



THE RELATIONSHIP BETWEEN KNOWLEDGE, ATTITUDE, AND PEER SUPPORT WITH ATTENDANCE AT ADOLESCENTS HEALTH SERVICE, INDONESIA

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ABSTRACT

Adolescents Health Service is a government initiative aimed at addressing adolescent health issues, which can lead to various challenges. Low attendance at the Adolescents Health Service results in suboptimal health empowerment among teenagers. This study analyzes the relationship between knowledge, attitudes, and peer support with the attendance of adolescents at the Adolescents Health Service in Carangsari Village, Bali, Indonesia. This correlational research was used a cross-sectional design and purposive sampling, with primary data collected via questionnaire from 47 respondents in April 2024. The Shapiro-Wilk test was used for normality testing. Univariate analysis showed median scores of 73 for knowledge, 31 for attitude, and 5 for peer support. Spearman's Rho bivariate analysis was revealed a weak positive correlation between knowledge and attendance ($p = 0.071$, $r = 0.266$). However, a strong positive correlation was found between attitude and attendance ($p = <0.001$, $r = 0.730$), as well as between peer support and attendance ($p = <0.001$, $r = 0.675$). In conclusion, higher levels of knowledge, positive attitudes, and peer support are associated with increased attendance at Adolescents Health Service in Carangsari Village, Petang District, Bali, Indonesia.

Keywords: *Adolescents Health Service; Knowledge; Attitude; Peer Support; Attendance*

ABSTRAK

Layanan kesehatan remaja adalah upaya pemerintah untuk mengatasi masalah kesehatan remaja karena banyak menimbulkan masalah. Rendahnya kehadiran remaja di Layanan Kesehatan Remaja mengakibatkan pemberdayaan kesehatan tidak optimal. Penelitian ini bertujuan menganalisis hubungan pengetahuan, sikap, dan dukungan teman sebaya dengan kehadiran remaja pada Layanan Kesehatan Remaja di Desa Carangsari Kecamatan Petang, Bali, Indonesia. Jenis penelitian analitik korelatif dengan desain penelitian cross-sectional study dengan teknik purposive sampling, dengan data primer yang dikumpulkan melalui kuesioner dengan responden 47 orang pada bulan April 2024. Uji Shapiro Wilk. digunakan untuk uji normalitas data Analisis univariat menunjukkan nilai median 73 untuk pengetahuan, 31 untuk sikap, 5 untuk dukungan teman sebaya. Analisis bivariat dengan Spearman Rho menunjukkan korelasi positif namun lemah antara pengetahuan dengan kehadiran ($p = 0.071$, $r = 0.266$). Namun, korelasi positif yang kuat antara sikap dengan kehadiran ($p = <0.001$, $r = 0.730$), serta dukungan teman sebaya dengan kehadiran ($p = <0.001$, $r = 0.675$). Disimpulkan bahwa makin tinggi nilai pengetahuan, sikap, dan dukungan teman sebaya, maka

makin tinggi pula kehadiran remaja di Layanan Kesehatan Remaja Remaja Desa Carangsari Kecamatan Petang, Bali, Indonesia.

Keywords: *Layanan Kesehatan Remaja; Pengetahuan; Sikap; Dukungan Teman Sebaya; Kehadiran*

INTRODUCTION

Adolescence is a period of storm and stress, because adolescents experience many challenges from themselves (biopsychosocial factors) and the environment (environmental factors) (Susanti dkk, 2020). Adolescents are a unique group in the human development stage, where they are generally in good health. However, data shows that there are significant rates of death, illness and injury among adolescents (Pratiwi & Nawangsari, 2022). This is a big challenge in maintaining adolescent health that involves not only internal, but also external factors.

