The Role of Wijaya Kusuma's Youth Information and Counseling Center (PIK-R) on Adolescent Health Problems

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ABSTRACT

The issue of adolescent health is important for national development. Adolescents need a place that can provide facilities in the form of correct information and life skills improvement programs. So as to deal with various health problems of adolescent. Government efforts to overcome these problems through the establishment of the Youth Information and Counseling Center (PIK-R) that can be done in schools. PIK-R in schools that have been formed can be assessed its role to adolescent health problems. The purpose of this research is to know the role of PIK-R Wijaya Kusuma in overcoming the health problem of adolescent among non-members of PIK-R. The research used qualitative design with case study approach. The data was collected by focus group discussion (FGD) technique on 10 non-PIK-R students and triangulation to peer counselor and PIK-R coach Wijaya Kusuma through indepth interview. The results of the study reported that PIK-R Wijaya Kusuma has an important role as health information source for non PIK-R member students in facing adolescent health problems. Besides, teachers and NGOs. Awareness of non-members of PIK-R Wijaya Kusuma related to adolescent's vulnerability to high adolescent health problems, peers and family plays an important role in adolescent health behavior.

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1. INTRODUCTION

Health in adolescence is an important aspect of the individual life cycle. At this time is a period where individuals begin to learn and have functional and health capabilities. In health, this is an important period for reproductive health and the early formation of healthy living behaviors [1]. The issue of reproductive and sexual health of adolescents is important for national development. Thus, given the large population of adolescents and the long-term effects that can result from adolescent reproductive health and sexual problems. Meanwhile, our current adolescent population is still vulnerable to reproductive and sexual health issues, such as early marriage, low reproductive and sexual health knowledge, early pregnancy, unwanted pregnancy, sexually transmitted diseases such as HIV and AIDS, unsafe abortions, and gender-based violence [2].

Based on the results of Indonesia Health Demogafi Survey in 2012, showed 28% of boys and 27% of girls stated age began dating before 15 years. Sexual activity dating varied 72% holding hands, 48% kissing, and 30% sensitive body parts and 7% having sex. Then, as many as 25% of boys and 18% of girls declare using condoms when they first had sex [3].

According to the results of the Youth Reproductive Health Surveys (SKRRI) of 2013-2014 conducted by the Statistics Indonesia (BPS) shows that the basic knowledge level of 15-24 years old about the characteristics of puberty is quite good. But in terms of knowledge of the fertile period, the risk of

pregnancy, abortion, and anemia are still relatively low. Results of the Indonesian Youth Reproduction Health Survey (SKRRI) in 2013, the knowledge of adolescents aged 15-24 years on reproductive health is still low. Then, data from the Ministry of Health in 2013, the description of utilization behavior of youth care facilities is still low by 50%. Adolescents are less active to utilize adolescent reproductive health information and Counseling Center (PIK-KRR) as a place to consult on reproductive health [4].

Similar to the health problems of adolescents in Yogyakarta, Soetjiningsih's research in Juju showed 398 high school students in Yogyakarta, stated that the majority of adolescents had sexual intercourse first time in high school ie between 15-18 years old. There are 60% of students stated that the sexual behavior that can be done before marriage is limited to the kiss of the lips while hugging. This activity among adolescents is considered as something normal or reasonable. But if uncontrollable can lead to sexual relationships that lead to unwanted pregnancy [5]. Married dispensation rates or early marriage applications in Bantul District tend to be high within the last five years. In 2014, the number of dispensation of marriage in Religious Court was 132 cases. Most of the causes are unwanted pregnancies [6].

The government continues to improve the knowledge and skills of adolescents, thereby reducing the number of adolescent health problems through the Information and Counseling Center for Youth (PIK-R). PIK-R is a place of GenRe (Generasi Berencana) program activities in the context of preparing family life for adolescents managed from, by and for adolescents. PIK-R serves to provide information and counseling services about family life planning for adolescents and other supporting activities [7]. PIK-R can be established through formal and informal channels. The formal path is the PIK-R established at the school, while the informal path is formed within the community.

