Proceedings Series of Educational Studies

The 5th International Conference on Educational Management and Technology (ICEMT) 2026

Training "School Health Ambassador (Dokter Kecil)" as a Means of Fostering a Health-Conscious Character Among Elementary School Students: A Case Study at SDN Sawojajar 6, Malang City

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Abstract

This study was motivated by the importance of strengthening health-caring character among elementary school students through the School Health Cadets (Dokter Kecil) program as part of the implementation of the School Health Unit (UKS). The School Health Cadets program functions not only as a medium for health education but also as a means of character development through students' direct involvement in school health activities. This study aimed to describe the implementation of the School Health Cadets training program at SDN Sawojajar 6 and to explore the development of students' health-caring character through the program. The study employed a qualitative approach with a descriptive qualitative research design. The research participants consisted of School Health Cadets members, the UKS coordinator, and classroom teachers. Data were collected through observation, semi-structured interviews, and documentation. Data analysis followed the Miles, Huberman, and Saldaña model, which includes data reduction, data display, and drawing conclusions. Data validity was ensured through source triangulation and technique triangulation. The findings revealed that the School Health Cadets training program was implemented systematically through four stages: providing information on UKS and the roles of School Health Cadets; introducing basic medications and the management of minor health complaints; practicing first aid for fainting and minor injuries; and evaluating the implementation of the School Health Cadets' duties within the school environment. The program had a positive impact on the development of students' health-caring character. Students became more concerned about their peers' health conditions, more disciplined in maintaining personal and environmental hygiene, more responsive to minor health issues, and more responsible in carrying out health-related duties at school. Therefore, the School Health Cadets program can serve as an effective means of integrating health education and character education in elementary schools.

Keywords: School Health Ambassador (Dokter Kecil); School Health Unit; Character Education.

1. Introduction

Health is a fundamental right of every individual and a key prerequisite for optimal learning processes in elementary schools. According to Law No. 36 of 2009 on health, every person has the right to health, and the state is obligated to achieve the highest possible level of public health. In the context of education, students who are physically and mentally healthy will find it easier to concentrate, actively participate in learning, and achieve optimal academic performance. Conversely, even the slightest health issue can hinder the

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effectiveness of learning and has the potential to lower the overall quality of educational outcomes.

Schools serve not only as places for the transfer of knowledge but also as centers for instilling values and shaping students' character. Presidential Regulation No. 87 of 2017 on Character Education Strengthening (PPK) explicitly states that educational institutions are one of the primary vehicles for strengthening the nation's character. (Ministry of Education and Culture 2021) emphasizes that schools must become an ecosystem conducive to the holistic growth and development of students' character—not only through classroom learning but also through various programs and daily practices within the school environment. Thus, every school program—including health programs—should be designed and implemented with a focus on character strengthening.

One character trait that is urgent to instill starting in elementary school is a commitment to health. This character trait encompasses awareness, concern, and concrete actions to maintain and improve one's own health, the health of others, and the surrounding environment. Minister of Education and Culture Regulation No. 20 of 2018 on Strengthening Character Education in Formal Educational Institutions emphasizes that the values of mutual cooperation and concern—including concern for health—are core character values that must be developed in formal educational institutions. Instilling a health-conscious character from an early age has a long-term impact on the quality of life for individuals and society, as children who grow up with clean and healthy lifestyle habits tend to... Conceptually, a health-conscious character is defined as an internal disposition that drives individuals to consciously, consistently, and voluntarily maintain and improve their own health as well as that of those around them. Azwar (2007) explains that this type of character is part of prosocial behavior that is formed through the internalization of values—a process that occurs repeatedly and meaningfully within a social context.

The Indonesian Ministry of Health (2020) explains that a health-conscious mindset encompasses three interrelated dimensions. The first dimension is self-awareness—an individual's ability to recognize their own health status, understand the importance of clean and healthy living behaviors (PHBS), and independently adopt healthy habits. Indicators of this include washing hands with soap, maintaining personal hygiene, consuming nutritious food, and exercising regularly. The second dimension is social care, which refers to sensitivity and responsiveness to the health conditions of others, demonstrated through behaviors such as helping sick friends, reminding friends to practice healthy behaviors, and being willing to provide first aid when needed. The third dimension is environmental care, which refers to the awareness of maintaining the cleanliness and health of the surrounding environment; indicators include disposing of trash properly, keeping classrooms and restrooms clean, and actively participating in community service activities. These three dimensions serve as a framework for assessing the impact of the "School Health Ambassador (Dokter Kecil)" program on students' character in this study.

