



Personal Hygiene Behavior of Female Prisoners' Genitalia in Efforts to Fulfill Reproductive Health Rights at Class IIB Pacitan State Detention Center

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Abstract.

This study aims to examine the personal hygiene behavior of female inmates' genitalia at Class IIB Pacitan Prison and identify the factors influencing it. Using a descriptive qualitative approach, this study found that although prisoners generally exhibit good hygiene behavior, there are still some obstacles that need to be addressed. Limited facilities, lack of female medical personnel, and minimal socialization regarding reproductive health are the main hindering factors. These findings indicate the importance of comprehensive efforts to improve the quality of reproductive health services in correctional facilities to meet the basic rights of female inmates.

Keywords: *Personal Hygiene of the Genitalia, Female Prisoners, Reproductive Health Rights, Detention Center.*

INTRODUCTION

The concept of correctional facilities prioritizes a humane approach in treating prisoners compared to the prison system alone. This is based on the understanding that the implementation of prisoner rehabilitation programs will run optimally if they are in good health, both physically and mentally-emotionally. (Biaggy & Wibowo, 2020). The condition of a healthy prisoner is indirectly reflected in the 9th principle of correctional philosophy, which states that prisoners and inmates are only sentenced to the deprivation of liberty as one of the sufferings they endure.

This statement indirectly explains that the health of prisoners must be ensured because prisoners should not be subjected to additional suffering beyond the loss of their freedom of movement. Therefore, the treatment of prisoners is now increasingly adjusted and directed to achieve the goals of the correctional system itself, one of which is by implementing service programs that align with the objectives of rehabilitating and reintegrating prisoners. (Kurniawan & Subroto, 2021).

One of its important aspects is the healthcare for prisoners, which must be equivalent to general public healthcare services without distinguishing legal status, for example, through healthcare service programs available to all prisoners. (Widyatama & Wibowo, 2021). Health is one of the human rights that needs to be realized in accordance with the aspirations of the Indonesian nation as stated in the Pancasila and the Preamble of the 1945 Constitution of the Republic of Indonesia.

The concept of health according to the World Health Organization (WHO) is "Health is a state of complete physical, mental and social well-being and not merely the absence of disease

or infirmity," in other words, health is a perfect state both physically, mentally, and socially that is not just free from disease or weakness. (WHO, 1948).

From that understanding, health development must involve all aspects of community life, including female inmates in prisons and detention centers. The activities of basic health care and treatment for women in detention centers, prisons, and child correctional facilities consist of providing health information and education (promotive and preventive) and health services (curative and rehabilitative) that are implemented according to the specific situations and conditions of each detention center, prison, and child correctional facility. Every individual, regardless of gender, has the right to reproductive health that must be fulfilled and guaranteed by the state. In other words, reproductive health unites various aspects of science related to the human reproduction process comprehensively. (Kartono Mohamad, 2007).

Reproductive health based on Peraturan Pemerintah (PP) Nomor 61 Tahun 2014 concerning Reproductive Health, is a state of complete physical, mental, and social well-being not merely the absence of disease or disability related to the reproductive system, functions, and processes.

In the Decision of the Director General of Corrections of the Ministry of Law and Human Rights of the Republic of Indonesia Number: PAS-03.OT.02.02 Year 2020 Regarding Standards for Basic Health Services and Care for Women in Prisons, Detention Centers, and Child Correctional Institutions, it is explained that the basic concept of implementing basic health services and care for women in Detention Centers, Prisons, and Child Correctional Institutions includes targets as service providers, service recipients, service implementation periods, and the scope of these services as well as the activities of these services.

One of the efforts to maintain reproductive health is by practicing genital personal hygiene. Intimate hygiene is important to protect the organs and reproductive functions from various diseases or disorders in women. (Kementerian Kesehatan RI, 2015). Personal hygiene is a knowledge, attitude, and action to maintain and prevent the risk of disease occurrence, and to protect oneself from disease threats. (Proverawati, 2009 dalam Zakiudin & Shaluhayah, 2016). Genital personal hygiene is necessary for both men and women, but it is more crucial for women to maintain genital cleanliness because the female vagina is more susceptible to infections and bacteria. All women in this country, especially those in prisons or detention centers, face the same difficulties in maintaining the cleanliness of their genitals.