PIK-R Wijaya Kusuma is an upright PIK-R line of schools owned by SMAN 1 Srandakan Bantul Regency. PIK-R Wijaya Kusuma succeeded to occupy the first winner of DIY province in PIK-R / M competition organized by Family Welfare Board, Women Empowerment and Family Planning and Bantul Regency Government in 2013. Activities conducted by PIK-R Wijaya Kusuma are not only environmental extension internal school, but also in groups of adolescents outside the school environment [8]. So, when viewed from the context, the PIK-R service should play an important role in increasing the knowledge and life skills of students in facing various adolescent health problems. Research conducted by Astriana (2016), concludes that there is a significant relationship between the level of knowledge of reproductive health with the utilization of PIK-KRR in Madrasah Aliyah students [4]. However, in the implementation of PIK-R services found many obstacles such as lack of interest of adolescents who became the main target of GenRe program, inadequate facilities and infrastructure and lack of skills from peer educators and peer counselors [9].

The hope PIK-R Wijaya Kusuma can be one of the health information source of students in SMAN 1 Srandakan. The role of PIK-R Wijaya Kusuma in improving the knowledge and skills of students can be felt by all students of SMAN 1 Srandakan. Therefore, it is necessary to conduct a study related to the role of PIK-R Wijaya Kusuma to students of SMAN 1 Srandakan in overcoming adolescent health problems.

2. RESEARCH METHOD

This research type is qualitative research with case study approach. Implementation of research for 6 months (April - October 2017) at SMAN 1 Srandakan, Bantul, DIY. Key informants in this study were ten students of SMAN 1 Srandakan who were not incorporated as members of PIK-R Wijaya Kusuma extracurricular activities through focus group discussions (FGD). Triangulation of data was done to peer counselor and PIK-R coach Wijaya Kusuma through in-depth interview. Data analysis using thematic data analysis, that is identifying themes patterned in a phenomenon. This study has obtained a ethical clearence approval from the UAD Research Ethics Committee prior to data collection.

3. RESULTS AND ANALYSIS

The purpose of this research is to know the role of PIK-R Wijaya Kusuma owned by SMAN 1 Srandakan in helping students face adolescent health problems. This is based on the high cases of adolescent health problems, both in Indonesia and Bantul District. Then, the Youth Reproductive Health Program (KRR) is included in the 2010-2014 National Medium-Term Development Plan (RPJMN). It has been agreed to be developed into a Generasi Berencana Program (GenRe) for the preparation of family life for adolescents.

PIK-R Wijaya Kusuma is one of the leading extracurricular in SMAN 1 Srandakan. Extracurricular activities are supporting activities organized by each school, but outside of the curriculum and time of school teaching and learning activities. So in the implementation, not all students follow the activity. Therefore, the key informants in this study were non-members of PIK-R Wijaya Kusuma. All informants have been aware

of various issues of reproductive health problems often faced by adolescents. Some reproductive health issues known to the informant are anemia, vaginal discharge, free sex, HIV / AIDS, early marriage, and unwanted pregnancy. Then, informants also know the impact of unhealthy behavior on adolescents can cause health problems. For example, informants mentioned that the influence of inappropriate use of social media will bring adolescents to promiscuity resulting in unwanted pregnancy and early marriage.