To foster a healthy school environment and support the development of health-conscious character, the government has developed the School Health Program (UKS) as a framework for health education for the entire school community. Based on Joint Regulation No. 6/X/PB/2014 issued by the Ministers of Education and Culture, Health, Religious Affairs, and Home Affairs regarding the Guidance and Development of UKS/M, the UKS program is

implemented through three core programs known as the Trias UKS, namely: (1) health education, (2) health services, and (3) fostering a healthy school environment. Effective implementation of the Trias UKS has the potential to transform schools into ecosystems that are not only physically healthy but also serve as a medium for shaping a generation of students with strong character.

One of the health service programs within the UKS framework that holds strategic potential as a vehicle for character development is the "School Health Ambassador (Dokter Kecil)" program. A "School Health Ambassador (Dokter Kecil)" is a student who is selected, trained, and mentored to participate in efforts to maintain and improve the health of themselves, their peers, their families, and their community. This program adopts a peer education approach that positions students not merely as recipients of health services, but as agents of behavioral change among their peers (Joint Regulation of the Minister of Education and Culture, 2014). The peer-based approach has been empirically proven to be more effective in changing the health behaviors of adolescents and school-age children compared to conventional top-down approaches from adults or health workers.

Real-world conditions on the ground indicate that health issues in elementary school settings still require serious attention. Based on observations during an internship at SDN Sawojajar 6 in Malang City, various incidents requiring immediate attention were identified. Several students experienced syncope (fainting) during the flag-raising ceremony held under the scorching sun, necessitating initial first aid before teachers or medical personnel could provide assistance. In addition, quite a few students sustained minor injuries from falls during recess on the school grounds, and a number of students complained of headaches or nausea during class. These situations underscore the need for trained personnel within the school environment who can provide prompt and appropriate initial care, while also raising awareness among the entire school community about the importance of maintaining collective health.

In response to these conditions, a "junior doctor" training program was implemented as part of the student internship program at SDN Sawojajar 6. The training included first aid for accidents, basic health checkups, education on clean and healthy living practices, and structured assignments in the school health room. This series of activities not only enhances students' technical skills in the field of health but also consistently fosters the values of compassion, responsibility, and empathy—which are at the core of health-conscious character (Ministry of Education and Culture Regulation No. 20 of 2018). In other words, the "School Health Ambassador (Dokter Kecil)" program has the potential to serve as an effective tool for simultaneously integrating health education and character education in elementary schools.

A number of previous studies have examined the "School Health Ambassador (Dokter Kecil)" program and school-based health education from various perspectives, but there are still gaps that remain unfilled. First, Aliviameita, Purwanti, and Wisaksono (2019) conducted "School Health Ambassador (Dokter Kecil)" training at elementary schools in Sidoarjo Regency and found that the training was effective in improving students' understanding of the School Health Unit (UKS) and basic health skills; however, the study did not examine the impact of the training on students' character development in depth. Second, Qalbina and Nurrachmawati (2023), in their study on the revitalization of the Trias UKS through "School

Health Ambassador (Dokter Kecil)" education on healthy lifestyle practices (PHBS) during the COVID-19 pandemic, found a significant increase in PHBS knowledge; however, their analysis focused solely on the knowledge aspect and did not explore the process of internalizing the value of health awareness as a character trait. Third, Herlina et al. (2023), in their implementation of "School Health Ambassador (Dokter Kecil)" training at SDN 4 Kertaharja, concluded that the training successfully improved students' first-aid knowledge and skills, although they did not link the training outcomes to the character dimensions developed in the students. Fourth, Rahmaddiansyah, Nurmiati, and Rusti (2023) examined improvements in the school health program through the "School Health Ambassador (Dokter Kecil)" training program at SDN 21 Limau Sundai in Pesisir Selatan Regency and identified implementation challenges as well as strategies to strengthen it; however, they did not explicitly analyze how this training impacted students' health-conscious character. Fifth, Kariyanti and Indrawati (2023) analyzed the implementation of the Trias UKS program at SDN Pongangan in Semarang and found that its implementation was still suboptimal across several indicators; however, the "School Health Ambassador (Dokter Kecil)" program—as a component of the UKS—was not analyzed separately in relation to character development. Based on this mapping, the following gaps have been identified: (1) there is no study that explicitly links the "School Health Ambassador (Dokter Kecil)" training process to the multidimensional strengthening of health-conscious character—encompassing concern for oneself, peers, and the environment—within a single integrated research framework; and (2) existing studies tend to focus on cognitive aspects and skills, while the dynamic process of character development through the "School Health Ambassador (Dokter Kecil)" program has not been qualitatively documented. This study aims to address both of these gaps.

