of the research were included in the answers. Documentation method is also required in this research to find data about notes, documents, reports, and so on.

The validity of the data was checked with the triangulation technique. The triangulation technique is used to compare the data from one source to another. In this

research, the validity of the data was done by cross-checking to compare the perspectives and conditions among UKS program implementers in SDN 1 Mangundikaran Nganjuk. In addition, researchers also refer to the sources of the document data obtained to strengthen the existing information. The Qualitative data analysis technique based on Milles and Huberman there is three-step that occurs simultaneously, which consists of reduction data, data presentation, and conclusion.

RESULTS

Staff of SDN 1 Mangundikaran Nganjuk

Staff in SDN 1 Mangundikaran Nganjuk on the educational year 2020/2021 as shown within the table as follows:

Table 1. Staffing Data in SDN 1 Mangundikaran Nganjuk on the Educational Year 2020/2021

No.	Position	Amount
1.	Headmaster	1 person
2.	Teacher	10 people
3.	Admin staff	1 person
	Amount	12 people

Source: SDN 1 Mangundikaran Nganjuk on the academic year 2020/2021

Student of SDN 1 Mangundikaran Nganjuk

The student in SDN 1 Mangundikaran Nganjuk on the educational year 2020/2021 as shown within the table as follows:

Table 2. Student Data in SDN 1 Mangundikaran Nganjuk on the Educational Year 2020/2021

No.	Class	Amount
1.	Class I	28 students
2.	Class II	25 students
3.	Class III	28 students
4.	Class IV A	22 students
5.	Class IV B	14 students
6.	Class V	43 students
7.	Class VI	33 students
	Amount	193 students

Source: SDN 1 Mangundikaran Nganjuk on the academic year 2020/2021

Implementation of Health School

Program (UKS) in SDN 1

Mangundikaran Nganjuk

Based on the interview, almost all of the implementers of the UKS in SDN 1 Mangundikaran Nganjuk already know what's in it, the goals, and the targets of holding a UKS. UKS is part of the health effort that is a task of community health service aimed to schools with student and their living environment to achieve the best possible health condition for students and to improve the learning achievement of the student as high as possible.

The results of the interviews also showed that the UKS target was appropriate, UKS target is school members which included headmaster, teachers, students, school staff, elements of the community health service, and elements of the school implementation team from the education level of kindergarten, basic education, secondary education, religious education, vocational education and special education (special schools), including boarding school students, family, and community around the school. UKS is very important because it has the main goal to improve the ability to a healthy life and the health status of students and create a healthy environment so the student can growth and development optimally in the context of forming an Indonesian human being.

Affecting Factors Implementation of Health School Program (UKS) in SDN 1 Mangundikaran Nganjuk

a. Communication

Implementation of the UKS involves the participation of all school members. So, the communication factor is important to achieve the goals of UKS. Regulations relating to the UKS from

the Nganjuk Government, the Nganjuk Education and Culture Office, and the Nganjuk Health Office are always communicated consistently at SDN I Mangundikaran Nganjuk. Activities about the UKS are always communicated by the headmaster and teachers to students during the teaching and learning process in class, during flag ceremonies, and other school activities. Headmaster and teachers also always communicate any activities related to the UKS to parents when there is an invitation for a meeting between the school and the parents.

UKS has three main programs called Trias UKS. This program always communicated to all school members, that is health education, health services, and fostering a healthy school environment. All school members have received the UKS program which includes health education by given knowledge about the principles of a healthy life, health services carrying out health screening checks for students and mild treatment from first aid kits, and fostering a healthy school environment by creating all classrooms clean and healthy sanitation.

b. Resources

Resources that affect health school program are people, authority, financial, information, and facilities factors. Results of the interviews obtained information that the implementation of UKS in SDN I Mangundikaran Nganjuk lacked a specific budget. The budget used was the School Operational Government Assistance budget (BOS), which budgeted in conjunction with other school programs, like infrastructure. BOS budgets are usually used for UKS extracurricular activities, such as building toilets and sanitation; improving school sanitation; healthy canteens; education and developing healthy schools, purchasing cleaning equipment, and providing clean water sources.