"... free sex, (dating already Making Love), Early marriage (affected from sosmed, pornography)" (JAM, FGD)

"....anemia, free sex (promiscuity) environmental influences" (HN, FGD)

Adolescence is defined as a period of dynamic development between physiological, psychosocial, temporal, and cultural. This adolescence can also be called a critical period. The period between early puberty and the formation of social independence. The most characteristic of teenagers is to have a very big curiosity, like adventure and challenge. Sometimes, tend to dare to bear the risk of his actions without preceded by careful consideration and thought. If these spontaneous decisions are not appropriate, they fall into risky behavior and the consequences can be short and long term in various physical and psychological health problems [10]. Therefore, at this time, adolescents should be aware of various issues, impacts, and levels of vulnerability and seriousness of health problems that can be faced by adolescents. The results of this study indicate that, all informants have a high awareness of the vulnerability of adolescents involved in health problems. Informants mentioned that the vulnerability is influenced by family and environmental factors. Meanwhile, informants are also able to mention the social impact that will arise when involved in one of the adolescent health problems, such as the following quote:

- "... depending on the person, if from family has deviated, child could also deviate too. Environmental factors ... "(TR, FGD)
- "... it seems serious, the future is not clear, the family participate in the bad and hard to make a living" (US, FGD)

Other studies have indicated that the family is the primary educator agent who is fully responsible for the availability of information on adolescent issues, especially health issues. However, in reality this task is not easy. Parents need help to facilitate communication between parents and adolescents, such as school teachers or health workers. This is due to the many influences of the environment, one of which is the peer factor [11]. Thus parental supervision and peer influence play an important role in adolescent sexual behavior [12]. According to Sanusi (2004) in Desyolmita Nunung, adolescents need to get the information as clear as possible about the conditions they experienced. Thus adolescents are able to deal with the changes that occur to him naturally. The information needs of adolescents in general is a problem related to sex and more specifically packaged in the form of introduction of information on reproductive health [13]. Another study mentioned that the main source of health information when in school is peers. The influence of peers is good then adolescents can be good, not infrequently invited to do positive activities such as following the activities of Health Information Center of Youth (PIK-R) [14].

PIK-R is one of the Generasi Berencana (GenRe) program. PIK-R Wijaya Kusuma owned by SMAN 1 Srandakan is a place for students to do peer counseling. The number of peer counselors per period of 4 people. The introduction of PIK-R activities is done when the student has not started teaching and learning activities by giving some materials related to TRIAD KRR (Reproductive health, Sexuality and Drug), Maturation of Marriage Age, and 8 family functions. All informants have known about PIK-R and defined it as a youth health information center or an organization that addresses adolescent health issues such as HIV, Drugs, Family Medicinal Plants, HIV / AIDS, and healthy dating and early marriage. The informants also added that teenage health information obtained was not as complete and as much information obtained by students who were members of PIK-R. This is as revealed by the informant, as follows:

"....The information center on adolescent counseling about HIV, Drugs, association can find out how to solve the problem and can prevent it" (YY, FGD)

Students who do not join the PIK-R feel an exclusivity between internal PIK-R and non PIK-R members, the researchers draw the conclusion that even general students have a curiosity about teenage issues with slide-show or extension presentation. Their passive attitude implies that students are not interested and passive will pursue information of adolescent problems by PIK-R members or teachers. There needs to be a similarity of perceptions and approach methods that are more interesting from the psychological side of students who are still teenagers, which is reasonable if considered "less enthusiastic". This was

revealed by two informants in a non-PIK-R discussion group explaining that they did not get information about PIK-R and assumed that information dissemination was only given to PIK-R members only. Thus, the information is obtained from students who are members of PIK-R activities. The same thing was also revealed by other informants who claimed to have received socialization related to PIK-R but not yet fully understand. Student will seek explanation to the friends who become PIK-R member for sharing.

- ".... I think PIK-R members are told the information .. not all ... "(HN, FGD)
- "..... never, not everyone knows. Members of PIK / R are given material ..."(US, FGD)
- "....All student expectations can be the same information even though not members of the organization. Every 6 months from National Population and Family Planning Board, Health Office, Indonesian Family Planning Association from related institutions...." (LS, Peer Counselor)

Related health information obtained by non-PIK-R students, peer counselors said that there is socialization or counseling every six months from government institutions to all students of SMAN 1 Srandakan. However, based on statements from peer counselors can be concluded that not all students of SMAN 1 Srandakan Bantul follow the socialization activities and still only limited to students who follow extracurricular PIK-R Wijaya Kusuma. So the expectations of peer counselors, socialization activities can be followed by all students, both members and non members PIK-R.

