# THE IMPLEMENTATION OF COMMUNITY-BASED TOTAL SANITATION AT PUSKESMAS PASUNDAN GARUT REGENCY AND ITS LAW ENFORCEMENT IS CONNECTED WITH THE FULFILLMENT OF THE RIGHT TO A GOOD AND HEALTHY ENVIRONMENT

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### **ABSTRACT**

Until moment this implementation Community Based Total Sanitation (STBM) in the district Garut still weak, so impact to environment life very take effect big. Public health center In implementation STBM implementation in Puskesmas Pasundan through trigger not yet in accordance as mandated by the regulation of the Minister of Health Number 3 of 2014 concerning Community Based Total Sanitation. Problem in thesis is How Implementation Community Based Total Sanitation based on Minister of Health Regulation Number 3 of 2014 concerning Community Based Total Sanitation at UPT Puskesmas Pasundan Regency Garut and how enforcement law to implementation Community Based Total Sanitation based on Minister of Health Regulation Number 3 of 2014 concerning Community Based Total Sanitation at UPT Puskesmas Pasundan connected with fulfillment right on good and healthy environment.

**Keywords**: Community Based Total Sanitation, Enforcement Law

# **ABSTRACT**

Sampai saat ini pelaksanaan Sanitasi Total Berbasis Masyarakat (STBM) di kabupaten Garut masih lemah, sehingga dampak terhadap lingkungan hidup sangat berpengaruh besar. Dalam pelaksanaan implementasi STBM di Puskesmas Pasundan melalui pemicuan belum sesuai dengan yang diamanatkan oleh peraturan Menteri Kesehatan Nomor 3 Tahun 2014 tentang Sanitasi Total Berbasis Masyarakat. Permasalahan dalam tesis adalah Bagaimana Implementasi Sanitasi Total Berbasis Masyarakat berdasarkan Peraturan Menteri Kesehatan Nomor 3 Tahun 2014 tentang Sanitasi Total Berbasis Masyarakat di UPT Puskesmas Pasundan Kabupaten Garut dan bagaimana penegakan hukum terhadap implementasi Sanitasi Total Berbasis Masyarakat berdasarkan Peraturan Menteri Kesehatan Nomor 3 Tahun 2014 tentang Sanitasi Total Berbasis Masyarakat di UPT Puskesmas Pasundan dihubungkan dengan pemenuhan hak atas lingkungan yang baik dan sehat.

Kata Kunci: Sanitasi Total Berbasis Masyarakat, Penegakan Hukum

# A. INTRODUCTION

The achievement of this degree of public health is the authority of the Government and Regional Government based on the Health Law, so referring to Law Number 23 of 2014 concerning Regional Government, it is stated that mandatory government affairs related to basic services include health, and mandatory government affairs that are not related to basic services as intended include the environment.<sup>2</sup>

The government is responsible for planning, organizing, organizing, fostering, and supervising the implementation of health efforts that are equitable and affordable to the community. The government is responsible for the availability of environment, order, health facilities both physical and social for the community to achieve the highest possible degree of health.<sup>3</sup> The government is responsible for the availability of resources in the field of health that are fair and equitable for all people to obtain the highest possible degree of health. <sup>4</sup>

The government is responsible for the availability of access to information, education, health care facilities to improve, maintain the highest possible degree of health, empower and encourage the active role of the community in all forms of health efforts. In addition, the government is responsible for the availability of all forms of quality, safe, efficient, and affordable health measures. The government is responsible for the implementation of public health insurance through the national social security system for individual health efforts <sup>5</sup>.

To realize the highest degree of health for the community, integrated and comprehensive health efforts are organized in the form of individual health efforts and public health efforts.<sup>6</sup> Health efforts are carried out in the form of activities

<sup>1</sup> Hapsara Habib Rachmat, Strengthening Health Efforts, Gajah Mada University, Yogyakarta, 2018, p. 3

<sup>&</sup>lt;sup>1</sup> Law No.23 of 2014 concerning Local Government article 12 paragraph 1,2

<sup>&</sup>lt;sup>3</sup> Agus Salim Andi Gajong, Local Government, Political and Legal Studies, Galia Indonesia, Jakarta, 2007 p.197

<sup>&</sup>lt;sup>4</sup> Regulation of the Minister of Health No.36 of 2009 concerning Health article 14 paragraph 1 and article 15, article 16

<sup>&</sup>lt;sup>5</sup> Law Number 36 of 2009 concerning Health articles 17 to article 20

<sup>&</sup>lt;sup>6</sup> Irwan, Health Ethics and Behavior, Jakarta, 2020, p.19

with promotive, preventive, curative, and rehabilitative approaches that are carried out in an integrated, comprehensive, and sustainable manner<sup>7</sup>.