Human resources in implementing the health school program in SDN I Mangundikaran Nganjuk are head master, teachers, staff, and students who are authorized to carry out activities related to the UKS coordinated by UKS teacher and sport teacher. Information is an important factor needed in the implementation of the UKS. Information about the UKS at SDN I Mangundikaran Nganjuk always socialized to all school members, especially information related to the Trias UKS. Information about the trias UKS is carried out by intracurricular activities, while extracurricular activities are about participating in various competitions related to the UKS.

The next resource that also influences the implementation of UKS is the authority resource. Authority about the implementation of UKS at SDN I Mangundikaran Nganjuk by forming a UKS core team consisting of UKS teachers, sport teachers, and class teacher representatives with the aim of activating the implementation of the Trias UKS. Schools have the authority to make decisions related to the UKS program as contained in school rules, for example, students are responsible for cleanliness, security, and discipline in the classroom. The implementation of UKS is under the authority of the Nganjuk Government, the Nganjuk Education and Culture Office, and the Nganjuk Health Office. So the implementation of UKS and making decisions about UKS in SDN I Mangundikaran Nganjuk is always based on the regulations that have been made by these institutions.

Facility resources about the UKS in SDN I Mangundikaran Nganjuk aren't complete and the number is insufficiency, such as large UKS room about 18m² that are used to treat students when suddenly they faint during the ceremony or get injuries during sports lessons. UKS room is equipped

with beds, blankets, cupboard, table, chairs, scale, heightmeter, sphygmomanometer, and body thermometer. But the numbers of facilities are insufficient. In the UKS room also there is UKS organizational structure, student health records, first aid kits, trash bin, hand washing stations, clocks on the wall, and some writings about the UKS program.

c. Disposition

The attitude of the implementers of UKS is strongly supporting the UKS well. They understand that the UKS is an activity in the school to educate clean and healthy life habits (PHBS) and improve the health status of students. The teacher becomes a motivator for students by giving health education, such as habituating students to hand wash with soap and clean running water, always exercising, and not snacking carelessly. Implementation of UKS for health services always gets support from school members and coordinates with the Nganjuk community health service, such as the implementation of immunization, giving worm medicine, and screening for student health. The UKS implementers can carry out responsibility, support each other, and always cooperate with outsiders. So there is no obstacle to the factors of the implementers, even if there is an obstacle, the UKS implementers always meet to get an agreement.

d. Bureaucratic Structure

The success of implementing UKS in SDN I Mangundikaran Nganjuk was due to good coordination and cooperation among the UKS program implementers. The UKS implementers in SDN I Mangundikaran Nganjuk carry out their duties and organize well because their implementation is based on the organizational structure, bureaucratic structure, and SOP about the implementation of UKS, while the school committee gives support with suggestions for the good program in the future.

Pic 1. Bureaucratic Structure UKS in SDN 1 Mangundikaranon the Educational Year 2020/2021



Source: SDN 1 Mangundikaran Nganjukon the Educational Year 2020/2021

DISCUSSION

Implementation of Health School Program (UKS) in SDN 1 Mangundikaran Nganjuk

Almost all of the implementers of the UKS in SDN 1 Mangundikaran Nganjuk already know the contents, goals, and targets of holding a UKS. Health school program (UKS) is an effort made by the school and other teams to improve a healthy lifestyle and the health status of school members. UKS is not only for students alone, but also covers all school members, so a healthy lifestyle both when in school and daily life can maintain and improve their health status. A healthy lifestyle and a good degree of health will bring schools into good educational institutions and can carry out their functions as an educational forum for Indonesian children to become intelligent and healthy people. So UKS is a government program to improve health services, health education, and foster a healthy school environment or the ability to healthy life for school members.

UKS is very important because it has the main goal to increase students' abilities to live a healthy life and their health status and create a healthy environment so the student can grow and develop optimally in the context of forming an Indonesian human being. Meanwhile, the specific goal is to foster healthy life habits and improve

the health status of students, which include:

- 1) Reducing school children's morbidity;
- 2) Improving the health of students both physically, mentally, and socially;
- 3) Students have the knowledge, attitudes, and abilities to put healthy living concepts into practice and to actively participate in efforts to promote school health;
- 4) Improving the coverage of health services for school children;
- 5) Improving the resistance and life force against the bad effects of narcotics, cigarettes, alcohol, and other dangerous drugs.

