



Published by: Institut Kesehatan Karsa Husada Garut

Jurnal Pengabdian Masyarakat DEDIKASI

Homepage: <https://dedikasi.lp4mstikeskhg.org/home>

PRODUCTIVE WASTE MANAGEMENT FOR THE COMMUNITY IN THE WORKING AREA OF PEMBANGUNAN COMMUNITY HEALTH CENTER, GARUT REGENCY

ARTICLE INFO

Article history:

Received July 09th, 2026

Revised July 19th, 2026

Accepted July 29th, 2026

Keywords:

Environment health, Pollution, Waste
management

ABSTRACT

The community service program titled “Productive Waste Management for Communities in the Service Area of the Pembangunan Community Health Center, Garut Regency” is an implementation of the Tri Dharma of Higher Education by faculty members of the Karsa Husada Health Institute in Garut, aimed at improving the community’s knowledge, awareness, and skills in managing waste productively while supporting environmental health. This program was prompted by the low level of household waste management practices, as evidenced by the large number of residents who still do not sort their waste and dispose of it improperly, which has the potential to cause environmental pollution and various diseases. Activities held in Citereup Village, Sukagalih Subdistrict, included group exercises, educational sessions on 3R-based waste management, instruction on turning used cooking oil into soap, and health screenings covering blood pressure, blood sugar, cholesterol, and uric acid levels. The event was carried out through a collaboration between faculty members, students, the Pembangunan Community Health Center, the subdistrict government, and the Zero Waste Foundation. The community showed great enthusiasm throughout the event. This program is expected to promote clean and healthy living habits, reduce waste generation, and encourage the use of waste as an economically valuable and sustainable resource for the community.

Keywords: Environment health, Pollution, Waste management

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1. INTRODUCTION

Indonesia is currently facing health challenges known as the “triple burden”—a threefold burden of various types of diseases, namely: (1) the emergence of new infectious diseases and the re-emergence of old infectious diseases; (2) Communicable diseases that have not yet been optimally managed; and (3) An annual increase in the number of noncommunicable disease (NCD) cases (Lungguh Perceka et al., 2025). The complexity of these issues remains a priority for the government, which is why effective policies and strategies are needed to address these various health challenges (Organization, 2022).

These health issues are influenced by various factors, including behavioral and environmental factors. These factors stem from low public awareness of the importance of health. Additionally, unequal and still-low levels of education—particularly in residential areas—as well as limited health facilities and infrastructure also contribute to worsening public health conditions. Most health problems arise from individual behaviors and environmental conditions that do not prioritize health considerations (Sulaiman, 2021). Health is influenced by various factors, such as income, education, social connectedness, employment, and access to health services (Qowiyyum & Pradana, 2021). Furthermore, health issues frequently encountered in the community are also caused by demographic conditions, such as population size (Perceka, 2018).

A common problem resulting from population growth is waste management. The issue of waste remains one of the challenges that must be urgently addressed in Indonesia. The volume of waste generated by human activities continues to increase in tandem with population growth, rising consumption levels, and technological advancements (Suharta & Lungguh Perceka, 2024).

Waste that is not properly managed leads to environmental and public health problems. Dangerous diseases that can arise from waste include diarrhea, dengue fever, typhoid, and others. Environmental problems also arising from waste include air pollution through odors that interfere with breathing and water pollution resulting from leachate generated by waste that seeps into the ground, thereby contaminating groundwater and/or nearby water sources. However, current community practices have not yet maximized waste management. The risks associated with these behaviors will become health issues in the future (Andhika Lungguh Perceka et al., 2025).

A survey conducted among residents of Sukagalih Village—within the service area of the Pembangunan Community Health Center—by third-year D-3 Nursing students from the 30th cohort identified several health issues related to waste disposal and management. The data included information on household waste management, specifically that 1,594 (61.5%), 306 (11.8%) dumped it into rivers, 2 (0.1%) buried it, 61 (2.4%) burned it themselves, 2 (0.1%) composted it themselves, and 628 (24.2%) had it collected by sanitation workers. Regarding data on household waste sorting (organic and non-organic), it was found that 2,379 households, or approximately 91.6%, do not sort their waste, while 217 households, or 8.4%, do sort their waste (Sulistiyowati et al., 2024).

Based on this data, it is evident that many residents still dispose of waste in an unproductive manner. Nearly the entire community fails to manage waste properly starting from their households. Given this issue, an intervention is needed to address the problem of inadequate waste management in households that meets health standards. The agreed-upon activity is the implementation of health education on productive and health-compliant waste management among the community in Sukagalih Village, within the service area of the Pembangunan Community Health Center (Karim et al., 2022).