According to data from the *World Health Organization* (WHO) in 2021, the population of adolescents aged 10-19 years reached 18% of the total world population, or around 1.2 billion people. In Indonesian, the number of adolescents aged 10-19 years reaches 46 million (17%) of the total population, with 655 thousand (10.47%) adolescents. This figure reflects the importance of paying attention to the adolescents group, especially regarding their health. Survey results Ministry of Health (2018) shows several adolescents health problems in Indonesia, such as anemia, smoking behavior, drug use, and unhealthy diet problems. This highlights the need for appropriate health interventions to address health problems among adolescents.

The government's efforts to improve adolescents health are *Upaya Kesehatan Berbasis Masyarakat (UKBM)* or Community-based Health Efforts, one of which is the Adolescents Health Service (Mardhiyah dkk, 2021). This program is designed to routinely monitor adolescents health and provide comprehensive health education. Unlike other youth character development platforms, such as *PIK-R* (Youth Information and Counselung Center) and *Karang Taruna* (Community Youth Development), Adolescents Health Service not only provides education, but also conducts monthly health checks to support optimal growth and development of adolescents (Ministry of Health, 2018).

Despite its significant benefits, adolescents attendance at Adolescents Health Service is still low. This is due to the lack of motivation and interest of adolescents to participate in these activities (Abdullah & Anissa, 2022). Some research Ariantini et al., (2023), Lisma & Ruwayda (2021), and (Endang, 2019) showed that factors such as knowledge, attitudes, and peer support have an influence on the level of adolescents at Adolescents Health Service. The results of the preliminary study in Carangsari Village show that the level of adolescents attendance at Adolescents Health Service does not meet the expected target, even though this program has been running for three years.

Due to the low attendance of adolescent health services, the researcher wants to know the relationship between knowledge, attitude, and peer support with adolescents attendance at the Adolescent Health Service, Carangsari Village, Petang District, Indonesia. This study can provide a deeper understanding of the factors that influence adolescents attendance in community-based health programs, as well as provide insights to improve the effectiveness of Adolescents Health Service in the future.

METHODS

This research design was a cross-sectional study with correlative analytic study. This research was conducted in Carangsari Village, Petang District, Bali, Indonesia, which is the working area of Puskesmas Petang I and consists of ten neighborhoods. The research variables are knowledge, attitude, and peer support with attendance. The population were adolescents who attended at adolescents health service totaling 593 people, and 47 samples after calcuting the correlative formula were selected if they met the inclusion and exclusion criteria. Inclusion criteria were adolescents aged 12-18 years who attended at adolecents health service, adolescents who were not married, adolescents education at least elementary school, and adolescents were willing to become repondents and signed informed consent. Exclusion criteria were adolescents who experienced physical and mental illness and adolescents who had already filled out the questionnaire during the validity and reliability tests. Sampling type was using purposive sampling technique. The data collection instruments was a written statements in the form of a questionnaires containing statements about knowledge, attitudes, and peer support for adolescents health service that have been tested for validity and reliability. Univariate analysis was conducted to describe the characteristics of each variable, namely age, education, gender, and variables of knowledge, attitudes, and peer support so that the median value, minimum value (min), maximum value (max) were obtained. Bivariate analysis was conducted to analyze the relationship between each variable using the Spearman Rho test because the data were not normally distributed after the data normality test using the Shapiro Wilk test. In selecting respondents, researchers explained the purpose and benefits of the study to adolescents and facilitated the filling of informed consent without coercion, researchers also considered the risks obtained by adolescents as research subject by equalizing each treatment given to each respondent, and compensating each respondent who became a sample in this study.

RESULTS

1. Respondent Characteristics

The characteristics of respondents in this study are presented in table 1 as follows:

Table 1. Respondents Characteristic

Characteristic	Frequency (f)	Percentage (%)
Age		
Early Adolescence (10-12 years old)	7	14.9
Middle Adolescence (13-15 years old)	32	68.1
Late Adolescence (16-19 years old)	8	17.0
Total	47	100
Gender		
Male	13	27.7
Female	34	72.3
Total	47	100
Education		
Primary	40	85.1
Secondary	7	14.9
Total	47	100

Table 1 indicates it can be seen that most respondents are in the middle adolescents age range (68.1%), with female gender (72.3%) and primary education level (85.1%).

