



The Small Group Discussion Health Education Model for Improving Adolescent Knowledge About HIV / AIDS in High Schools in Kerambitan District, Tabanan Regency

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ABSTRACT

The level of knowledge of adolescents about HIV / AIDS in Indonesia by category is not large enough, which is 48.9%. The small group discussion / SGD learning model is one of the learning steps implemented so that the goal of learning outcomes is quickly achieved more effectively and efficiently. The purpose of this study was to determine the effectiveness of the SGD health education model in increasing adolescent knowledge about HIV / AIDS in high schools in Kerambitan District, Tabanan Regency. The research method used was a pre-experimental design with one-group pre-test - post test design. The sample technique used was random sampling with a total of 100 students. The statistical test used Wilcoxon test. The results showed that the small group discussion education model was effective in increasing adolescent knowledge about HIV AIDS in Kerambitan Tabanan High School, with a value (p) of 0,000.

1. Introduction

HIV / AIDS is a disease that continues to grow and become a global health problem in both developed and developing countries. In the world in 2013 there were 35 million people living with HIV which included 16 million women and 3.2 million children aged <15 years. The number of new HIV infections in 2013 was 2.1 million consisting of 1.9 million adults and 240 000 children aged <15 years. Deaths due to AIDS as many as 1.5 million consisting of 1.3 million adults and 190,000 aged <15 years (Kemenkes RI, 2014)

Observing cases of HIV / AIDS in Indonesia is increasing rapidly, free behavior and lifestyle has made this case go far. Cases of HIV / AIDS in Indonesia were first discovered in 1987 in Bali until 2016 spread in 407 (80%) of 507 districts / cities in all provinces in Indonesia. But since 2007, HIV cases have arrived - soaring from year to year, 2014 (32,711), 2015 (30,935) and 2016 (41,250). HIV infection in 2016 was highest in the age group of 25-49 years (68%), followed by the age group of 20-24 years (18.1%). AIDS cases in 2014 (7,963), 2015 (7,185) and 2016 (7,491). AIDS in 2016 was highest in the age group of 30-39 years (35.3%), then followed by the age group of 20-29 years (32.3%), 40-49 years (Ditjen P2P Kemenkes RI, 2016).

HIV / AIDS cases in the Province of Bali according to the report of the Directorate General of P2P of the Republic of Indonesia Ministry of Health (2016) ranks sixth (523 cases) after Jakarta (1136), West Java (1048), Central Java (712), Papua (615). In Tabanan District HIV / AIDS cases show an increasing trend every year. In 2014 there were 64 HIV cases in Tabanan District, with 80 AIDS cases (Dinkes Kabupaten Tabanan, 2015). In 2016 there were 47 cases, with the number of AIDS cases being 58 cases, where there were 2 cases of AIDS-related deaths, both of which were male (Dinkes Kabupaten Tabanan, 2016).

Background in which there are 7 cases of death due to AIDS. Most sufferers occur at the age of 25-49 years, and the lowest at the age of 5-14 years. Background in which there are 7 cases of death due to AIDS. Most sufferers occur at the age of 25-49 years, and the lowest at the age of 5-14 years (Dinkes Kabupaten Tabanan, 2017)

The high AIDS cases found at the age of 20-29 years can be estimated when adolescents aged 15-24 years in their bodies have been infected with HIV. This is possible because of the lack of access to information obtained by adolescents relating to HIV-AIDS. stated that married women and men heard more about HIV AIDS compared to unmarried women and men. Knowledge about HIV and AIDS prevention which includes 10 questions at Riskesdas in 2010 the knowledge of adolescents was categorized less 62.1% and knowledge of transmission with 6 questions categorized less than 46.9% . (Sudikno, dkk, 2010)

The research results of Sudikno, et al, (2010) showed knowledge of HIV and AIDS in adolescents with less categories is still quite large, which is 48.9%. Adolescents who are able to answer correctly the knowledge of HIV and AIDS are only 0.3 percent.

The results of the SDKI (2012) show that adolescent knowledge about reproductive health is inadequate and information about HIV AIDS is only known by adolescent girls 37.3% and 40.1% by adolescent boys (Kemenkes RI, 2013). The research by Yuliantini, H (2012) shows that the level of knowledge of adolescents about HIV / AIDS is 47.90% in poor categories. The results of the research Suharti S., Surmiasih, (2015) conducted on 156 adolescents obtained 93 results (59.6%) have poor category knowledge about reproductive health.

