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Relationship Between Environmental Sanitation And Personal Hygiene And Diarrhea In Toddlers In The Service Area Of Putri Ayu Community Health Center, Jambi City

Safira Andini[1)], Andy Amir[2)], Andree Aulia Rahmat[3)], Usi Lanita[4)], Kasyani[5)]
[1,2,3,4,5)] Public Health Study Program, Faculty of Medicine and Health Sciences, University Jambi, Indonesia

*Corresponding Author
Email: Safiraandini2035@gmail.com

Abstract

Diarrhea remains a common health problem among toddlers. Diarrhea is the passage of loose or liquid stools three or more times per day, or more often than usual. The Putri Ayu Community Health Center service area has the highest number of diarrhea cases among toddlers in Jambi City. This study aimed to determine the relationship between environmental sanitation and personal hygiene and the incidence of diarrhea in toddlers in the Putri Ayu Community Health Center service area. This study aimed to determine the relationship between environmental sanitation and personal hygiene and the incidence of diarrhea in toddlers in the Putri Ayu Community Health Center service area. This was a quantitative study with a cross-sectional study design. The population comprised all toddlers in the service area of the Putri Ayu Community Health Center. The sample consisted of 94 toddlers. Sampling was conducted using proportional random sampling. Data were collected using a questionnaire and analyzed using univariate and bivariate analyses with thechi-square test. The proportion of diarrhea cases was 46.8%. Associations were found with clean water facilities (p=0,004,PR=1,966), latrine facilities (p=0,000,PR=2,978), wastewater disposal facilities (p=0,002,PR=2,248), waste management facilities (p=0,029,PR=1,766), and toddlers' personal hygiene (p=0,001,PR=2,240). The associated variables were clean water facilities, latrine facilities, wastewater disposal facilities, waste management facilities, and personal hygiene. Therefore, maintaining personal hygiene practices and environmental sanitation is recommended to reduce the risk of diarrhea in toddlers.

Keywords: Diarrhea, Environmental Sanitation, Personal Hygiene

INTRODUCTION

Diarrhea remains a public health burden in many countries, and toddlers are the group most susceptible to infection. If treatment is incorrect or delayed, an apparently mild digestive disorder can develop into a life-threatening condition (Timo Retna, Limbu Ribka and Romeo Petrus 2025). According to the WHO definition, a person has diarrhea if they pass loose to watery stools at least three times a day, or more often than their usual pattern. It is caused by bacterial, viral, or parasitic infections in the intestines. Every year, an estimated 1,7 billion cases of diarrhea affect children worldwide (WHO, 2024). The 2023 Indonesian Health Survey (SKI) recorded a national diarrhea prevalence of 2% across all age groups, 4,9% among toddlers, and 3,9% among infants. In addition, the Sample Registration Syestem 2018 published by the Ministry of Health of the Republic of Indonesia shows that diarrhea caused 7% of neonatal deaths and 6% of deaths among infants aged 28 days (Ministry of Health of the Republic of Indonesia 2024). In Jambi Province, the Indonesia Health Profile reported that 17,9% of toddlers had diarrhea in 2022 (Ministry of Health of the Republic of Indonesia 2022). This percentage fell to 13,1% in 2023 (Ministry of Health of the Republic of Indonesia 2023), then rose sharply to 28,90% in 2024 (Ministry of Health of the Republic of Indonesia 2024). At the city level, data from the Jambi City Health Office covering 20 community health centers recorded 910 cases of diarrhea among toddlers

in 2022, followed by 1,388 cases in 2023 and 1,989 cases in 2024. Only in 2025 did the number decrease to 1,680 cases. Putri Ayu Community Health Center ranked first for the number of diarrhea cases among children under five for four consecutive years, with 100 cases (2022), 157 cases (2023), 243 cases (2024), and 171 cases (2025).

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Although the figure declined in the most recent year, this health center still recorded the highest number of diarrhea cases among children under five in Jambi City.

Poor personal hygiene is one of the factors that causes diarrhea. However, environmental factors play a major role in the spread of diarrheal disease. These factors include clean living conditions, such as potable water, sanitary latrines, household waste management, and handwashing.Sanitation is an important component of environmental health and has a major impact on public health. Ineffective sanitation can lead to a decline in health, contamination of drinking water sources, and an increased risk of transmitting environmental diseases such as diarrhea. Diarrhea in children under five can result in deficiencies in various essential nutrients that are vital during their growth phase (Oktafia Febi, Salma Wa Ode and Yasnani 2025).

