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THE EFFORT OF PHYSICAL EDUCATION TEACHERS IN DEVELOPING SCHOOL HEALTH CENTRE IN ELEMENTARY SCHOOL OF SUNGAILIAT BANGKA SUBDISTRICT

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ABSTRACT

This research is aimed to gain the information of how big is the efforts of Physical education teacher in developing Student Health Centre in the Elementary School of Sungailiat Bangka subdistrict. The population of this research is all of the 32 Physical Education teachers in Sungailiat Bangka subdistrict. The sample had been used in this research was all the population. The data was taken by using the questionnaire that includes the optimizing Student Health Centre programme factor and the administration of Student Health Centre (SHC) Control factor. Before doing the research, the test of the instrument was held. The validity test was implemented by using the correlation product moment technique, while the accumulation of reliability was implemented by using the Alpha Cronbach technique. The data analysis technique is using the quantitative descriptive analysis with percentage. The result of this research shown that the efforts of the Physical Education teachers in developing Student Health Centre in Sungailiat Bangka subdistrict was categorized 9.38% Very Good; 25.00% Good; 71.25% Quite Good; 31.25% Not Quite Good; 3.12% was Not Good. In more detail, the efforts of Physical Education teacher in taking care of the Student Health Centre are: (1) The optimizing Student Health Centre programme factor which was categorized as Quite Good, and (2) the administration of Student Health Centre Control factor which was also categorized as Quite Good.

Key words*: effort, Physical Education teacher, Student Health Centre*

INTRODUCTION

Student Health Centre is a foundation which plays a big role in serving school health problems including the efforts of preventing anything that will destruct health, overcoming disease, giving some understanding about kinds of injuries, giving knowledge and ability about First Aid in Accident, and some health guidance of how to make the school environment become clean, comfortable, and healthy.

A Physical Education teacher is a person who has knowledge and competence (authority) in teaching Physical Education. With these knowledge, competence, and authority, the responsibility of School Health Centre is usually given to the Physical Education teacher.

In recent education programme, the School Health Centre should have place and attention from both central and regional government. The success of School Health Centre programme depends on the efforts and guidance. Beside as an educator, a Physical Education teacher has a responsibility to run the Student Health Centre as well as possible. According to facts, there are many schools, especially Elementary School, which do not consider how important School Health Centre is. Besides, there are not many efforts come from the teachers, especially for Physical Education teacher and other teachers who become Physical Education teacher in once for the Student Health Centre. This evidence can be seen from the programme of SHC which are not realized well, moreover there are some schools that are not equipped with School Health Centre. The Physical Education teacher whom is considered has more knowledge about health, suppose to do more efforts to develop School Health Centre. The reality is pretty different, even more in Sungailiat Subdistrict. We can say that the School Health Centre in Sungailiat is not compiled with a good health degree because there are still a lot of schools that do not have proper School Health Centre facilities. This can be happen because the school committee still seeing with only one eye about the SHC. According to the explanation of School Health Centre and several surveys that had been done, a gap was found, there are a lot of schools which is not compiled with a good health degree, especially in Sungailiat subdistrict. For that, a research about the effort of developing School Health Centre is necessary, especially in Sungailiat Bangka subdistrict. The purpose of this research is to gain information about how big the effort of the Physical Education Teacher in developing School Heath Centre.

Physical Education Teacher

In the school education process, a teacher is a dominant factor because it is often that a teacher becomes a role model for the students. According to Masnur Muslich (2008: 8) Teacher is a sword for the students' education. Called 'a sword' because in the shoulder of the teacher is where the education depend on. In education, Physical Education is basically an integral part of the whole education and plays an important role since it influences the growth and the development of the students. Sukintaka (2001) said that Physical Education is an interaction process between the students

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and the environment through the physical activities which are arranged systematically to be a truly Indonesian nation. While according to M. Saufi (2008) Physical Education is a media to improve motoric development, physical ability, knowledge and understanding, value comprehension (behavioral, mental, spiritual, and social), and also to make people accustomed to a healthy life style in which the goal is to stimulate a balanced growth and development.

Soenarjo (2002) said, a Physical Education teacher is a person who has a profession which requires a special skill (competence) in the education effort by giving Physical Education lesson and Sport. From the description above, we can conclude that a Physical Education teacher is a person who has a knowledge, ability, and competence (authority) to teach Physical Education. With these knowledge, ability and competence, the responsibility of Student Health Centre is usually given to a Physical Education teacher. Due to that, the success of the Student Health Centre might be reached as long as the Physical Education teacher able to run it well.