This study was conducted given the limited number of empirical studies that specifically address the implementation of the "School Health Ambassador (Dokter Kecil)" training program in relation to fostering health-conscious character in elementary schools. In fact, the effectiveness of the "School Health Ambassador (Dokter Kecil)" program as a character-building tool is largely determined by the quality of the training process conducted (Sugiyono, 2019). Based on the above discussion, this study focuses on two research questions, namely: (1) how is the "School Health Ambassador (Dokter Kecil)" training program implemented at SDN Sawojajar 6, and (2) how is health-conscious character strengthened through the "School Health Ambassador (Dokter Kecil)" training program at SDN Sawojajar 6. In line with these research questions, this study aims to describe the implementation of the "School Health Ambassador (Dokter Kecil)" mentoring program and to describe the strengthening of health-conscious character through this program at SDN Sawojajar 6. The benefits of this study can be examined from both theoretical and practical perspectives. Theoretically, this study is expected to enrich the body of knowledge in elementary education, particularly regarding the integration of school health programs with character education, while also serving as a reference for future researchers. Practically, the results of this study are expected to serve as evaluation material for schools in developing the "School Health Ambassador (Dokter Kecil)" program, provide an overview of effective training strategies for UKS (School Health Unit) supervisors and classroom teachers, equip students with meaningful healthy living skills, and provide input for policymakers in strengthening character-based UKS programs in elementary schools (Creswell & Creswell, 2017).

2. Method

1.1. Research Design

This study employed a qualitative approach using a descriptive qualitative research design. Sugiyono (2019) states that qualitative research is used to examine objects in natural conditions, with the researcher serving as the main instrument. Data are collected through purposive sampling, analyzed inductively, and interpreted by emphasizing meaning rather than generalization. Similarly, Creswell and Creswell (2017) explain that qualitative research aims to develop an in-depth and holistic understanding of social or human phenomena through an interpretive process.

This approach was selected because the study aimed to explore the implementation of the School Health Ambassador (Dokter Kecil) program and its impact on students' character in a natural school setting. The study did not manipulate variables or test statistical hypotheses.

1.2. Research Setting and Time

The research was conducted at SDN Sawojajar 6, Malang City, East Java Province. The school was selected because it actively implements the UKS program through School Health Ambassador (Dokter Kecil) activities. The location was also relevant to the researcher's teaching assistance activities, which provided the empirical context for the study.

The research was conducted for approximately one month during the teaching assistance program and School Health Ambassador (Dokter Kecil) training period. During this period, the researcher observed the training process, student participation, and the implementation of health-conscious behaviors in the school environment.

1.3. Research Subjects

The research subjects were selected using purposive sampling. According to Moleong (2018), purposive sampling involves selecting informants who have relevant knowledge and information related to the research focus.

The research subjects consisted of three groups. First, 20 School Health Ambassador (Dokter Kecil) students from grades 4 and 5 participated as student informants. They were selected based on their active participation in the training activities and their willingness to provide information. Second, one UKS supervising teacher who was responsible for planning and implementing the School Health Ambassador (Dokter Kecil) program participated as an informant. Third, two classroom teachers, consisting of one fourth-grade teacher and one fifth-grade teacher, participated because they interacted directly with the students and could provide information about changes in students' behavior in the classroom.

Thus, the total number of research informants was 23.

1.4. Research Procedure

The research procedure consisted of several stages, namely preparation, data collection, data analysis, and conclusion drawing.

1.4.1. Preparation Stage

In the preparation stage, the researcher conducted an initial observation to identify the implementation of the UKS and School Health Ambassador (Dokter Kecil) programs at SDN Sawojajar 6. The researcher then determined the research focus, subjects, and appropriate data collection techniques.

1.4.2. Data Collection Stage

At this stage, the researcher collected data through observation, semi-structured interviews, and documentation. These techniques were used simultaneously to obtain complementary information regarding the implementation of the School Health Ambassador (Dokter Kecil) program and students' behavior.

1.4.3. Data Analysis and Conclusion Stage

The collected data were analyzed using the interactive model developed by Miles, Huberman, and Saldaña (2014). The results of the analysis were then used to identify research findings and formulate conclusions regarding the implementation of the School Health Ambassador (Dokter Kecil) program and its contribution to students' character development.

1.5. Data Collection Techniques

Data were collected through three techniques: observation, semi-structured interviews, and documentation.

1.5.1. Observation

Observation was conducted to directly examine the School Health Ambassador (Dokter Kecil) training process, student activities within the school environment, and health-conscious behaviors demonstrated by students in their daily activities.

