

## Research Article

# The Ownership of Latrines in Southeast Sulawesi in 2020

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## Abstract.

One environmental health and environmental sanitation problem in developing countries is latrine sanitation. In Southeast Sulawesi, the number of household heads with access to proper sanitation (Healthy Latrines) is 754,914 heads of families. This study aims to describe how proper sanitation ownership (Healthy Latrines) in Southeast Sulawesi Province is represented. The study uses observations with a descriptive approach. The results indicate that Kendari and Baubau had a higher percentage of healthy latrines ownership in Southeast Sulawesi in 2020, a number of 100% . Also, the Regency of North Konawe has a low percentage of healthy latrine ownership, only 53%. It is expected that the government can be more encouraging and assist in manufacturing latrines for each head of the family.

**Keywords:** Sanitation, Latrine, Healthy

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Published 26 May 2023

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Selection and Peer-review under the responsibility of the ICASI Conference Committee.

## 1. Introduction

The level of health is one of the key factors in efforts to improve Indeks Pembangunan Manusia (IPM) of the population of Indonesian. IPM is not only determined by health services, but it is way strongly determined by environmental conditions and community behavior. Behavior of PHBS in the household, including the availability of clean water, latrines, waste disposal canal and waste disposal facilities. Healthiness and well-being, clean water and health issues related to sanitation are two of the 17 Sustainable Development Goals SDGs (ensuring the access to clean water and sustainable sanitation for all)[1].

Cleanliness, according to Ismail, is a conscious act in a clean living culture, where humans come into direct contact with dirt and other hazardous waste expecting that these efforts can maintain and improve human health. Maintaining good hygiene is highly dependent on procedures and actions of society in maintaining the quality of

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improvement. A clean environment is a reflection of keeping the physical health in everyone's daily life. Poor sanitation conditions, on the other hand, can be a source of various types of diseases that can affect human health. Because of that, if your health is compromised, your well-being will eventually decreased[2]

Environmental health problems in developing countries revolve around latrines sanitation, clean water supplies, housing, waste disposal, and sanitation. The ownership of clean water and latrines facilities are still very low because not all of the households are meeting the requirements and some of the households are not having it yet[3]. However, according to the data from WHO, in 2020 the proportion of people who practice open defecation in Indonesia has decreased to more than 20% from 2000-2017 to 9% in the national household survey in 2015-2018[4].

If the latrine used does not meet the health requirements, a transfer in open air and disposal of feces that do not go into healthy latrines can affect pathogens that can be transmitted through feces and increase the variety of disease contamination types that leads to contamination. A qualified healthy latrines can directly prevent the spread of human waste and prevent disease-carrying vectors for latrine users and the community in the surroundings[5].

The construction of healthy latrines that require high costs causes lack of septic tanks in cities. Therefore, the city government prefers to dispose the garbage from the latrine in the nearest river and they do not fix or cover the garbage from the latrine. Changing the latrine construction requirements fit the Regulation of the Minister of Health.[5] In order to actualize the sanitation target (the proper latrines), the object of the target must be able to meet several existing indicators. The Indicators of proper latrines can be seen in the availability and accessibility of the society to the clean water, as well as local waste disposal facilities and family latrines. By 2030, the world is targeting one of the six development goals to improve access to proper hygiene and sanitation for everyone and to end Open Defecation Free (ODF). Meanwhile, for national sanitation, it is targeted that in 2024, an increase in access to drinking water services as well as proper and sustainable sanitation, also the implementation of the health eligibility promotion as well as empowerment for all society[6].

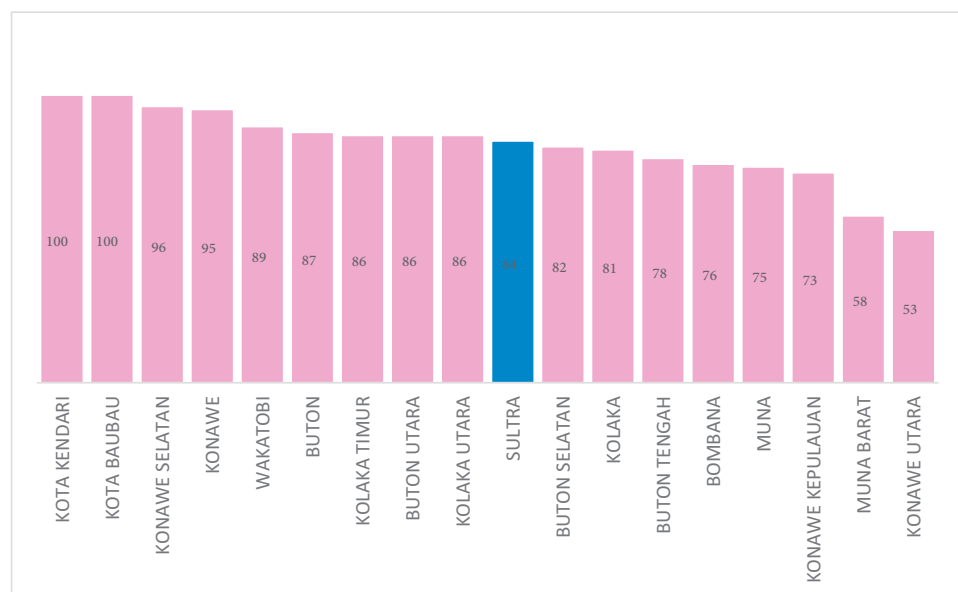
Information on the number of households that have access to proper sanitation (WC) in Southeast Sulawesi reached 754,914 households or 84% of the total number of households. 16% of household heads are still lacking in accessing proper sanitation (healthy toilet). This problem has caused by many households that do not have a

permanent latrine and they defecate in public places or anywhere else. However, it can be concluded that people in Southeast Sulawesi use healthy latrines generally and 84% of them meet the requirements for healthy and proper latrines[7].