2. Knowledge, Attitude, Peer Support, and Attendance

The results of the analysis of adolescent knowledge about adolescents health service, adolescent attitudes about adolescents health service, adolescent peer support about adolescents health service, and adolescent attendance at adolescents health service in Carangsari Village, Petang District, Bali, Indonesia are shown in table 2 as follows:

Table 2. Knowledge, Attitude, Peer Support, and Attendance

Variables	Minimum	Maximum	Median	Mean	Standar Deviasi
Knowledge	47	100	73	73.5	14.6
Attitude	24	40	31	31.7	4.5
Peer Support	1	6	5	4.3	1.7
Attendance	1	6	4	4.2	1.4

Table 2 indicates adolescents knowledge about adolescents health service with a median value of 73, adolescents attitudes about adolescents health service with a median value of 31, peer support with about adolescents health service with a median value of 5, and adolescents attendance at adolescents health service with a median value of 4.

3. The Relationship Between Knowledge, Attitude, and Peer Support with Adolescent Attendance at the Adolescents Health Service

Table 3. The Relationship Between Knowledge, Attitude, and Peer Support with Adolescents Attendance at the Adolescents Health Service

Variables	Median	<i>rho</i>	<i>p</i>
Knowledge Attendance	73	0.266	0.071
Attitude Attendance	31	0.730	<0.001
Peer Support Attendance	5	0.675	<0.001

Table 3 indicates it can be seen that there was no significant relationship between knowledge and adolescent attendance ($p = 0.071$, $r = 0.266$) but there was a weak and unidirectional correlation. There was a relationship between attitude and adolescents attendance ($p = <0.001$, $r = 0.730$). There was a relationship between peer support and adolescents attendance ($p = <0.001$, $r = 0.675$).

DISCUSSION

1. The Relationship Between Knowledge and Adolescent Attendance at the Adolescents Health Service in Carangsari Village, Petang District

Based on the results of this study, it was found that there was no significant relationship between knowledge and adolescent attendance, but there was a weak correlation, indicating a minimal relationship between the variables. The two variables can be interpreted that the better the knowledge of adolescents, the higher the attendance of adolescents. This is consistent with the hypothesis that knowledge affects adolescents attendance. Although most adolescents have good knowledge score, many are still reluctant to come to adolescents health service, it because they were shy to check their health and do not understand the importance of health checks. This finding is in line with research by Pangaribuan (2020) which shows that even though adolescents have good knowledge, they still tend to be reluctant to attend of adolescents health service. According to Saadah & Silalahi (2019) knowledge is a factor that influences adolescents in decision making.

Based on the characteristics of respondents, the results showed that most of the adolescents who attended the adolescents health service were female, as many as 34 respondents (72.3%). This research is in line with research conducted by Pangaribuan (2020) which states that most male adolescents still feel afraid and embarrassed to come to adolescents

health service, because they think they will undergo various kinds of health tests during these activities.

Based on the results of interviews between researchers and respondents, it is known that most respondents do not know about the benefits of adolescents health service materially, but they know through the experience of activities that have been participated in the field and from information sources that have been shared several times related to the benefits and objectives of the adolescents health service. In addition, they also never get information in the form of material about adolescents health service at school or in Karang Taruna activities, but they know it through mouth to mouth from the environment, community and family who tell them so that most adolescents have good knowledge about adolescents health service. Based on research Hartati et al. (2019) agree that the ease with which adolescents can obtain information can help accelerate a person to acquire new knowledge. A person's experience can be obtained from his personal experience or by others. This is based on research conducted by Meliyanti et al. (2024) which states that there was an influence between personal experience on adolescent knowledge.

