

Behind the Knowledge and Attitude: Female Adolescent in Looking at Physical Appearance Change during Puberty at SMPN 1 Telaga Biru Gorontalo

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Abstract. *As a period of life, the adolescence is an important stage that a person must go through before he reaches adulthood. During adolescence, many changes occur both biologically, psychologically and socially. Generally, the process of physical change occurs faster than mental maturation. The changes in physical appearance that occur in adolescents can cause anxiety and awkwardness for adolescents because they require them to adjust to the changes that occur. This study aimed to analyze the relationship between knowledge and attitudes of young women in preparing for physical appearance changes during puberty in SMP Negeri 1 Telaga Biru, Gorontalo District, Gorontalo Province, Indonesia. This type of research is a quantitative study with a cross sectional approach. The population in this study were all of the 163 female junior high school students of SMP Negeri 1 Telaga Biru 1 in Gorontalo. The sampling technique used stratified random sampling on grade VII to IX students. The obtained samples were 54 students. Data processing was analyzed using chi square test. Based on the research results, it was found that the relationship between the knowledge of young women in dealing with physical changes at puberty was $p \text{ value} = 0.009 < 0.05$. Second, there is a relationship between the attitudes of young women in dealing with physical changes at puberty with the results of the chi square test showing the $p \text{ value} = 0.007 < 0.05$. The conclusion of this study is that there is a relationship between adolescent knowledge in dealing with physical changes at puberty and there is a relationship between adolescent attitudes in dealing with physical changes at puberty. Researchers expect that in dealing with changes during puberty, adolescents must equip themselves with knowledge and have a positive attitude.*

Keywords: *Attitude, Knowledge, Physical Change, Puberty*

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INTRODUCTION

Adolescence is also called teenagers, the phase of growing into adulthood. It is an important period of life that a person must go through before becoming an adult. Adolescence consists of early adolescence (10-14 years), middle adolescence (14-17 years) and late adolescence (17-19 years). During adolescence, many changes occur

both biologically, psychologically and socially. Whereas generally the process of physical change occurs faster than the psychosocial maturation process (Depkes, 2017).

Demographic data shows that the world's population, the number of adolescents, is a very large population, currently an estimated 27% -30% of the world's population aged 10-24 years, and according to WHO (2015) about 83% of them in developing countries including Indonesia (Organization, 2015). The total population of Indonesia according to BKKBN 2015 was 237.6 million people, 26.67% of them were adolescents with 32,164,436 boys (50.70%) and 31,279,012 women (49.30%). Based on population projections in 2015, it shows that the number of adolescents (aged 10-24 years) in Indonesia reaches more than 66.0 million or 25% of the total Indonesian population of 255 million (BKKBN, 2015).

The population prevalence in Gorontalo Province in 2018 is 1,133,237 people, where the age group of 10-19 years (teenagers) is 214,023, consisting of 108,785 men, and 105,238 women (Population and Employment of Gorontalo Province, 2018). In Gorontalo District, the population in 2015 was 370,441 people, of which the 10-19-year-old group was 74,920 people. The large number of adolescents has no bundled consequences for Indonesia, especially in Gorontalo Province itself, because preparing quality human resources is not produced through a fast process, but requires a sustainable process.

Every adolescent who getting through adolescence always goes through the stage of puberty, and this has a good impact on the physical, namely where the impact of rapid growth and change in the body accompanied by fatigue, lethargy and other bad symptoms lead to a worse quality of tasks and responsibilities for finish it. In addition, the impact on attitudes and behavior caused by body growth and development is the result of deviant maturity (Herwati & Wiyono, 2017).

Female adolescents who hit puberty who mature earlier are less profitable for themselves because they will appear to behave more mature, have earlier interest in the opposite sex, and participate earlier in various social activities of women so that it seems more experienced than their chronological age as the hierarchy of lifetime (Meliala, 2016). As for puberty for girls who are slow to mature, this condition will not have a negative impact on the development of their attitudes and behavior. Puberty girls are less involved in their identity-seeking behavior even if they experience delays in maturing. Psychological problems that are often caused by late maturity for female puberty are shame and feeling inferior (Panjaitan et al., 2020).

