



The Effectiveness of Adolescent Health Booklets to Strengthen the Character of Healthy Living Behavior of Junior High School Students

Desak Made Citrawathi^{1*}, Putu Budi Adnyana², Ni Putu Sri Ratna Dewi³ 

^{1,2,3} Universitas Pendidikan Ganesha, Singaraja, Indonesia

ARTICLE INFO

Article history:

Received March 04, 2022

Revised March 05, 2022

Accepted July 24, 2022

Available online August 25, 2022

Kata Kunci :

Buklet, Karakter Perilaku Hidup Sehat, Kesehatan Remaja

Keywords:

Booklet, Characteristics of Healthy Living Behavior, Adolescent Health



This is an open access article under the [CC BY-SA](https://creativecommons.org/licenses/by-sa/4.0/) license.

Copyright ©2022 by Author. Published by Universitas Pendidikan Ganesha

ABSTRAK

Remaja saat ini mempunyai sifat yang sangat permisif berkaitan dengan seksualitas sebelum menikah, sehingga menimbulkan berbagai masalah kesehatan pada remaja. Tujuan penelitian ini adalah untuk menganalisis keefektifan penggunaan buklet kesehatan remaja dalam pendidikan untuk penguatan karakter perilaku hidup sehat siswa SMP. Jenis penelitian ini merupakan eksperimental semu, dengan rancangan penelitian yang digunakan adalah randomized posttest only control group design. Sampel penelitian adalah siswa yang mengikuti kegiatan ekstrakurikuler kelompok siswa peduli AIDS dan narkoba (KSPAN), yang berjumlah 58 orang. Metode pengumpulan data menggunakan deself assesment dan lembar observasi dan penilaian diri. Pengetahuan siswa tentang pola hidup sehat diukur dengan test objektif dan uraian melalui kuesioner. Hasil penelitian menunjukkan bahwa siswa yang menunjukkan penguasaan konsep pola hidup sehat dalam kategori baik dan sangat baik sebesar 96,67%, menunjukkan respon siswa dalam kategori baik (27%) dan sangat baik (73%) dan menunjukkan perilaku yang baik (40%) dan sangat baik sebesar 60%. Penggunaan buklet kesehatan remaja dapat menguatkan karakter perilaku hidup sehat siswa SMP. Implikasi penelitian ini diharapkan siswa dapat meningkatkan penerapan perilaku hidup bersih dan sehat dalam kehidupan sehari-hari.

ABSTRACT

Teenagers today have a very permissive nature related to sex before marriage, giving rise to various health problems in adolescents. This study aimed to analyze the effectiveness of using youth health booklets in education to strengthen the character of healthy living behaviors in junior high school students. This type of research is quasi-experimental, with the research design being a randomized posttest-only control group design. The research sample was students who took part in the extracurricular activities of the AIDS and Drug Concern Student Group (KSPAN), totaling 58 people. The data collection method uses self-assessment and observation, and self-assessment sheets. Objective tests and descriptions measure students' knowledge of healthy lifestyles through questionnaires. The results showed that students who demonstrated mastery of the concept of a healthy lifestyle were in the good and very good categories of 96.67%, showed student responses in the good (27%) and very good (73%) categories, and showed good behavior (40%) and very good by 60%. The use of youth health booklets can strengthen the healthy behavior of junior high school students. This research implies that students are expected to be able to improve the application of clean and healthy living behaviors in everyday life.

1. INTRODUCTION

Clean and healthy living behavior is defined as one of the activities or efforts of individuals, families, groups, and communities to provide learning experiences in cleanliness and health to have a healthy body and immune system and avoid diseases or viruses that are currently endemic (Hardiyanti et al., 2019; Tabi'in, 2020). Implementing a clean and healthy lifestyle for students is critical during a pandemic like this, specifically by getting children used to maintaining cleanliness (Safitri & Harun, 2020; Wiranata, 2020). Teachers and parents must be consistent in their teaching and get their students used to doing it regularly as educators. Adolescence is the period between childhood and adulthood. Puberty is another name for adolescence (Alfiyah et al., 2018; Chasanah, 2018). Schools are centers for learning and developing highly strategic human resources to produce intelligent and characterful individuals (Darmayasa et al., 2018; Manurung, 2012). Schools are centers for learning and developing highly strategic human resources to produce intelligent and characterful individuals (Astawa et al., 2020; Wahyuni & Purnama, 2020). Teenagers in the twenty-first century face numerous challenges that may

*Corresponding author.

