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FACTORS RELATED TO THE INCIDENCE OF DIARRHEA IN TODDLERS AGED 12-48 MONTHS IN THE WORKING AREA OF TLOGOSARI KULON HEALTH CENTER IN SEMARANG CITY

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ABSTRACT

HIV / AIDS pandemic is worldwide has infected an estimated 36.9 million people. Data from the Indonesian Ministry of Health that reported new HIV-positive cases in 2018 were 46,659 cases and AIDS 10,190 cases from 34 provinces in Indonesia. Adolescence begins to feel sexual urges as shown by attraction towards the opposite sex. As a result, teenagers experiment with sexuality. The population of Indonesia is 265 million people, 18% of whom are teenagers. The highest group of adolescents aged 10-14 years amounted to 22.8 million. Adolescents are very at risk of sexual behavior and HIV / AIDS. The purpose of this study was to describe and analyze the relationship between adolescent characteristics including gender, knowledge level of reproductive health, access to information, and the role of peers on adolescent sexual behavior. This research was conducted at SLTP Al-Irsyad Al-Islamiyyah, North Semarang District, Semarang City. This type of research was quantitative using correlation analysis with a cross-sectional design. The population of this study was 235 students at Al-Irsyad Al-Islamiyyah Junior High School. Sampling with purposive sampling of 70 respondents. The results of this study indicate that there was a relationship between gender characteristics, knowledge of reproductive health on adolescent sexual behavior, with a significance p-value <0.05. There is no relationship between access to information, and the role of peers on adolescent sexual behavior with a significance p-value > 0.05. From the research results, it is hoped that the use Health provider and academicians can work together in monitoring and education related to adolescent reproductive health by providing education and provision of reproductive health materials.

Keyword: Gender characteristics; reproductive health knowledge; access to information; the role of peers; and adolescent sexual behavior

Introduction

Adolescence is the period of the life span of the individual, there are very large physical changes such as the maturation of organs and reproductive function. With these changes, adolescents begin to feel the sexual urge shown by attraction to the opposite sex. Teenagers begin to dabble in terms of sexuality¹. Adolescence is divided into early adolescence aged 10-13 years, midadolescence age 14-16 years, late adolescence age 17-19 years².

According to the results of the 2018 population census, the population of Indonesia is 265 million people, 18% of whom are teenagers. Adolescents aged 10-14 years amounted to 22.8 million. While the population of 15-19 years amounted to 22.2 million. The size of the adolescent population affects the development of economic, social, and demographic aspects. The adolescent population (10-19 years) in school-age and working-age is very at risk of reproductive health problems such as active dating, sexual relationship patterns in dating, the early status of sex, syringe lovers (tattoo lovers, piercings with tools exposed to HIV / AIDS) are very likely to contract HIV / AIDS³.

HIV/AIDS has become a pandemic with the number of HIV/AIDS cases from year to year continuing to increase, and no drugs or vaccines have been found to prevent or treat patients. The disease also has a "window period" of time during which a person has been infected with HIV but the body has not formed antibodies to HIV so the serologic examination results negatively and the asymptomatic (asymptomatic) phase of the disease's relatively long course¹.

Data from the Indonesian Ministry of Health that has been reported from 34 provinces in Indonesia the number of HIV positive cases in 2018 amounted to 46,659 cases and AIDS as many as 10,190 cases, with the cumulative number of HIV / AIDS cases there were 640,443 cases. The provisions in Indonesia with the highest number of HIV infections are DKI Jakarta (55,099 people), East Java (43.0699 people), West Java (31,293), and Central Java (24,757 people)¹.

HIV /AIDS cases in Central Java Province in 2018 were the 4th highest with HIV patients as many as 24,757 people and AIDS as many as 4,418 cases, there was an increase in AIDS cases compared to 3,679 cases in 2017 and in 2016 as many as 3,269 cases⁴.

The area with the most HIV /AIDS sufferers in Central Java Province is Semarang City. Based on data from the Semarang City Health Office, cumulative data on HIV / AIDS cases in 1995-2018 reached 5625 cases. The highest area of HIV /AIDS cases in Semarang City is in North Semarang District as many as 159 cases⁵.