METHODS

The research was conducted at SMP Negeri 1 Telaga Biru Gorontalo Indonesia. The research time will be carried out in April-May 2018. This type of research is quantitative with a cross sectional approach. For data processing using a cross-sectional design to study the relationship between the independent variable and the dependent variable by taking a momentary measurement at the same time.

The population used in this study were all young women in SMP Negeri 1 Telaga Biru, which amounted to 163 students. The sampling technique was carried out by stratified random sampling and the results were 54 female students. Sampling from each stratum was done by arranging all the names of the students in one absence, then taking the names of students at 4 intervals.

RESULTS AND DISCUSSION

Statistics Results in Univariate Analysis

Table 1. Aged-Based Distribution of Frequency

Age	n	%
12-year-old	5	9.3
13-year-old	25	46.3
14-year-old	8	14.8
15-year-old	16	29.6
Total	54	100

Source: Primary Data (2018)

Table 1 shows that 25 respondents were 13 years old (46.3%) and 5 respondents were 12 years old (9.3%).

Table 2. Class-Based Distribution of Frequency

Class	n	%
VII	17	31.5
VIII	23	42.6
IX	14	25.9
Total	54	100

Source: Primary Data (2018)

Table 2 shows that most of the respondent frequency in class-based came from class VIII as many as 23 respondents (42.6%), and the smallest respondent from class IX were 14 respondents (25.9%).

Table 3. Knowledge-Based Distribution of Frequency

Knowledge	N	%
Less	0	0
Enough	12	22.2
Good	42	77.8
Total	54	100

Source: Primary Data (2018)

Table 3 shows that some of the respondents with good knowledge were 42 respondents (77.8%), and the respondents had sufficient knowledge (22.2%).

Table 4. Attitude-Based Distribution of Frequency

Attitude	n	%
Less	0	0
Enough	30	55.6
Good	24	44.4
Total	54	100

Source: Primary Data (2018)

Tabel 4 Menunjukkan sebagian responden mempunyai sikap cukup sebanyak 30 responden (55,6 %), dan responden yang mempunyai sikap kurang sebanyak (0%)

Table 5. Physical Change during Puberty Distribution of Frequency

Readiness of Physical Change During Puberty	n	%
Unready	11	20.4
Ready	43	79.6
Total	54	100

Source: Primary Data (2018)

Table 5 shows that most of the respondents had readiness for physical change at puberty as many as 43 respondents (79.6%), and 11 respondents who did not have physical change readiness at puberty (20.4%).

Statistics Results in Bivariate Analysis

Relationship of Knowledge of Female Adolescents in Dealing with Physical Change during Puberty

Table 6. Distribution of Level of Knowledge in Physical Change

Knowledge	Physical Change During Puberty					P Value
	Unready	%	Ready	%	n	
Less	0	0	0	0	0	0.009
Enough	6	11.1	6	11.1	12	
Good	5	9.3	37	68.5	42	
Total	11	20.4	43	79.6	54	100

Source: Primary Data (2018)

Based on Table 6, there is a relationship between knowledge in dealing with physical changes during puberty, where 12 respondents (22.2%) who have enough knowledge are in the “unready” category of physical changes during puberty were 6 respondents (11.1%) and “ready” category of physical changes during puberty were 6 respondents (11.1%). Respondents who had good knowledge category were 42 respondents (77.8%) with the “unready” category physical changes during puberty were 5 respondents (9.3%) and respondents who had the “ready” category with physical changes during puberty were 37 respondents (68, 5%). Based on the Chi-Square test with a confidence level of 95%, the p-value is 0.009, which means less than $\alpha = 0.05$. Thus, there is a significant relationship between the knowledge of adolescent girls in dealing with physical changes during puberty. This is reflected on the attitude in the Table 7.