Environmental sanitation is supported by several factors: clean water sources, the availability and use of sanitary latrines, waste management, and wastewater disposal facilities (SPAL) (Zahirah et al.2025). Water used in daily life, whether directly or indirectly, has a significant effect on health. Therefore, water quality standards must be met to prevent water from becoming a source of disease (Hamzah and Rahmawati 2021). Sanitary latrines also play a major role in reducing the risk of diarrhea. Improperly disposed feces contaminate the environment and can transmit disease through insects, making families without sanitary latrines more susceptible to diarrhea (Kamaria Nada et al. 2026). Unhealthy home environments, such as those without SPAL facilities, affect the incidence of diarrhea among children under five; such conditions make it easier for disease-carrying insects to breed (Rondonuwud et al. 2025). Household waste management is also an important factor in diarrhea cases. Waste provides a breeding ground for insects and disease-causing microorganisms. In addition to polluting the environment, this can also increase the risk of spreading infectious diseases, including diarrhea (Asmah Sarifatul, Puteri Ade and Kusumawati Nila 2024). In addition to environmental factors, personal hygiene behavior also affects the incidence of diarrhea among children under five. The cleanliness of a child's body and surroundings depends greatly on the caregiver's behavior, especially the mother's (Anissah Neli 2025). Personal hygiene is the practice of maintaining bodily cleanliness to preserve and improve health. Poor personal hygiene makes it easier for pathogens to spread and increases the likelihood of a child developing diarrhea (Hamzah B. 2025).

In the preliminary survey at the site, cases of diarrhea among children under five were still found, and environmental sanitation was not well managed. Litter was scattered around residents' homes, and substandard wastewater drains caused water to pool. The area also frequently floods, potentially increasing the risk of diarrhea. These findings indicate that sanitation and personal hygiene problems among residents remain contributing factors to the high number of diarrhea cases among children under five in this health center's service area.

Based on the issues described above, this study aims to determine the relationship between environmental sanitation and personal hygiene and the incidence of diarrhea among children under five in the service area of Putri Ayu Community Health Center.

RESEARCH METHODS

This is a quantitative study with a cross-sectional study design. The study was condu.cted in the service area of Putri Ayu Community Health Center, Jambi City, from August to September 2026. The population consisted of all children under five living in the service area of Putri Ayu Community Health Center, totaling 670 children, with a sample of 94 respondents.

The independent variables in this study were clean water facilities, latrine facilities, wastewater disposal facilities, waste management facilities, and personal hygiene. Sampling used the proportional random sampling method, with a lottery method to select a sample representative of the population. Data were collected through interviews, questionnaires, and observation sheets. Data were analyzed using the Chi-square test.

RESULTS AND DISCUSSION

Univariate Analysis

Table 1. Distribution of Respondent Characteristics in the Service Area of Putri Ayu Community Health Center, Jambi City

Respondent Characteristics	n	Percentage (%)
Mother's Age		
18–32 years	48	51,1
33–46 years	46	48,9
Mother's Occupation		
Homemaker	79	84,0
Private-sector employee	8	8,5
Nurse	1	1,1
Civil servant	4	4,3
Self-employed	2	2,1
Mother's Education		
Elementary school	13	13,8
Junior high school	15	16,0
Senior high school	50	53,2
Bachelor's degree	15	16,0
Master's degree	1	1,1
Child Under Five's Age		
12–35 months	36	38,3
36–59 months	58	61,7
Toddler's Sex		
Male	41	43,6
Female	53	56,4

Referring to Table 1, most of the respondents' mothers were aged 18–32 years, namely 48 respondents (51,1%). In terms of occupation, most respondents were housewives (IRT), namely 79 respondents (84,0%). In terms of education, the majority had completed high school, namely 50 respondents (53,2%). Based on the toddlers' ages, the 36–59-month

group predominated, with 58 toddlers (61,7%). By sex, there were more female toddlers, namely 53 toddlers (56,4%).