Meanwhile, the willingness of non PIK-R students to utilize PIK-R can be said to be high. The result of the research shows that almost all informants stated that it is not difficult to access PIK-R Wijaya Kusuma service. However, what is interesting here is that the informant assumes that by becoming a PIK-R member, it will automatically be able to utilize the PIK-R service. The same is also expressed by peer counselors, that there is no special requirement for students interested in participating in PIK-R activities. However, what is interesting here is that the informant assumes that by becoming a PIK-R member, it will automatically be able to utilize the PIK-R service. In fact, to be able to utilize PIK-R Wijaya Kusuma not only students who have joined to become members of PIK-R only. All students can avail the services of PIK-R Wijaya Kusuma. This is as quoted from the statement of informants, as follows:

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"... easy, just join the PIK-R organization, can already ..." (IN, FGD)
"... There is no requirement for PIK-R members..." (LS, Peer Counselor)
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Peer counselors may act as one of the 'bridges' of health information in PIK-R to non-PIK-R students. Similarly, non-PIK-R students continue to receive adolescent health information despite not following PIK-R extracurricular activities. This is in line with research that mentions peer counselor is useful in maintaining good relationships between the classroom leader and the class students he leads, especially when there is a conflict [15]. However, good skills are required from peer counselors to perform the role, so they can be packaged into effective forms. In fact, peer counselor programs are available in most schools. However, there are no standard criteria in selection selection, lack of adequate training, and monitoring and evaluation of programs are rare. The challenges of self-counselor peers include lack of self-confidence, lack of criticism from other students, and the lack of roles, skills, and time to fully engage in peer counseling [16]. These facts of hope can be one of the focus of PIK-R program implementers, so that peer counselor credibility can be acknowledged by other students [17].

Furthermore, informants' knowledge of PIK-R will impact on how students define health problems that often occur in adolescents and how non-PIK-R students formulate the role of PIK-R in addressing these adolescent health problems. The results showed that almost all informants feel confident if PIK-R can help students in overcoming the adolescent reproduction health problem. Because PIK-R members have better knowledge than non-PIK-R members.

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"... can help solve student problems and find solutions if there are problems ..." (IN, FGD)
".... maybe, because PIK-R members have been given knowledge to solve the problem ..."
(HR, FGD)
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PIK-R is one media that can be accessed by adolescents to get health information. All informants stated that the health information obtained from the school. The socialization from PKBI NGOs, PIK-R members, and teachers in the school delivered through the subjects. Interesting findings from this study related to the use of technology that is currently very high among adolescents, was not found in non-member PIK-R Wijaya Kusuma. It is acknowledged by all informants that it rarely uses the internet or social media to access health information. In addition, the negative impact of internet and social media usage is that the

health information obtained is not necessarily true, so that if not getting guidance from the right source will bring the teenager to the wrong behavior [18].

"... social media is rare, school or Indonesian Family Planning Association.. Indonesian Family Planning Association is sufficient to be informed "(YY, FGD)

Based on quotations from informants, it can be concluded that PIK-R in schools has an important role in providing health information to students as an effort to overcome adolescent reproductive health problems. In line with Harini's study which states that giving peer counselor training has a significant effect on the improvement of knowledge, attitude, and skill of PIK-RM student [19]. In addition to PIK-R, the source of health information in schools is teachers through explanations of certain subjects. Other studies have shown that the most common source of reproductive health information students get from teachers rather than elderly people or health care [20].