One of the health efforts in order to strengthen efforts to clean and healthy living behavior, prevent the spread of environment-based diseases, improve community capacity, and increase access to drinking water and basic sanitation, it is necessary to organize community-based total sanitation. To support the program, the government issued Minister of Health Regulation Number 3 of 2004 concerning Community-Based Total Sanitation (STBM), hereinafter referred to as STBM. Through this decision, STBM became a national program and is one of the main targets in the 2020-2024 RPJMN, with the hope of increasing households with access to proper sanitation to 90%.

STBM is an approach to change hygienic and sanitary behavior through community empowerment by triggering. The challenges faced by Indonesia related to health development, especially in the field of hygiene and sanitation are still very large. For this reason, it is necessary to carry out integrated interventions through a total sanitation approach. The government changed the approach to national sanitation development from a sectoral approach by providing hardware subsidies that have so far not provided leverage for changes in hygienic behavior and increased access to sanitation, to a community-based total sanitation approach that emphasizes 5 (five) changes in hygienic behavior. The implementation of STBM with five pillars will facilitate efforts to improve access to better community sanitation and change and maintain the sustainability of a culture of clean and healthy living. The implementation of STBM in the long term can reduce morbidity and death rates caused by poor sanitation, and can encourage the realization of a healthy community that is independent and equitable. The implementation of a healthy community that is independent and equitable.

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<sup>&</sup>lt;sup>7</sup> Law Number 36 of 2009 concerning Health article 46 and article 47

<sup>&</sup>lt;sup>8</sup> Appendix to Presidential Regulation of the Republic of Indonesia Number 18 of 2020 concerning RPJMN 2020-2024, page 1.49

<sup>&</sup>lt;sup>9</sup> Yeni Rosita, Model of Community Empowerment Towards ODF Village, Deepublish, Yogyakarta, 2001, p.12

<sup>&</sup>lt;sup>10</sup> Sukmal Fahri, Community-Based Total Sanitation Teaching Materials, Deepublish, Yogyakarta, 2021 p.6

The five pillars mentioned above are indicators of good sanitation, so that if one or all of the five pillars are not achieved, it will lead to poor sanitation. Some of the impacts caused by poor sanitation are diarrhea outbreaks and stunting problems. Based on the results of Basic Health Research (Riskesdas) conducted by the Ministry of Health in 2018 which is the latest research shows the incidence of diarrhea in toddlers is 6.8%. This figure is still high and is still a public health issue. The prevalence of diarrhea by district/city in West Java is 12.20%. In addition, (Riskesdas 2018) shows that the problem of stunting in Indonesia has a prevalence of 29.9%.

Similarly, what happened in Garut Regency based on data obtained from the Public Works and Spatial Planning Office in 2017 showed that environmental conditions were not fully healthy, which was shown from that there were still 27.56% of households that had not been able to access clean water and there were still 41.12% of households that had not enjoyed proper sanitation. 12 The impact of poor sanitation in the Pasundan Puskesmas work area shows a stunting rate of 14% in toddlers aged 0-59 months and is among the second largest compared to puskesmas in Garut Regency. Then for diarrhea cases at all ages including high cases compared to other puskesmas (483 cases) in 2020 and entered the top 10 diseases in Pasundan Health Center (270 cases). If sanitation in Indonesia is in good condition, there will be around 9 million Indonesian children saved from stunting. This is because there is a positive relationship between the provision of drinking water, improved sanitation, and / or hygiene directly proportional to physical growth. 13 The risk of stunting will be reduced with improvements in drinking water and sanitation. <sup>14</sup> Families who had access to latrines (55.8%) were associated with families who defecated (open defecation) by 33.5% in toddlers, reducing the possibility of stunting by 23% - 44% in children aged 6 - 23 months.

The National Program on STBM must be implemented by all regions, both provinces and districts / cities in Indonesia, including in Garut district. The

<sup>11</sup> Muhamad Ikhtiar, Introduction to Environmental Health, SIGn, Jakarta, 2017, Page 21

<sup>&</sup>lt;sup>12</sup> Pemkab, Kab, Garut, Ranwal Book, RPJMD Kab, Garut 2019-2024, Pages II-43, IV-2

<sup>&</sup>lt;sup>13</sup> Onny Untung, Purifying Dirty Water, Puspa Swara, Jakarta, 2018, p 1

<sup>&</sup>lt;sup>14</sup> Nurul Imani, Stunting in Children, Deepublish, Yogyakarta, 2017, p 47

implementation of the STBM program in Garut district is carried out through the preparation of the Regional Medium-Term Development Plan (RPJMD) 2019 – 2024 in the Health sector, one of which is the realization of villages that implement STBM, with a target until 2021 of 80% of STBM villages.