There are several factors that encourage adolescents to have sex outside of marriage such as lack of knowledge of reproductive health, access to information, and the influence of peers or promiscuity. The group of people who are easily affected by the flow of information both negative and positive is adolescents⁶. Transmission of HIV/AIDS and STIs in adolescents can occur through sexual intercourse, the use of unsterilized syringes, and receiving transfusions of blood that has been contaminated with HIV.

Bandarharjo Health Center work area is a health center located in North Semarang District with the highest cases of HIV / AIDS and Sexually Transmitted Infections (STI), based on cumulative data in 2011-2018 HIV / AIDS cases as many as 103 cases and STI cases as many as 44 cases. Bandarharjo Health Center Work Area is located in North Semarang District and is in a coastal area that includes high-risk criteria for HIV / AIDS and STIs transmission with entertainment facilities in the form of karaoke and massage parlors plus in Tawang and Tanjung Mas port, prostitution businesses in Tawang area that are an option to seek entertainment and access to risky sexual transactions⁴.

According to the results of the researcher's interview with the P2P section of Bandarharjo Health Center on October 19,

2019, of the 4 junior high schools covered by Bandarharjo Health Center, there is 1 school located in the risk area, namely SLTP Al-Irsyad Al-Islamiyyah Kota Semarang because it is located in Dadapsari Village, an area that is at high risk for the spread of HIV / AIDS and IMS events because it is directly adjacent to the Star karaoke entertainment venue and massage parlor plus Tawang Railway Station which becomes access to risky sexual transactions.

The involvement of families, educators, and the surrounding community can participate in HIV /AIDS and STI extension activities to minimize and prevent other AIDS incidence. Bandarharjo Health Center has a reproductive health extension program that is carried out every year. In 2019 it was completed in early September.

The purpose of this study was to know the Factors Related to Sexual Behavior in Adolescents in SLTP Al-Irsyad Al-Islamiyyah.

Methods

This type of research is correlational analytics i.e. research that looks for the absence of an association between two or more research variables. The approach used in this study is the cross-sectional approach.

In taking samples this study using purposive sampling is sampling according to the consideration of researchers by taking random according to the criteria that have been done. This sampling technique is used to determine samples that are in accordance with the researcher's wishes, in accordance with inclusion criteria and exclusion criteria.

Independent variables in the study were reproductive health knowledge levels, access to information, and peer roles. The dependent variable in the study was sexual behavior in students (adolescents).

The measuring instruments used are open questionnaires about reproductive

health knowledge levels, access to information on the role of peers, and sexual behavior.

The data analysis in this study is univariate and bivariate. Univariate analysis to determine the frequency distribution of reproductive health knowledge levels, access to information, and the role of peers and sexual behavior. The bivariate analysis aims to assess or determine the presence or absence of relationships between each variable independent and dependent variables (Notoatmodio, 2018). statistical test used in this study was to use Chi-Square in the Statistical Package for Social Science (SPSS) 23.0 program.

Results and Discussion

The research was conducted in February - March 2020 at SLTP Al-Irsyad Al-Islamiyyah Semarang City. The respondents to the study numbered 70 students. This study aims to find out what are the factors associated with sexual behavior in adolescents in SLTP Al-Irsyad Al-Islamiyyah Semarang City.

The study was conducted in the school hall by providing questionnaires that had been provided.

Tabel 1. Characteristics Respondents

No	category	F	%
1	Girl	40	57.2
2	Boy	30	42.8
	Total	70	100

From Table 1 data it is known that most respondents have female gender characteristics as many as 40 respondents with a percentage of 57.2% and men as many as 30 respondents with a percentage of 42.8%.

Tabel 2. Knowledge about Reproductive

No	Category	F	%
1	Less	3	4,2
2	Enough	25	35,8
3	Good	42	60
	Total	75	100

From Table 2 data it is known that adolescent knowledge about reproductive health can be known as many as 3 respondents (4.2%) have less knowledge, 25 respondents (35.8%) have sufficient knowledge, 42 respondents (60%) have a good knowledge of reproductive health.