Distribution of research variables

Table 2. Distribution of Respondents by Research Variables in the Working Area of Putri Ayu Community Health Center, Jambi City

Research Variables	n	Percentage (%)
Diarrhea Incidence		
Diarrhea	44	46,8
No Diarrhea	50	53,2
Personal Hygiene Behavior		
Poor	39	41,5
Good	55	58,5
Clean Water Facilities		
Does Not Meet Requirements	42	44,7
Meets Requirements	52	55,3
Healthy Latrine Facilities		
Does Not Meet Requirements	37	39,4
Meets Requirements	57	60,6
Wastewater Disposal Facilities		
Does Not Meet Requirements	51	54,3
Meets Requirements	43	45,7
Waste Management Facilities		
Does Not Meet Requirements	54	57,4
Meets Requirements 40 42,6	40	42,6

Table 2 shows that the majority of toddlers did not have diarrhea, namely 50 toddlers (53,2%), while 44 toddlers (46,8%) had diarrhea.In terms of personal hygiene behavior, most respondents were classified as good, namely 55 respondents (58,5%), while 39 respondents (41,5%) had poor behavior. For the availability of clean water facilities, the category meeting requirements predominated, with 52 respondents (55,3%), while 42 respondents (44,7%) did not meet requirements. For healthy latrine facilities, the category meeting requirements was also the largest, at 57 respondents (60,6%), while the remaining 37 respondents (39,4%) did not meet requirements. Conversely, wastewater disposal facilities more often failed to meet requirements, with 51 respondents (54,3%), while 43 (45,7%) met requirements. Similarly, waste management mostly did not meet requirements, at 54 respondents (57,4%), while 40 (42,6%) met requirements.

Bivariate Analysis

Association between Availability of Clean Water Facilities and Diarrhea in Toddlers

Table 3 Association between Clean Water Facilities and Diarrhea in Toddlers in the Working Area of Putri Ayu Community Health Center, Jambi City

Clean Water Facilities	Diarrhea		No Diarrhea		Total		P-Value	PR (95% CI)
	n	%	n	%	n	%		
Does Not Meet Requirements	27	64,3	15	35,7	42	100	0,004	1,966 (1,253–3,085)
Meets Requirements	17	32,7	35	67,3	52	100		
Total	44	46,8	50	53,2	94	100		

Table 3 shows that of the 42 respondents whose clean water facilities did not meet requirements, 27 toddlers (64,3%) had diarrhea and 15 toddlers (35,7%) did not. Of the 52 respondents whose clean water facilities met requirements, 17 toddlers (32,7%) had diarrhea, while 35 toddlers (67,3%) did not.

Based on statistical testing using the Chi-Square test, the p-value obtained was 0,004 ($p < 0,05$). This indicates an association between the availability of clean water facilities and diarrhea in toddlers in the working area of Putri Ayu Community Health Center, Jambi City. The analysis also showed a Prevalence Ratio (PR) of 1,966 (95% CI: 1,253–3,085). This means that toddlers in households whose clean water facilities do not meet requirements are 1,966 times more likely to have diarrhea than toddlers whose water facilities meet requirements.

Association between Healthy Latrine Facilities and Diarrhea in Toddlers

Table 4 Association between Healthy Latrine Facilities and Diarrhea in Toddlers in the Working Area of Putri Ayu Community Health Center, Jambi City

Healthy Toilet Facilities	Diarrhea		No Diarrhea		Total	
	n	%	n	%	n	%
Does Not Meet Requirements	29	78,4	8	21,6	37	100
Meets Requirements	15	26,3	42	73,7	57	100
Total	44	46,8	50	53,2	94	100

Based on Table 4, of the 37 respondents with toilet facilities that did not meet requirements, 29 children under five (78,4%) had diarrhea and 8 (21,6%) did not. Meanwhile, of the 57 respondents with compliant healthy toilets, 15 children under five (26,3%) had diarrhea, while 42 (73,7%) did not. The results of the statistical analysis using the Chi-Square test indicate a correlation between having a healthy toilet and diarrhea among children under five in the service area of Putri Ayu Community Health Center, Jambi City. The analysis also showed a Prevalence Ratio (PR) of 2,978(95% CI: 1,869–4,747), meaning children under five in households with toilets that do not meet requirements are 2,826 times more likely to have diarrhea than those whose toilets meet requirements.