Relationship of Attitude of Female Adolescents in Dealing with Physical Change during Puberty

Table 7. Distribution of Level of Attitude in Physical Change

Attitude	Physical Change During Puberty						P Value
	Unready	%	Ready	%	n	%	
Less	0	0	0	0	0	0	0.007
Enough	2	3.7	28	51.9	30	55.6	
Good	9	16.7	15	27.7	24	44.4	
Total	11	20.4	43	79.6	54	100	

Source: Primary Data (2018)

Based on the Table 7 about the relationship between female adolescents' attitudes in dealing with physical changes at puberty, from 54 respondents, it was shown that respondents who had sufficient attitudes were 30 respondents (55.6%) with the "unready" category for physical changes at puberty as many as 2 respondents (3.7%) and in the "ready" category for physical changes at puberty were 28 respondents (51.9%). Respondents who had a good attitude category were 24 respondents (44.4%), while 9 respondents were not ready for physical changes at puberty (16.7%), and 15 respondents were ready for physical changes at puberty (27.7%). Based on the results of statistical tests using the Chi-Square test with a confidence level of 95%, the p-value is 0.007, which means it is smaller than $\alpha = 0.05$. Thus, there is a significant relationship between the attitudes of young women in dealing with physical changes at puberty.

Relationship of Knowledge of Female Adolescents in Dealing with Physical Change during Puberty

Based on the results of the study, there is a relationship between knowledge and attitudes in dealing with physical changes. Based on the results of statistical tests using the Chi-Square test with a 95% confidence level, the p-value is 0.009 which means less than $\alpha = 0.05$. Respondents who have good knowledge and are ready to face physical changes at puberty in accordance with the opinion of Notoatmodjo (2010), knowledge is the result of recognized patterns and this occurs after a person senses a certain object, knowledge is a guide in shaping one's actions in this case were female adolescents.

Respondents who have good knowledge but are not ready to face physical changes at puberty are 3 respondents, this could be due to local environmental factors, for example habits or customs that consider puberty to be taboo for children to know, so respondents get information about puberty only from lessons so that their psychological readiness is lacking. Whereas for students with sufficient knowledge levels, due to the lack of information about physical changes at puberty they get, so they don't know much about it so they are not ready to face puberty (Prihartini & Maesaroh, 2019).

The results of this study are in line with research conducted by Muhamad, Hadi, & Yani, (2019) regarding the relationship between knowledge and attitudes of young girls in preventing vaginal discharge, which states that there is a positive and significant relationship between knowledge of teenage girls' readiness. The better a one's knowledge, the more prepared a person is to prevent vaginal discharge. The results of the research by Puteri et al. (2019) state that menarche is a new experience for female adolescents. The age of puberty is related to psychological factors such as embarrassment, confusion, and seeing menstruation as an unpleasant event.

These young women can immediately realize that menstruation is a physiological process and respond positively to menarche, on the other hand, bad knowledge, misperceptions and wrong thoughts can lead to fear, anxiety, and negative behavior for young women (Putri, 2019). According to Annisa (2020), students who lacked knowledge and information about puberty said they were ashamed of their parents and friends because of physical changes such as enlarged breasts, widening of the pelvis and voice changes (Annisa, 2020). These various conditions indicate that many young women lack readiness to face change because they do not have the knowledge and understanding to prepare themselves (Prihartini & Maesaroh, 2019).

Readiness at puberty is caused by a variety of complex factors, such as family or parents, motherhood, mass media / electronics. Family factors affect the readiness of students to face menarche. Female adolescents who do not have prior preparation for physical changes at puberty will tend to show negative attitudes than those who have prepared in advance (Muhamad et al., 2019). Based on the behavioral theory put forward by Lawrence Green, behavior is influenced by 3 main factors, one of which is the predisposition factor which includes public knowledge and attitudes towards health, where knowledge will affect a female adolescents' readiness (Ita Fijanah et al., 2014).