2. METHODS

a. Types and Approaches of Activities

This Community Service (PkM) activity employs a community empowerment approach based on education and community participation. This approach involves the community as both participants and partners in efforts to improve knowledge, awareness, and skills regarding productive and hygienic waste management.

The methods used include health education, outreach, demonstrations or practical sessions on the utilization of household waste, group physical activities, and health screenings. This approach was selected based on the issues identified within the community, particularly the still-low rates of

household waste sorting and management. Preliminary survey results indicate that 91.6% of households do not yet sort their household waste.

b. Location and Date of Implementation

The Community Service activity was conducted in Citereup Village, Sukagalih Subdistrict, within the service area of the Pembangunan Community Health Center in Garut Regency, on March 28, 2026.

c. Activity Targets

The activity targets the residents of Citereup Village, Sukagalih Subdistrict, within the service area of the Pembangunan Community Health Center in Garut Regency. Participants in the activity received education on waste management and the utilization of household waste, as well as health screening services.

The implementation of the activity involved several parties, namely:

- a. The residents of Citereup Village as the primary target of the activity.
- b. Faculty members from the Karsa Husada Garut Health Institute as facilitators and resource persons.
- c. Students as activity implementers and screening support staff.
- d. Pembangunan Community Health Center as a partner in public health activities.
- e. Zero Waste Foundation as a resource person for waste management materials.
- f. Fitness instructors as facilitators for physical activity sessions.
- g. Implementation Phases

d. The activity was carried out through the following phases:

1. Preparation Phase

The preparation phase began with the identification of community health and environmental issues based on survey results. The main issues identified were the still-low rate of household waste sorting, the continued practice of some community members dumping waste into rivers, and the lack of optimal productive waste management.

Next, coordination took place among the implementation team, the sub-district government, the Pembangunan Community Health Center, the community, and other parties involved in the activities. This coordination was carried out to determine the location, targets, materials, resource persons, implementation details, and the division of tasks among the various parties.

2. Implementation Phase

The activities were implemented through several forms of intervention.

a. Group Exercise

The activities began with a group exercise session with the community. The exercise was led by an instructor from Mimin Lovers. This activity aims to increase community participation while providing physical activity that is both promotive and preventive.

b. Health Education on Waste Management

Health education on waste management was provided to the community by a speaker from the Zero Waste Foundation. The material covered waste-related issues, the impact of waste on the environment and health, waste sorting, waste reduction, reuse, and waste processing to create both practical and economic value. The session was conducted interactively, giving participants the opportunity to understand waste issues in their local communities and discuss waste management practices that can be applied in daily life.

c. Education on the reuse of used cooking oil

Community members received education on how to reuse used cooking oil to make bath soap. The material was presented by a Pharmacy lecturer, Ms. Diah Wardhani. This activity aims to introduce alternative uses for household waste so that used cooking oil is not directly disposed of into the environment. The activity employs a demonstration- and education-based approach to help the community understand the process of transforming waste into useful products.

d. Screening for Non-Communicable Diseases

Health screenings were conducted as part of promotive and preventive activities. The examinations included:

- a. Blood pressure;
- b. Blood sugar;
- c. Uric acid; and
- d. Cholesterol.

The screenings were conducted by faculty members and students in collaboration with the Pembangunan Community Health Center. The results were provided to participants as preliminary information regarding their health status (Perceka et al., 2022).

e. Evaluation Phase

Activity evaluation was conducted directly during and after the event. The evaluation included:

1. Process evaluation, which assessed the smoothness of the activity's implementation, community attendance and participation, and partner involvement.
2. Community response evaluation, which involves observing participants' enthusiasm during educational sessions, discussions, and practical activities.
3. Comprehension evaluation, which is conducted through question-and-answer sessions and discussions regarding waste management and the reuse of used cooking oil.
4. Health service evaluation, specifically ensuring that blood pressure, blood sugar, uric acid, and cholesterol screenings are conducted for community members participating in the program.
5. Health service evaluation, specifically ensuring that blood pressure, blood sugar, uric acid, and cholesterol screenings are conducted for community members participating in the program.
6. Sustainability evaluation, which involves identifying follow-up needs in the form of community assistance in productive waste management.