E-mail addresses: dskcitra@undiksha.ac.id (Desak Made Citrawathi)

jeopardize their future. Teenagers' problems have a significant impact on the societal upheaval. The increased ease of access in the globalization era provides extremely rich information for anyone, including teenagers (Widiyastuti et al., 2018). Globalization has facilitated quick and simple international communication. The dissemination of information by the mass media, including radio, television, computers, and cell phones, as well as print media like magazines, newspapers, and tabloids, speeds up change (Komara, 2018; Mitra & Purnawarman, 2019).

Today's teenagers have a very permissive attitude toward sexuality before marriage, causing various health issues in adolescents. Adolescents today are plagued by reproductive and sexuality issues, such as an increasing number of adolescents living with HIV/AIDS, sexually transmitted infections (STIs), unintended pregnancies (KTD), and drug abuse (narcotics, psychotropic alcohol, and additives) (Ariantini et al., 2019). Risks include sexuality issues (KDM), HIV/AIDS, and drugs. TRIAD KRR stands for TRIAD Adolescent Reproductive Health (Fujiati, 2016; Maulia et al., 2022). In general, school education has failed to fulfill the task of developing character in students so that they become human beings who believe and are devoted to God Almighty, have a noble character, are healthy, knowledgeable, capable, creative, and independent, and become democratic and responsible citizens. The existence of brawls between students, students frequently skipping school and cheating, the existence of a "success" team to help students solve national exam questions, often copy-paste assignments, low learning motivation (lazy), the existence of crimes against friends (bullying), a lack of respect for teachers and parents, as well as the existence of lawless motorcycle gangs and brawls, all indicate an inability to build people of character (Gong et al., 2022; Mahriza et al., 2020; Tjahjono & Nita, 2019). There is a crisis of example, as evidenced by many corrupt officials, many brawls and riots among citizens, and still many rapes, prostitution, robberies, and violence (Maghfiroh & Sugito, 2022; Mahriza et al., 2020; Nugroho, 2019).

The use of the media is the solution to these problems. Adolescent health booklets are one type of media that can be used. Booklets are more durable than other forms of information media. A randomized controlled trial found that booklets improved students' knowledge and behavior. Print media is expected to provide information about healthy living habits because it is convenient, portable, and requires no additional hardware. Previous research found that giving Islamic reading booklets to hemodialysis patients affected their self-acceptance (Prasetyo et al., 2020). The use of booklets to deliver nutritional messages has significantly increased nutrition knowledge (Sartika et al., 2019). Booklet media can assist elementary school students in preventing ASF (Paramastri et al., 2011). According to preliminary research, developing the Adolescent Health Booklet as a learning resource in junior high schools is urgently needed. Adolescent health booklets comprehensively teach students about adolescent health about the relevant subject matter. Adolescent Health booklets can help facilitate group learning and collaboration in discussing health issues commonly affecting adolescents. Adolescent health education reinforces values and character development, particularly the character of clean and healthy living. This research aims to assess the efficacy of using youth health booklets in education to strengthen the character of healthy living behavior in junior high school students.