Female adolescents' knowledge is not only influenced by the understanding of an object, but also by the experience and information obtained. Notoatmodjo (2010) suggests that the factors that influence the level of knowledge are education, information or mass media, socio-culture and economy, environment, experience and age. Darvill & Powell (2003) suggests that science can provide a sense of security to humans. Knowledge of reproduction tells what is experienced by a woman who is in puberty is normal.

Relationship of Attitude of Female Adolescents in Dealing with Physical Change during Puberty

Based on the results of research on the relationship between attitudes in dealing with physical changes during puberty, from 54 respondents showed that respondents who had sufficient attitudes were 30 respondents (55.6%) with the category of being unprepared for physical changes at puberty as many as 2 respondents (3.7%) and the categories ready for physical changes at puberty were 28 respondents (51.9%). Respondents who had a good attitude category were 24 respondents (44.4%), 9 respondents were not ready for physical changes at puberty (16.7%), and 15 respondents were ready for physical changes at puberty (27.7%). Based on the results of statistical tests using the Chi-Square test with a confidence level of 95%, the p-value is 0.007, which means it is smaller than $\alpha = 0.05$. Thus, there is a significant relationship between the attitudes of young women in dealing with physical changes at puberty.

The results of this study are supported by research by Herwati & Wiyono. (2017) which states that young women who have very good attitudes about puberty are more ready to face physical changes at puberty than young women who have bad attitudes about physical changes at puberty (Herwati & Wiyono, 2017). Attitudes can also be influenced by several factors including age, education, information and social status, which ultimately lead to inappropriate attitudes. Good knowledge will result in a good attitude and understanding which will then give birth to positive behavior and so (Muhammad & Sumarmi, 2019).

Based on the research above, there were 7 respondents who had good attitudes but were not ready for physical changes at puberty, this was due to the insufficient information they got about puberty. Based on the results of research that has been done, they say that acne is the most disturbing thing, feel insecure about their appearance due to changes in body shape, and feel afraid of increasing weight gain. The results of this study are in line with the research conducted by Panjaitan et al. (2020), with the title "the attitude of young women to face puberty", it was found that the percentage of respondents who had readiness to face puberty was higher (70.8%) compared to respondents who had negative attitudes (29.6 %). The statistical test results obtained p

value = 0.008 ($p < 0.05$) and PR = 2.391, so there is a significant relationship between the attitudes of young women about menarche and the readiness of young women to face puberty, female adolescents who have a positive attitude are 2.391 times more ready than adolescents. women who have negative attitudes toward menarche (Panjaitan et al., 2020).

Attitudes can be positive and can also be negative A positive attitude of adolescents in facing physical changes is shown by being proud or tolerant of their own bodies, using and protecting their own bodies effectively accompanied by a sense of personal satisfaction, self-confidence (Muhamad & Sumarmi, 2018). The negative attitude of adolescents in dealing with physical changes is shown by lack of confidence, hesitation in taking action, fear and anxiety (Muhammad & Sumarmi, 2019).

Attitude reflects the readiness of a person to act in certain ways on certain things. Attitudes can be both positive and negative. A positive attitude tends to action is to approach, like, expect objects. While in a negative attitude there is a tendency to stay away, avoid, hate and dislike objects (Sarwono, 2012). According to Azwar (2010) states that even though it is assumed that attitude is a predisposition for evaluation that largely determines how individuals act, attitudes are not the same as behavior, and behavior does not always reflect a person's attitude. The respondent's attitude can change by obtaining additional information about the object.

CONCLUSION

Based on the results of the study, it can be concluded that there is a relationship between knowledge and readiness of young girls in facing puberty at SMP Negeri 1 Telaga Biru, Gorontalo Regency and there is a relationship between attitudes and readiness of young girls in facing puberty at SMP Negeri 1 Telaga Biru, Gorontalo District.

It is hoped that teachers can provide education about reproductive health, especially the changes that occur at puberty such as physical and psychological changes, so that young girls can adjust to the formation of better self-concepts. Health information should be improved, namely by providing material about puberty. This research can be used as information material to increase knowledge about physical changes at puberty and the self-image of adolescents for future researchers.

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