Student Health Centre

Student Health Centre is a vehicle to improve the ability of living healthy and health degree for the student as early as possible in the purpose of increasing achievement. According to the National Education Department (2005: 3-4) the definition of Student Health Centre is: a vehicle to improve the ability of living healthy and health degree of the student as early as possible, a combination of two basic efforts; education and health efforts, in which eventually the students are hoped to be independent and able to implement a healthy life style.

According to Sunarjo (2002) the Student Health Centre is the efforts of the society in which applied in schools, with the students and the environment as the main target. While according to Mu'rifah (1991) Student Health Centre is a vehicle to improve the ability of living healthy and health degree for the students as early as possible. In the broad outline we can categorized Student Health Centre into three parts which is commonly called the three programme of Student Health Centre (Trias UKS), they are: (1) Health Education, (2) Health maintenance and service, (3) Healthy school living environment. These efforts are applied from the Elementary School up to Senior High School, but now it emphasizes in Elementary Schools. This is because the Elementary School is a huge community and susceptible o illness and is a basic for the next level of education. Even so, it does not mean that the implementation in the higher level of education becomes ignored.

   a. The review of the efforts of the Physical Education teacher in developing Student Health Centre in Sungailiat Bangka subdisdtrict.

According to Poerwadarminta (1996) effort is a requirement to deliver some thoughts. While according to Sudirman N. and friends, effort can be called exertion, by doing some efforts and exertions the goal might be reached.

Rusli Lutan and friends (2000) said, in doing a healthy life style there are some factors involved. Health education teacher, in this case Physical Education teacher is in a strategic position in giving a strong principle of a healthy life quality for the next generation. The related task is the education experimental development, that's why there are several things that a Physical Education Teacher ought to learn: (1). The understanding and knowledge about the purpose and the advantage of School Health Centre, (2). The ability of managing School Health Centre from formal education or training.

From the explanation above, we can summarize that the efforts of Physical Education teacher for the School Health Centre are: (1). Optimizing the School Health Centre programme, and (2). Controlling the administration of School Health Centre.

RESEARCH METHOD

This research was implemented by using survey method that is collecting data from the member of population to identify the population status during the research. The population here in this research is all of the 32 Physical Education teachers in Sungailiat Bangka subdistrict.

The efforts of the teachers here is the exertions of the teachers in developing the School Health Centre in their schools. The realization of these efforts are optimizing the School Health Centre programme and controlling the administration of School Health Centre.

The instrument used in this research is questionnaire. To reveal how big the effort of the teachers in this research, the questionnaire with the score 1-5 had been used for each question valued from very positive up to very negative, consist of 5 alternative answers. By giving score 5 for the answer always (SL), score 4 for the answer often (S), 3 for sometimes (KD), 2 for almost never (HTP), and 1 for never (TP).

The instrument had to be tested first before it categorized as good instrument. This validity test was using the *pearson product moment* correlation formula in which to get the final result of the formula we need the computer programme help named SPSS. The result of the validity calculation produces 2 questions failed. The instrument reliability test in this research was using the *Alpha*

Cronbach formula with the reason that each question requires more than one answer. According to the result analysis gad been done, we get the reliability level result of the instrument 0.963%. That score is bigger than the r table which only gets 0.549%, and so the instrument was categorized reliable and ready to collect the data for this research.

The data analysis used was the descriptive qualitative data analysis in the form of percentage. The calculation technique for each question to get the number of relative frequency according to Anas Sudjiono (1995: 40) is:

$$P = \frac{F}{N} x100\%$$

Explanation:
P= percentage number
F=frequency
N=number of subjects

To simplify the identification and description, each indicator in this research based on the *Mean* (M), and the Deviation (SD), with the five-scale. According to Annas Sudjiono (2006) to identify the criteria and the classification of the five-scale is:
1) M + 1.5 SD or more is very good
2) M + 0.5 SD up to 1.5 SD is good
3) M - 0,5 SD s.d M + 0,5 SD is medium
4) M - 1,5 SD s.d M - 0,5 SD is not good enough
5) M - 1,5 SD or less is less than enough

