

Knowledge And Adolescent Attitudes In Urban About Hiv And Aids

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ABSTRAC

The phenomenon that is happening now is that many teenagers do not know the impact of HIV and AIDS both in terms of knowledge and from the attitudes of teenagers themselves. So that the research emphasizes more on the knowledge and attitudes of adolescents about HIV and AIDS. This study aims to identify the knowledge and attitudes of high school adolescents in urban areas about HIV and AIDS in Mas Ma'arif Bulukumba, Bulukumba District. Measurement in this study is the Analitik Descriptive study which is a form of research that is conducted with a survey approach. The sample was 36 respondents. Sampling is done using total sampling. Based on the results of the research that has been done, out of 36 respondents about the level of students' knowledge of HIV and AIDS, the highest number of respondents was high knowledge, namely 24 students (66.7%), then low knowledge by 12 students (33.3%). And those who have attitudes about HIV and AIDS with the highest number of respondents are good attitudes, namely 30 students (83.3%) then bad attitudes as many as 6 students (16.7%). Based on the results of research on students' knowledge and attitudes about HIV and AIDS MAS Ma'arif Bulukumba has good knowledge and attitudes because of the large amount of information obtained by students so that students get an understanding of HIV and AIDS.

Keywords: HIV and AIDS, Knowledge, Attitudes

INTRODUCTION

Human Immunodeficiency Virus (HIV) is a virus that causes acquired immunodeficiency syndrome (AIDS) which is a global health problem both in developed and developing countries (Soedarto, 2009). HIV and AIDS is the biggest public health problem in the world today. This disease is found in almost all countries in the world without exception including Indonesia. Adolescents more easily adjust to the flow of globalization and the free flow of information that can lead to changes in deviant behavior due to adaptation to values that come from outside, such as drugs, crime, and free sex crimes that can endanger them because they can contract various venereal diseases especially HIV and AIDS. Changes in a person's health behavior are influenced by three factors, namely predisposing, enabling, reinforcing (Yulianingsih, 2015).

Based on the Ministry of Health of the Republic of Indonesia (Ministry of Health Republic of Indonesia, 2008) HIV and AIDS (Human Immuno Deficiency Virus / Acquired Immuno Deficiency Syndrome) Is a health problem in the world since 1981, this disease develops in a pandemic. which can result in losses not only in the health sector but also in the social, economic, political, cultural and demographic fields.

Deputy Secretary of the National AIDS Commission (KPAN, 2017) National Program Development Division said, one indicator of the performance of HIV and AIDS control is knowledge. HIV and AIDS disease is a virus that weakens the human immune system. People affected by this virus will become susceptible to infection / susceptible to disease. Symptoms of HIV and AIDS include fever, cold, night sweats, diarrhea and weight loss. In Indonesia the most sufferers of HIV and AIDS cases are DKI Jakarta, West Java, Medan, East Java, Papua and Bali. About 75% contract HIV and AIDS in their teens due to promiscuity. The impact of sex outside of marriage not only results in pregnancy, but also transmission of venereal diseases including HIV and AIDS (Sarmita, 2015).

This Indonesian teenager seems to be more tolerant of premarital sexual lifestyles. The study shows that an increase in sexual activity among adolescents is not accompanied by an increase in knowledge about sexual and reproductive health including HIV and AIDS, sexually transmitted diseases (STDs) and contraception other than caused by sexual behavior, HIV and AIDS can be caused by injecting drug use. The possibility of an increase in the incidence of HIV and AIDS, especially in adolescents is both a threat and a challenge because of the increasing number of adolescent drug users (Suryoputro, 2008).

HIV and AIDS cases in South Sulawesi Province rank 8th in Indonesia. Bulukumba Regency ranks 3rd in the number of cases at the South Sulawesi Province level. The risk group is a cafe waiter, to prevent HIV and AIDS transmission, the source of which is from the waitress is to use a condom, be loyal to a partner or not have sexual relations with customers (Andi Fadhali, 2012). Based on data compiled by the South Sulawesi Provincial Health Office, HIV and AIDS transmission to housewives reached 0.38% of patients and transmission to perinatal or HIV mothers to children by 0.71% and teenage sufferers 6.1% from case data Cumulative HIV and AIDS from the Provincial Health Office to September 2012 from 26 districts / cities totaled 3795 cases with 1375 HIV cases and 2420 AIDS cases.