A lot of efforts have been made but HIV AIDS cases are still high and in Bali Province is being intensively socializing the dangers of the HIV / AIDS virus in each school, public services and health services to prevent dangerous diseases. Dinkes Kabupaten Tabanan, (2017) states that with the increase in HIV cases there is a need for promotive and preventive efforts in all age groups. Adolescence is a critical period in human development both physiologically, psychologically and socially. Adolescents are expected to become the foundation and backbone in continuing development, therefore it is very important to provide true and accurate understanding and knowledge, including information about HIV and AIDS (Sudikno, dkk, 2010). The methods that can be used in the provision of public health education (PKM) are films, pamphlets, leaflets, and lectures, (Sanjaya, 2010).

But more methods used are counseling methods because they are cheaper and do not require too complicated place settings and require a short time both in preparation and implementation. Although the most frequent efforts have been made with counseling methods to prevent cases of HIV / AIDS The results of Bakara Derison, dkk (2014) stated that health education about HIV / AIDS can increase adolescent knowledge about HIV / AIDS, with an average value before counseling of 70.60 and an average value after counseling of 85.92%. Other research conducted by) (Candraditya Z, 2015) on health education through comic book media states that the knowledge variable has increased from 10.32 ± 1.77 to 18.05 ± 2.54

Until now there has been no publication of the small group discussion / SGD for health education model to increase adolescent knowledge about HIV / AIDS in Kerambitan District, Tabanan. The learning model will be able to increase one's learning interest and attention so that it will affect the activity and learning achievement and can make it more critical. The results of the study (Isfirochah, 2012) state that learning by applying the SGD learning media model gives a significant increase. Thus, this research becomes very important because it will provide broader scientific insights.

In addition, the results of this study can be used as input in developing HIV AIDS prevention programs for adolescents.

The purpose of this study was to determine the effectiveness of the small group discussion health education model in increasing adolescent knowledge about HIV / AIDS in high schools in Kerambitan District, Tabanan Regency.

2. Methods

This type of research is Pre-experimental with one-group pre-test-post-test design. The research subjects of class X students who met the inclusion criteria were 16 years of age, and the exclusion criteria were not willing to be respondents, had received HIV / AIDS counseling, were not present during the study. The sampling technique used in this study is random sampling technique, jumlah sampel 100 orang. the number of samples is 100 people. Data obtained directly from respondents using a questionnaire. Analysis of the data used is the Wilcoxon test with a confidence level of 0.05%. This study was approved by the Health Research Ethics Committee of the Ministry of Health Denpasar.

3. Result And Discussion

Table 1. Distribution of Frequency Levels of Youth Knowledge About HIV / AIDS Before And After Small Group Discussion in State High Schools in Kerambitan District, Tabanan

Level Knowledge	Pre Test		Post Test		Mean %	
	f	Mean %	f	Mean %	f	Mean %
Well	14	14,0	82	82,0		
Enough	82	82,0	18	18,0	1,18	
Less	4	4,0	0	0,0		
Total	100					

Primary data source 2018

Based on table 1 the level of knowledge of respondents about HIV AIDS during the pre-test obtained the largest number in the category is quite 82 respondents (82%). While the level of knowledge about HIV / AIDS at the post test found the highest number in the category of good 82 respondents (82%).

Table 2. Bivariate Model test results. small group discussion education to increase adolescent knowledge about HIV AIDS at SMAN in Kerambitan Tabanan District.

N	Z	Asym.sign	(2-tailed)
Post- pre	Negatif Rank	0 ^a -8.791 ^a .000	
Positif Rank	100 ^b		
Ties	0 ^c		
Total	100		

Primary data source 2018

Based on table 5.3 it can be seen that there is no lower knowledge yield than before the small group discussion health education model was given, 100 students had better knowledge than before, and there were differences in scores between pre-test and post-test with scores (z) amounting to -8,791. The analysis result of Wilcoxon test for adolescent knowledge obtained a significant value (p) of 0,000 The level of knowledge of adolescents about HIV AIDS before being given the SGD health education model most of the respondents showed sufficient knowledge in the category of 82 people (82%).

The results of this study are in line with research conducted by Wulan A.,dkk,(2013) which states that the level of knowledge of respondents before being given health education is mostly sufficient, namely 60.40% of 48 respondents. While the research results of Permata, A. Tarigan, S (2015) stated that the level of knowledge before being given the treatment of group discussions was mostly sufficient at 63.3%. Research Setiowati D., (2014) revealed that the level of knowledge before being given reproductive health education was mostly sufficient at 82.5%.