Relationship Between Wastewater Disposal Facilities and Diarrhea in Children Under Five

Table 5. Relationship Between Wastewater Disposal Facilities and Diarrhea in Children Under Five in the Service Area of Putri Ayu Community Health Center, Jambi City

Water Disposal Facilities	Diarrhea		No Diarrhea		Total	
	n	%	n	%	n	%
Does Not Meet Requirements	32	62,7	19	37,3	51	100
Meets Requirements	12	27,9	31	72,1	43	100
Total	44	46,8	50	53,2	94	100

According to Table 5, of the 51 respondents with wastewater disposal facilities that did not meet requirements, 32 children under five (62,7%) had diarrhea and 19 (37,3%) did not. Of the 43 respondents with compliant facilities, 12 children under five (27,9%) had diarrhea, while 31 (72,1%) did not. The statistical analysis using the Chi-Square test yielded a p-value of 0,002 ($p < 0,05$). This indicates a correlation between wastewater disposal facilities and diarrhea among children under five in the service area of Putri Ayu Community Health Center, Jambi City. The analysis also indicates a 2,248-fold greater risk of diarrhea.

Relationship Between Waste Management Facilities and Diarrhea in Children Under Five

Table 6. Relationship Between Waste Management Facilities and Diarrhea in Children Under Five in the Service Area of Putri Ayu Community Health Center, Jambi City

Waste Management Facilities	Diarrhea		No Diarrhea		Total	
	n	%	n	%	n	%
Does Not Meet Requirements	31	57,4	23	42,6	54	100,0
Meets Requirements	13	32,5	27	67,5	40	100,0

Total	44	46,8	50	53,2	94	100,0

Based on Table 6, of the 54 respondents with waste management that did not meet requirements, 31 toddlers (57,4%) had diarrhea and 23 toddlers (42,6%) did not. Among the 40 respondents with waste management that met requirements, 13 toddlers (32,5%) had diarrhea and 27 toddlers (67,5%) did not. Based on the statistical test results using the Chi-Square test, the p-value was 0,029 (p < 0,05). This means that waste management is associated with diarrhea in toddlers in the service area of Putri Ayu Community Health Center, Jambi City. The Prevalence Ratio (PR) is 1,766 (95% CI: 1,069–2,919), meaning toddlers from households whose waste management does not meet requirements are 1,766 times more likely to have diarrhea than toddlers whose household waste management meets requirements.

Relationship between Personal Hygiene and Diarrhea in Toddlers

Table 7. Relationship between Personal Hygiene and Diarrhea in Toddlers in the Service Area of Putri Ayu Community Health Center, Jambi City

Personal Hygiene Behavior	Diarrhea		No Diarrhea		Total		P-Value	PR (95% CI)
	n	%	n	%	n	%		
Poor	27	69,2	12	30,8	39	100,0	0,001	2,240 (1,432–3,503)
Good	17	30,9	38	69,1	55	100,0		
Total	44	46,8	50	53,2	94	100,0		

Based on Table 7, of the 39 respondents with poor personal hygiene behavior, 27 toddlers (69,2%) had diarrhea and 12 toddlers (30,8%) did not. Among the 55 respondents with good personal hygiene behavior, 17 toddlers (30,9%) had diarrhea, while 38 toddlers (69,1%) did not. The statistical test results yielded a p-value of 0,001 (p < 0,05). This indicates an association between personal hygiene and diarrhea in toddlers in the service area of Putri Ayu Community Health Center, Jambi City. Toddlers with poor personal hygiene behavior are 2,240 times more likely to develop diarrhea.

Discussion

Relationship Between Clean Water Facilities and Diarrhea in Toddlers

Based on the results of the study conducted using statistical tests, the p-value obtained was of 0.004 (p < 0.05), indicating a correlation between the availability of clean water facilities and diarrhea in toddlers in the working area of Putri Ayu Community Health Center, Jambi City. Toddlers living in homes where clean water facilities do not meet requirements are 1.966 times more likely

to develop diarrhea.

This finding is consistent with Maywati et al. (2023), who reported a P-value of 0.000 and OR 6.057 (CI 2.535 – 14, 472). At alpha 0.05, these results demonstrate a significant relationship between clean water facilities and diarrhea in toddlers, with a 6.057-fold risk for toddlers whose water facilities do not meet requirements compared with those whose facilities do (Maywati Sri,Gustaman Rian and Riyanti Rini 2023). This study's results are consistent with those of Fitriani et al. (2026), which showed a significant correlation between the quality and availability of clean water and diarrhea in toddlers, based on Fisher's Exact Test (p < 0.001) (Fitriani, Hasrullah, Subhan and Andirani 2026).

