

THE RELATIONSHIP BETWEEN KNOWLEDGE AND PRODUCTION HEALTH BEHAVIOR IN ELEMENTARY SCHOOL CHILDREN IN BLABAK 1, KEDIRI REGENCY

by Iik Bhakti Wiyata Kediri Perpustakaan 1

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THE RELATIONSHIP BETWEEN KNOWLEDGE AND PRODUCTION HEALTH BEHAVIOR IN ELEMENTARY SCHOOL CHILDREN IN BLABAK 1, KEDIRI REGENCY

Mia Ashari Kurniasari¹, Candra Dewinataningtyas², Ellatyas Rahmawati Tejo Putri³, Dwi Margareta Andini⁴

¹ D3 Medical Laboratory Technology, ² D3 Midwifery, ^{3,4} S1 Midwifery
Institut Ilmu Kesehatan Bhakti Wiyata Kediri

Correspondence address:

Jl KH Wachid Hasyim No 65 Kec Mojoroto Kota Kediri

Email : mia.ashari@iik.ac.id

Abstract

Introduction: The transition from childhood to adolescence or puberty is a time when hormonal development can affect the physical and psychological development of an early adolescence. The change can be a traumatic experience, if there is no early preparation. Knowledge is very necessary and can be a major factor in shaping one's actions or behavior, because at this time the importance of knowledge about adolescent physical changes, because at this time there is a lot of pressure with physical, biological changes and pressure on environmental changes, while elementary school children are still rarely exposed to reproductive health knowledge. **The purpose** of this study was to analyze the relationship between reproductive health knowledge and behavior in elementary school children. **The method used** is observational analytics with a sample number of 75 using total sampling sampling techniques, analysis tests used using chi square. **The results** of the study were low knowledge of respondents with poor reproductive health behavior around 26.7%. Knowledge of respondents is high with good reproductive health behavior around 21.3%. Poor reproductive health behavior with low knowledge is 18.7%, while for good reproductive health behavior with good knowledge is around 33.3%. The results of the chi-square test obtained a value of $p = 0.001$, which means that statistically there is a relationship between knowledge and reproductive health behavior in elementary school children. **Conclusion:** There is a relationship between knowledge and reproductive behavior in elementary school children 1 Blabak Kediri.

Keyword : Knowledge, reproductive health behavior, Preschool children

INTRODUCTION

WHO states that the age limit for adolescents is 10-19 years. The number of adolescents in Indonesia according to population census data in 2020 is estimated at 67 million people or as much as 24% of the total or total population of Indonesia. So that adolescents become the focus of important attention in national development (Pusdatin, 2017). Contribution to BKKBN's national priority programs is by increasing maternal child health, family planning and reproductive health with a strategic focus, one of which is on increasing knowledge and access to adolescent reproductive health services. Behavior in adolescents is closely related to reproductive health problems, adolescent behavior that is at risk for example smoking, alcohol addiction, drug use and sexual intercourse before

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marriage. In 2017 the results of the IDHS survey obtained data on adolescent smoking as much as 55% of adolescent boys and 1% of adolescent girls, drug abuse as much as 15% of adolescent boys and 1% adolescent girls, alcohol consumption 5% of adolescent boys, and already engaged in premarital sex as much as 1% of adolescent girls. (BKKBN, 2018).

The period of rapid changes in physical, psychological and intellectual growth and development is in adolescence. One of the characteristics possessed by a teenager is to have a great curiosity, like all things that are adventurous, challenging and more likely to dare to act first without careful consideration of the risks that might occur. Improper decision-making in a teenager when conflict occurs can cause the adolescent to be in risky behavior both short and long term, especially in physical and psychological health problems. Adolescent care health services are needed in this case so that adolescents can meet their health needs, including reproductive health services. The result of human curiosity in something and the desire to achieve a better life and human effort in meeting current or future needs is knowledge. Knowledge is very necessary and can be a major factor in shaping one's actions or behavior, because with knowledge can result in a human being will act according to the knowledge he has. So that with the knowledge of a teenager on his reproductive health, there will be efforts to prepare for puberty that will be experienced by a teenager. (Ratih, et al. 2020).