## B. METHODS

The research method in writing a thesis and this research uses the normative juridical method, namely by conducting legal studies through literature studies to obtain secondary data consisting of primary, secondary and tertiary legal materials and qualitative methods by processing data on the implementation of empowerment towards Community-Based Total Sanitation. The method used in this study is an analytical descriptive method to get a comprehensive picture of the laws and regulations in Indonesia related to STBM.

Research is carried out through the stages of data collection carried out through literature review to obtain secondary data, this literature research is carried out to review and inventory primary law, secondary legal material and tertiary legal material. 15 (a) the primary legal materials are several laws and regulations, namely Law Number 36 of 2009 concerning Health, Law Number 32 concerning Protection and Management of the Community-Based Total Environment, Regulation of the Minister of Health Number 3 of 2014 concerning Community-Based Total Sanitation, Regulation of the Minister of Health Number 46 of 2019 concerning Puskesmas. (b) secondary legal materials, namely the writings of legal experts and other fields related to research problems or related to primary law such as books and journals on environmental law, and STBM. (c) tertiary legal materials such as dictionaries, encyclopedias, internet including secondary legal materials. Data collection techniques in this study using literature studies are research conducted by collecting data contained in literature books, laws and regulations, journals and other sources related to STBM. To find theories relevant to existing problems and interviews with resource persons in the Public Health Sector of the Environmental

<sup>&</sup>lt;sup>15</sup> Zainudin Ali, Legal Research Methods, Sinar Grafika, Jakarta, 2009, p.106

Health Section (Kesling) of the Garut Regency Health Office. The data analysis used in this study was descriptive qualitative against secondary data. This research stems from existing regulations as positive legal norms and is related to problems. The data are arranged and presented in a systematic, systematic interpretation. Systematic interpretation is interpreting laws as part of the overall system of legislation in the form of descriptions. The description includes the content or meaning of legal rules that are used as references in solving legal problems that are the object of study. 17

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<sup>&</sup>lt;sup>16</sup> Marwan Mas, Introduction to Law, Ghalia Indonesia, Jakarta, 2004, p.143

<sup>&</sup>lt;sup>17</sup> Amirudin and Zainal Asikin, Legal Research Methods, PT. Raja Grafindo Persada, Jakarta,2003, p.107

## C. RESULTS AND DISCUSSION

In the general manual of printed service manuscripts edition of January 1, 2004 and Regulation number 22 of 2008 published by the Ministry of State Apparatus, the definition of a Circular Letter is an official text that contains notifications about certain matters that are considered important and urgent. Furthermore, in the Regulation of the Minister of Home Affairs number 55 of 2010 article 1 point 43, it is explained that a Circular Letter is an official text that contains notifications, explanations, and / instructions on how to carry out certain things that are considered important and urgent. Circulars have a higher degree than ordinary letters, because circulars contain instructions or notices, there are no sanctions because they are not the norm. In the laws and regulations in Indonesia, legal norms include, among others, norms of conduct (prohibitions, orders, permits, exemptions from an order); norms of authority (authorized and not authorized); Norms of determination (when a law comes into force, determination of the seat of an Institution).

A Circular Letter is an order of certain officials to their subordinates / people under their guidance, Circular Letters do not have the force to bind out because the official who issued them has no legal basis for issuing circulars. The issuing officer of the circular does not need a legal basis because the circular is a policy regulation issued solely based on free authority but needs to pay attention to several factors as a basis for consideration of the issuer, including only issued due to urgent circumstances; there are unclear related regulations that need to be interpreted; substance does not contradict laws and regulations; It cannot be morally accounted for by the principles of good governance.<sup>18</sup>

In the *Universal Declaration of Human Rights* 1948, hereinafter referred to as the 1948 Declaration, especially Article 25 regulates *everyone has the right to a standard of living adequate for the health and well-being of himself and of his family*, meaning the right to get a healthy life (*healthy environment*), so as to get an *adequate life for the health* shows that everyone deserves a healthy life. Reforms in Indonesia that resulted in a paradigm shift in governance at the local level. Regional governments are given the widest authority, namely in the form of granting autonomy to regions in developing their regions.

