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THE CORRELATION OF ADOLESCENT'S KNOWLEDGE AND ATTITUDE TO DRUGS WITH ADOLESCENT'S DRUG ABUSE BEHAVIOR IN THE COMMUNITY HEALTH CENTER OF KESUNEAN, CIREBON

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ABSTRACT

Background: The reports on the number of drug abuse in Indonesia by the National Narcotic Agency (NNA) showed 3.3 million drug users in 2008 and 3.8 million drug users in 2014 in which its number keeps increasing year after year. The number of teenagers who become drug users in Cirebon is quite high, i.e. 25% compared to unemployed people of 19%, and followed by private employees and government employees of 56%. Data from community health center show that drug users who underwent treatment and were sent to rehabilitation center in 2017 were 32 people; it was higher than in 2016, i.e. 10 people. Adolescence is a transition period between childhood and adulthood. There are several factors influencing mental abilities, knowledge, and attitudes. It makes adolescents may consume narcotics, psychotropic abuse and other drug addictive substances. The community health center of Kesunean has an Integrated service post (ISP) program called REMPONG PISAN (an ISP who cares for HIV/AIDS and Narcotics) aiming to make adolescent understand about HIV/AIDS and drugs and to make them healthy. This ISP program is conducted once a month with one of the activities is education about HIV/AIDS and drugs.

Aim: To observe the correlation of adolescent's knowledge and attitudes to drugs with drug abuse behavior among adolescents at the ISP.

Method: This research was an observational analytic study with a cross-sectional design. The sample was determined using consecutive sampling technique during the implementation of the ISP at the 2 neighborhood in the community health center of Kesunean. The data were analyzed using Pearson correlation to determine the correlation of adolescent's knowledge and attitudes to drugs with drug abuse behavior among adolescents.

Results: Statistical analysis shows that there was no significant correlation between knowledge and drug abuse behavior ($p = 0.180$ and; $r = -0,201$), there was no significant correlation between attitudes with drug abuse behavior ($p = 0.264$; $r = -0,168$), however, there was a significant correlation between knowledge and attitudes towards drug abuse ($p = 0.000$; $r = 0,710^{**}$).

Conclusion: The better the adolescent's knowledge about drugs, the better their attitude will be. In this case, good teen behavior is influenced by good knowledge and attitude.

Keywords: NNA, Drug, Knowledge, Attitude, Drug Abuse Behavior

INTRODUCTION

Adolescence is a transition period between childhood and adulthood. It includes some big changes to the body and to the way a young person relates to the world. Many physical, sexual, cognitive, social, and emotional changes that happen during this time can bring anticipation and anxiety for both children

and their families. Understanding what to expect at different stages can promote healthy development throughout adolescence and into early adulthood [1].

Drug abuse is consuming a substance that works on the CNS (Central Nervous System) and influences the mental process and its use other than medical indications, without instructions/prescriptions and supervision of doctors, and is consumed regularly or periodically for at least 1 month [2].

In Indonesia, drug abuse has been regulated by the government in a lot of regulations and laws [3]–[5]. The National Narcotics Agency (NNA) states that from 2004-2008 drug abusers increased from 2.80 million to 3.3 million, and finally reached 4.1 million people in 2014 and 5.1 million people in 2015 [6]. The number of teenagers who become drug users in Cirebon is quite high, i.e. 25% compared to unemployed people of 19%, and followed by private employees and government employees of 56%. Data from community health center show that drug users who underwent treatment and were sent home in 2017 were 32 people; it was higher than in 2016, i.e. 10 people.

Knowledge about drug abuse can come from various sources, such as from the internet, living in a place of residence with high rates of drug users, parents who are also drug users, peer group influence, and low levels of education [7]–[9]. Attitude influences behavior based on their own understanding. There are 3 kinds of characteristics 1) behavior is influenced by specific attitudes, 2) behavior is influenced not only by attitude, but also by subjective norms; in this case, subjective norms are trusting in the opinions of others about the actions to be taken, and 3) attitudes toward behavior because subjective norm factors will form intentions to behave in a certain way [10].

ISP is a program in health sector that is managed and organized from, by, for and with the community, including adolescents to improve the health status and healthy life skills of adolescents. An ISPE program run by community health center of Kesunean called REMPONG PISAN is an effort regarding the prevention of drug abuse through counseling and screening. In addition, there were also treatment service and rehabilitation center for drug users. This program is intended to improve the quality of adolescent health. The ISP participants are teenagers who live in that area. The data collected focused only on adolescents who came to the ISP program. Since this ISP activity is interesting, many teenagers gather, fill out the questionnaire. From the aforementioned background, the author is interested in conducting a study on the correlation of knowledge and attitudes to drugs with drug abuse behavior in this area.