It should be noted that the activity report does not provide pre-test and post-test data or quantitative data on changes in community knowledge. Therefore, the evaluation of knowledge improvement in this activity is based on participants' responses, participation, discussions, and engagement, rather than on a statistical analysis of changes in knowledge scores.

d. Educational Methods

The educational methods used in the activity included:

- Lectures/outreach sessions, to convey concepts and information regarding waste management;
- Discussions and Q&A sessions, to provide opportunities for the community to raise issues and receive explanations;
- Demonstrations, to introduce the reuse of used cooking oil into useful products;
- Hands-on practice/direct participation, to increase community involvement in the activities;
- Health screenings, as an effort toward early detection of risk factors for noncommunicable diseases.

These methods were used in an integrated manner so that the activities were not only focused on increasing knowledge but also provided the community with hands-on experience.

e. Collaboration and Partnerships

The activities were carried out based on the principle of collaboration among universities, the community, local government, and health care facilities. The Karsa Husada Garut Health Institute played a role in planning and implementing the activities through its faculty and students. The Pembangunan Community Health Center (Puskesmas) supported the community health screening activities. The community served as both participants and partners in implementing waste management in their residential areas.

This collaboration is a crucial part of the problem-solving strategy designed for the initiative, which involves the community, community health workers, community leaders, village officials, and the Community Health Center in productive waste management activities.

f. Success Indicators

Success indicators for the initiative are established based on both the process and outcomes of the activities, namely:

No.	Indikator	Target
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1	Public presence	The community participates in the activities in accordance with the objectives.
2	Public participation	Participants actively took part in the series of activities.
3	Knowledge of waste management	Participants understand the principles of productive waste management.
4	Waste utilization	Participants learn about alternative uses for used cooking oil.
5	health screening	Participants received blood pressure, blood sugar, uric acid and cholesterol checks
6	Cross-sector Collaboration	Implementation of collaboration among higher education institutions, community health centers (Puskesmas), the community, and partners.
7	Sustainability	There is a commitment to continue productive waste management.

1. Activity Implementation Process

Overall, the method for implementing the activities can be described as follows:

Problem identification → Coordination with partners → Activity preparation → Group exercise → Education on waste management → Education on the reuse of used cooking oil → NCD screening → Evaluation → Follow-up plan

This method is expected to provide a comprehensive approach to addressing community issues, particularly those related to waste management and raising health awareness. The community empowerment approach is designed so that community members not only gain knowledge but are also able to apply waste management practices productively and sustainably in their daily lives.

3. RESULT AND DISCUSSION

a. Result

A Community Service (PkM) activity themed “Productive Waste Management for Communities in the Service Area of the Pembangunan Community Health Center, Garut Regency” was held on March 28, 2026, in Citereup Hamlet, Sukagalih Village/Subdistrict, within the service area of the Pembangunan Community Health Center, Garut Regency. The activity was carried out through an educational, promotional, and community empowerment approach, involving faculty members, students, community members, and staff from the Pembangunan Community Health Center.

The event began with a group exercise session led by fitness instructor Mimin Lovers. This activity aimed to create an energetic atmosphere and boost community participation before moving on to the main program. Community members showed great enthusiasm in participating in the group exercise.

The next activity consisted of health education on waste management. The material was presented by the Zero Waste Foundation, which educated the community on the importance of proper waste management—from waste sorting and waste reduction to reuse and processing—to ensure waste has both practical and economic value. This education is crucial, given that previous survey results indicated that the majority of families in the target area had not yet sorted their household waste. A total of 2,379 families, or 91.6%, had not yet sorted their waste, while only 217 families, or 8.4%, had done so.

In addition to waste management education, the community received instruction on turning used cooking oil into bath soap, presented by Pharmacy lecturer Ms. Diah Wardhani. This activity highlighted that household waste does not always have to be discarded but can be processed into useful products. The reuse of used cooking oil is one form of waste management that supports the concept of waste as a resource while also providing productive opportunities for the community (Lungguh Perceka et al., n.d.).

The event also included a screening for non-communicable diseases (NCDs), which covered blood pressure, blood sugar, uric acid, and cholesterol checks. The screenings were conducted by faculty members and students in collaboration with the Pembangunan Community Health Center. The screening provided community members with the opportunity to receive direct information about their health status and served as part of promotive and preventive efforts in public health services (Rafeinia, 2024).