The level of knowledge of adolescents in this study mostly shows the level of knowledge in the category is quite caused also because the community currently has a very broad insight given the rapid pace of science and technology so that all information can be known through print or electronic media. In the study all respondents said they had never received counseling and only had a cursory reading of HIV / AIDS on social media both electronic and print media. According to the first level of knowledge, according to Notoatmodjo,S.,(2007) know is defined as remembering a material that has been studied before, and the level of know is the lowest level of knowledge used to measure that people know what is learned.

And in terms of the opinion of Rogers 1974 (Notoatmodjo,S., (2007) stated someone before adopting new behaviors, in someone's self sequential processes occur namely awerenes, interes, evaluation, trial, adoption. The possibility of response when obtaining information from print and electronic media about HIV / AIDS is just the awerenes stage that is just getting to know. The level of knowledge of adolescents about HIV AIDS after being given the SGD health education model in the good category is 82 people (82%). The results of this study are in accordance with Wulan A.,dkk,(2013) stated the level of knowledge of the category both after being given health education about HIV / AIDS is 43%. Research Handayani,L., (2017) the level of knowledge of the category both after being given health education is 63%.

Basically, if a person is given health education, his knowledge will be better. This is in accordance with the opinions of Notoatmodjo,S.,(2007) Knowledge is the initial step of someone to determine attitudes and actions. So the level of knowledge will affect the acceptance of the program.

The results of this study were obtained from all students who received SGD health education experiencing increased knowledge about HIV / AIDS, this is because the use of this method is interesting, students get the opportunity to discuss and obtain problem solving so that students are enthusiastic about knowing about HIV / AIDS. According to Izzan (2009) the SGD learning model begins by conveying real problems whose solution requires collaboration between students or group members. The atmosphere can be created flexible and oriented towards problem solving efforts.

The level of knowledge in adolescents about HIV / AIDS from 100 respondents has better knowledge than before, and there is a difference in the value between pre-test and post-test with a value (z) of -8,791. The results of the Wilcoxon test data on adolescent knowledge obtained a significant value (p) of 0,000. The analysis test gives a p value of 0,000 smaller than 0.05 (0,000 <0.05) so that it can be concluded that the SGD education model is effective in increasing adolescent knowledge about HIV AIDS in high schools in Kerambitann Tabanan District.

Health education is any planned effort to influence others so that they do what is expected by education practitioners Notoatmodjo,S.,(2007).

The goal of health education is to teach people to live in the best conditions that is trying hard to achieve maximum levels of health (Smeltzer and Bare in. Notoatmodjo,S., (2007). According to Sanjaya, Sanjaya, W, (2010) one method that can be used in the learning process is the small group discussion method.

Health education especially with SGD method is very important to increase knowledge about HIV / AIDS. According to Sanjaya, W, (2010) with the SGD method, respondents were actively involved in discussion groups to explore problems and solve problems with groups.

With SGD method, Kerambitan high school students not only remember the material but can also master, understand, develop the ability to analyze the situation to be more responsible in learning.

The results of this study are in accordance with research by Isfirochah (2012) stating that learning by applying the SGD learning media model provides a significant increase in knowledge because discussion increases the activities of group members so as to increase participation in critical activities, understanding and completeness in learning.

Widarti's research, Widarti, (2014) showed that there was a significant effect of SGD method on the level of knowledge of HIV / AIDS in female sex workers (WPS), before being given health education 10 people (45.5%) had good categories and after being given health education knowledge of good categories increased to 20 people (90.0%).

This is supported by the theory of Notoatmodjo,S.,(2007) stating that counseling includes a form of health education that aims to change awareness and provide or enhance one's knowledge. According to RI

Law Number 23 of 1992 article 38 paragraph 1 states that public health counseling is held to increase awareness, awareness, willingness, and ability to live healthy and actively participate in health efforts.

Public health education is an activity that is inherent in every public health activity. Health education is organized to change the behavior of a person or group so that they can live healthy through information, communication and education (UU RI, 1992).

4. Conclusion

The results showed that of the 100 respondents who had better knowledge than before, and there were differences in values between pre-test and post-test with a value (z) of -8,791. The analysis result of Wilcoxon test for adolescent knowledge obtained a significant value (p) of 0,000.

The results of the analysis test give a p value of 0,000 smaller than 0.05 ($0,000 < 0.05$) so it can be concluded that H_a is accepted and H_0 is rejected, which means that the small group discussion education model is effective in increasing adolescent knowledge about HIV AIDS in SMAN in Kerambitan District Tabanan.

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