UKS is prioritized for students in class I, class III, and class VI with considerations:

- 1) Class I, the adjustment phase in a new school environment and far from parent supervision, the possibility of contact with various diseases is greater because of ignorance and lack of understanding about health. This time is a good time to be given re-immunization, and in class I screening is done to detect any abnormalities that may arise to facilitate supervision to the next level;
- 2) Class III, carried out to evaluate the results of the implementation of the UKS in class 1 and the next steps that will be carried out in the UKS coaching program;
- 3) Class VI, to prepare the health of students for the next level of education, thus requiring adequate maintenance and health checks.

In addition, according to Effendy (1998), UKS has the target such:

- 1) The primary target includes all students;
- 2) Secondary targets include teachers, tutors, education people, and healthy people;
- 3) Tertiary targets include the school environment, family, and the community around the school.

Although the UKS can be used by all school members, the main target is students. All students from the lowest level (kindergarten) to high school level (senior high school) are the main targets of the UKS.

Affecting Factors Implementation of Health School Program (UKS) in SDN 1 Mangundikaran Nganjuk

a. Communication

The success of implementation UKS requires that the implementers know what to do, and the goals and objectives of the program can be transmitted properly to the target group, such as socialization and coordination. Regulations relating to the UKS from the Nganjuk Government, the Nganjuk Education and Culture Office, and the Nganjuk Health Office are always communicated consistently at SDN 1 Mangundikaran Nganjuk.

Need to know implementing the UKS is based on the Joint Regulation of 4 Ministries, that is Ministry of Education and Culture, Ministry of Health, Ministry of Religion and the Ministry of Internal Affairs Number 6/X/PB/2014; Number 73 of 2014; Number 41 of 2014 and Number 81 of 2014 about the Guidance and Development of Health School Program (UKS). UKS is a public health effort in schools, targeting student and their environment. Efforts to foster and develop healthy life habits have been integrated, like an educational program in schools through physical education, sports, and health that can be carried out in curricular activities (intracurricular and extracurricular).

All school members have received the UKS program which includes health education by providing knowledge about the principles of a healthy life, health services by health screening checks for students and mild treatment with first aids kits, fostering a healthy school environment by creating all classrooms must be clean and healthy, with proper sanitation hygiene. Thus, information related to the implementation of the UKS program at SDN 1 Mangundikaran Nganjuk as the target group must be communicated to all members of the school so that UKS implementation runs well.

b. Resources

Resources that affect health school program are people, authority, financial, information, and facilities factors. Results of the interviews obtained information that the implementation of UKS in SDN I Mangundikaran Nganjuk did not have a special budget. The budget used was the School Operational Government Assistance budget (BOS), which integrated with other school program budgets. Based on George C. Edward III, it cannot be denied that budgets are one of the determining factors in the implementation of any program. The program that were planned can run well or not depending on the availability of budgets (Winarno, 2005).

Budget for school program activities is needed by every educational institution manager. The more activities in schools, the more budget is needed. Thus, the creativity of each school manager in collecting budgets from various sources will greatly help the implementation of school programs (Darma, 2007). So, if there is a special budget for the implementation of the UKS in SDN I Mangundikaran Nganjuk, the UKS facilities will be fulfilled in number.

The implementation of UKS is also influenced by human resources. Human resources in UKS SDN I Mangundikaran Nganjuk are all school members consisting of headmaster, teacher, staff, and students who are authorized to carry out activities related to the UKS program coordinated by UKS teachers and sports teachers. UKS in SDN I Mangundikaran Nganjuk is also supported by the school committee, Nganjuk Community Health Service, and the head village from Mangundikaran Village Nganjuk.