During puberty there are many changes in the body that a child undergoes. These changes can be traumatic experiences, if there is no early preparation (Candra Dewi, 2012). At this time the importance of knowledge about adolescent physical changes, because at this time there is a lot of pressure with physical, biological changes and the insistence of environmental changes that require a process of adjustment in adolescents, for example, sexual development in adolescents takes place the fastest of various cycles in humans. So it is important for adolescents to know and understand the sexual development they face. Teenagers' ignorance of the many changes that occur in their bodies can cause embarrassment and anxiety, teenagers tend to just wonder, what should be done but they tend to be embarrassed in expressing it. (Ratih. et al. 2020).



The existence of adolescent reproductive health programs has the aim of providing good knowledge to children so that a child can live his adolescence without shame and anxiety and can maintain and maintain his health with the aim of entering a family life with healthy reproduction. The information provided about reproductive health so far by the Ministry of Health Program is only often targeted at junior and senior high school students. While elementary school students are still rarely exposed to knowledge about reproductive health, this is considering what WHO has mentioned that the age limit for adolescents is starting from the age of 10 years. (Widiyastuti, 2019). Based on the description above, the purpose of this study is to see the relationship between knowledge and reproductive health behavior in elementary school children, so that it can be used as initial information for children in dealing with sexual problems. Children who know about reproductive health behavior well, are expected in living their adolescence they can behave without risk.

METHOD

This study is an observational analytical study. This research was conducted at SDN 1 Blabak Kediri, East Java in December 2021. The population in this study was all students in Grades 4, 5 and 6 of elementary school. The research subjects used were elementary school students in grades 4, 5 and 6. The population in this study was 75 people, with a sample of 75 people. The sampling technique used is total sampling, by taking the overall population in each class. The independent variable in this study is the knowledge of elementary school children for the dependent variable is the reproductive health behavior of elementary school children. Data collection in this study used a questionnaire of 20 questions, 10 questions to find out how knowledge of elementary school children and 10 questions to see reproductive health behaviour. To see whether this instrument can be used or not, a validity test is carried out first. The results of the validity test conducted by the researcher obtained a rtable of 0.632, where the calculation of > 0.60 is interpreted as valid. The analysis methods used are univariate and bivariate analysis. In this study, the analysis used was using the chi-square test. Before the study, an ethical test was carried out first, where this ethical test, used to see whether

or not this research was feasible, was carried out on humans. Ethics are carried out at the Institut Ilmu Kesehatan Bhakti Wiyata Kediri.

2 RESULT AND DISCUSSION

Based on the results of the analysis of general data of respondents based on, age, and gender show:

Table 1. General data distribution by age, and gender

Age	Frequency	Percentage (%)
9 Years	13	17,0%
10 Years	21	28,3%
11 Years	29	38,7%
12 Years	12	16,0%
Total	75	100%
Gender	Frequency	Percentage
Man	42	42,56%
Woman	33	33,44%
Total	75	100%

Based on table 1 shows that the average age of elementary school children in grades 4, 5 and 6 is the most 11 years old or around 38.7%, the age of 11 years has been included in the category of early adolescence, the more someone gets older, the more they will increase one's knowledge with the experience done. The above results also show that the most gender is men around 42.56% or a total of 42 people, and more than women around 33.44%.

Table 2. Characteristics of Knowledge of Children in SD 1 Blabak Kediri

Knowledge	Frequency	Persentase (%)
Tall	41	54,6%
Low	34	45,4%
Total	75	100 %

Table 2 shows that the level of knowledge of elementary school children about reproductive health is in the high category with a frequency of 41 or 54.6% and for those who have low knowledge with a frequency of 34 or 45.4%.

Table 3. Characteristics of Reproductive Health Behavioural of Children at SD 1 Blabak Kediri

Reproductive Health Behaviors	Frequency	Persentase (%)
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Good	39	52%
Bad	36	48%
Total	75	100

¹ Table 3 shows that for the level of reproductive health behavior of elementary school children who have good behavior there are 39 children or 52% and for bad behavior around 36 children or 48%..