## 2. Methods

The design of this study is using observations with a descriptive approach. Its data is secondary data obtained from the health profile of Southeast Sulawesi in 2020. The data is processed through describing the data by compiling redactions in the form of percentages, charts, and narrations in order to make the results of data analysis easier to understand.

## 3. Results and Discussion



**Figure 1:** Chart of Southeast Sulawesi Sanitation Ownership Percentage (Healthy Latrine) in 2020.

Based on the chart above, it can be seen that the city of Kendari and the city of Bau Bau have the highest percentage of healthy latrine owners in Southeast Sulawesi with a score of 100% percentage. North Konawe, on the other hand, has a lowest level of healthy latrine ownership scoring only 53%. The data above also shows that the entire ownership of healthy latrines in Southeast Sulawesi is 84%. This statement shows that 16% of household heads in Southeast Sulawesi not have en access to sanitation facilities yet.

TABLE 1: The Percentage of The Ownership of Proper Latrines in Southeast Sulawesi in 2017-2019.

Regency/City	2017	2018	2019
Buton	73.97	66.22	79.18
Muna	63.30	72.02	68.07
Konawe	74.71	80.30	81.38
Kolaka	69.01	76.57	81.90
South Konawe	58.93	64.24	73.47
Bombana	60.26	68.19	74.16
Wakatobi	82.42	81.25	77.38
Kolaka Utara	69.70	75.70	81.71
Buton Utara	59.60	63.21	61.39
Konawe Utara	70.53	72.88	77.00
Kolaka Timur	74.77	84.26	86.40
Konawe Kepulauan	48.80	56.21	68.31
Muna Barat	41.12	45.25	62.60
Buton Tengah	74.20	82.40	85.74
Buton Selatan	71.47	78.55	84.53
Kendari	90.29	83.77	94.42
Baubau	81.89	61.17	80.22
<b>Sulawesi Tenggara</b>	<b>71.28</b>	<b>73.61</b>	<b>79.75</b>

The tabel above shows that from 2017 to 2019 the ownership of latrine access for each head of household has increased every year even the increase from 2018 to 2019 was less over 6%, but in 2020 alone it has reached 84%. This shows that the people of Southeast Sulawesi every year already have awareness to stop open defecation and choose to build a more decent latrine. By that, the government's duty is to encourage the society even more and to continue this positive trend in order to achieve better results.

#### 4. Conclusions

One of the many health problems that remain as a concern in developing countries is the environmental hygiene development program, the need for latrines in the society is very low. This is due to their ignorance of the importance of a clean and healthy life which is reflected in the behavior of the locals who still send people to rivers, gardens, fields, or other places. The importance of cleanliness make the government seems to see the cleanliness budget increase as a cost rather than an investment. World Health Organization (WHO) and many other organizations have calculated that

for every US\$1 invested in sanitation, there is an economic benefit of US\$8 in the form of productivity improvements and time, also reductions of disease and death. The habit of Open Defecation (BABS) according to UNICEF data (2012) make around 150,000 Indonesian children die every year because of diarrhea and other diseases caused by poor sanitation. Latest data from the monitoring site of Sanitasi Total Berbasis Masyarakat (STBM) that is posted on the website of The Ministry of The Health of the Republic of Indonesia shows that there are still 8.6 million households whose family members are still practicing open defecation as per January 2020. The data collected shows that ownership of proper sanitation facilities (healthy latrines) reached 84% in Southeast Sulawesi with Kendari City and Bau-Bau city ranked at the top of healthy latrine ownership for every head of household. However, it should be realized that there are still some areas which the ownership of proper latrines that is used by each head families are still relatively small, especially in the districts of North Konawe and Muna West, whose percentage is still below 60%.

To encourage all household heads that have latrines, some things that can be done is by triggering them in routine then actively do the latrine social gathering, encourage the movement of sanitation marketing by facilitating material credit, and actively campaign for PHBS messages at every meeting with the cadres and the society. According to a research that has conducted by Susanti et al in 2021, it is stated that the society participated in development activities due to a factor that there was a stimulant funds from the program with forms of involvement through steps of planning, decision-making and program implementation[8]. Changes in behavior are also expected to be appropriate with the stages that have been pursued, namely starting from the society who defecate in public place, the second stage people defecate in healthy latrines, then the third stage all the people have and defecate in healthy latrines. By that environmental sanitation improvements can be achieved in order to achieve Sanitasi Total (Total Sanitation).

The need to give penalties or other efforts by the society to prevent defecation occurs in public place by doing a general monitoring mechanism created by the society to achieve 100% of the head of the family has healthy latrines and there are clear efforts or strategies to achieve total Total Sanitasi (Total Sanitation). The government expected to give latrine assistance as a stimulus to change defecation behavior becomes defecation in healthy latrines.

The benefits of using a latrine are more dignified and more right to privacy, cleaner environment, reducing odors, improving hygiene and health, safer (no need to go to the field/garden/river at night), saving time and money (producing energy into compost and biogas), breaking the epidemic cycle sanitation related diseases. The latrine is one of the basic human needs. When a latrine is being installed, it is necessary to make every effort to prevent unpleasant odor comes out of the latrine. Also, building a stable and affordable cost of latrines must be considered. Latrines are most beneficial for humans because it can prevent the spread of various diseases transmitted through feces, such as diarrhea, cholera, and skin diseases that are classified as waterborne infections.

## Acknowledgments

The ownership of healthy latrines dominated by Kendari city and Baubau city (100%), and the least number of ownership of healthy latrines is in North Konawe regency (53%). From this data, it is expected that the government can be more intensive on triggering and providing assistance in making latrines for each head of family.

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