Tabel 3. Category access to adolescent information

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No	category	F	%
1	Less	44	62.8
2	Good	26	37.2
'	Total	75	100

From Table 3 data it is known that access to adolescent information can be known as many as 44 respondents (62.8%) have access to less information and 26 respondents (37.2%) have access to good information.

From Table 1.5 data, it is known that sexual behavior can be known as many as 50 respondents (71.4%) have good behavior and 14 respondents (20%) have bad behavior as much as 6 respondents (8.6%).

Tabel 6. Reliationship of Characteristics of Sex with Sexual Behavior

		Sex	xual B	ehavior			sum	Exa	ct.sig
Gender		High		dium	Lov	w risk	F	%	0.00
	1	Risk	r	isk					2
	F	%	F	%	%	%			_
Girl	1	2.5	4	10	35	87.5	40	57.2	_
Boy	5	16.7	10	33.3	15	21.4	30	42.8	=
Total	6	8.6	14	20	50	71.4	70	100	

Based on the results of cross-tabulation of respondents with high-risk sexual behavior with female sex by 2.5% and men by 16.7%, moderate risk sexual behavior with female sex by 10% and men by (33.3%), while low-risk sexual behavior with female sex by 87.5% and men by 21.4%.

Tabel 7. Knowledge Level Reliationship with Sexual Behavior

								WILLI	CAua	Denav	101		
	Tab	el 4. Category t	the Role of P	eers Level			Sexu	al Behav	ior		S	um	Exact
	No	category	F	% of									.sig
•	1	category	20	28.5 agger		High Risk		edium risk	Lo	w risk	F	%	0.022
	2	category	50	Less	1	33.3	2	66.7	0	0	3	4.3	
_		Total	category	10khough	3	12	6	24	16	64	25	35.7	•
	I	From Table 4 da	ta it is knowr	n th <u>at the</u>									
r	ole of	peers can be ki	nown as mai	ny a ^{Ba} ido	2	4.8	6	14.3	34	81	42	60	
		anta (29.50/) a			6	8.6	1/1	20	50	71.4	70	100	

respondents (28.5%) said that the roll peers supports behavior and 50 respondents (71.5%) say the role of peers is not supportive.

Tabel 5. Category the Sexual Behavior

No	category	F	%
1	Good	50	71.4
2	Enough	14	20
3	Less	6	8.6
	Total	75	100

Based on the results of cross-tabulation between Educational Characteristics and Diarrhea Incidence in Toddlers showed that of 75 respondents there were mothers of toddlers with Secondary Education 40 respondents (53.3%), among them 23 (30.7%) respondents had a history of diarrhea events in toddlers, and 17 (22.7%) had no history of diarrhea events in toddlers.

Tabel 8. Reliationship of Access to Information with Sexual Behavior

		S	exual B	ehavior			Jumlah	Е	Exact.sig
Access Information	Hig	h Risk	Medi	um risk	Lo	ow risk	F	%	0.610
	F	%	F	%	%	%			
Less	5	11.4	9	20.5	30	68.2	44	62.8	_
Good	1	3.8	5	19.2	20	76.9	26	37.2	_
Total	6	8.6	14	20	50	71.4	70	100	

Based on the results of cross-tabulation respondents with high-risk sexual behavior when viewed from access to information, obtained by 11.4% greater than access to good information by 3.8%. Sexual behavior is at moderate risk when viewed

from access to information less than 20.7% greater than access to good information (19.2%). Low-risk behavior, when viewed from access to information, is less than 62.8% less than access to good information (76.9%).