MATERIAL AND METHOD

This study used observational analytic research with a cross-sectional approach. It was conducted in the 2 neighborhoods in the community health center of Kesunean, Cirebon. The subjects of this study were 46 adolescents taken during the implementation of integrated service post (ISP), while the Ethical Clearance was taken from the Research Ethics Committee of the Medical Faculty of Swadaya Gunung Jati University. Respondents were explained about the research conducted, goals, benefits, procedures and confidentiality and were then asked to sign an informed consent. Data were collected through questionnaires given to adolescents during the implementation of ISP.

The questionnaire was adapted from a research by Quiznul Fatuf Musmarf about knowledge, attitudes and behavior of drug abuse [11]. Knowledge questionnaire uses multiple choices of 10 questions, attitude questionnaire uses a Likert scale consisting of 8 questions, and behavioral questionnaire uses the Guttman scale consisting of 10 questions. The classification is determined based on the median score of Good knowledge > 8, and Poor knowledge < 8. Good attitude score > 16 and bad attitude < 16. Good behavior score > 7, and bad behavior score < 7. The data were analyzed using the Pearson correlation since data are normally distributed with ordinal non-parametric scale. In this case, data are classified into 2 groups, good and bad.

RESULTS

Data retrieved from the respondents show the characteristics of respondents as seen in the following table:

Table 1. Characteristics of Respondents

Characteristics	Frequency (n)	Percentage (%)
Age		
12-15	26	56.5
16-18	13	28.3
19-21	7	15.2
Pocket money		
Rp5.000 - Rp15.000	29	63.0
Rp16.000 – Rp20.000	10	21.7
> Rp20.000	7	15.2
Sex		
Male	29	63.0
Female	17	37.0
Educational status		
Junior high school	24	52.2
Senior high school	11	23.9
Graduated from high school	11	23.9

Distribution of frequency and percentage of the variable are shown in Table 2 below:

Table 2. Distribution of frequency and percentage

Variables	Distribution of frequency and Percentage	
	f	%
Knowledge		
1. Poor	19	29.7
2. Good	27	42.2
Attitude		
1. Bad	21	32.8
2. Good	25	39.1
Behavior		
1. Bad	15	23.4
2. Good	31	48.4
Smoking		
1. Smoking	11	23.9
2. No Smoking	35	76.1
Drug Abusers		
1. Yes	5	10.9
2. No	41	89.1
Consuming Alcohol		
1. Yes	7	15.2
2. No	39	84.8

Table 2 shows that 42.2% of adolescents have good knowledge, 39.1% of adolescents show good attitudes, 48.4% show good behavior, 23.9% of adolescents are smoking, 10.9% of adolescents are not drug abusers, and 15.2% of adolescents consume alcohol. The results of bivariate analysis using Pearson correlation test are shown in Table 3 and Table 4:

Table 3. Bivariate Analysis of Research Variables

Variable	Drug Abuse Behavior				<i>p value</i>	r
	Bad		Good			
	f	%	f	%		
Knowledge						
1. Poor	4	21.1 %	15	78.9 %	0.180	-0.201
2. Good	11	40.7 %	16	59.3 %		
Attitude						
1. Bad	4	19 %	17	81 %	0.264	-0.168
2. Good	11	44 %	14	56 %		

Table 4. Bivariate Analysis of the Correlation Between Knowledge and Attitudes

Variable	Attitude About Drug Abuse				<i>p value</i>	r
	Bad		Good			
	f	%	f	%		
Knowledge						
1. Less	14	73.7 %	5	26.3 %	0.000	0.710**
2. Well	7	25.9 %	20	74.1 %		

Table 3 shows the Pearson Test Result correlation between attitude and behavior. The significance value is 0.264 meaning that the correlation is not significant. Pearson Test Results correlation between knowledge and behavior shows significance value of 0.180 indicating that the correlation is not significant. Table 4 shows the results of the Pearson correlation test with a significance value of 0.000 meaning that the correlation between knowledge and attitude is significant. The correlation coefficient of 0.710** indicates that the correlation is in the same direction with sufficient correlation strength. It means there is a sufficient significant correlation and unidirectional correlation between knowledge variables about drugs and attitudes towards drug abuse.