Improving the life skills of adolescents is also included in the activities of PIK-R Wijaya Kusuma. Life skills improvement program that has been done by PIK-R Wijaya Kusuma such as the development of a material into a product that is worth selling. Some products ever produced by students in SMAN 1 Srandakan include making drinks from aloe vera, making traditional food made from tempe, and batik. Life skills improvement programs have goals and expectations that are beneficial to students in the next life. This was expressed by the teacher of PIK-R Wijaya Kusuma, as follows:

"... activities other than Triad KRR there TOGA, Kopsis, Batik. It is a life skill activity for PIK-R ... making drinks from aloe vera, making traditional food from tempe " (YN, PIK-R Coach) ".... My Hope again, life skills that have been owned can be utilized in the future" (YN, PIK-R Coach)

The purpose of improving life skills is as an effort to transfer science, ideology and technology in terms of empowerment in terms of economic, psychological, and social fields. Thus, the presence of adolescents can have a positive impact on community [21]. The hope of the benefits of PIK-R Wijaya Kusuma is also felt by all students including non-PIK-R students, so the function and role of PIK-R Wijaya Kusuma as information and counseling center for students of SMAN 1 Srandakan can be achieved. In addition, the role of PIK-R is to provide life skills for adolescents. Skills and readiness are needed in dealing with various health problems through positive activities.

Changes in attitudes and behaviors and increased public acceptance, especially adolescent health problems or sexuality is a positive impact on the life skills of adolescents and PIK-R through peer counseling as a media of information dissemination [22]. Adolescents will have confidence in almost all aspects of life when adolescents have a positive reciprocal relationship between life skills and self-concept [23]. However, it is not easy in the process of improving the life skills of adolescents. The lack of program consistency, not involving religious bodies particularly in spreading knowledge of sexuality, and the lack of adolescent-friendly health facilities that can be visited at any time by adolescents, are some examples of challenges encountered in the process of improving the life skills of adolescents [22]. Cooperation across sectors, not only from the health and education sectors, but also from the religious sector and other sectors, so that efforts to improve the life skills of teenagers to the maximum.

4. CONCLUSION

PIK-R Wijaya Kusuma has an important role in facing teenage health problems. PIK-R Wijaya Kusuma is one of the sources of reproductive health information for non-PIK-R students, besides teachers and NGOs. In addition, students have a high awareness of vulnerability in adolescent health problems. Peers and family play an important role in adolescent health behavior.

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REFERENCES

[1] National Institute of Health Research and Development, "Health Risk Behavior among Junior and Senior High School Students in Indonesia," Jakarta, 2015.