The observation was conducted using limited participant observation. The researcher participated in the training activities while recording relevant findings in field notes. The observed aspects included the training process, methods and materials used, interactions between students and the supervising teacher, student activities outside the training sessions, and health-conscious behaviors demonstrated by students.

1.5.2. Semi-Structured Interview

Semi-structured interviews were conducted with the UKS supervising teacher and School Health Ambassador (Dokter Kecil) students. This technique was used to obtain in-depth

information while allowing the researcher to develop follow-up questions based on the participants' responses (Creswell & Creswell, 2017).

The interview with the UKS supervising teacher focused on program planning, implementation, challenges, and evaluation. Meanwhile, interviews with students focused on their experiences during the program, changes in knowledge and attitudes, and the implementation of health-conscious behaviors within the school environment.

1.5.3. Documentation

Documentation was used to obtain supporting data for the research. The documents included photographs of training activities, the School Health Ambassador (Dokter Kecil) activity schedule, UKS activity records, and the list of School Health Ambassador (Dokter Kecil) members.

Documentation was used to complement the data obtained through observation and interviews and to provide supporting evidence of program implementation.

1.6. Research Instruments

In qualitative research, the researcher serves as the primary research instrument. Supporting instruments were used to facilitate the data collection process, including observation guidelines, interview guidelines, field notes, and documentation.

The observation guidelines were used to record the training process and students' behaviors. The interview guidelines were used to guide the interviews with the UKS supervising teacher and students. Field notes were used to record relevant findings during the activities. Documentation was used to collect supporting evidence, such as photographs, activity schedules, UKS records, and student membership data.

1.7. Data Analysis Technique

Data analysis employed the interactive model developed by Miles, Huberman, and Saldaña (2014). The model consists of three interconnected stages: data reduction, data display, and conclusion drawing and verification.

1.7.1. Data Reduction

Data reduction involved selecting, focusing, simplifying, and organizing the data obtained from observations, interviews, and documentation. Data that were irrelevant to the research focus were excluded, while relevant data were categorized according to the themes of the study.

1.7.2. Data Display

The reduced data were presented in the form of narrative descriptions, tables, or matrices. Data display helped the researcher identify relationships among findings and recognize patterns emerging from the collected data.

1.7.3. Conclusion Drawing and Verification

The final stage involved drawing and verifying conclusions. Conclusions were developed based on patterns and relationships identified in the data. The conclusions were continuously verified by comparing information obtained from observations, interviews, and documentation to ensure credible findings.

1.8. Data Validity

Data validity was established to ensure that the research findings accurately represented the conditions observed in the field. This study employed two triangulation techniques, namely source triangulation and methodological triangulation.

1.8.1. Source Triangulation

Source triangulation was conducted by comparing information obtained from the UKS supervising teacher, School Health Ambassador (Dokter Kecil) students, and classroom teachers. The comparison focused on information related to program implementation and changes in students' behavior.

1.8.2. Methodological Triangulation

Methodological triangulation was conducted by comparing data obtained through observation, interviews, and documentation. The data were considered credible when information obtained from different sources and techniques showed consistency regarding the same phenomenon.

3. Results and Discussion

3.1 Result

In this study, the analysis of students' health-conscious character was conducted based on a number of indicators established as research benchmarks. These indicators were formulated by referring to the concept of health-conscious character proposed by Aminah, H. K., Sukarno, & Yulisetiani, S. (2022), and were then grouped into three main dimensions. The first dimension is self-awareness, which describes students' ability to maintain their own health. Indicators in this dimension include the habit of washing hands with soap after activities, maintaining clean nails and personal grooming, consuming nutritious food, and disposing of trash in designated areas. The second dimension is social care, which relates to students' concern for and response to the health conditions of others. Observed indicators include students' willingness to approach and inquire about the condition of classmates who appear unwell, providing first aid when necessary, reminding classmates to practice healthy behaviors, and helping to escort sick classmates to the school health room.

The third dimension is environmental care, which reflects students' participation in maintaining the cleanliness and health of the school environment. Indicators in this dimension include involvement in keeping classrooms and the school health room clean, active participation in cleaning duty shifts, and a willingness to remind the school community to help

maintain environmental cleanliness. These three dimensions and their respective indicators serve as guidelines for interpreting the data collected through observation, interviews, and documentation. The results of the analysis based on these three dimensions are presented in the following section on research findings.