Globally, the number of female prisoners is only about 5% of the total number of prisoners. However, its population tends to increase every year, especially in developing countries and countries with a relatively high rate of substance use. (UNAIDS, 2008). Based on that data, there has been an increase in the number of female prisoners in prisons and detention centers in Indonesia from year to year. This matter must receive attention from the government considering that the characteristics of female prisoners differ from those of male prisoners.

Female prisoners have special conditions such as menstruation, pregnancy, and breastfeeding that men do not experience. Health problems often arise among female prisoners due to environmental pressures such as menstrual disorders, discharge, even miscarriages, weak physical and mental conditions, lack of access to gender-specific health services, inadequate nutrition, and insufficient prison facilities.

Additionally, female prisoners with a history of drug abuse, high-risk sexual behavior, or victims of sexual violence tend to have higher prevalence rates of HIV and STIs compared to male prisoners. Therefore, sustainable and adequate healthcare services are needed for female prisoners. Due to limited access to reproductive health consultation services, female inmates tend to consider issues of hygiene or cleanliness of their genitalia as common and normal occurrences.

This belief is reinforced by Timmreck's statement (Christy & Rondhianto, 2015), that bad habits in maintaining personal hygiene can negatively impact one's health. Therefore, it is very important to always maintain and care for the health and cleanliness of the body regularly, as it can provide physical and mental well-being for individuals.

Pacitan Class IIB State Detention Center is an institution or place that performs the function of serving detainees. Although the number of female prisoners is small and they are a minority in the Class IIB Pacitan State Detention Center, the lack of attention to genital personal hygiene among female prisoners may occur because they have more limited access or opportunities to obtain facilities and health services that support the care and fulfillment of their reproductive health needs, compared to women outside the prison.

LITERATURE REVIEW

In compiling this thesis, the researcher uses theories that support and are related to the ongoing research. Some relevant theories:

Shehandu B. Karr's Behavioral Theory (1983)

According to Kar, an individual's or community's health behavior can be determined by the intention within them towards health objects, the presence or absence of support from society or close individuals, the ease or difficulty of accessing health information, the individual's freedom to decide whether to act or not, and the individual's condition to behave/act or not behave/act. (Notoatmodjo, 12 C.E.).

So then Karr elaborated it into a function with factors such as behavior intention, social support, accessibility of information, personal autonomy, and action situation. (Rany, n.d.). Of the five functions, they can be explained as follows:

- a. Behavior Intention, which is the intention from within to act and engage in a health behavior.
- b. Social Support, which is the social support from close and trustworthy individuals to carry out health behaviors.
- c. Accessibility of Information, which is the access to information obtained by individuals to support their intention to engage in health behaviors.
- d. Personal Autonomy, which is the personal autonomy related to the decision-making process of whether to engage in health behaviors or not.
- e. Action Situation, which is the situation that supports and enables individuals to engage in health behaviors or not.

Behavior originates from both internal and external factors of an individual, so the characteristics of the informants such as gender, age, education level, and general knowledge about genital personal hygiene are among the internal factors of the inmates that can influence their genital personal hygiene behavior. Another internal factor that can influence female inmates to have healthier genital personal hygiene behavior is the behavior intention or the intention within themselves to engage in better or worse behavior. Then there is personal autonomy or the personal autonomy of the inmate to decide whether they will behave better or not after gaining knowledge or information from outside themselves regarding genital personal hygiene. External factors that can influence the personal hygiene behavior of female inmates are social support, accessibility of information, and action situation.

Levey Loomba Health Service Theory (1973)

The definition of health service according to Levey and Loomba, as quoted by (Azwar, 1996), is every effort organized individually or collectively within an organization to maintain, improve health, prevent and cure diseases, and restore the health of individuals, families, groups, and communities.