2. METHODS

The previous development research is the preliminary study stage, the prototype stage, and the testing stage for the prototype of the Youth Health Booklet (Bukesra). The evaluation and dissemination stages of research will be carried out in 2020 through experimental research to test the effectiveness and excellence of Bukesra. This superiority test was held at the Ganesha Education University Laboratory Junior High School, chosen randomly, and involved two groups of KSPAN students (Aids and Drugs Concerned Student Group). It is a quasi-experimental study with the research design "randomized posttest only control group design." Purposive random sampling was used to select research subjects. Ganesha University Laboratory students participated in the study. Penentuan subyek penelitian dilakukan dengan *purposive random sampling*. The research subjects were 58 students from the Laboratory Middle School of the University of Education of Ganesha who participated in KSPAN activities. Using a lottery system, students participating in KSPAN activities were divided into two groups. The first group of students studied adolescent health using the Adolescent Health Booklet (Bukesra) in a problem-based learning setting (PBM group). In contrast, the second group studied adolescent health using Bukesra in a direct learning setting (PL group). The Google Meet and WhatsApp (WA) Group applications are used for online learning. The instruments used to collect data are objective tests and description tests (problem-solving tests) to assess students' knowledge of adolescent health and the character of healthy living behaviors, observation guidelines and self-assessment questionnaires to assess the character of healthy living behaviors, and student response questionnaires to learning using Bukesra. The collected data were analyzed descriptively and statistically. An independent t-test was used to determine the benefits of using

Adolescent Health Booklets with PBM settings to provide knowledge of adolescent health and healthy behavior and strengthen healthy living characteristics, as opposed to using Adolescent Health Booklets through direct learning.

3. RESULT AND DISCUSSION

Results

The learning outcomes assessed in this study were adolescent health knowledge, problem-solving skills, the character of healthy living behavior, and student responses to adolescent health learning using Bukesra with PBM settings.

Table 1. Learning Outcomes and Student Responses about Adolescent Health Using Bukesra with Problem-Based Learning and Direct Learning settings

Learning Outcomes	Bukesra with PL (n = 28)		Bukesra with PBM setting (n = 30)	
	Average	SB	Average	SB
Mastery of the Concept	70.54	5.08	78.63	3.98
PHS character	77.32	6.33	76.60	4.47
Problem Solving	46.18	7.71	69.23	7.38
Student Response	-	-	77.63	4.810

Table 1 shows junior high school students participating in KSPAN at Laboratory Junior High School have a good understanding of the concept and character of healthy living behavior, both for students taught by Bukesra using PL (mean score 70.54) and PBM (mean score 78.63). However, the average score characterizes healthy living behavior in the good category for students taught with the Bukesra using PL (mean score 77.32) and PBM (mean score 77.32). Students with PL have medium problem-solving skills (mean score 46.18), while students taught with PBM settings have good problem-solving skills (mean score 69.23). Good responses to implementing students' learning with the Bukesra and PBM settings (mean score 77.63). A preliminary knowledge test about the concept of healthy adolescents and healthy behavior, as well as the character of healthy living behavior, was conducted before being given an adolescent health lesson using the Adolescent Health Booklet. An independent t-test was used to determine the equality of groups of students taught through direct learning and problem-based learning. Table 2 displays the results of the student's prior knowledge t-test.

Table 2. Results of the t-test of Students' Prior Knowledge about Adolescent Health

	Average	SB	T score	P Score	Description
Mastery of PL group (n=28)	52.00	1.96	0.58	0.56	No Different
Mastery of PBM group (n=30)	51.73	1.46	0.59	0.55	Meaning

According to the t-test results, there is no significant difference ($p > 0.05$) in the mastery of the concept of adolescent health and healthy behavior between groups of students who will be taught using the Adolescent Health Booklet in direct learning (PL) and problem-based learning settings (PBM). Table 3 shows the results of hypothesis testing on learning outcomes (mastery of the concept of adolescent health and healthy behavior), the character of healthy living behavior, and problem-solving skills) in students who were taught adolescent health using Bukesra with direct learning (PL) and students who were taught adolescent health using Bukesra with PBM.

Table 3. Results of Hypothesis Testing Learning Outcomes using Bukesra

Variable	Group with PL (n = 28)		Group with PBM (n = 30)		T score	P score	Description
	Average	SB	Average	SB			
Mastery of the Concept	70.54	5.08	78.63	3.98	-6.777	0.0001	Different Meaning
.PHS character	77.32	6.33	76.60	4.47	0.504	0.616	No Different Meaning
Problem Solving Skills	46.18	7.71	69.23	7.38	-11.629	0.0001	Different Meaning

Based on the hypothesis testing results in Table 3, it can be concluded that groups of KSPAN participant students who participate in learning using the Youth Health Booklet (Bukesra) demonstrate significant differences between those using direct learning (PL) and those using problem-based learning settings (PBM).