1. Implementation of the "School Health Ambassador (Dokter Kecil)" Program at SDN Sawojajar 6

The "School Health Ambassador (Dokter Kecil)s" mentoring program at SDN Sawojajar 6 was conducted over a one-month period, with sessions held once a week—specifically, every Friday. Friday was chosen as the day for the sessions because the school schedule on that day tends to be less packed and does not interfere with the students' learning activities. The first session was held on March 10, 2026, in the classroom and was attended by all participants, who showed enthusiasm and active participation throughout the activity. The second session was held on March 17, 2026, in the classroom, where students demonstrated strong engagement in every activity provided. The third session was held on March 24, 2026, and featured hands-on activities outside the classroom, which allowed students to participate directly in various training activities. Meanwhile, the fourth session was held on May 8, 2026, in the classroom. Overall, the program consisted of four sessions, each with different objectives and activity focuses, yet interconnected with one another to form a systematic and structured training series.

The first two sessions were held in the classroom in the form of face-to-face instruction. During the first session, students learned about the role of the School Health Unit (UKS) as well as the duties and responsibilities of "junior doctors" at school. The material presented was supplemented with examples relevant to daily life, making it easy for elementary school students to understand. The second session, also held in the classroom, covered basic medications available at the UKS and how to provide initial care for minor ailments such as headaches, stomachaches, and others. During this session, students were introduced to commonly used types of medications, how to use them, and important considerations when caring for sick students. Based on observations, the students began to show a high level of curiosity and actively took notes on the material presented. Some students even related the material to their own experiences visiting friends who were resting at the UKS.

The third session was held outdoors to provide students with more freedom of movement during practical activities. In this session, students practiced handling fainting episodes and treating minor injuries firsthand. The student instructors first demonstrated how to handle fainting and treat injuries, followed by hands-on practice by the students. Students were divided into small groups and took turns practicing first aid steps under the supervision of instructors.

The fourth session focused on evaluating the "junior doctor" program's activities during school hours, including the flag-raising ceremony, morning assembly, recess, and duty shifts to clean the school health room. During this evaluation phase, the supervising teacher—acting as an observer—and the university students—who served as mentors throughout the training—assessed the extent to which students were able to apply the knowledge and skills they had acquired during the previous three sessions. The results of the evaluation are then used as

material for reflection and as a basis for designing follow-up activities for the mentoring program in the future.

2. The Role of the "School Health Ambassador (Dokter Kecil)s" in School Activities

The presence of the "School Health Ambassador (Dokter Kecil)s" at SDN Sawojajar 6 has had a tangible impact on daily life within the school environment. After completing the training series, the students who became members of the "School Health Ambassador (Dokter Kecil)s" began to actively and responsibly carry out their roles. One of the most visible roles of the "School Health Ambassador (Dokter Kecil)s" is their ability to assist sick students on school grounds. When a classmate complains of a headache, stomachache, or suffers a minor injury from falling while playing, the "School Health Ambassador (Dokter Kecil)s" promptly approach the student and provide first aid before escorting them to the school health room (UKS). Based on field observations, it is evident that the "School Health Ambassador (Dokter Kecil)s" are already capable of identifying conditions requiring immediate attention and do not hesitate to act quickly.

Given that SDN Sawojajar 6 holds a daily assembly in addition to the Monday flag ceremony, the junior doctors are also involved in these activities as part of their responsibilities. During the assembly, the junior doctors patrol the lines of students to monitor their classmates' health, particularly to anticipate students who might faint from standing too long under the scorching sun. The "School Health Ambassador (Dokter Kecil)s'" participation in these assemblies and ceremonies makes the school's routine activities safer and more secure from a health perspective.

In addition, the junior doctors are also responsible for taking turns cleaning and tidying up the school health room. This activity aims not only to maintain the cleanliness of the school's health facilities but also to instill a sense of ownership and responsibility toward the available health resources. The school health room appears more organized after the "School Health Ambassador (Dokter Kecil)" program was implemented, with better-organized medicine supplies and patient beds that are always clean and ready for use. This demonstrates an increase in students' awareness of maintaining the environment where they serve.

3. The Emergence of a Health-Conscious Character

Student involvement in the "School Health Ambassador (Dokter Kecil)" activities not only resulted in changes in knowledge and skills but also had a significant impact on character development, particularly a health-conscious character. Based on observations, documentation, and interviews conducted during the study, various indicators of behavioral change were identified that reflect the development of health-conscious character values among students after participating in the "School Health Ambassador (Dokter Kecil)" training activities. One of the most noticeable manifestations of this character trait is the students' increased concern for their peers' health. Before participating in the "School Health Ambassador (Dokter Kecil)" program, students tended to remain passive when they saw a classmate experiencing health issues and relied more on teachers to provide assistance. However, after undergoing the training, the "School Health Ambassador (Dokter Kecil)s" demonstrated a clearer sense of empathy by actively approaching classmates who appeared sick or unwell, asking about their condition, and offering help.

