

EMPOWERING VILLAGE COMMUNITIES OF SURVIVORS THROUGH MASS CIRCUMCISION SERVICES

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Abstract

The 2025 flood disaster in Ujong Pacu Village, Lhokseumawe City, disrupted access to preventive health services for children, including circumcision, which has medical, social, and religious aspects. This community service research aims to improve the health of flood survivor children through a community-based mass circumcision program. The implementation method uses a community-based intervention approach that includes preparation, medical procedures, and post-procedure monitoring and evaluation. Data were collected through activity observations, participant documentation, and post-circumcision health evaluations. The results of the activity indicate that the mass circumcision program, implemented continuously from 2015 to 2026, served 260 children with a 100% success rate without serious complications. This program not only improves children's preventive health but also strengthens social solidarity and the role of universities in post-disaster social rehabilitation. These findings confirm that community-based health interventions are effective as a community empowerment strategy in disaster-affected areas.

Keywords: community empowerment, mass circumcision, preventive health, community service, post-disaster

INTRODUCTION

Circumcision is a medical procedure with health, social, and religious benefits. Medically, circumcision can reduce the risk of urinary tract infections, reduce the risk of sexually transmitted infections, and improve reproductive hygiene (Nagelkerke et al., 2018). Ujong Pacu Village, one of the areas affected by the 2025 major floods, experienced declining purchasing power and limited access to healthcare. This situation led to delays in circumcision procedures for school-age boys. Malikussaleh University, through its community service program, initiated a free mass circumcision program as a form of social and health intervention. The purpose of this community service is to provide free circumcision services for children who are flood survivors, improve children's health, reduce the economic burden on families, and strengthen the role of universities in post-disaster social rehabilitation. Circumcision is a medically recognized preventive health intervention that reduces the risk of urinary tract infections and sexually transmitted infections (STIs), as well as improving male reproductive health hygiene. The World Health Organization (WHO) has identified circumcision as a community-based preventive strategy, particularly in areas with limited access to healthcare (WHO, 2020; Nagelkerke et al., 2018). Disaster-affected areas generally experience reduced health service capacity and public purchasing power, often delaying preventive healthcare needs. Studies show that children are the most vulnerable population to post-disaster health service disruptions (Rifkin, 2014). Although various health assistance programs have been implemented in disaster-affected areas, most still focus on short-term curative services. Research on the integration of preventive health services with university-based community empowerment approaches is still limited, particularly in the context of community service in Indonesia.

Therefore, this article offers a community empowerment-based service approach through mass circumcision services as a model of sustainable preventive health intervention in disaster survivor communities.

METHOD

This community service activity uses a community-based participatory approach, namely a method that emphasizes active community involvement in all stages of the activity.

Preparation Stage

This includes coordination with village governments and health workers, participant data collection, initial health screening, and the preparation of standard operating procedures for medical procedures.

Implementation Stage

Implementation of activities includes:

- examination of participants' vital signs,
- circumcision using modern methods,
- drug administration,
- wound care education for participants' parents.

Monitoring and Evaluation

Monitoring was conducted by observing wound conditions on days 3 to 5 post-procedure and documenting activity results. Analysis was conducted descriptively by comparing program outcomes to community health service success indicators (Trencher et al., 2014).

RESULTS, DISCUSSION, AND IMPACT

Development of the Number of Participants

The following table shows the development in the number of children who have participated in mass circumcision from 2015 to 2026.

Table 1. Development of the number of children who have been circumcised (2015–2026)

No	Year	Number of children	Place
1	2015	11	Panggoi
2	2016	17	Panggoi
3	2017	11	Panggoi
4	2018	29	Panggoi
5	2019	16	Panggoi
6	2020	27	Panggoi
7	2021	35	Panggoi
8	2022	26	Panggoi
9	2023	27	Panggoi
10	2024	24	Panggoi
11	2025	25	Panggoi
12	2026	12	Ujong Pacu
	Total	260	

The mass circumcision program has seen increasing community participation year after year. Significant increases in 2018 and 2021 demonstrate social trust in the university-based program. This aligns with research by Mansuri and Rao (2013), which found that community participation increases when interventions are implemented through a collaborative community approach. In addition to health benefits, this activity has social impacts in the form of: strengthening community solidarity, increasing trust in higher education institutions, reducing the economic burden on disaster survivor families. This approach shows that community service does not only function as a social activity, but as an instrument of sustainable social development.

Activity Documentation



Figure 1. Documentation of the Mass Circumcision in Ujong Pacu Village, March 2026. This photo shows a lecturer from Malikussaleh University with children participating in a mass circumcision in Ujong Pacu Village. This activity was part of a post-flood community service program, aimed at improving children's health and easing families' economic burdens.



Figure 2. Documentation of the Mass Circumcision in Peunayan Village, March 2023. This photo shows the atmosphere of the mass circumcision in Peunayan Village, where children received books from the committee as a form of educational support and motivation after the event. This documentation confirms the continuity of the mass circumcision program from year to year.

CONCLUSION

The mass circumcision in Ujong Pacu Village represents a concrete example of post-disaster community empowerment. This program has successfully improved children's health, eased the economic burden on families, and strengthened the university's relationship with the community. A community-based mass circumcision program has proven effective as a preventive health intervention in disaster-affected areas. This activity has increased access to child health services, reduced the economic burden on families, and strengthened the role of universities in community social development. This intervention model has the potential to be replicated in other disaster-affected areas as a sustainable community health strengthening strategy. Community Service Contribution This article provides a contribution in the form of a model for implementing university-based preventive health services that are integrated with post-disaster community empowerment.

THANK-YOU NOTE

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