Levey and Loomba in (Azwar, 1996) propose service dimensions that determine the success of health services, namely input, process, output, impact, and feedback. All these parts are interconnected and influence each other, as follows:

a. Input

This is a subsystem that provides all inputs for the functioning of a service, such as reproductive health services. Therefore, inputs include community potential, health workforce, and health facilities.

b. Process

An activity that functions to transform an input into the expected outcome of the service. In the case of health services, the process refers to various activities within health services.

c. Output

The result obtained from a process in health services can be quality, effective, and efficient health services that are accessible to all layers of society, leading to patients recovering and being optimally healthy.

d. Impact

This is the consequence produced by the service that occurs relatively long after the results are achieved. As in healthcare services, the impact will make the community healthy and reduce morbidity and mortality rates because the services are accessible to the community.

e. Feedback

It is a result that also serves as input, and this occurs from a service that is interrelated and mutually influential. Feedback in healthcare services can take the form of the quality of healthcare personnel, which can also serve as input that continuously improves.

METHODS

The research design in this thesis uses descriptive qualitative. Sugiyono (2013) defines descriptive qualitative research as research aimed at describing and interpreting phenomena occurring in the current situation and conditions. The design of this research aims to describe the observed phenomena in detail and comprehensively, without manipulating variables or seeking cause-and-effect relationships.

In qualitative research, two types of primary and secondary data are used. Primary data is obtained directly from the field, in this study acquired through interviews with the Head of the Prison Service Subsection, 1 Staff of the Prison Service Subsection, and 1 Polyclinic Doctor of the Prison, 6 Female Inmates. Secondary data is sourced from previous documents or written materials. Meanwhile, the data collection techniques used in this research are through observation, interviews, and document studies. Then, data analysis was conducted interactively and continuously. The process includes data reduction, data presentation, and conclusion drawing.

RESULT

This research was conducted at the Class IIB Pacitan Detention Center, a correctional facility under the East Java Ministry of Law and Human Rights, which has been established since the colonial era. Located at Jalan Ronggowarsito No. 5, Pacitan, this detention center occupies an area of 3,093 m². It is known that the total number of correctional facility inmates is 111 people.

The total number of detainees is 15 people, consisting of 11 male detainees and 4 female detainees. Meanwhile, the total number of convicts is 102 people, consisting of 91 male convicts and 5 female convicts. Then, the total number of employees is 60 people, with 56 male employees and 4 female employees.

Issues such as reproductive health also need to be addressed considering that there are women in the detention center who are vulnerable to such problems. According to the International Conference on Population and Development (ICPD), reproductive health refers to a condition in which a person's body is in optimal physical, mental, and social state when engaging in all activities related to their reproductive system, functions, and processes, not only concerning the presence or absence of health disturbances such as diseases or disorders. (Eko Winarti, 2017).

To avoid health problems, it is necessary to maintain personal hygiene. Personal hygiene is a very significant aspect of maintaining optimal body health and preventing the transmission of various infections. Personal hygiene of the genitalia refers to actions taken to maintain the cleanliness of the genital organs, stay healthy, and avoid diseases. Actions taken to maintain genital organs include regularly changing underwear at least twice a day, changing sanitary pads during menstruation every six hours at most, and properly washing the genital area, specifically from front to back. (Sandriana, Ibnu, & Watief A, 2015). Based on that theoretical foundation, the research results are as follows.

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Based on the observation results regarding the personal hygiene behavior of female prisoners' genitalia at Class IIB Pacitan State Detention Center, all informants exhibited good personal hygiene behavior of their genitalia. The behaviors carried out include:

1. Using the Bathroom and Washing Facilities Effectively for Personal Hygiene Needs
2. Implementation of Cleaning Duty for the Women's Block
3. Reproductive Health Check-ups for Female Inmates

This research uses interview methods with eight individuals, consisting of one doctor, one detention service sub-section head, one staff member, and five inmates. They were chosen as data sources because they have direct experience and knowledge regarding the issue being studied. Then, the analysis is based on 2 theories, namely Shehandu B. Karr's Behavioral Theory and Levey Loomba's Health Service Theory as follows.