In addition to fostering care for others, the "School Health Ambassador (Dokter Kecil)s" program has also successfully improved students' discipline in maintaining personal hygiene and the cleanliness of the school environment. The "School Health Ambassador (Dokter Kecil)s," having gained an understanding of the connection between hygiene and health, have become more consistent in practicing clean living habits, such as washing their hands after activities, keeping their nails clean, and ensuring their play areas are free of trash. These positive habits have also begun to be emulated by other students who are not yet "School Health Ambassador (Dokter Kecil)s," so the program's impact is felt evenly across the entire class. This phenomenon demonstrates that character building through peer groups has its own unique effectiveness in the context of character education in elementary school.

The program has also had a positive impact on improving students' responsiveness to health-related situations within the school environment. Through practical activities and habit-forming exercises during the training, students have become more attuned to the early signs of health issues and are able to respond appropriately to minor emergencies. Interview results with the students also indicate that they feel more confident when helping sick classmates and are less likely to panic when faced with certain situations. Beyond the aspect of responsiveness, the "School Health Ambassador (Dokter Kecil)s" training also plays a role in fostering students' sense of responsibility toward themselves, their peers, and the school environment. The "School Health Ambassador (Dokter Kecil)s" demonstrate commitment in carrying out their duty shifts, maintaining cleanliness, and actively participating in school activities without always needing to be directed by teachers. These findings show that the "School Health Ambassador (Dokter Kecil)s" program not only functions as a school health program but also serves as an effective means of character education. Students' direct involvement in real-world activities encourages a deeper internalization of character values, so that learning does not stop at the level of knowledge but also extends to daily attitudes and behaviors.

3.2 Discussion

1. Implementation of the "School Health Ambassador (Dokter Kecil)" Training Program as Health Education at SDN Sawojajar 6

The implementation of the "School Health Ambassador (Dokter Kecil)" training program at SDN Sawojajar 6 demonstrates that health education activities are more effective when conducted in stages and accompanied by hands-on practice. The training, conducted over four sessions, helped students understand health-related material more concretely because they not only received theoretical explanations but also participated directly in practical health activities. This was evident from the increased student engagement throughout the activities. At the beginning of the training, some students were still passive and merely listened to the material being explained; however, after the practical activities began, students started actively asking questions, taking notes, and were willing to try performing simple first aid procedures.

The improvement in students' understanding was also evident from the pre-test and post-test results, which showed a change in their understanding after participating in the "School Health Ambassador (Dokter Kecil)" training. Before the program began, some students still did not fully understand the role of a "School Health Ambassador (Dokter

Kecil)," the function of the school health unit (UKS), or the initial steps for addressing minor health conditions. After the training, students began to understand the role of the "School Health Ambassador (Dokter Kecil)" and were able to explain the simple steps for helping a sick classmate. These findings indicate that practice-based health education helps students understand the material better. This aligns with the view of Hidayat and Wahyuni (2021), who state that health education is more effective when it involves hands-on practice and active student participation in the learning process.

Practical activities on handling fainting and minor injuries also provided students with real-world experience in dealing with simple health conditions in the school environment. Based on the observation results, students appeared more enthusiastic during practical activities than during classroom instruction. Students began to feel confident trying to perform first aid steps and were not afraid of making mistakes during the practice sessions. This indicates that the hands-on approach can boost students' self-confidence and skills in the "junior doctor" program. According to Sari and Nugroho (2023), practice-based "junior doctor" activities can help improve elementary school students' basic health skills through direct experience.

Evaluations conducted during morning assemblies, ceremonies, recess, and UKS duty shifts showed that most students were beginning to apply what they had learned in their daily school activities. Students appeared more proactive in helping sick classmates, maintaining the cleanliness of the UKS room, and carrying out their duties without always needing guidance from teachers. These findings indicate that the "School Health Ambassador (Dokter Kecil)" program not only enhances students' health knowledge but also helps foster habits of clean and healthy living within the school environment. The Ministry of Health of the Republic of Indonesia (2020) explains that the "School Health Ambassador (Dokter Kecil)" program is part of the School Health Unit (UKS) initiative, which aims to cultivate clean and healthy living behaviors through students' active involvement in school health activities.

The "School Health Ambassador (Dokter Kecil)" program at SDN Sawojajar 6 also aligns with health education theory, which emphasizes the importance of habit formation and hands-on experience in shaping students' healthy behaviors. Through "School Health Ambassador (Dokter Kecil)" activities, students not only gain health knowledge but also learn to apply healthy behaviors in their daily lives. This program supports the implementation of the UKS in elementary schools because it actively involves students in health education, basic health services, and fostering a healthy school environment.

