



## **ADOLESCENTS' KNOWLEDGE ABOUT ADOLESCENT INTEGRATED HEALTH CENTERS**

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### **ABSTRACT**

Adolescents represent a population group that requires specific health services, as they face various challenges including nutritional issues, reproductive health, and mental health. The Adolescent Integrated program by Indonesia Government was established as a community-based health service aimed at improving adolescents' knowledge and awareness regarding health promotion and disease prevention. This study aimed to describe the level of knowledge of adolescents regarding the Posyandu Remaja's program in the working area of Baki Public Health Center, Sukoharjo Regency. This research employed a descriptive quantitative design. A total of 99 adolescent respondents participated, all of whom were selected using total sampling techniques. Data were collected through a validated questionnaire consisting of 20 items (Cronbach's Alpha = 0.912). Univariate analysis was used to determine the distribution of respondents' characteristics and knowledge levels. The findings revealed that the majority of respondents had a moderate level of knowledge (77.8%), while 20.2% demonstrated good knowledge, and only 2.0% were categorized as having low knowledge. Most respondents were female adolescents aged 15 years, predominantly with a junior high school education, and the majority regularly attended Posyandu activities. These results indicate that while basic information has been delivered, adolescents' understanding of the Posyandu program remains at a general level. The adolescent integrated health center in the Baki Public Health Center area has been effective in providing basic information, but adolescents' knowledge is still largely moderate.

Keywords: adolescent knowledge; community-based health program health promotion; posyandu remaja; sukoharjo

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## **INTRODUCTION**

Adolescence is a transitional period from childhood to adulthood. During adolescence, individuals become more independent and experience changes both physically, mentally, emotionally, and socially. Adolescents experience transitions from one stage to the next stage of life, and this developmental stage is characterised by changes in primary and secondary sexual characteristics (Tukiran et al., 2010). According to WHO, adolescents are the population with an age range of 10-19 years. The Minister of Health Regulation No. 25 of 2014 states that adolescents are the population with an age range of 10-18 years, and according to Population and family planning agency, the adolescent age range is 10-24 years and unmarried.

The stages of adolescent development according to Mapiarre (in Ali: 2012) occur between the ages of 12 to 22 years, namely 12 to 21 years for females and 13 to 22 years for males. This adolescent age range is divided into two parts: early adolescence with an age range between 12/13 years to 17/18 years and late adolescence aged 17/18 years to 21/22 years. In fact, adolescents are not free from existing problems, such as early marriage and anaemia in female adolescents (Kurniawati & Sutanto, 2019). Anaemia is a condition where the amount of haemoglobin as a protein that carries oxygen is below normal levels. For males, normal haemoglobin levels are at 13.5 g/dl, whilst for females they are at 12 g/dl (Firdaus, 2020). The main cause of anaemia is nutritional deficiency, especially iron (Juffrie et al., 2020). Data from the World Health Organisation (WHO) in 2017 shows that around 30-40% of female adolescents experience iron deficiency anaemia. Based on the preliminary study results that have been conducted, it was found that there were adolescents who

experienced health problems, such as anaemia characterised by low haemoglobin levels obtained after examination.

To address these problems, the government provides supplies of iron supplement tablets to female adolescents. Posyandu Remaja/Adolescents integrated health center is one form of community based health initiatives that is managed and organised from, by, for and with the community including adolescents in the implementation of health development, in order to empower the community and provide ease in obtaining health services especially for adolescents to improve the health status and healthy life skills of adolescents.

Besides anaemia problems in female adolescents, there are also other problems that often occur in adolescents. Based on the results of the school-based health survey in Indonesia in 2015 (GSHS), a picture of health risk factors among students aged 12-18 years (junior and senior secondary school) can be seen nationally. As many as 41.8% of males and 4.1% of females admitted to having smoked, with 32.8% amongst them smoking for the first time at age  $\leq 13$  years. The same data also shows that 14.4% of males and 5.6% of females have consumed alcohol, and it was also found that 2.6% of males had consumed drugs. Another picture of health risk factors is sexual behaviour, where it was found that 8.26% of male students and 4.17% of female students aged 12-18 years had engaged in sexual intercourse. Sexual behaviour certainly has a wide impact on adolescents, especially regarding disease transmission and unwanted pregnancies as well as abortion.

Based on the data description, it can be known together that problems in adolescents are very complex, thus requiring handling that involves all elements from cross-programmes and sectors. Then health policy was made regarding adolescent health services, namely in Minister of Health Regulation No. 25 of 2014, which is intended so that every child has the ability to behave in a clean and healthy lifestyle, has healthy life skills, and good social skills so that they can learn to grow and develop optimally to become quality human resources. Therefore, to realise this goal and to reduce problems in adolescents, one of the efforts made is the formation of youth posyandu to assist in socialisation activities or health education to the community, especially adolescents regarding health information.