World Health Organization (WHO) there are 35.3 million people in the World living with HIV and AIDS. Some countries such as Myanmar, Nepal and Thailand show a declining trend for new HIV infections, this is related to one of them being the implementation of HIV and AIDS prevention programs through the Condom use program 100 percent (CUP). Death trends caused by AIDS between 2002 and 2011 differ in each part of the country. In Eastern Europe and Central Asia the number of people dying from AIDS increased from 7,800 to 90,000, in the Middle East and North Africa it increased from 22,000 to 35,000, in East Asia it also increased from 24,000 to 56,000 (WHO, 2016).

In Bulukumba Regency, it was recorded from January to November 2016 that an increase in HIV and AIDS cases occurred every year. Detected HIV and AIDS sufferers are 18 HIV sufferers and 7 AIDS sufferers found in Bulukumba Regency in 2016, specifically in 2017 the distribution of HIV and AIDS cases based on gender risk factors can be seen that the comparison of HIV and AIDS cases in the male population between men and women, the difference was quite significant with a ratio of 19 men to 6 women, over a 3: 1 ratio of HIV and AIDS to 3 men and 1 woman subsequently until 2017, 25 cases of HIV and AIDS. While the number of deaths due to AIDS was recorded in 2017 as many as 7 cases out of 7 AIDS sufferers. STI sufferers recorded 3,588 cases (Dukes Bulukumba District). Based on the initial survey conducted on February 26, 2018 in MAS Ma'Arif Bulukumba, Bulukumba Regency obtained 95 teenage student data (MAS Ma'Arif Bulukumba). Based on the above phenomenon, the authors took the initiative to conduct research under the title "Knowledge and Attitudes of High School Youth About HIV and AIDS in Mas Ma'Arif Bulukumba".

MATERIAL AND METHODS

The research design used in this study was a descriptive analytic research design with a survey approach in which several populations were observed at the same time aiming to find out knowledge and attitudes of adolescents in urban areas about HIV and AIDS in Mas Ma'Arif Bulukumba, Bulukumba Regency. Population is the whole source of data needed in a study (Saryono, 2011). The population in this study were all students in Mas Ma'Arif Bulukumba Bulukumba Regency with a total of 95 people. Sampling using the Total Sampling technique means that if all populations are made Samples, the sample in this study were 36 Students in Mas Ma'Arif Bulukumba. The research instrument used to measure the level of knowledge and attitudes of students about HIV

and AIDS with instruments in the form of questionnaire sheets that have been tested for validity. Data were analyzed based on measuring scale and research objectives using computerized program software. Data were analyzed using Univariate Analysis, Analysis was carried out to see the proportions

RESULTS

Tabel 1. Distribution of Characteristics of MAS Ma'arif Bulukumba Respondents

Gender	n	Percentage (%)
Male	20	55.6
Female	16	44.4
Class		
X	20	52.6
XI	10	26.3
XII	6	15.8
Age		
Age 15	18	50.0
Age 16	11	30.6
Age 17	7	19.4
Amount	36	100.0

Based on (Table 1) the frequency distribution of male sex as many as 20 respondents (55.6%) and female as many as 16 respondents (44.4%). Based on the Distribution of Characteristics of Respondent Classes shows the total of all MAS classes. Ma'arif Bulukumba as many as 3 classes (X, XI and XII), where the number of class X 20 respondents (52.6%), while class XI 10 respondents (26.3%) and in class XII students 6 respondents (15.8%). Age Characteristics Distribution of MAS Respondents Ma'arif Bulukumba shows the age of MAS respondents. Ma'arif Bulukumba where the age of 15 years was 18 respondents (50%), while the age of 16 years was 11 respondents (30.6%) and at the age of 17 years were 7 respondents (19.4%).

Tabel 2 Distribution of Respondents' Statements by Student's Knowledge Level about HIV and AIDS in MAS Ma'arif Bulukumba

Konwledge	n	Percentage (%)
High	24	66.7
Low	12	33.3
Amount	36	100.0

Based on (table 2) Frequency distribution of 36 respondents about the level of student knowledge of HIV and AIDS, the criteria for the highest number of respondents in a high statement were 24 respondents (66.7%), then the criteria for a low statement were 12 respondents (33.3%).