Discussion

The results showed several findings. First, the mastery of healthy adolescents and the character of students' healthy living behavior among those taught with the Adolescent Health Booklet using the OT setting is significantly different from those using the PBM. Mastery of the concept of healthy adolescents and the character of students' healthy living behavior is in a good category because students who get a score greater than or equal to the KKM (70) are 96.67% in the group of students who are taught with PBM settings. While those who were taught using the OT setting, the group of students who scored higher with the KKM was 57.14%. Mastery of concepts and problem-solving skills in groups of KSPAN participant students who took part in learning using the Youth Health Booklet (Bukesra) showed significant differences between those using direct learning (PL) and those using problem-based learning settings (PBM). The use of PBM shows a higher (better) average score of mastery of concepts and problem-solving skills compared to using PL. Meanwhile, strengthening the character of healthy living behavior did not differ significantly between groups of students who used direct learning (PL) and those who used problem-based learning (PBM) settings (Aryanto & Widiansyah, 2019; Maqfiroh et al., 2020). One thing that can be done to help adolescents grow and develop into healthy adolescents is youth health education (PKR).

Second, the character of the healthy lifestyle of students taught using the adolescent health booklet did not differ significantly between those using PL and PBM settings. It means that the use of learning settings using adolescent health booklets does not affect the character of healthy behavior of students. The characters of the students' healthy life behavior in both groups were in the good and very good categories. Adolescent health information to students can be integrated into relevant subjects (subject matter), KSPAN and PMR extracurricular activities. Bring in competent resource persons to give lectures and discussions on adolescent health. Involve peer tutors and involve all teachers to inform young people about health at the start or end of lessons. Students' understanding of adolescent health and healthy living behavior is quite good. Still, it needs to be improved by providing information and continuously being carried out by the teacher and other students who have been trained as peer tutors (Lestari et al., 2020; Mahsup et al., 2020). With continuous information in the right way, the knowledge will foster a positive attitude and strengthen students' character for a healthy life. This finding is reinforced by previous studies, which stated that giving Islamic reading booklets affected the self-acceptance of hemodialysis patients (Prasetyo et al., 2020). Delivering nutrition messages using booklets significantly increases nutritional knowledge (Sartika et al., 2019). Booklet media can be applied to elementary school students as a supporting tool for preventing ASF (Paramastri et al., 2011). This research implies that students are expected to be able to improve the application of clean and healthy living behavior in everyday life.

4. CONCLUSION

The mastery of the concept of healthy adolescents and the character of students' healthy living behavior between those taught with the Adolescent Health Booklet using the OT setting is significantly different from those using the PBM. The character of the healthy life behavior of students taught by the adolescent health booklet did not differ significantly between those who used the PL setting and the PBM. It means that using learning settings using adolescent health booklets does not affect the character of students' healthy behavior. Adolescent Health booklets taught in PM settings effectively teach students about adolescent health and healthy living behavior.

5. REFERENCES

- Alfiah, N., Solehati, T., & Sutini, T. (2018). Gambaran Faktor-Faktor yang Berhubungan dengan Perilaku Seksual Pranikah pada Remaja SMP. *Jurnal Pendidikan Keperawatan Indonesia*, 4(2), 131 - 139. <https://doi.org/10.17509/jpki.v4i2.10443>.
- Ariantini, N. S., Kurniati, D. P. Y., & Duarsa, D. P. (2019). Needs for Reproductive Health Education for Deaf Students in Singaraja District, Bali Province. *Indonesian Journal of Health Research*, 2(2), 75-83. <https://doi.org/10.32805/ijhr.2019.2.2.51>.