Tabel 9. Peer Role Reliationship with Sexual Behavior

			Sexual Be	ehavior			sum Exact.sig			
Peer Role	Hig	h Risk	Mediu	m risk	L	ow risk	F	%	0.618	
	F	%	F	%	%	%				
Support	4	8	9	18	37	74	50	71.5		
Not Support	2	10	5	25	13	65	20	28.5		
Total	6	8.6	14	20	50	71.4	70	100		

Based on the results of cross-tabulation that respondents with high-risk sexual behavior when viewed from peer roles, the role of supportive peers was 8% smaller than the role of peers who did not support 10%, moderate risk sexual behavior when viewed from the role of supportive peers by 18% less than the role of peers who did not support 25%, Low-risk sexual behavior when viewed from the role of supportive peers is 74% smaller than the role of peers who do not support 65%.

Relationship of Characteristics of Sex with Sexual Behavior

Sex is an analytical concept used to identify differences between men and women

from a non-biological point of view, i.e. from the social, cultural, and psychological aspects of the biological characteristics of men and women. Biological differences and functions cannot be exchanged between the two. Gender distinguishes roles and tasks in everyday life and in terms of work⁷.

Based on the results of cross-tabulation showed the pattern of relationships strengthened by the results of statistical analysis using the Fishers Exact Test obtained a value of p-value = 0.002 < 0.05, meaning that there is a relationship between the characteristics of the respondent's gender to adolescent sexual behavior. This is because the number of female respondents in each class is more than the number of male

respondents. This opinion is in line with data from the Central Bureau of Statistics of Semarang City in 2019 which showed that the number of teenage girls aged 10-19 years living in Semarang City is more than the number of teenage boys. The number of teenage girls is 76,732, while the number of teenage boys is 70,817.

Knowledge Level Relationship with Sexual Behavior

Adolescent reproductive health is a health condition related to the reproductive systems, functions, and processes possessed by adolescents. The understanding of health here is not only disease-free or free from disability but also mentally and socioculturally healthy².

Based on the results of crosstabulation Showing relationship patterns strengthened by the results of statistical analysis using the Fishers Exact Test obtained a value of p-value = 0.022 < 0.05, meaning that there is a relationship between the level of knowledge respondents to adolescent sexual behavior. Cognitive knowledge is an important domain in shaping a person's behavior. If a person's level of knowledge is less, the less someone will absorb and apply the information they know, and vice versa if one's level of knowledge is better, the better in absorbing and applying the information obtained⁸.

Relationship of Access to Information with Sexual Behavior

Access to information is obtained a lot from media exposure. Media is essentially a tool used by a person in conveying materials, materials, or messages. This tool is more often called a prop because it serves to help and demonstrate something in the promotion process so that the messages can be conveyed more clearly and the public can receive the message more clearly and

precisely. This promotional media consists of print media (booklet, leaflet, flyer, flip chart, poster), electronic media (television, radio, video, slide, film strip), and media board (billboard)⁹.

Based on the results of crosstabulation shows the pattern of relationships strengthened by the results of statistical analysis using the Fishers Exact Test obtained a value of p-value = 0.610 > 0.05, meaning that there is no relationship between access to information to adolescent sexual behavior. The results of the processing of questionnaire data showed that respondents accessed a lot of information about reproductive health and did not download porn.

Peer Role Relationship with Sexual Behavior

Peers can be interpreted as friends or friends who are the same age and work and do together¹.

Based on the results of cross-tabulation shows the pattern of relationships strengthened by the results of statistical analysis using the Fishers Exact Test obtained a value of p-value = 0.618 < 0.05, meaning that there is a relationship between the role of peers to adolescent sexual The results behavior. processing of questionnaire data showed that respondents rarely told personal things to their friends and opinions had friends' no effect respondents' decisions.

Conclusion

Based on the results of the study "Factors Related to Sexual Behavior in Adolescents in SLTP Al-Irsyad Al-Islamiyyah Kota Semarang" can be concluded that the most of the characteristics of the female sex (57.1%), a good education level (60%), access to information are lacking (62.8%), non-supportive peer roles (71.5%), low-risk sexual behavior (71.4%).

There was a relationship between gender characteristics (0.002), knowledge level (0.022) to adolescent sexual behavior, no relationship between access to information (0.610), peer role (0.618) to adolescent sexual behavior.

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