DISCUSSION

Based on the result this study, there is a strong and in the same direction correlation between variables of knowledge about drugs and attitudes to drug abuse, but there is no significant correlation between knowledge and behavior, and there is no significant relationship between attitude and behavior. It is in line with the research conducted by Quiznul Fatuf Musmarf showing that there was a significant correlation between knowledge about drug abuse and attitudes to drug abuse meaning that the attitude of adolescents would be better if they increase their knowledge about drugs [11]. Below are the ways through which attitude is formed [12]:

a. Learning through classical conditioning

Classical conditioning is a basic form of learning in which a stimulus, initially neutral, acquires the potential to evoke responses through repeated pairing with another stimulus.

b. Learning through instrumental conditioning

Instrumental conditioning is another basic form of learning in which responses that lead to positive/rewarding outcomes or that is instrumental in avoiding negative/aversive outcomes are strengthened.

c. Attitude formation through social comparison

Social comparison theory developed by Leon Festinger (1954) forms another basis for the development of attitude. According to this theory, we compare ourselves to others in order to determine whether our view of social reality is or is not correct. Thus, due to our desire to hold 'right' views, our attitude is shaped by the social information that we seek from people we admire or respect.



d. Genetic factors associated with attitude formation

A study conducted by Hershberger, Lichtenstein, and Knox (1994) showed that the identical twins were more similar in their perceptions of the work climate (in the organizations where they worked) than non-identical (dizygotic) twins. The study indicates the role of genetic factors in shaping the attitude to workplace. George (1990) further explained that the genetic factors may affect attitude formation as these influence more general dispositions such as tendency to experience positive or negative emotions towards events or objects in an individual's social world.

In this study, there is no significant correlation between attitudes and drug abuse behavior, and no significant correlation between knowledge and behavior. It means that the behavior of teenagers is good because their knowledge and attitude are good. In the theory, new behavioral changes follow the stages of knowledge, attitude, and then the behavior. But in life, it can be different, someone has behaved positively, even though his knowledge and attitude are still negative. Behavior is formed through a certain process and takes place in human interaction with the environment. The factors that play a role in the formation of behavior are internal and external factors (like friends, social environment, and economy) [13].

The manifestation of behavior can begin with knowledge and attitude, but an attitude may not necessarily manifest in an action. The realization of an attitude so that it becomes a real action is needed supplementary factor or a possible condition, such as facilities and support from other parties such as family, school, environment and peer groups. Environmental factors have great power in determining behavior, even sometimes their strength is greater than individual characteristics (examples: motivation, value, personality and attitude) [14]. According to the dependent consistency postulate, the correlation between attitudes and behavior is determined by situational factors such as norms, membership in groups and culture [15].

Drug abuse (Narcotics, Psychotropic, and Addictive Substances) is a pathological behavior pattern, and is usually carried out by individuals who have a vulnerable or high-risk personality, and if it is done within a certain period of time, it will cause a bio-psycho-social-spiritual disorders. The behavior of drug abuse has a correlation with the knowledge and attitudes of teenagers. Since adolescence is a transition period to adulthood, they have lack of courage to behave and experience to understand something [16]. NNA suggests that the stages of someone becoming drugs abuse as the followings:

- a. Trial, someone commonly starts this stage because of curiosity and to be recognized in a group.
- b. Social or recreational, someone uses drugs for the purpose of having fun.
- c. Situational, a person who uses drugs is included in the higher social class, a stage before dependence.
- d. Dependence, is the final stage of drug abuse, a person feels that he cannot live if he does not use drugs

Therefore, there are some efforts which can be done by the government to prevent teenagers from being drug abuser such as promotive activities, screening, symptomatic treatment and addiction counseling. It can be beneficial for teens to live healthy and reduce 1) the number of young people who smoke, 2) the number of young people who drink alcohol, 3) drug abuse, and 4) reduce HIV/AIDS cases [17].

LIMITATION

In this research, there are limitations:

1. Behavioral variables measured do not discuss or distinguish prevention behavior and drug abuse behavior.
2. It does not measure social environment variables as an influence on drug abuse

CONCLUSION

Based on the results of this study, there is a strong significant correlation between knowledge and attitudes to drug abuse, but there is no significant correlation between knowledge and behavior, and attitudes to behavior. Its means that if adolescents get better knowledge about drugs, their attitude will be better; therefore, they do not commit acts of drug abuse. Someone doing something is influenced by knowledge and attitude. Increasing understanding of drugs and forming good teen attitudes will keep teenagers away from drug abuse, but there are other factors that might support someone who uses drugs such as friends, social environment, and economy.

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