Shehandu B. Karr's behavioral theory

Based on Shehandu B. Karr's behavioral theory, an individual's health behavior can be determined by their intention towards health-related objects. This theory outlines a function with the following factors, namely:

a. Dimension of Behavior Intention

The interview results revealed that all female inmates who were informants shared a common motivation to maintain the cleanliness of their intimate organs, which is to prevent the onset of various diseases. They realize that diseases related to poor hygiene can seriously impact their health, even posing a life-threatening risk. Additionally, they also consider the social aspect of hygiene, which is to avoid causing discomfort to others around them. This awareness of the importance of cleanliness shows that female prisoners have a good understanding of the relationship between clean living habits and health. This indicates that with proper support and education, hygiene behavior can be improved and become a positive habit among female prisoners.

b. Dimension of Social Support

Based on interview excerpts and the doctor's explanation, it can be concluded that social support for female inmates at the Pacitan Detention Center, especially regarding menstrual hygiene, has had a positive impact on their behavior and health. The sanitary pad facilities provided by the prison authorities, whether from the institution's budget or donations from families, have helped meet the basic needs of the inmates. However, despite that, there are still gaps in the efforts to prevent reproductive health issues. The main focus of current development is more on treatment when problems have already arisen, while more structured prevention programs, such as periodic reproductive health education, are still not optimal. This indicates the potential to improve the quality of life for female prisoners through the provision of more comprehensive information and more proactive programs in maintaining their health.

c. Dimension of Accessibility of Information

Data obtained from interviews with female inmates at Class IIB Pacitan Prison indicate a lack of specific information regarding reproductive health, particularly related to personal genital hygiene. Although inmates generally receive socialization about personal and environmental hygiene, more detailed and targeted information regarding reproductive health still remains an unmet need.

d. Dimension of Personal Autonomy

The results of this study indicate a positive correlation between the provision of information on genital hygiene and the increase in awareness and hygiene practices among female prisoners. The inmates showed a proactive attitude in maintaining personal hygiene after receiving socialization, as seen in the interview excerpt. This shows that educational efforts have successfully instilled an understanding of the importance of maintaining genital hygiene for health. However, it should be noted that although prisoners have the desire to adopt better behavior, behavioral change does not automatically and permanently occur. As the doctor expressed, behavioral change ultimately depends on individual awareness and motivation. Without ongoing monitoring and support, behavioral changes are likely to be temporary.

e. Action Situation Dimension

Based on interviews with female inmates, it can be concluded that, in general, the facilities provided by the Class IIB Pacitan Detention Center to support genital personal hygiene behavior are quite adequate. This is evident from the provision of facilities such as sanitary pads given periodically by the detention center authorities. In addition, most inmates also mentioned that the washing areas and bathrooms are in clean condition. However, there are several obstacles that need to be considered regarding the availability and quality of the infrastructure.

One of the main obstacles is the limited drying space, which is small, receives little sunlight, and has minimal lighting. This condition can hinder the drying process of clothes and cause unpleasant odors, which can affect personal hygiene. Moreover, not all inmates can easily obtain sanitary pads, because the prison cooperative does not provide them.

Levey Loomba's Health Service Theory

Levey Loomba's health service theory is an effort carried out individually or in groups within an organization to maintain, improve health, prevent and cure diseases, and restore the

health of individuals, families, groups, and communities. Here are the service dimensions that determine the success of health services, namely:

a. Input Dimension

Analysis of the input dimension in reproductive health services at Class IIB Pacitan Detention Center, particularly related to health personnel and facilities, reveals several shortcomings. Based on the results of interviews with inmates, the existing healthcare facilities are deemed inadequate and ineffective. The lack of female medical staff and the presence of only one male doctor pose a challenge for female inmates to consult on reproductive health issues.

In addition, the unsanitary environmental conditions, such as the rat problem in the drying area, are also under scrutiny. This indicates that the existing healthcare facilities do not fully support the health needs of prisoners, especially women, and have the potential to hinder their access to adequate healthcare services. These findings underscore the importance of improving the quality and quantity of medical personnel, as well as upgrading healthcare facilities in correctional institutions to ensure the fulfillment of prisoners' health rights.

b. Process Dimension

Analysis of the process dimension in reproductive health services at Class IIB Pacitan Prison shows deficiencies in the delivery of information and socialization related to maintaining reproductive hygiene. Although there have been efforts from the detention center to provide basic health services such as blood sugar tests, blood pressure checks, and HIV testing, specific information regarding reproductive health is still limited.

c. Output Dimension

The research results indicate that the output dimension of health services at Class IIB Pacitan Prison has shown effectiveness in responding to the health conditions of inmates. However, despite proactive efforts in health management, there are still several aspects that need improvement.