- [2] D. T. Pakasi and R. Kartikawati, "Between Needs and Taboo: Sexuality and Reproductive Health Education for High School Teens," *J. Makara Seri Kesehat.*, vol/issue: 2(17), pp. 79–81, 2013.
- [3] The Central Statistics Agency, "Indonesia Demographic and Health Survey 2012," 2013.
- [4] Astriana, "Reproduction of Adolescents with the Use of Information Center and Consultation of Adolescent Reproductive Health (PIK-KRR) in Madrasah Aliyah Al-Makmur," *J. Kesehat. Holistik*, vol/issue: 10(1), pp. 23–26, 2016.
- [5] J. B. Djuria, "Relation between Accessibility of Reproductive Health Service with Premarital Sex Behavior on Street Children at Girlan Nusantara Sleman Homes Year 2015," Universitas 'Aisyiyah Yogyakarta, 2015.
- [6] S. Ariyanti, "Early Marriage in Bantul is predominantly Unwanted Pregnancy," Tribun News, Yogyakarta, 2015.
- [7] National Population and Family Planning Board, "Management Guidelines for Teenage and Student Information and Counseling Center (PIK R / M)," Jakarta, 2012.
- [8] F. W. B. Women's Empowerment and Family Planning, "PIK R 'Wijaya Kusuma' SMA N I Srandakan First Winner of DIY," Family Welfare Board Women's Empowerment and Family Planning, Bantul, 2013.
- [9] E. Desintia, "The Role of Palapa Youth Information and Counseling Center in Implementing Generation Planning Program in Kelurahan Dadi Mulya Samarinda," J. Adm. Negara, vol/issue: 5(2), pp. 6012–6025, 2017.
- [10] A. C. Curtis, "Defining Adolescence," J. Adolesc. Fam. Heal., vol/issue: 7(2), pp. 1–39, 2015.
- [11] M. V. Pop and A. S. Rusu, "The Role of Parents in Shaping and Improving the Sexual Health of Children Lines of Developing Parental Sexuality Education Programmes," *Procedia-Soc. Behav. Sci.*, vol. 209, pp. 395–401, 2015.
- [12] S. Kusumastuti, "The Influence of Personal and Environmental Factors on Sexual Behavior in Adolescents," Universitas Sebelas Maret, 2015.
- [13] N. Desyolmita and Firman, "The Relationship between Perceptions and the Role of Students in the Implementation of the Program Activity of Youth Reproductive Health Counseling Information Center at SMPN 2 Pariaman," *J. Ilm. Konseling*, vol. 2, pp. 213–219, 2013.
- [14] L. Oljira, et al., "Assessment of comprehensive HIV/AIDS knowledge level among in-school adolescents in eastern Ethiopia," J. Int. AIDS Soc., vol. 16, pp. 11–15, 2013.
- [15] P. A. Mudis and J. M. Onyango, Yambo, "Role of Peer Counseling on the Relationship between Prefects and the Students' body in public Secondary schools in Migori Sub-county, Migori County, Kenya," *Int. J. Acad. Res. Progress. Educ. Dev.*, vol/issue: 4(4), pp. 136–148, 2015.
- [16] S. K. Kamore and P. M. Tiego, "Four Pillars of Effectiveness of Peer Counselling Programs in Meru South District High Schools, Kenya," *Int. J. Humanit. Soc. Sci.*, vol/issue: 5(2), pp. 254–262, 2015.
- [17] D. N. Bururia, *et al.*, "Contribution of peer counseling to student behavior change in secondary schools in Maara Sub County, Kenya," *J. Educ. Policy Entrep. Res.*, vol/issue: 1(2), pp. 86–93, 2014.
- [18] S. Siddiqui and T. Singh, "Social Media its Impact with Positive and Negative Aspects," *Int. J. Comput. Appl. Technol. Res.*, vol/issue: 5(2), pp. 71–75, 2016.
- [19] R. Harini, "The Effects of Peer Counselor Training on Knowledge, Attitudes, and Skills of PIK-KRM Board in Faculty of Health, University of Muhammadiyah Malang," Postgrad. Progr. Nurs. Sci. Progr. Fac. Med. Gadjah Mada Univ., pp. 326247, 2014.
- [20] A. A. Donaldson, *et al.*, "Receipt of sexual health information from parents, teachers, and healthcare providers by sexually experienced U.S. adolescents," *J. Adolesc. Heal.*, vol/issue: 53(2), pp. 235–240, 2013.
- [21] R. Rostikawati, "The Role of Youth Reproductive Health Information and Counseling Center (PIK-KRR) on Youth Empowerment (Study at PIK-KRR 'BERKIBAR' Pandak Village, Baturaden District, Banyumas District)," *Spririt Publik*, vol/issue: 9(1), pp. 77–88, 2014.
- [22] U. C. I. Abanihe, *et al.*, "Adolescent Sexuality and Life Skills Education in Nigeria: To What Extent have Out-of-School Adolescents Been Reached?" *Afr. J. Reprod. Health*, vol. 19, pp. 101–111, 2015.
- [23] S. Khera and S. Khosla, "A Study of Core Life Skills of Adolescents in Relation To Their Self Concept Developed through Yuva School Life Skill Programme," Int. J. Soc. Sci. Interdisciplinary Res., vol/issue: 1(11), pp. 115–125, 2012.