Overall, the event proceeded smoothly and received a positive response from the community. Residents participated enthusiastically in the series of activities, gaining knowledge about waste management and the utilization of household waste, as well as receiving health checkups through the NCD screening. The event report also noted that door prizes were awarded to participants as a token of appreciation and to encourage community involvement in the event.

b. Discussion

1. Raising Public Awareness of Waste Management

The issue of waste is one of the environmental problems closely linked to public health. Based on the results of an initial survey in the Sukagalih neighborhood—within the service area of the Pembangunan Community Health Center—various suboptimal waste management practices were still observed. A total of 11.8% of households dispose of waste into rivers, while the majority of households do not yet sort their household waste. These conditions highlight the need for interventions that not only provide information but also encourage behavioral change among the community.

Health education on waste management provided through the Community Service (PkM) program is a form of promotive intervention aimed at increasing public knowledge and awareness. The educational materials guide the community to view waste not merely as something to be discarded, but as a resource that can still be utilized.

This approach aligns with the concept of community-based waste management, which positions the community as the primary actor in the planning, implementation, and evaluation of waste management. Community participation is a critical factor because effective waste management must begin at the source of the waste, particularly in households (Muhamnu et al., 2024).

Thus, the outreach activities conducted not only provide theoretical knowledge but are also expected to serve as the initial step toward changing community behavior in sorting and managing waste more responsibly.

2. Utilizing Waste as Valuable Products

One key aspect of the Community Service (PkM) activities is introducing the concept of transforming household waste into useful products. The material on processing used cooking oil into soap provides a concrete example that waste can be reused if managed using the proper techniques.

This concept aligns with the “waste to wealth” approach, which involves transforming trash or waste into something that has both practical and economic value. In a community context, this approach has the potential to boost motivation because waste management is viewed not only as an obligation to maintain environmental cleanliness but also as a productive activity. The concept of utilizing waste as a resource also forms one of the foundations of community-based waste management developed through this initiative.

Processing used cooking oil into soap also provides an alternative for utilizing household waste that would otherwise be discarded into the environment. Through education and training in processing techniques, the community is expected to reduce the disposal of household waste while developing productive skills that can be carried out on a household or community group scale.

3. Waste Management and Environmental Health

Waste management is closely linked to public health. Waste that is not properly managed can become a source of environmental pollution and a breeding ground for various disease vectors. The activity report states that unmanaged waste can contribute to air, water, and soil pollution and increase the risk of diseases such as diarrhea and dengue fever.

Therefore, waste management education in PkM activities can be viewed as part of efforts to

improve environmental health. Changes in community behavior regarding disposing of, sorting, reducing, reusing, and processing waste are expected to reduce sources of pollution in residential areas.

The initial conditions of the community, which indicate a still-low level of waste sorting practices, show that educational and empowerment interventions are still needed. PkM activities serve as a platform to integrate health knowledge, environmental knowledge, and productive skills so that waste management can be carried out more comprehensively.

4. Integration of Environmental Education with Noncommunicable Disease Screening

A key strength of this PkM activity is the integration of environmental management education with public health initiatives. In addition to receiving health education on waste, community members also undergo NCD screening, including checks for blood pressure, blood sugar, uric acid, and cholesterol.

This integration demonstrates a holistic approach to improving public health. Health is influenced not only by health services but also by behavior and environmental conditions. Therefore, activities that combine environmental health education with early detection of health issues can raise public awareness of the importance of maintaining overall health.

Conducting the screenings in collaboration with the Pembangunan Community Health Center also demonstrates collaboration among educational institutions, students, faculty, the community, and health care facilities. This kind of collaboration is important in community nursing because the community is viewed as a partner in efforts to improve health.

5. Community Participation and Enthusiasm

Community participation is one of the key indicators of the success of empowerment activities. Based on the results of the program, the community showed enthusiasm in participating in the series of activities, ranging from group exercise, health education, education on waste management, to health screenings.

This enthusiasm demonstrates that an approach combining education, physical activity, productive skills, and health services is effective in engaging the community. The distribution of door prizes also served as a form of appreciation that helped encourage participant involvement.

However, the success of the program is not measured solely by community attendance and enthusiasm during the activities. A more important impact is the sustainability of behavioral changes after the program concludes. Therefore, follow-up measures are necessary, including ongoing guidance, monitoring of household waste sorting practices, the development of community groups or environmental cadres, and sustained collaboration with the Community Health Center (Puskesmas) and local government.

6. Program Sustainability Potential

Community service activities have laid the foundation for the development of a more sustainable waste management program. The activity report emphasizes the hope that these activities will continue and help improve the health of the Citereup Village community.

