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The Effect of Providing Counseling on Efforts to Prevent Degenerative Diseases on Clean and Healthy Living Behaviors in School Settings for Adolescents at SMK I Sumbawa

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Abstract---Degenerative disease is a disease that arises due to the deterioration of organ function due to the aging process and is one of the biggest causes of death in the world, causing 60% of deaths and 40% of the global disease burden. According to the World Health Organization (WHO), nearly 17 million people are dying from degenerative diseases every year (Departemen Kesehatan RI, 2005). Efforts to increase clean and healthy living behavior in adolescents require counseling to adolescents, especially regarding various kinds of degenerative diseases and prevention efforts that must be done. The preliminary study conducted by the researcher is that out of 50 students at SMK 1 Sumbawa, it is known that 45 class XI students have never received counseling/knowledge about degenerative diseases, and 35 of them have a negative lifestyle, including often eating instant noodles, fried snacks, etc. (SMK 1 Sumbawa, 2023). The method used was pre-experimental, namely one group pretest-posttest design. This study aims to determine the effect of providing counseling on efforts to prevent degenerative diseases on clean and healthy living behavior in school settings in adolescents at SMK I Sumbawa. The location of data collection was carried out at SMK1 Sumbawa. The population of this study was all students of SMK 1 Sumbawa. The independent variable in this study is the effect of providing counseling while the dependent variable is the effort to prevent degenerative diseases on clean and healthy living behavior in adolescents Sampling using nonprobability sampling type purposive sampling.

Keywords---adolescents, counseling, degenerative disease.

Introduction

Degenerative diseases are diseases that arise due to the deterioration of organ function due to the aging process and are one of the biggest causes of death in the world, causing 60% of deaths and 40% of the global disease burden. According to the World Health Organization (WHO), nearly 17 million people die from degenerative diseases every year (Departemen Kesehatan RI, 2005). Non-communicable diseases are triggered by various risk factors, as 34.7% of the population aged 15 years and over smoke every day, 93.6% lack fruit and vegetable consumption, and 48.2% lack physical activity. The increase in NCDs has a negative impact on the nation's economy and productivity. Treatment and management of NCDs often take a long time and require large costs, therefore concrete steps are needed to overcome them, therefore prevention with a healthy lifestyle must be prioritized (Depkes RI, 2010 and 2011).

Degenerative diseases arise due to age factors, and cannot be cured but can be controlled of them by means of a clean and healthy lifestyle. Adolescents are the main target for this effort because there are still often problems with

the level of health and nutritional status and unhealthy diet and lifestyle at a young age (Tjokroprawiro, 2008). Health behavior is basically a person's response (passive or active) to stimuli related to illness and disease, health care systems, food, and the environment. What is important in health behavior is the issue of behavior formation and change. Because behavior change is the goal of education or in adolescents.

Efforts to determine the effect of providing counseling on efforts to prevent degenerative diseases on clean and healthy living behavior in adolescents. health counseling as a support for other health programs (Notoatmodjo, 2007). In efforts to increase clean and healthy living behavior in adolescents, it is necessary to conduct counseling to adolescents, especially those concerning various kinds of degenerative diseases, and prevention efforts must be done. A preliminary study conducted by the researcher showed that out of 50 students at SMK 1 Sumbawa, 45 of the class XI students had never received counseling/knowledge about degenerative diseases, and 35 of them had a negative lifestyle, including often eating instant noodles, fried snacks, Cimol, etc (SMK 1 Sumbawa, 2012). often eating instant noodles, Seblak snacks, fried foods, Cimol, etc (SMK 1 Sumbawa, 2012).

Given that degenerative diseases are the cause of 60% of deaths in the world and have a tendency to increase, it is necessary to reduce and prevent them more intensively since adolescence. Therefore, the researcher wanted to examine "the effect of providing counseling on efforts to prevent degenerative diseases on clean and healthy living behavior in adolescents at SMK 1 Sumbawa". From the various descriptions that have been presented, the problem arises, "Is there an effect of providing counseling on efforts to prevent degenerative diseases on clean and healthy living behavior in adolescents?"

Research Method

This study uses a Quasi Experiment research design with a Pretest - Posttest with Control Group design, in this design randomization is carried out, which means that the grouping of control groups and experimental groups is carried out randomly or randomly. Then a pretest is carried out on the two groups, followed by an intervention in the experimental group then a post-test is carried out at some time later on the two groups. The data collection location was at SMK 1 Sumbawa. The target population used was all students of SMK 1 Sumbawa. The samples used in this study were young men and women who were at SMK 1 Sumbawa. Sampling using sampling technique with probability sampling approach with Simple Random Sampling method.