RESULT AND REVIEW
Research result

The efforts of Physical Education teacher in developing School Health Centre produce 78 as the minimum score and 147 as the maximum score. The data analysis produce mean = 117.00, median = 120.00, modus = 93.00, and the standard deviation = 17.76. After the categorizing process, we found out that the efforts of the 3 Physical Education teachers in developing School Health Centre (9.38%) is categorized very good, 8 teachers (25.00%) is good, 10 teachers (31.25%) were good enough, 10 teachers (31.25%) is not good enough, and 1 teacher (3.13%) is categorized less than good. If we take a look at the result from the mean score we got, that is 117.00, is located in the interval 116.00 up to 127.07. The frequency distribution according to the category can be seen below.

Table1. The efforts of the Physical Education teachers in developing School Health Centre of Sungailiat Bangka subdistrict

No.	Category	Interval	Frequency	
			Absolute	Persentage
1.	SVert Good	> 143,64	3	9,38
2.	Good	125,88 s.d. 143,64	8	25,00
3.	Good enough	108,12 s.d. 125,88	10	31,25
4.	Not Good enough	90,36 s.d. 108,12	10	31,25
5.	Less than enough	< 90,36	1	3,12
	Score		32	100

The factors describing the efforts of Physical Education Teachers efforts in developing School Health Centre consist of 2 factors, they are: (1) Optimizing the School Health Centre programme, and (2) Controlling the administration of School Health Centre. The analysis of each factors described as followed:

Optimizing the School Health Centre programme factor

The efforts of the Physical Education teacher in developing School Health Centre programme produce 57 as the minimum score and 107 as the maximum score. The data analysis gets mean = 86.81, median = 86.50, modus = 73.00, and deviation standard = 12.29. After categorizing, it is found that in optimizing the School Heal Centre programme 2 teachers (6.25%) were categorized very good, 10 teachers (31.25%) were good, 9 teachers (28.13%) were quite good, 10 teachers (31.25%) were not quite good, and 1 teacher (3.13%)was very not good.

Seen from the mean score we got, that is 86.81, is in the interval 80.67 up to 92,96. So the conclusion is the effort of the Physical Education teachers in developing School Health Centre is categorized quite good. The frequency distribution based on the category can be seen as followed:

Table2. The efforts of the Physical Education teachers in developing School Health Centre

No.	Category	Interval	Frequency	
			Absolute	Persentage
1.	Very Good	> 105,24	2	6,25
2.	Good	92,96 s.d. 105,24	10	31,25
3.	Quite Good	80,67 s.d. 92,96	9	28,13
4.	Not quite Good	68,38 s.d. 80,67	10	31,25
5.	Very not Good	< 68,38	1	3,13
Score			32	100

The efforts of the Physical Education teachers in developing School Health Centre consist of 5 indicators. The five indicators are the efforts of optimizing School Health Centre programme. The description of each indicator is as followed:

1) Following the upgrading and training indicator

The participation of Physical Education teacher in following upgrading and training gets 3 points as the minimum score, 15 as the maximum score, mean = 8.41, median = 9.00, modus = 9.00, and deviation standard = 3.08. After categorizing, it is fond that 1 teacher (3,13%) was categorized very good, 10 teachers (31,25%) were good, 13 teachers (40,63%) were good enough, 5 teachers (15,63%) were not good enough, 3 teachers (9,38%) were less than enough.

From the mean score, that is 8.41, is in the interval 6.87 up to 9. 95. The conclusion is the efforts of the Physical Education teachers in following the upgrading and training is categorized quite good. The frequency distribution based on the category is as seen bellow:

Tabel 3 The efforts of the teachers in following the upgrading and training

	Category	Interval	Frequency	
			Absolute	Percentage
1.	Very Good	> 13,02	1	3,13
2.	Good	9,95 s.d. 13,02	10	31,25
3.	Good enough	6,87 s.d. 9,95	13	40,63
4.	Not Good enough	3,79 s.d. 6,87	5	15,63
5.	Less than Enough	< 3,79	3	9,38
Score			32	100

2) The Indicator of the Health Education Implementation Through Extracurricular Activities

The implementation of health education through extracurricular activities is the efforts of the Physical Education teacher in developing knowledge and educating the students about medical world. The answer given by all teachers is 8 for the minimum score and 16 for the maximum score, 12.06 for the mean, 12.00 for the median, 10 for the modus, and 2.46 for the deviation standard.