Clean water that meets health requirements plays an important role in preventing

contamination by pathogenic microorganisms that cause diarrhea. Conversely, using contaminated water can increase the risk of gastrointestinal infections (Prasida et al. 2026). Since water is used every day for drinking, toileting, washing, and bathing, its source must meet health standards to prevent contamination (Munawarah, Hidayat and Sididi Mansur 2026). Observations found families whose well water sources were near sources of pollution, as well as water with physical quality that did not meet requirements. The researchers therefore assume that poor water quality in some households at the study site is a risk factor requiring serious attention, given that water is used not only for drinking but also for cooking and personal hygiene. Suboptimal water quality may provide a means of transmission for pathogens that cause diarrhea. Accordingly, efforts are needed to improve the availability and quality of household clean water facilities to prevent water contamination that could transmit diarrheal disease to toddlers.

Relationship Between Healthy Latrine Facilities and Diarrhea in Toddlers

Based on the results of the study analyzed statistically using the Chi-Square test, the p-value obtained was 0.000 ($p < 0.05$). This indicates a relationship between healthy latrine facilities and diarrhea in toddlers in the working area of Putri Ayu Community Health Center, Jambi City. The analysis also shows that toddlers living in households with latrines that do not meet health requirements are 2.978 times more likely to develop diarrhea.

Maywati et al. (2023) corroborated this finding, reporting a P-value of 0.000 and an Odds Ratio(OR) of 6.231. The relationship between latrine facilities and diarrhea in toddlers was also significant, and families with latrines that do not meet requirements face a 6.231-fold risk (Maywati Sri, Gustaman Rian and Riyanti Rini 2023). This study's results are also consistent with those of Fitriani et al. (2026), who reported a significant correlation between ownership of and access to suitable healthy latrines and diarrhea in toddlers ($p < 0.001$) (Fitriani, Hasrullah, Subhan and Andirani 2026). The characteristics of a feces disposal facility that meets health requirements include a water-seal trap and a floored

waterproof, adequately ventilated, covered, and connected to a septic tank or another safe containment system. The design of a healthy latrine aims to protect the environment from fecal contamination so that diarrhea and similar diseases are transmitted less often (Supiidin Muhammad, Susanto Adi and Saputra Rangga 2026). A healthy latrine that is owned and used protects the environment from human waste. An inadequate latrine instead allows pathogens to spread through soil, water, and vectors (Prasida et al. 2026).

Observations showed that respondents had latrines with floors that were not waterproof and slippery, with the septic tank located at a distance that does not meet the requirements of Ministry of Health Regulation No. 3 of 2014, namely 10 to 15 meters from a water source. This condition increases toddlers' exposure to diarrhea-causing pathogenic microorganisms, especially since toddlers are a group vulnerable to infection. Therefore, having a latrine that meets health requirements helps prevent environmental contamination and break the chain of disease transmission, thereby reducing the risk of diarrhea among toddlers in the working area of Putri Ayu Community Health Center, Jambi City.

Relationship Between Wastewater Disposal Sites and Diarrhea in Toddlers

Based on the results of the research conducted using statistical tests with the Chi-Square test, a p-value of 0,002 ($p < 0,05$) was obtained. This indicates a correlation between wastewater disposal sites and diarrhea in toddlers in the working area of Putri Ayu Community Health Center, Jambi City, with a 2,248-fold greater risk of diarrhea.

These findings are also consistent with research conducted by Sutarni et al. in 2026 showing a p-value <0,05, meaning that wastewater treatment is significantly correlated with diarrhea in toddlers (Sutarni, Yulianti Sasteri and Tranado Hengki 2025). The p-value of 0,01 < 0,05 reported by Sididi et al. in 2026 also demonstrates a significant relationship between wastewater management and diarrhea (Munawarah, Hidayat and Sididi Mansur 2026).

The harmful effects of wastewater disposal systems that do not meet health requirements include becoming a breeding ground for vectors, emitting foul odors, spoiling the surroundings for residents and neighbors, and ultimately triggering diarrhea (Fitriani, Hasrullah, Subhan and Andirani 2026). Wastewater discharged into rivers or ponds near homes creates breeding sites for vectors, unpleasant odors, and drains disconnected from the public wastewater network. Improper management can contaminate clean water sources and provide hiding places for vectors such as flies, threatening health and allowing diseases like diarrhea to spread through these channels. Wastewater contains many microorganisms and soap; improper handling can contaminate groundwater and surface water used daily by residents (Sutarni, Yulianti Sasteri and Tranado Hengki 2025).