First, the lack of socialization regarding health, especially women's reproductive health, poses a barrier to enhancing the understanding and awareness of inmates. Second, the presence of male doctors in health facilities makes female inmates feel uncomfortable consulting about personal health issues. This indicates the need for a more sensitive and holistic approach in healthcare services, including the availability of female medical personnel and more comprehensive outreach programs. It is also important to raise the awareness of inmates about the importance of reporting health complaints as early as possible so that effective treatment can be provided.

d. Dimension of Impact

The results of this study indicate that the dimension of impact from reproductive health services at the Class IIB Pacitan Prison significantly influences positive behavioral changes in female inmates. Through interviews, it was found that after receiving health services and socialization, the inmates became more concerned about their hygiene and reproductive health.

e. However, this behavioral change is still temporary and requires continuous effort to maintain it. The replacement of new prisoners necessitates regular and intensive educational and socialization programs. Additionally, the initial screening results showing a high risk of

cervical cancer among female inmates indicate the importance of a more comprehensive screening and early detection program.

f. Feedback dimension

In the healthcare services at Rutan Kelas IIB Pacitan, there is a fairly good mechanism for accommodating the aspirations and input from the inmates. Nevertheless, there are differing perceptions among the sources. Some inmates provided suggestions for improvements regarding facilities and services, while others were satisfied with the existing services. This indicates that the Class IIB Pacitan Detention Center has made efforts to involve inmates in the evaluation process of health services.

Obstacles to Personal Hygiene Behavior of Female Prisoners' Genitalia in Efforts to Fulfill Reproductive Health Rights at Class IIB Pacitan State Detention Center

The implementation of genitalia personal hygiene behavior among female prisoners at Class IIB Pacitan Detention Center faces several significant obstacles.

1. Limited facilities

Especially in the women's block, it has become the main obstacle. The lack of adequate drying space, poor lighting, and environmental cleanliness issues such as the presence of rats directly impact the inmates' ability to maintain the cleanliness of their clothes and themselves.

2. The shortage of healthcare workers

The shortage of healthcare workers, specifically for women, such as doctors and nurses, poses a challenge in providing comprehensive reproductive health services. Female inmates are reluctant to consult male doctors regarding women's health issues, which hinders their access to proper healthcare.

3. Lack of Information

Socialization or information related to genital personal hygiene and reproductive health is a significant gap in efforts to raise awareness and knowledge among prisoners. The lack of education has the potential to cause more serious health problems in the future. Therefore, serious efforts are needed to address these obstacles in order to ensure the fulfillment of reproductive health rights for female prisoners at the Class IIB Pacitan Detention Center.

CONCLUSION

This study shows that although female inmates at the Class IIB Pacitan Detention Center generally have good personal hygiene behavior, there are still some obstacles that need to be addressed. Limited facilities, lack of female medical personnel, and minimal socialization regarding reproductive health are hindering factors. Nevertheless, the social support from fellow inmates and officers, as well as the generally available facilities, have helped raise awareness of the importance of maintaining cleanliness.

Based on the application of Shehandu B. Karr's Behavioral Theory and Levey Loomba's Health Service Theory, this research highlights the importance of social support, information accessibility, and facility quality in shaping health behavior among female prisoners. Although there is an intention to maintain cleanliness, environmental constraints and limited healthcare services are hindering factors. The results of this research provide important implications for the development of more comprehensive rehabilitation programs in correctional institutions.

LIMITATIONS

Based on the application of Shehandu B. Karr's Behavioral Theory and Levey Loomba's Health Service Theory, this study highlights the importance of social support, information accessibility, and facility quality in shaping health behavior among female prisoners. Although the intention to maintain cleanliness is already present, environmental constraints and limited healthcare services become hindering factors. The results of this research provide important implications for the development of more comprehensive rehabilitation programs in correctional institutions.

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