After categorizing, it is found that 3 teachers (9,38%) were categorized very good, 7 teachers (21,88%) were good, 13 (40,63%) were good enough, 5 teachers (15,63%) were not good enough, and 4 teachers (12,50%) were less than enough. From the mean score, that is 12.06, the interval is 10,83 up to 13,29. The conclusion is the effort of the teachers in implementing health education through extracurricular activities i: categorized quite good. The frequency distribution based on the category can be seen as followed:

Tabel 4. The efforts of the teachers in the indicator of implementing jealth education through extracurricular activities

No.	Category	Interval	Frequency	
			Absolute	Percentage
1.	Very Good	> 15,76	3	9,38
2.	Good	13,29 s.d. 15,76	7	21,88
3.	Good Enough	10,83 s.d. 13,29	13	40,63
4.	Not Good Enough	8,37 s.d. 10,83	5	15,63
5.	Less than enough	< 8,37	4	12,50
Score			32	100

3) The Indicator of gaining knowledge about health

The effort of gaining knowledge about health is an important indicator that can be done to develop the quality of Physical Education teacher in optimizing the School Health Centre programme. The answers given by all the teachers get 9 for the minimum score, 18 for the maximum score, 13.06 for the mean, 13 for the median, 11 for the modus, 2,45 for the deviation standard. After categorizing, it is found that in gaining knowledge about health, 4 teachers (12,50%) were categorized very good, 4 teachers (12,50%) were good, 14 (43,75%) were good enough, 7 teachers (21,88%) were not good enough, and 3 teachers (9,38%) were categorized less than enough. From the mean we got, that is 13.06, is in the interval 11.79 up to 14.33. So we can conclude that the effort of the Physical Education teachers in gaining knowledge about heath was categorized good enough. The frequency distribution based on the category can be seen as followed:

Tabel 5. The efforts of the Physical Education teachers in gaining knowledge about health

No.	Category	Interval	Frequency	
			Absolute	Percentage
1.	Very Good	> 16,87	4	12,50
2.	Good	14,33 s.d. 16,87	4	12,50
3.	Good Enough	11,79 s.d. 14,33	14	43,75
4.	Not Good Enough	9,25 s.d. 11,79	7	21,88
5.	Less Than Enough	< 9,25	3	9,38
	Score		32	100

4) The Indicator of making cooperation with the society, Health Department, and related institution.

The effort of making cooperation with the society, Health Department, and related institutions is the exertion of building communication and getting information about School Health Centre. The answer given by the teachers get 16 for minimum score; 39 for maximum score; 29,35 for the mean.30,50 for median; 34,00 for the modus; 5,91 for Deviation Standard. After categorizing, there's found that making cooperation with the society, health department, related institution, 2 teachers (6,25) were categorized very good, 10 teachers (31,25)were categorized good enough, 7 teachers (21,88) were categorized not good enough, 3 teachers (9,383 %) were categorized less then enough.

From the mean, that is 29.53, the interval is 26.57 up to 32.49. So we can conclude that the effort of the Physical Education teachers in making cooperation with the society, Health Department, and related institutions is categorized good enough. The frequency distribution based on the category can be seen as followed:

Tabel 6. The Effort of making cooperation with the society, Health Department, and related institutions.

No.	Category	Interval	Frequency	
			Absolute	Percentage
1.	Very Good	> 38,40	2	6,25
2.	Good	32,49 s.d. 38,40	10	31,25
3.	Good Enough	26,57 s.d. 32,49	10	31,25
4.	Not Good Enough	20,66 s.d. 26,57	7	21,88
5.	Less than Enough	< 20,66	3	9,38
	Score		32	100

5) The Indicator of making a healthy school environment

The effort of making a healthy school environment is a real programme that reflects the effort of Physical Education Teacher for the School Health Centre. The answers given by all teachers get 29 for the minimum score, 40 for the maximum score, 35.81 for the mean, 36.00 for the median, 37 for the modus, 2.91 for the deviation standard. After categorizing, it is found that in making a healthy school environment, 0 teacher (0,00%) was categorized very good, 10 teachers (31,253 %) were categorized good, 12 teachers (37,50%) were categorized good enough, 8 teachers (25,00%) were categorized not good enough, 2 teachers (6,25%) were categorized less than enough. From the mean, that is 35.81, is in the interval 34.36 up to 37.27. So the conclusion is, making a healthy school environtment is categorized good enough. The Frequency disrtibution based on thecategory can be seen as followed:

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Tabel 7. The efforts of making a healthy school environtment indicator

.No.	Category	Interval	Frequency	
			Absolute	Percentage
1.	Very Good	> 40,18	0	0,00
2.	Good	37,27 s.d. 40,18	10	31,25
3.	Good Enough	34,36 s.d. 37,27	12	37,50
4.	Not Good enough	31,44 s.d. 34,36	8	25,00
5.	Less than enough	< 31,44	2	6,25
	Score		32	100

a) Controlling the School Health Centre Administration

The effort of the Physical Education teacher in controlling the School Health Centre administration gets 18 for the minimum score, and 40 for the maximum score. The data analysis gets the mean = 30.19; median = 30.00; modus = 30.00; and the deviation standard = 6.62. After categorizing, it is found that in controlling the School Health administration, 0 teacher (0,00%) was categorized very good, 11 teachers (34,38%) were categorized good, 9 teachers (28,13%) were good enough, 10 teachers (31,25%) were not good enough, and 2 teachers (6,25%) were less than enough. From the mean, that is 30.19, the interval is in 26.87 up to 33.50. So we can conclude that controlling the School Health Centre is categorized good enough. The frequency distribution based on the category can be seen as followed:

Tabel 8. The effort of the Physical Education teacher in controling School Health Centre administration

No.	Category	Interval	Frequency	
			Absolute	Percentage
1.	Very good	> 40,13	0	0,00
2.	Good	33,50 s.d. 40,13	11	34,38
3.	Good Enough	26,87 s.d. 33,50	9	28,13
4.	Not Good Enough	20,25 s.d. 26,87	10	31,25
5.	Less than Enough	< 20,25	2	6,25
	Score		32	100

The factors of the Physical Education teacher in controlling the School Health Centre administration in the Elementary school in Sungailiat Bangka subdistrict consist of 3 indicators. The three indicators are the efforts of the Physical Education teacher in making a well-organized School Health Centre. The description of each indicator is as followed:

1) The indicator of supplying and utilizing the administration book

The indicator of supplying and utilizing the administration book is the effort of organizing the School Health Centre. The answers given by all teachers resulting 4 for the minimum score, and 10 for the maximum score, 7.75 for the mean, 7.50 for the median, 10.00 for the modus, and 1,87 for the deviation standard. After categorizing, it is found that in supplying and utilizing the administration book, 0 teacher (0,00%) was categorized very good, 12 teachers (37,50%) were good, 10 teachers(31,25%) were good enough, 9 teachers (28,13%) were not good enough, and 1 teacher (3,13%) was less than enough. Derives from the score, that is 7.75, the interval is in 6.82 up to 8.68. So we can conclude that supplying and utilizing the administration book is categorized good enough. The frequency distribution based on the category can be seen as followed:

Tabel 9. The effort of supplying and utolizing the administration book

No.	Category	Interval	Frequency	
			Absolute	Percentage
1.	Very Good	> 10,55	0	0,00
2.	Good	8,68 s.d. 10,55	12	37,50
3.	Good Enough	6,82 s.d. 8,68	10	31,25
4.	Not Good Enough	4,95 s.d. 6,82	9	28,13
5.	Less Than Enough	< 4,95	1	3,13
	Score		32	100

2) The indicator of arranging activity plan

The effort of arranging activity plan is the exertion of organizing the administration of School Health Centre. The answers given by the teachers resulting 5 for the minimum score, 10 for the maximum score, 11.44 for the mean, 12.00 for the median, 9.00 for the modus, and 2.78 for the deviation standard. After categorizing, it is found that in arranging activity plan, 0 teacher (0,00%) was categorized very good, 12 teachers (37,50%) were good, 7 teachers (21,88%) were good enough, 11 teachers (34,38%) were not good enough, and 2 teachers (6,25%) were less than enough.