- Aryanto, S., & Widiyansyah, A. (2019). Kreativitas dalam Pembuatan Sastra Anak Berbasis Ecopreneurship. *Indonesian Journal of Primary Education*, 3(2), 83–90. <https://doi.org/10.17509/ijpe.v3i2.21677>.
- Astawa, I. W. W., Putra, M., & Abadi, I. . G. S. (2020). Pembelajaran PPKn dengan Model VCT Bermuatan Nilai Karakter Meningkatkan Kompetensi Pengetahuan Siswa. *Jurnal Pedagogi Dan Pembelajaran*, 3(2), 199. <https://doi.org/10.23887/jp2.v3i2.25677>.
- Chasanah, I. (2018). Psikoedukasi Pendidikan Seks untuk Meningkatkan Sikap Orangtua dalam Pemberian Pendidikan Seks. *Jurnal Intervensi Psikologi (JIP)*, 10(2), 133–150. <https://doi.org/10.20885/intervensipsikologi.vol10.iss2.art5>.
- Darmayasa, I. K., Jampel, N., & Simamora, A. H. (2018). Pengembangan E-Modul Ipa Berorientasi Pendidikan Karakter Di Smp Negeri 1 Singaraja. *Jurnal Edutech Undiksha*, 6(1), 53–65. <https://doi.org/10.23887/jeu.v6i1.20267>.
- Fujiati, D. (2016). Seksualitas Perempuan dalam Budaya Patriarki. *MUWAZAH: Jurnal Kajian Gender*, 8(1), 26–47. <http://e-journal.iainpekalongan.ac.id/index.php/muwazah/article/view/734>.
- Gong, Z., D.Reinhardt, J., Han, Z., Ba, Z., & Le, S. (2022). Associations between school bullying and anxiety in children and adolescents from an ethnic autonomous county in China. *Psychiatry Research*, 314, 114649. <https://doi.org/10.1016/j.psychres.2022.114649>.
- Hardiyanti, F., Madiastuti, M., & Hermawati, E. (2019). Faktor-Faktor yang berhubungan dengan perilaku hidup bersih dan sehat (PHBS) Pada Siswa Kelas 5 SDN Sugutamu Kota Depok. *Jurnal Media Keperawatan: Politeknik Kesehatan Makassar*, 10(2). <https://doi.org/10.32382/jmk.v10i2.1332>.
- Komara, E. (2018). Penguatan Pendidikan Karakter dan Pembelajaran Abad 21. *SIPATAHOENAN: South-East Asian Journal for Youth, Sports & Health Education*, 4(1), 17–26. <https://doi.org/10.2121/sip.v4i1.991>.
- Lestari, A. W., Mangesa, R. T., & -, M.-. (2020). Penerapan Tutor Sebaya Dalam Implementasi Strategi CIRC Berbasis Active Learning Untuk Meningkatkan Hasil Belajar Siswa Pada Mata Pelajaran Sistem Komputer di SMKN 5 Makassar. *Jurnal MediaTIK*, 3(3), 13. <https://doi.org/10.26858/jmtik.v3i3.15174>.
- Maghfiroh, N. ., & Sugito. (2022). Perilaku Bullying pada Anak di Taman Kanak-Kanak. *Jurnal Obsesi: Jurnal Pendidikan Anak Usia Dini*, 6(3), 2175–2182. <https://doi.org/10.31004/obsesi.v6i3.1845>.
- Mahriza, R., Rahmah, M., & Santi, N. E. (2020). Stop Bullying: Analisis Kesadaran dan Tindakan Preventif Guru pada Anak Pra Sekolah. *Jurnal Obsesi : Jurnal Pendidikan Anak Usia Dini*, 5(1), 891–899. <https://doi.org/10.31004/obsesi.v5i1.739>.
- Mahsup, Ibrahim, Muhardini, S., Nurjannah, & Eka Fitriani. (2020). Peningkatan Hasil Belajar Mahasiswa Melalui Model Pembelajaran Tutor Sebaya. *Jurnal Kependidikan*, 6(3), 609–616. <https://doi.org/10.33394/jk.v6i3.2673>.
- Manurung, R. (2012). Pendidikan Antikorupsi Sebagai Satuan Pembelajaran Berkarakter Dan Humanistik. *Jurnal Sosioteknologi*, 11(27), 227–239. <https://doi.org/10.21831/jump.v2i2.33747>.
- Maqfiroh, D. N. M., Khutobah, K., & Budyawati, L. P. I. (2020). Pengembangan Media Motif (Monopoli Edukatif) Dalam Pembelajaran Berbasis Multiple Intelligence Pada Anak Tk Kelompok B. *Cakrawala Dini: Jurnal Pendidikan Anak Usia Dini*, 11(1), 65–74. <https://doi.org/10.17509/cd.v11i1.24230>.
- Maulia, D., Rakhmawati, D., & Dewanto, F. M. (2022). Kontribusi Guru pada Pendidikan Seksualitas Anak Usia Dini. *Intuisi: Jurnal Psikologi Ilmiah*, 13(2). <https://doi.org/10.15294/intuisi.v13i2.31846>.
- Mitra, D., & Purnawarman, P. (2019). Teachers' Perception Related to the Implementation of Curriculum 2013. *Indonesian Journal of Curriculum and Educational Technology Studies*, 7(1), 44–52. <https://doi.org/10.15294/ijcets.v7i1.27564>.
- Nugroho, W. (2019). Pengaruh Layanan Mediasi Terhadap Perilaku Bullying. *Jurnal Medi Kons*, 5(2), 103–114.
- Paramastri, I., Prawitasari, J. E., Prabandari, Y. S., & Ekowarni, E. (2011). Buklet sebagai media pencegahan terhadap kekerasan seksual pada anak-anak. *Kesmas: Jurnal Kesehatan Masyarakat Nasional (National Public Health Journal)*, 6(2), 77–84. <https://doi.org/10.21109/kesmas.v6i2.109>.
- Prasetyo, A., Sodikin, S., & Sarwa, S. (2020). The Effects of Giving Islamic Reading Booklets on Self-Acceptance of Hemodialysis Patients. *Faletehan Health Journal*, 7(3), 170–176. <https://doi.org/10.33746/fhj.v7i03.204>.
- Safitri, H. I., & Harun, H. (2020). Membiasakan Pola Hidup Sehat dan Bersih pada Anak Usia Dini Selama Pandemi Covid-19. *Jurnal Obsesi: Jurnal Pendidikan Anak Usia Dini*, 5(1), 385. <https://doi.org/10.31004/obsesi.v5i1.542>.