Posyandu Remaja is a form of guidance and supervision so that adolescents do not fall into negative things that can harm themselves or others around them. Posyandu Remaja as a form of concern for the adolescents generation helps to accompany adolescents in facing important phases in their lives. Posyandu Remaja activities are community health-based activities, especially adolescents with an age range of 10-18 years, to monitor and involve them for continuous improvement of health and healthy life skills (Ministry of Health, 2018). Therefore, community understanding of youth posyandu programmes is also needed. Therefore, this research was conducted to determine the description of adolescent knowledge about Posyandu Remaja activities in the working area of Baki Primary Health Centre.

## **METHOD**

The research design used in this study is descriptive quantitative research. The population in this research is all youth in the working area of Baki Primary Health Centre, Sukoharjo Regency with a total population of 11,127 people with an age range of 10 to 19 years. Respondents are selected from part of the number of individuals in the population that can represent the population (Raihan, 2019). Respondents from this research are village youth in the working area of Baki Primary Health Centre, Sukoharjo Regency who meet the criteria as respondents. The respondents used in this research were taken using proportional random sampling technique, with the formula used being the Slovin formula. So the sample used in this research is 99 respondents. The data analysis used in this research uses a univariate analyst by using a statistical test with the SPSS application. From the results of univariate analysis, data was obtained in the form of adolescent knowledge level regarding the Posyandu Remaja, with frequency distribution, central tendency, spread size or

presentation of each variable in the research. The type of numerical data in the research is described by looking at the mean value, median, mode, standard deviation, minimum value and maximum value, while for the categorical data type it is described by looking at the frequency distribution and proportion.

## RESULT

Table 1.  
Distribution Frequency Characteristics Respondents (n= 99)

| Respondent characteristics | f  | %     |
|----------------------------|----|-------|
| Age                        |    |       |
| 10                         | 3  | 3,0   |
| 11                         | 17 | 17,2  |
| 12                         | 11 | 11,1  |
| 13                         | 12 | 12,1  |
| 14                         | 10 | 10,1  |
| 15                         | 20 | 20,2  |
| 16                         | 6  | 6,1   |
| 17                         | 11 | 11,1  |
| 18                         | 9  | 9,1   |
| Total                      | 99 | 100,0 |
| Gender                     |    |       |
| Laki - laki                | 0  | 0,0   |
| Perempuan                  | 99 | 100,0 |
| Total                      | 99 | 100,0 |
| Education                  |    |       |
| SD                         | 30 | 30,3  |
| SMP                        | 41 | 41,4  |
| SMA                        | 28 | 28,3  |
| Total                      | 99 | 100,0 |
| Regularly visit Posyandu   |    |       |
| Yes                        | 84 | 84,8  |
| Sometimes                  | 15 | 15,2  |
| No                         | 0  | 0,0   |
| Total                      | 99 | 100,0 |

Based on table 1 is known that all over respondents various sex women, with dominated 15 years old as many as 20 people (20.2%), some of them big respondents occupy seat School Intermediate First (junior high school) with total of 41 respondents (41.4%). And some of them big regular respondents come to Posyandu Remaja (84.8%).

Table 2.  
Distribution Frequency of Knowledge Level Adolescent About the Posyandu Remaja (n= 99)

| Knowlage level category | f  | %     |
|-------------------------|----|-------|
| Good                    | 20 | 20,2  |
| Enough                  | 77 | 77,8  |
| Not enough              | 2  | 2,0   |
| Total                   | 99 | 100,0 |

Based on table 2 is known that level knowledge respondents about Posyandu Remaja classified as enough as many as 77 respondents (77.8%), good 20 respondents (20.2%) and category less than 2 respondents (2.0%).

## DISCUSSION

### Characteristics Respondents

Based on results research that has been done age respondents be in range aged 10 to 18 years, in the research conducted this dominated by 15 year olds with number of 20 respondents (20.2%). This in accordance with the data that age 15 is age mid - teens beginning, where the individual start active look for identity and environment social new (Papalia & Olds, 2011). At the age of this, teenager tend more easy for accept information, conditions this can explain why most of respondents own knowledge in category enough, because adolescents in this age is at in phase cognitive that is still develop. According to Hurlock (2011), in mid-adolescence, individuals begin to develop a strong

sense of curiosity and become active in social and health activities. This supports their participation in Posyandu Remaja's activities. As a person ages, their ability to think and receive health information improves.

All over respondents various sex women, things the caused by because Posyandu Remaja was implemented in Gedongan Village, Baki District, Sukoharjo Regency only intended for woman only, so that overall respondents in the research conducted this various sex woman with the total is 99 (100%). This is in line with a focus on anemia prevention programs through distribution of iron supplement tablets. Fitriani's (2020) research shows that adolescents girls more often made into health program targets because, adolescents girls more risky experiencing anemia due to menstruation. However, with this can cause weakness in the form of lack of knowledge adolescents man about the integrated health post program adolescents and about health. Furthermore, this aligns with research by Nuraini (2020), which found that women's participation in Posyandu Remaja activities is higher than that of men, as women tend to be more concerned about health, particularly reproductive health. Furthermore, adolescent girls are more easily engaged in social and educational health activities.