Derives from the score, that is 11.44, the interval is between 10.05 and 12.83. We can summarize that arranging activity plan is categorized good enough. The frequency distribution based on the category can be seen as followed:

Tabel 10. The effort of Physical Education teacher in arranging activity plan

No.	Category	Interval	Frequency	
			Absolute	Percentage
1.	Very Good	> 15,61	0	0,00
2.	Good	12,83 s.d. 15,61	12	37,50
3.	Good Enough	10,05 s.d. 12,83	7	21,88
4.	Not Good Enough	7,26 s.d. 10,05	11	34,38
5.	Less Than Enough	< 7,26	2	6,25
	Score		32	100

3) The indicator of School Health Centre computerization system

The School Health Centre computerization system is the effort to organize the School Health Centre administration in more practical and easier way. The answers of all teachers resulting 6 as the minimum score, 15 as the maximum score, 11 for the mean, 11 for the median, 9 for the modus, and 2.85 for the deviation standard. After categorizing, it is found that by computerizing the administration of School Health Centre, 0 teacher (0,00%) was categorized very good, 9 teachers (28,13%) were categorized good, 11 teachers (34,38%) were categorized good enough, 10 teachers (31,25%) were not good enough, 2 teachers (6,25%) were less than enough.

Derives from the score, that is 11.00, the interval is in 9.57 up to 12.43. So we can conclude that the effort of the Physical Education teacher in computerizing the administration of School Health Centre is categorized good enough. The frequency distribution based on the category can be seen as followed:

Tabel 11. The effort of the Physical Education teacher in the indicator of the School Health Centre computerizing system

No.	Category	Interval	Frequency	
			Absolute	Percentage
1.	Very Good	> 15,28	0	0,00
2.	Good	12,43 s.d. 15,28	9	28,13
3.	Good enough	9,57 s.d. 12,43	11	34,38
4.	Not Good enough	6,72 s.d. 9,57	10	31,25
5.	Less than enough	< 6,72	2	6,25
	Score		32	100

DISCUSSION

Derives from the research result, we can conclude that the efforts of the Physical Education teacher in developing the School Health Centre is categorized good enough. The factors that support the conclusion above will be described as followed:

1) Optimizing The School Health Centre programme factor

The optimizing the school health centre is categorized good enough. This is because almost all the Physical Education teachers have a good knowledge both in theory or practical about some medical knowledge including the medial devices, medicines, the understanding of spreading diseases, and rescue education. This understanding comes from the teachers' experience and education through the upgrading and training held by the Health Department and related institutions. But these efforts are not yet optimum.

2) Controlling the School Health Centre administration factor

The Physical Education teacher in controlling the school health centre administration is categorized good enough. This is because not all the Physical Education teachers were engaged both in making the programme and applying the programme in the school environment. It is only half of them who were really involved with the structural organization. The programme is not fully applied, and many of them didn't make the report. To minimize these sort of things, an observation from the head master is needed, it is also necessary to give rewards and punishments.

CONCLUSION

According to the research result and the discussion, we can conclude that the efforts of the Physical Education teacher in developing the School Health Centre in the elementary school in Sungailiat Bangka subdistrict9, 38% were categorized very good; 25,00% were categorized good; 31,25% were categorized good enough; 31,25% were categorized not good enough; 3,13%were categorized less than enough. In more detail, the efforts of the Physical Education teachers in developing the School Health Centre are: (1) optimizing the school health centre programme is categorized good enough, and (2) controlling the administration of school health centre is categorized good enough.

REFERENCES

Anas Sudijono. (2006). *Pengantar Statistik Pendidikan*. Jakarta. PT. Raja Grafindo
Persada.Depdiknas. (2005). *Pedoman Pelatihan Pembina dan Pelaksana UKS*. Jakarta.

Masnur Muslich. (2008). KTSP: *Pembelajaran Berbasis Kompetensi dan Kontekstual*. Jakarta: Bumi Aksara

M. Saufi. (2008). http://one.indoskripsi.com/node/2329

Mu'rifah. (1992). *Pendidikan Kesehatan*. Jakarta: Depdikbud.

Rusli Lutan. (2000). *Pendidikan Kesehatan*. Jakarta: Depdiknas.

Soenarjo. (2002). *Usaha Kesehatan Sekolah*. Bandung: PT. Remaja Rosdakarya.

Sudirman N. dkk. (1992). *Ilmu Pendidikan*. Bandung: Remaja Rosdakarya.

Sukintaka. (2001). *Teori Pendidikan Jasmani*. Solo: Est. Graphika.

--------------------- (1992). Health Regulation No.23. www.ilunifk83.com/ uu-ri-no-23-tahun-1992-tentang-kesehatan-t149-15.htm.