2. Strengthening Health-Conscious Character through the "School Health Ambassador (Dokter Kecil)" Program

Research findings indicate that the "School Health Ambassador (Dokter Kecil)" program has a positive impact on fostering students' health-conscious character. After participating in the training, students began to show concern for their peers' health conditions. Based on observations, students participating in the "School Health Ambassador (Dokter Kecil)" program were seen to be more proactive in helping sick classmates, approaching peers with minor health complaints, and offering assistance without waiting for instructions from teachers. These behaviors indicate the development of students' empathy

and social concern for their surroundings. Rahmawati et al. (2021) state that habit-based health education can help foster a health-conscious character in elementary school students.

The "School Health Ambassador (Dokter Kecil)s" program also helps improve students' discipline in maintaining personal hygiene and the cleanliness of the school environment. After receiving guidance, students began to get into the habit of washing their hands after activities, keeping their nails clean, disposing of trash properly, and maintaining the cleanliness of the school health room. Observations showed that these habits were not only practiced by members of the "School Health Ambassador (Dokter Kecil)s" group but were also beginning to be emulated by other students in the classroom. This finding suggests that fostering healthy habits through peer groups can have a positive influence on the behavior of other students. According to Utami and Lestari (2024), character development in elementary school students is more effective when achieved through habit formation and modeling within the students' immediate environment.

In addition to fostering a sense of care and discipline, the "School Health Ambassador (Dokter Kecil)s" program also enhances students' responsiveness to health-related situations at school. Interview results show that students feel more confident when helping sick classmates and have a better understanding of the initial steps to take in minor emergencies. Students also began demonstrating responsibility in carrying out their UKS duty shifts and school health activities without needing constant guidance from teachers. These findings demonstrate that the "School Health Ambassador (Dokter Kecil)" program not only serves as a school health initiative but also functions as a means of character education through direct experience and routine practice.

3. Supporting Factors, Challenges, and Efforts in Developing the "School Health Ambassador (Dokter Kecil)" Program

The success of the "School Health Ambassador (Dokter Kecil)" program at SDN Sawojajar 6 was influenced by several supporting factors, namely the support of the principal, the supervising teacher, the school health unit (UKS) facilities, and the students' enthusiasm during the activities. Based on the observation results, students were seen to actively participate in both the presentation of health materials and practical health activities. Student enthusiasm was evident when they were directly involved in handwashing demonstrations, minor wound care practices, and UKS duty shifts. These conditions indicate that direct involvement in health activities can enhance students' motivation to learn. Hidayat and Wahyuni (2021) explain that students' active participation in health education can help improve their understanding and skills more effectively.

Although the activities went well, there were several challenges during the implementation of the "School Health Ambassador (Dokter Kecil)" training program. Time constraints were one obstacle, as the activities had to be scheduled around the school's regular curriculum. Additionally, the supply of basic medical equipment available at the school health unit was limited, so students had to take turns during practical sessions. The observations also revealed that some students still appeared shy and lacked confidence when performing health practices in front of their peers.

To address these challenges, the training was conducted in stages and repeated to help students become more accustomed to participating in the "School Health Ambassador

(Dokter Kecil)" activities. Direct guidance during practice sessions also helped students feel more confident in performing simple health procedures. Furthermore, providing motivation and opportunities for students to take turns practicing encouraged them to be more active and willing to try. Evaluation results showed that the hands-on approach and direct guidance helped students become better prepared to fulfill their roles as "School Health Ambassador (Dokter Kecil)s" within the school environment.

4. Relationship Between Research Findings and Theory and Previous Research

The research findings indicate that the "School Health Ambassador (Dokter Kecil)" program supports health education in elementary schools through habit-forming activities and hands-on practice. The guidance provided enhances students' health knowledge, fosters habits of cleanliness and healthy living, and cultivates a character that prioritizes health. These findings align with health education theory, which explains that changes in health behavior can be achieved through continuous learning and habit formation. Notoatmodjo (2020) states that health education aims to bring about behavioral change by improving students' health knowledge, attitudes, and practices.

The results of this study also align with previous research showing that the "School Health Ambassador (Dokter Kecil)" program is effective in improving elementary school students' clean and healthy lifestyle behaviors. Sari and Nugroho (2023) explain that "School Health Ambassador (Dokter Kecil)" activities can improve students' basic health skills and their concern for the school environment through daily health practices and habit formation. Furthermore, Rahmawati et al. (2021) state that habit-based health education can help foster discipline and a concern for health among elementary school students.