Sustainability can be achieved through the formation or strengthening of environmental cadres, the implementation of periodic educational programs, the development of waste banks, the composting of organic waste, and the development of recycled products. This approach aligns with the problem-solving framework that has been designed, which involves the community, cadres, community leaders, the village administration, the community health center (Puskesmas), and students in productive waste management.

With the program's sustainability, the community is expected not only to be recipients of information but to evolve into key actors in waste management within their environment. In the long term, productive waste management can provide dual benefits in the form of improved environmental quality, reduced health risks, enhanced community skills, and opportunities for economic development based on waste utilization.

7. Implications of the Activity

This community service activity has several implications, namely:

- a. Implications for knowledge: The community gains information about proper waste management, the utilization of household waste, and the relationship between environmental cleanliness and health.

- b. Behavioral implications: The activity is expected to encourage the community to begin sorting and managing waste at the household level.
- c. Environmental health implications: Better waste management has the potential to reduce pollution and eliminate breeding grounds for disease vectors.
- d. Economic implications: The utilization of waste and byproducts into useful products can open up opportunities for productive community activities.
- e. Implications for health services: Non-communicable disease (NCD) screening activities provide the community with an opportunity to assess their health status and raise awareness of the importance of early detection.
- f. Institutional implications: Collaboration between the Karsa Husada Garut Health Institute, the Pembangunan Community Health Center, the village government, students, and the community can serve as the foundation for the development of sustainable community empowerment programs.

8. Activity Evaluation

Overall, the activity proceeded smoothly and received a positive response from the community. The activity successfully integrated environmental health education, waste management skills, physical activity, and health screenings into a single series of activities.

However, the activity report does not yet include quantitative data on changes in the community's knowledge or behavior levels before and after the outreach sessions. Therefore, the effectiveness of the activities in increasing knowledge and changing behavior cannot yet be statistically demonstrated. Further evaluation through pre-tests and post-tests, observation of waste sorting practices, and periodic monitoring will be necessary to measure the program's impact more objectively.

Thus, the current results of the activities primarily demonstrate success in program implementation, community engagement, education provision, waste utilization, and the provision of health screening services, while the long-term impact on behavioral change and environmental health conditions requires further monitoring.

4. CONCLUSION

This online health education program for adolescents and adults focused on efforts to boost immunity to prevent rhinitis aimed to educate this demographic on strategies to strengthen their immune systems and avoid rhinitis. The program proceeded smoothly and successfully as planned. Based on the details of the program, it is recommended to organize similar programs in different locations and with different participants to improve the health of individuals with compromised immunity, particularly those suffering from rhinitis.

5. ACKNOWLEDGMENTS

We give thanks to Allah SWT for His mercy and blessings, which enabled the Community Service activity themed "Productive Waste Management for Communities in the Service Area of the Pembangunan Community Health Center, Garut Regency" to be carried out successfully and smoothly. The implementation team would like to express its deepest appreciation and gratitude to all parties who have provided support, assistance, and contributions to the implementation of this activity, particularly to:

1. The Karsa Husada Garut Health Institute, which has provided support and the opportunity for the team to carry out this Community Service activity as part of the implementation of the Tri Dharma of Higher Education.
2. The Institute for Education, Research, and Community Service Development (LP4M) at the Karsa Husada Garut Health Institute, for its support, guidance, and facilitation throughout the planning and implementation of the activity.
3. The Sukagalih Village Government, which granted permission, provided support, and made facilities available for the activity's implementation in the Citereup Village area.

4. The Garut Regency Pembangunan Community Health Center, which supported the activities and collaborated in conducting community health screenings.
5. The Zero Waste Foundation, which contributed by providing education on waste management to the community.
6. Ms. Diah Wardhani, a Pharmacy lecturer, who provided education on turning used cooking oil into soap.
7. The faculty and students of the Karsa Husada Garut Health Institute, who have played an active role in the preparation, implementation, and evaluation of the activities.
8. The Mimin Lovers exercise instructors, who have supported the implementation of group exercise sessions with the community.
9. The entire community of Citereup Village, Sukagalih Subdistrict, who have actively participated and shown enthusiasm throughout the entire series of activities.
10. All other parties who cannot be mentioned individually but who provided assistance, support, and contributions so that this activity could be carried out successfully.

We recognize that the success of this activity is inseparable from the cooperation and support of various parties. May all the assistance and contributions provided be rewarded by Allah SWT and bring benefits for improving public health as well as creating a clean, healthy, and productive environment. Finally, we hope that this Community Service activity can serve as a first step toward building community awareness and self-reliance in waste management and can be continued through ongoing community mentoring and empowerment programs.

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