Based on George C. Edward III, human resources are staff who are involved in policies related to the number, quality, skills of employees or personnel. The most important thing in human resources is the quality of human resources, such as

competencies and other skills possessed (Winarno, 2005). Human resources refer to a set of skills derived from the combined mental and physical ability of everyone involved in the process. Human resources are a very important element in various activities. Even though the existing equipment is quite sophisticated, without qualified human resources it will not be meaningful. Because thinking power is the basic capital that is brought from birth, while experts can be obtained from business (learning and training). Measure the level of Intelligence Quotient (IQ) and Emotional Quotient (EQ) can determine a person's intelligence (Hasibuan, 2003).

Information resources also can influence the implementation of UKS. UKS teachers always give information about schools in the community that can improve the health status with 3 main activities, such as creating a healthy school environment, health care, and services in schools, and health education efforts. All three of which are called the Trias UKS. Based on George C. Edward III the relevant information is an important factor in the implementation program, especially for new policies. Information has two forms, the first regarding the implementation of policies/programs and the second information about the data on the compliance of other personnel with regulations (Winarno, 2005).

The next resource that influences UKS implementation is authority. In policy implementation, the aspect of authority is closely related to the power to make a decision. At SDN I Mangundikaran Nganjuk, the school has the authority to make decisions about UKS which is contained in the school rules, for example, students are responsible for cleanliness, security, and discipline in the classroom. Authority about UKS is including UKS program in the learning process, for example

sharing health education, teaching simple medicine for students who have sick, and keeping the school environment clean. Authority is a component that comes with a lot of obligations and risks (Winarno, 2005). There needs authority to ensure that policies can be implemented as expected effectively.

Facilities also influence the implementation of UKS. In the UKS room, facilities are still limited. Based on George C. Edward III, the implementation of a program needs adequate facilities. Even if an executive has an appropriate employee, understands what has to be done, and has the power to do his job, a program cannot be optimally implemented without building (Winarno, 2005). Facilities related to UKS should be improved so that the implementation of UKS can be carried out properly. An implementer may have adequate staff, may understand what has to be done, and may have the authority to carry out his duties, but without a building as an office for coordination, without equipment, without supplies, the planned implementation is unlikely to succeed

c. Disposition

The attitude of the implementers is a factor that has important consequences for program implementation so that it can run effectively. The attitude of the implementers of SDN 1 Mangundikaran Nganjuk are strongly supporting the UKS well. It can be seen in the attitude of the implementers, who are constantly supportive of UKS by fostering a healthy school environment. The activities can see by providing healthy classrooms, healthy canteens, bathrooms/toilets and clean water, sanitation, trash bin, sports fields, and school regulations regarding the no-smoking area and a drug-free area.

Attitudes or perspectives of the UKS implementers also tend to be the same, they have the perspectives that the UKS aims to create a healthy school life environment,

increase knowledge, change attitudes, and shape the behavior of a healthy and independent school community. Based on George C. Edward III, the disposition has significant consequences in implementing an effective program (Winarno, 2005). If implementers have a good attitude, this means supporting a program, and they are more likely to implement the program as the original decision-makers intended. But, if implementers' attitudes or perspectives are different from those of decision-makers, implementing a program can become more difficult.

d. Bureaucratic Structure

The bureaucratic structure is defined as the characteristics, norms, and patterns of relationships that repeatedly occur in the executive body, which has a relationship by implementing the program. The UKS implementers in SDN I Mangundikaran Nganjuk carry out their duties and organize well because their implementation is based on the organizational structure, bureaucratic structure, and SOP about the implementation of UKS, while the school committee gives support with suggestions for the good program in the future.

Based on George C. Edward III, bureaucratic structure consists of aspects such as organizational structure, relationships between organizational units within the organization concerned, and so on (Winarno, 2005). The bureaucratic structure includes fragmentation dimensions and standard operating procedures that will simplify and unify the actions of program implementers in carrying out their responsibilities. The implementers of the program should be consistent with the existing bureaucratic structure and standards of operational procedure when carrying out the duty so that the implementation policy can be successful.

CONCLUSIONS

UKS to improve health services, health education, and fostering a healthy

school environment or the habits to healthy life for school members. The implementation of the health school program in SDN 1 Mangundikaran Nganjuk has not been maximized, so all factors (communication factor, resource factor, disposition factor, and bureaucratic structure factor) need to support this implementation to achieve UKS implementation well.

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