Table 3 Distribution of Respondents' Statements According to the Level of Knowledge in the Sub-Item About HIV and AIDS in MAS Ma'arif Bulukumba

Defenisi	n	Percentage (%)
True	109	70,8
False	43	29,2
Sign and Syimtoms		
True	30	19,5
False	124	71,5
Mode Of Transmission		
True	154	100,0
False	0	0
Preventive		
True	93	60,4
False	61	39,6
Amount	154	100,0

Based on (Table 3) shows that of 154 the number of each statement item about the level of respondents' knowledge of HIV and AIDS, the level of knowledge of respondents in item I (Definition) is 109 statements true (70.8%), in item II (Signs and Symptoms) are 30 statements true (19.5%), and item III (Mode of Transmission) is 154 statements true (100.0%), then item IV (Prevention) is 93 statements true (60.4%).

DISCUSSION

This research shows that the knowledge and attitudes of adolescents in Mas Ma'Arif bulukumba have good knowledge and attitudes. Based on the results of research from 36 respondents about the level of student knowledge of HIV and AIDS, the criteria for the highest number of respondents in a high statement were 24 respondents (66.7%), then the criteria for a low statement were 12 respondents (33.3%). The results above show that more students with high levels of knowledge compared to low knowledge.

Based on the results of the sub-item statement about the level of knowledge shows that of 154 the number of each item statement about the level of knowledge of respondents about HIV and AIDS, the level of knowledge of respondents in item I (Definition) is 109 statements true (70.8%), in item II (Signs and Symptoms) are 30 statements true (19.5%), and item III (Mode of Transmission) is 154 statements true (100.0%), then item IV (Prevention) is 93 statements true (60 , 4%).

The above results show that of the 154 items in the statement items about the level of respondents' knowledge of HIV and AIDS, the knowledge in the statement is high, which is about the mode of transmission and the lowest is the level of knowledge about the signs and symptoms Knowledge is the result of human knowing about something or

all human actions to understand an object it faces or the result of human efforts to understand a certain object (Dra. Sri Ati, 2015). Knowledge is something

1. humans use to understand the world, which can be changed based on information received. (Surajiyo, 2009)
2. Knowledge of HIV and AIDS among adolescents influences adolescent attitudes towards premarital sexual behavior so as to increase the vulnerability of adolescents to contracting HIV and AIDS and by providing counseling, adolescents get learning and information that results in a change. Adolescents who get enough information about sex are expected to be more prudent not to engage in premarital sex while adolescents with less knowledge about sex might be more aroused than that (Nuzulia rahayu, 2013).
3. In the opinion of the researchers the above happened because the knowledge of the students at Mas Ma'Arif Bulukumba got a lot of information about their health, especially about HIV and AIDS in various media such as books, magazines, newspapers and cellphones, and Mas Ma'Arif's school located in urban so students / students get more information about health and counseling which is carried out directly by posyandu officers at Mas Ma'Arif Bulukumba school.

A person's attitude to an object is an evaluation of feelings of support for a particular object. This definition is an attitude as an aspect of behavior that is not static (Pieter, 2011). Although the formation of attitudes is often not realized by the person concerned. But attitudes are dynamic and open to the possibility of change due to patterns of interaction between a person and his environment. Therefore, the attitude will be meaningful if it is displayed in the form of verbal statements and behavior behavior, then people tend to show attitudes that are in accordance with the expectations of others not just in accordance with the contents of their conscience (Pieter, 2011).

The opinion of researchers says that attitude is a response or response that is still closed from students towards people with HIV and AIDS (PLWHA), and the higher the knowledge one has about HIV and AIDS, it will affect the attitude that a person has, but even though knowledge is high but some people do not affect the person's attitude because it is caused by several factors such as culture.

CONCLUSIONS

Based on the research results above, it can be concluded that the knowledge and attitudes of students about HIV and AIDS MAS Ma'arif Bulukumba has good knowledge and attitudes. The researchers nest so that the results of this study can be used as material to increase insight in the field of research and increase knowledge and attitudes about HIV And AIDS DI Mas Ma'Arif Bulukumba Bulukumba District. As a reference data for the Teachers so they can inform students about HIV and AIDS in Mas Ma'Arif Bulukumba so that they can form cadres who can record and detect HIV and AIDS as a whole. this research hopefully can be a source of information and broaden knowledge for students at STIKES Panrita Husada Bulukumba.

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