In this case there is a role of government and local government. Local Government Administrators prioritize the implementation of compulsory government affairs related to basic

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<sup>&</sup>lt;sup>18</sup> http://vv.djp.depkumham.go.id/files/perda/implementationcy/2009/notesulbar.pdf

services as referred to in the implementation of basic services in compulsory government affairs related to basic services as referred to guided by the minimum service standards set by the central government. Local Government Further provisions regarding minimum service standards are regulated by government regulations.

The commitment of local governments to provide resources to implement the STBM approach provides budget for strengthening the institution of local policies and regulations on sanitation programs such as SE, RPJMP, Renstra, and others; The establishment of a coordinating institution that outlines the sanitation sector, resulting in an increase in regional sanitation budgets, coordination of government and non-government resources.

Furthermore, for the fulfillment of the right to a good and healthy environment. UUPPLH regulates the government's obligation to carry out environmental management in the article of UUPPLH stated that environmental protection and management is carried out based on the principles of state responsibility, good governance and regional autonomy, with the aim of ensuring safety, health, and human life. In addition, to ensure the fulfillment and protection of the right to the environment as part of human rights. Environmental protection and management includes: planning, utilization, control, maintenance, supervision, and law enforcement.

In practice, the Garut Regency Government has not fulfilled it as mandated by law. Advocacy carried out by the Health Office to the Regional Government has not reached binding regulations but only in the form of a circular or appeal. And this is a problem that occurs both in the lower ranks and the community which in the end the achievement of the targets mandated by the law has not been achieved. As explained in the previous Chapter on Circulars where legal products in the form of Circulars both before and after the enactment of Law Number 10 of 2004 concerning the establishment of laws and regulations are not categorized as laws and regulations, because the circular is not a statutory regulation. In the general manual of printed service manuscripts edition of January 1, 2004 and Regulation number 22 of 2008 published by the Ministry of State Apparatus, the definition of a Circular Letter is an official text that contains notifications about certain matters that are considered important and urgent.

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Implementation in terms of law enforcement with the right to a good and healthy environment has not been able to run well. People are free to do anything of their own will, for example defecating in rivers, ponds, and so on without any warning or sanctions from the government. As we know, human rights and the environment are interrelated and needy, because by respecting human rights while also protecting the environment. Conversely, by protecting the environment, human rights are automatically protected. In addition to human rights and environmental issues, the implementation of government at the regional level was also reformed, so that local governments were given the widest authority in the management of autonomous regional governments and are now known as regional autonomy. According to Ryaas Rasyid, that: "the implementation of regional autonomy is expected to provide great benefits in the life of society, nation and state, especially fostering democratic life, encouraging efforts to empower communities in development, strengthening the ability and position of local governments, improving public services and community welfare through regional development". Through this regional autonomy, "development activities are basically an effort to improve the standard of human life by utilizing the natural resources contained in the vicinity. Local governments (provincial, regency/city governments) are given the authority to manage their own households. Local governments are considered to know more about the potential of their regions to be developed to improve the welfare of their communities. The authority of the local government is included in the management of natural resources available in its area. Through regional autonomy, it is hoped that local governments can manage their

<sup>&</sup>lt;sup>19</sup> http://vv.djp.depkumham.go.id/files/perda/implementationcy/2009/notesulbar.pdf

natural resources as well as possible, so that they can make a real contribution to the prosperity and welfare of the people.

Law enforcement of Community-Based Total Sanitation based on the Regulation of the Minister of Health Number 3 of 2014 concerning Community-Based Total Sanitation at UPT Puskesmas Pasundan and its law enforcement with the fulfillment of the right to a good and healthy environment does not exist at all. The results of monitoring and evaluation reported from village/village midwives when in their area there are people who reuse pacilingan whereas previously using public latrines with septic tanks was only in the form of reprimands. Human rights violation is any act of a person or group of people including state officials, whether intentional or unintentional or negligence, restricting, and/or depriving a person or group of people of their human rights guaranteed by this Law, and not obtaining, or fearing that they will not obtain a fair and correct legal solution, based on applicable legal mechanisms. Human rights must be strictly respected, protected, and enforced, and for that the government, state apparatus, and other public officials have the obligation and responsibility to ensure the respect, protection, and enforcement of human rights.

## D. CONCLUSION

UPT Puskesmas Pasundan Garut Regency has not implemented STBM based on the Minister of Health Regulation Number 3 of 2014 concerning Community-Based Total Sanitation. This is because the applicable regulations do not have binding force because they are in the form of Circulars which juridically regulate Circular Letters are not regulated in laws and regulations. Local governments need to immediately issue more binding regulations from regional heads so that the strength of legal ties is strong.

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