Observations showed that some respondents discharged their wastewater into open ditches, and some had no drainage channel at all, leaving wastewater stagnant around their homes. Waste dumped without treatment can contaminate groundwater, rivers, and residents' drinking water sources. Therefore, residents should maintain wastewater drains so that they do not become breeding grounds for disease-carrying organisms. The government and health workers are also expected to work together more actively to educate the public about clean living practices and ensure that basic sanitation facilities meet adequate standards.

Relationship Between Waste Management and Diarrhea Incidence in Toddlers

Based on the results of the study conducted using statistical tests, the p-value obtained was of 0.029 ($p < 0.05$). This indicates a correlation between waste processing and diarrhea incidence among toddlers in the working area of Putri Ayu Public Health Center, Jambi City, with a 1.766-fold higher risk of diarrhea. These findings are supported by Maywati et al. (2023), who found a significant correlation between waste management facilities and diarrhea incidence among toddlers. Unhealthy waste management facilities pose a 6.323-fold risk of causing diarrhea in toddlers compared with families with good waste management facilities. Poorly managed waste tends to increase the likelihood of diarrhea in toddlers (Maywati Sri, Gustaman Rian and Riyanti Rini 2023).

Waste is an object that is no longer used and is discarded, and improper disposal

creates opportunities for vectors to transmit disease (Sutarni, Yulianti Sasteri and Tranado Hengki 2025). Children from households with poor waste management face a higher risk of diarrhea. Waste accumulations around homes can pollute groundwater and surface water, increasing the likelihood of contamination by pathogenic bacteria such as E. coli, Salmonella, and Shigella (Noorhidayah, Lely and Nofrai 2023).

According to the researchers, diarrhea incidence is also influenced by waste management, because piles of unattended waste become breeding grounds for disease-causing agents. At the respondents' homes, the trash bins in use were generally uncovered. Waste was also found piled in yards and then burned directly. Waste piles, especially organic waste, attract flies and rats that can transfer germs to food and areas used for daily activities. Improper waste handling increases the likelihood of diarrhea and other environmental diseases spreading, particularly when surrounding sanitation is also poor. Therefore, greater education, the provision of waste management facilities, and supervision are needed to reduce diarrhea incidence and gradually improve health.

Relationship Between Personal Hygiene and Diarrhea Incidence in Toddlers

Based on the results of the study conducted using statistical tests with the Chi-Square test, with a p-value of 0.001 ($p < 0.05$). This indicates a correlation between personal hygiene and diarrhea incidence among toddlers in the working area of Putri Ayu Public Health Center, Jambi City, with a 2.240-fold higher risk of diarrhea. These findings are supported by Noorhidayah et al. (2023), who reported a correlation between personal hygiene and diarrhea incidence, as shown by the Chi-Square test result of p-value 0.000 $< \alpha = 0.05$, indicating a significant correlation between personal hygiene and diarrhea incidence (Noorhidayah, Lely and Nofrai 2023). The findings are further supported by Herawati et al. (2023). Among n=108, the chi-square test showed a p-value of 0.000, or p-value =<0.05; personal hygiene was therefore associated with diarrhea, and neglecting personal hygiene increased the risk of diarrhea (Herawati and Rahman 2023).

Fundamentally, personal hygiene means taking steps to maintain cleanliness in order to avoid disease. Individuals who practice it consistently tend to be healthier than those who neglect it, and the better the behavior, the lower the likelihood of experiencing an undesirable outcome (Nazara et al. 2026). The risk of diarrhea in toddlers can be reduced through good personal hygiene, including bathing children twice a day, cleaning them promptly after they defecate, encouraging the use of sanitary latrines, trimming their nails regularly, and teaching them to wash their hands with soap and clean running water before and after meals (Azahra et al. 2026).

The researchers assume that the better the personal hygiene practices of toddlers, the lower the risk of diarrhea in toddlers. Conversely, poor personal hygiene increases the risk of diarrhea because it facilitates the transmission of disease-causing microorganisms. Based on the research findings, supported by previous journals and related theories, there is a correlation between personal hygiene and the incidence of diarrhea among toddlers in the service area of Putri Ayu Community Health Center, Jambi City.

CONCLUSION

Based on the research conducted on the relationship between environmental sanitation and personal hygiene and the incidence of diarrhea among toddlers in the service area of Putri Ayu Community Health Center, the results indicate that clean water facilities, latrine facilities, wastewater disposal facilities, waste management facilities, and personal hygiene are associated with diarrhea among toddlers.

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