The distinction in this study lies in the focus of the "School Health Ambassador (Dokter Kecil)" training, which emphasizes not only the delivery of health education content but also hands-on practice and the application of "School Health Ambassador (Dokter Kecil)" responsibilities in daily school activities. The research findings indicate that students were able to apply the knowledge gained during training to concrete actions, such as assisting sick classmates, maintaining the cleanliness of the school health room, and keeping the school environment clean. These findings suggest that the "School Health Ambassador (Dokter Kecil)" program can serve as a vehicle for health education while simultaneously strengthening health-conscious character traits in elementary school students through habit formation and active student engagement within the school environment. Theoretically, these findings expand upon Lickona's (1991) character education model—which emphasizes three components of character: moral knowledge, moral feelings, and moral actions—by demonstrating that these three components can be integrated simultaneously through a program based on direct experience. The "School Health Ambassador (Dokter Kecil)" program does not merely convey health knowledge (knowing), but encourages students to feel empathy toward sick classmates (feeling) and take concrete actions (acting), thereby ensuring that the internalization of character values occurs holistically. Research Limitations

5. Research Limitations

In its implementation, this study has several limitations that must be considered when interpreting the results. First, the duration of the "School Health Ambassador (Dokter Kecil)" program—which consisted of only four sessions over the course of one month—was

relatively insufficient to observe in-depth and sustained changes in character. Character is an aspect formed through a long-term process of habit formation; therefore, the behavioral changes identified in this study more accurately reflect early indications of the strengthening of health-conscious character rather than permanent character changes.

Second, this study was conducted at a single school with a limited number of participants: 20 "School Health Ambassador (Dokter Kecil)" students, one UKS mentor teacher, and two classroom teachers. While these conditions allowed for an in-depth understanding of the program's implementation at the study site, the findings cannot yet generalize to "School Health Ambassador (Dokter Kecil)" programs in elementary schools with different characteristics. Therefore, the findings of this study should be interpreted within the specific context of the research site.

Third, the study was conducted concurrently with a student internship program in which students served as mentors for the "School Health Ambassador (Dokter Kecil)s." The presence of researchers and mentors during the mentoring process could potentially influence students' behavior during the observation period. Some students might exhibit more disciplined, active, or health-conscious behavior because they felt they were being observed. This situation could affect the behavioral data collected during the study.

Fourth, this study employed a qualitative descriptive approach; therefore, its primary focus was on understanding the implementation process of the training and the development of health-conscious character that occurred during the program. Consequently, this study cannot definitively establish a causal relationship between the "School Health Ambassador (Dokter Kecil)" program and changes in students' character. Although positive behavioral changes were observed, the possibility of influence from other factors—such as school culture, the role of teachers, or family practices—cannot be entirely ruled out.

Despite these limitations, this study still provides an empirical picture of how the "School Health Ambassador (Dokter Kecil)" program can serve as a means of health education as well as a vehicle for fostering a health-conscious character in elementary schools. These limitations can serve as a foundation for future research to conduct studies with a longer duration, involving more schools, and using a research design that allows for a more comprehensive and sustainable measurement of the program's impact.

4. Conclusion

Based on the research findings and discussion, it can be concluded that the implementation of the "School Health Ambassador (Dokter Kecil)" training program at SDN Sawojajar 6 was carried out systematically through four stages of activities, including instruction, health practice, support for school activities, and evaluation of the "School Health Ambassador (Dokter Kecil)" duties. The training was conducted using a practice-based health education approach so that students not only gained knowledge but also direct experience in applying health skills within the school environment. The training activities, conducted in stages and on a regular basis, help students understand the role of "School Health Ambassador (Dokter Kecil)s" and improve their basic skills in handling minor health issues.

The "School Health Ambassador (Dokter Kecil)" program also plays a role in fostering a health-conscious character among students. After participating in the training, students demonstrate behavioral changes, such as increased concern for their peers' health, discipline in maintaining

personal and environmental hygiene, responsiveness in addressing minor health issues, and a sense of responsibility in carrying out school health duties. Students' direct involvement in practical activities—such as helping sick peers, maintaining the cleanliness of the school health unit (UKS), and performing health duty shifts—facilitates a deeper internalization of character values.

The implementation of the "School Health Ambassador (Dokter Kecil)" program was supported by student enthusiasm, guidance from supervising teachers, and the availability of school health room facilities. Although there were constraints such as time limitations and the use of simple medical equipment, the training activities were still able to proceed through direct mentoring and the gradual implementation of practical exercises. The results of this study indicate that the "School Health Ambassador (Dokter Kecil)" program can serve as an effective tool in supporting health education while simultaneously fostering a health-conscious character among elementary school students.

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