- Sartika, W., Suryarinilsih, Y., Herwati, H., & M, M. (2019). Peningkatan Pengetahuan Tentang Anemia Pada Remaja Putri Sesudah Diberikan Pendidikan Kesehatan Gizi Dengan Media Buklet di SMP Sabbihisma Padang. *Ensiklopedia of Journal*, 2(1), 123–127. <https://doi.org/10.33559/eoj.v2i1.352>.
- Tabi'in, A. (2020). Perilaku Hidup Bersih Dan Sehat(Phbs) Pada Anak Usia Dini Sebagai Upaya Pencegahan Covid 19. *JEA (Jurnal Edukasi AUD)*, 6(1), 58. <https://doi.org/10.18592/jea.v6i1.3620>.
- Tjahjono, S., & Nita, V. (2019). Pencegahan bullying di sekolah dasar melalui pendidikan kesehatan reproduksi. *Jurnal Komunikasi Pendidikan*, 3(1), 65–75. <https://doi.org/10.32585/jkp.v3i1.256>.
- Wahyuni, S., & Purnama, S. (2020). Pengembangan Religiusitas melalui Metode Kisah Qur'ani di Taman Kanak-Kanak. *Jurnal Obsesi: Jurnal Pendidikan Anak Usia Dini*, 5(1), 103. <https://doi.org/10.31004/obsesi.v5i1.523>.
- Widiyastuti, N., Slameto, S., & Radia, E. H. (2018). Pengembangan Media Pembelajaran Interaktif Menggunakan Software Adobe Flash Materi Bumi Dan Alam Semesta. *Perspektif Ilmu Pendidikan*, 32(1), 77–84. <https://doi.org/10.21009/pip.321.9>.
- Wiranata, I. G. L. A. (2020). Penerapan Positive Parenting Dalam Pembiasaan Pola Hidup Bersih dan Sehat Kepada Anak Usia Dini. *Jurnal Pendidikan Anak Usia Dini*, 5(1), 82–88. <https://doi.org/10.25078/pw.v5i1.1362>.