2. The Relationship Between Attitude and Adolescent Attendance at the Adolescents Health Service in Carangsari Village, Petang District

Based on the results of the study, it was found that there was a significant relationship between attitude with attendance of adolescents, and that there was direction of the correlation positive with a strong correlation strength, which means that the relationship between the two variables is unidirectional, thus it can be interpreted that the better the attitude of adolescents about adolescents health service, the higher the attendance of adolescents at Adolescents Health Service, Carangsari Village, Petang District, Indonesia.

According to researchers, the factors that influence attitudes are lack of encouragement or motivation from oneself, family, environment, and society. The formation of a person's attitude is largely influenced by factors that are intrinsic and extrinsic to that person. According to research conducted by (Muliati & Yusuf, 2020) motivation is related to a person's behavior to the adolescents health service. These factors can be in the form of personal experience, the influence of others, culture information media, and emotional factors of the person himself. In line with research conducted by (Lisma & Ruwayda, 2021) who said that someone who has a good attitude in utilizing adolescents health services is greater than adolescents who have a bad attitude. Research by K. D. Kurniawati et al. (2020) also said that the attitude of perceived seriousness and self-efficacy is directly proportional to adolescent behavior, which means that

the more serious a teenager is about himself being able to attend adolescents health service, it will increase the interest in empowering adolescents health service.

3. The Relationship Between Peer Support and Adolescent Attendance at the Adolescents Health Service in Carangsari Village, Petang District, Indonesia

Based on the results of the study, it was found that there was a significant relationship between peer support with attendance of adolescents, and that there was direction of the correlation positive with a strong correlation strength, which means that the relationship between the two variables is unidirectional, thus it can be interpreted that the better the peer support of adolescents about adolescents health service, the higher the attendance of adolescents at Adolescents Health Service, Carangsari Village, Petang District, Indonesia.

According to the researcher, peer support is influenced by the age of adolescents, which is dominated by respondents aged 13-15 years (middle adolescence) and are pursuing primary education, because most of those present at the adolescents health service are friends of the same age or scholl friends who become daily play and study buddies. Peer support is needed because it can influence adolescents behavior in participating in adolescents health service activities regularly (Avelina et al., 2023). Most of the adolescents health service participants are middle adolescence age group tend to need more association by choosing to make friends with friends who are of the same age or have something in common and form groups with friends their age (Asyia et al., 2022). Peers play an important role as reinforcers in increasing adolescent attendance rates at adolescents health service. Involving peers as reinforcers can help create a supportive environment and facilitate adolescent attendance at adolescents health service activities (M. Kurniawati et al., 2023). The respondents character is the main cause that shapes the respondents behavior, which can take the form of positive behavior, namely by regularly attending or negative, namely by not regularly attending at the adolescents health service.

CONCLUSION

Based on the results of research on the relationship between knowledge, attitudes, and peer support with adolescents attendance at the adolescents health service, it can be concluded that the higher the knowledge, attitude, and peer support for adolescents health service, the higher the attendance of adolescents at the Adolescents Health Service in Carangsari Village, Petang District, Bali, Indonesia.

There was the external factors that cause adolescents low attendance at Adolescents Health Service that cannot be fully measured in this study. The peer support instrument was used did not cover all aspects of peer support. It was likely that the results of the study cannot fully determine the variables that are the cause and effect of the study.

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ETHICS OF STUDY

This study has received ethical approval from the Ethics Commission of The Denpasar Health Polytechnic with No. DP.04.02/F.XXXII.25/0408/2024.

CONFLICT OF INTEREST

There was no conflict of interest.

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AUTHOR'S CONTRIBUTION

Ni Made Irayanti Friska Paramita Sena Putri Marken: concept and research question, conducting research, statistical analysis, report writing.

Ni Made Dwi Mahayati: concept and research question, verified the analytical methods, supervised the findings of this work, statistical analysis, report writing.

Ni Wayan Suarniti: concept and research question, verified the analytical methods, supervised the findings of this work, statistical analysis, report writing.

All authors discussed the results and contributed to the final manuscript.

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