Table 4. The Relationship of Knowledge with Children's Reproductive Health Behavior at SD 1 Blabak Kediri

Knowledge	Reproductive Health Behaviors				Total		p-value
	bad		Good		N	%	
	n	%	n	%			
Tall	16	21,3%	25	33,3%	41	54,6%	0,001
Low	20	26,7%	14	18,7%	34	45,4%	
Total	36	48	39	52	75	100%	

¹³ Based on table 4 above, it shows that the knowledge of respondents with poor reproductive health behavior amounted to 20 respondents or around 26.7%. High knowledge of respondents with good reproductive health behavior amounted to 16 respondents or around 21.3%. Poor reproductive health behavior with low knowledge amounted to 14 respondents or around 18.7%, while for good reproductive health behavior with good knowledge obtained 25 respondents or around 33.3%. ² The results of the chi-square test obtained a value of $p = 0.001$, it can be interpreted that H_0 is rejected and H_a is accepted, ⁸ there is a relationship between knowledge and reproductive health behavior in children of SD Blabak 1 Kediri.

Behavior (human) includes all human activities or activities that others can see directly or indirectly. Examples include walking, talking, laughing, working, and so on. Social sensitivity, continuity, and orientation to tasks, endeavors, and struggles are behavioural traits that distinguish humans from other creatures. To improve health status and develop human capital, the Indonesian government must prioritize reproductive health as one of the national development priorities. Reproductive health programs in Indonesia depend on this policy, which is used by

various sectors such as local governments, NGOs, professionals, and private companies (Kemenkes RI., 2021).

This result is different from the results of research conducted by Fadhullah and Hariyana (2019) stating that there is no significant relationship between reproductive health knowledge and behavior, as well as research conducted by Gustiawan et al (2021) states that from the results of the spearman rank test analysis, a value of $p = 0.196$ was obtained, which concluded that there was no significant relationship between reproductive health knowledge and behavior. According to Notoatmojo (2014) states that knowledge is the main component in the formation of one's behavior. Knowledge is required before a person performs an action. This is supported by Ramulo (2014) research states that the main role in the formation of behavior change is from good knowledge.

The results of this study are in line with research conducted by Bawental, et al (2019) in Manado City stating that knowledge significantly affects premarital sexual behavior in adolescents. This is also supported by research by Atik and Susilowati (2021) stating that knowledge plays an important role in changing a person's behavior which can change behavior to negative or positive, this research was conducted at SMK Semarang Regency with *chi-square* test results $p = 0.000$. According to notootmodjo (2011) states that the less knowledge, the tendency of a person to do good behavior will also be less. This opinion is reinforced by the results of research from Yusfarani (2022) which states that from a total of 79.0% of respondents have a high attitude towards knowledge with a chi-square value of $p = 0.000$. The impact that can arise due to the absence of knowledge about reproductive health can cause many problems, ranging from health problems to socioeconomic problems (Septiana, 2020). In sexual acts can be manifested in various ways, ranging from feeling attracted to dating, making out and intercourse (Kesume & Margo, 2021). This shows that knowledge plays an important role in determining an attitude and behavior, with good knowledge it is hoped that the behavior is also good so that problems, especially to adolescents, can be reduced by providing information from an early age



CONCLUSION, SUGGESTION, AND ACKNOWLEDGMENT

The conclusion in this study is that most students of SD Blabak 1 have less knowledge, and almost some respondents have poor reproductive health behavior, in this study it can be concluded that there is a relationship between knowledge and reproductive health behavior in SD Blabak 1 students. It is expected that in the implementation of learning inserted related to reproductive health material, so that they can get good knowledge so that they can apply it in everyday life. In addition, it is expected that the school will cooperate with local health workers or BKKBN regarding the provision of material, especially knowledge about reproductive health, so that it can be a provision of knowledge for elementary school children in behaving, especially to reproductive health behavior.

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