The results of the research conducted also shows that part big respondents occupy junior high school level of 41 respondents (41.4%). Education is very influential big in the learning process someone, from this education capable form pattern think that already there is (Wati, 2016). According to (Notoatmodjo, 2019), education has a very big influence to the level of knowledge. Ability reception information by someone will more easy if the level of knowledge high. However, formal education alone No can made into reject measuring height knowledge a person, because education can obtained no only from formal education alone but can obtained in non-formal education such as experience and socialization in the community. Counseling or socialization in society functions as the main strategy primary prevention.

Can be seen that in research that has been done this part big from respondents as many as 84 (84.8%) were routinely administered follow Posyandu Remaja in Gedongan Village, Baki District, are held routinely every three month. So, it can it is also said that someone who is routine come to Posyandu Remaja will more often accept socialization so that knowledge respondents about Posyandu Remaja more tall compared to with respondents who do not come regularly to Posyandu Remaja. According to the Indonesian Ministry of Health (2019), regular visits to the Youth Integrated Health Post (Posyandu) can increase adolescent awareness and knowledge of various health issues, such as nutrition, personal hygiene, mental health, and reproductive health. Regular visits enable adolescents to obtain more health information and reinforce healthy lifestyle behaviors.

### **Level of knowledge respondents about Posyandu Remaja**

A study of 99 respondents showed that the majority of adolescents (77.8%) had adequate knowledge about the Posyandu program, while 20.2% had good knowledge, and only 2.0% had inadequate knowledge. These results indicate that adolescents' general knowledge about the Posyandu program is quite good, but not yet optimal. Knowledge is the result of a person's perception of an object through the five senses, especially sight and hearing. According to Notoatmodjo (2012), knowledge is a crucial domain in shaping a person's behavior, including in maintaining and improving health. Teenagers' knowledge about the Posyandu Remaja program reflects the extent to which they understand its objectives, benefits, activities, and the role they can play in improving health among teenagers.

Based on the research results, the majority of respondents (41.4%) had a junior high school education. According to Notoatmodjo's theory (2012), the higher a person's level of education, the easier it is for them to understand the information they receive. This shows that adolescents with a junior high school education already have a sufficient knowledge base, but still need guidance and additional information to deepen their understanding. Adequate public knowledge is important in

promoting and implementing a community empowerment program (Yulian et al., 2024)

In addition to education, the frequency of visits to the Youth Health Center also affects the level of knowledge. In this study, the majority of respondents regularly participated in Youth Health Center activities (84.8%). Regular visits should increase knowledge because adolescents receive health education and information more often. However, the results show that the majority of respondents remain in the “sufficient knowledge” category. This indicates that the educational activities organized at the Posyandu Remaja may not have been implemented optimally, or the delivery methods may not have been interesting enough to attract adolescents. According to the Indonesian Ministry of Health (2019), educational activities at the Posyandu Remaja need to be tailored to the characteristics of adolescents, who tend to be active, dynamic, and prefer interactive methods such as group discussions or visual media rather than one-way lectures.

In addition, the interests and motivation of adolescents also influence their level of knowledge. Adolescents tend to be interested in topics that are considered relevant and enjoyable. If Posyandu activities are not presented in an interesting way, adolescent participation will be low, resulting in limited knowledge acquisition. Similar findings were also found by Sari and Rahayu (2020), who stated that adolescents' knowledge can increase significantly if counseling is carried out using interactive methods, such as group discussions, educational games, and the use of attractive digital media. Based on this, it can be concluded that the level of knowledge among adolescents, which is still in the moderate category, indicates that educational efforts at the Posyandu Remaja need to be improved in terms of frequency, methods, and media used.

Adequate knowledge shows that adolescents already have a good basic understanding of the Posyandu Remaja, but it needs to be further strengthened to achieve a good level. Improvements can be made through various strategies, such as increasing the intensity of outreach activities, using digital-based educational media, involving adolescents as peer cadres, and integrating Posyandu activities with school activities such as School Health Units or health extracurricular activities. With these steps, it is hoped that adolescents will better understand the benefits of the Posyandu Remaja program and can play an active role in maintaining and improving.

## **CONCLUSION**

Based on results research, found that level of knowledge adolescents of Gedongan Village regarding the Posyandu Remaja's program is in the category enough. That is show that although integrated Posyandu Remaja this implemented every three month, but adolescents village can accept socialized information with good. The majority respondents from study this occupy seat School Intermediate First (junior high school), and overall from respondents is a woman. This in harmony with research (Kawade et al., 2021) which states that women are more often involved in community health activities, such as integrated health post or activity other related villages with Health.

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