Results and Discussion

This research was conducted at SMK 1 Sumbawa, which is located at Jln. Durian No.3, Uma Sima, Sumbawa District, Sumbawa Regency, West Nusa Tenggara Province. Respondents in this study were grade XI students at SMK 1 Sumbawa who were randomly selected as many as 30 students. The age range of students who became research respondents was between 15-18 years.

Table 1 Respondent characteristics

Student	Frequency	Percentage
Characteristics		
Gender		
Male	12	40
Female	18	60
Age of Respondent		
15	6	20
16	8	26,7
17	12	40
18	4	13,3
Source of Information		
Teacher	5	16,7
Parents/relatives	7	23,3
Internet	6	20
Friends	3	10
Print Media	2	6,7

Electronic Media	7	23,3
(Source: Primary data processed 2023)		

(Source: Primary data processed, 2023)

Table 1 shows that the gender of service participants is male (60%), 40% are 17 years old and 23.3% of respondents get their source of information about degeneration through parents and electronic media. Respondents are in the teenage age category. There is a close relationship between education and degenerative history conditions. Degenerative diseases have a negative impact on the access and quality of education that a child may get (Sutrisna, 2009). Education about degenerative diseases in children and adolescents is very important. This is done as a way to prevent degenerative diseases from occurring early on, which children can later apply into adulthood. Unfortunately, many still think that education related to the prevention of degenerative diseases in adolescents is taboo to talk about. In fact, providing education to adolescents in the right way can be the right step to breaking the chain of degenerative diseases in the environment where they live and hang out (Linnane et al., 1989; Ballios et al., 2010; Adnani et al., 2018; Abadi & Duarsa, 2020).

Media use is also very influential in relation to the amount of information exposure obtained by adolescents in self-education about degenerative diseases. According to (Solehati et al., 2019), the social media they often use such as text messaging, the Internet, mobile applications, and social networking allow users to get important information about health topics. Users of these media can be a key component of health interventions and can facilitate risky behavior.

This implementation process was followed by the service participants with great enthusiasm. Before and after the socialization, the process of filling out pre-test and post-test questionnaires was carried out to measure the increase in participants' understanding related to the socialization material. The service process went smoothly without any obstacles (Esquivel et al., 2016; Ragelienė & Grønhøj, 2020; Marques et al., 2019). Hypothesis testing in this study was carried out using the T-test with the SPSS version 25 program. The results of the pretest and posttest questionnaires were tested statistically using the paired sample t-test with the following results.

Table 2
Results of paired sample t-test

Knowledge Category	Mean Knowledge	P-Value
	Score	
Before counseling	12,03	
After counseling	17,97	< 0,001

(Source: Primary data processed, 2023)

Table 2 shows that the average score of knowledge of students before counseling was 12.03 and after counseling there was an increase with an average score of knowledge to 17.9. The results of the analysis with t-paired obtained p value = 0.000 (p = <0.05), meaning that counseling increases knowledge about degenerative diseases of students of SMK 1 Sumbawa Regency. And getting access to information must be precise and fast in order to help students in increasing knowledge and understanding of how to prevent and overcome degenerative diseases, especially among adolescents.

This study shows the average value of knowledge and behavior that has increased after being given counseling. The level of education of respondents who are in middle age education is one of the factors that influence the receipt of information. This is supported by the results of research conducted by Septalia (2010), which states that the level of education of individuals is one of the factors that will support their ability to receive information. Research conducted by Made in Rahmawati (2011), states that a low level of education can affect a person's ability to think. Likewise, age can affect a person's level of knowledge. The more age the higher the knowledge.

Clean and healthy living behaviors are behaviors related to a person's efforts or activities to maintain and improve their health (Notoatmodjo, 2007). Factors that influence clean and healthy living behavior include predisposing factors (knowledge, attitudes, beliefs, beliefs, values), supporting factors (available or unavailable health facilities or facilities), and driving factors (attitudes and behavior of health workers or other officers who are the reference group of community behavior). These factors interact directly and indirectly in shaping clean and healthy living behavior.

Research conducted by Septalia in a study conducted by Rahmawati (2011), states that counseling with the help of leaflet media can increase knowledge. Counseling involves listening, talking, and seeing activities that make the counseling method effective. Information received through print media, electronics, education/counseling, books, and so on will increase a person's knowledge so that he will usually improve or change his behavior for the better.

Green (1984), suggests that health status is influenced by behavior, while behavior itself is influenced by predisposing factors, one of which is knowledge (Rahmawati, 2011). Knowledge is the result of knowing and this occurs after people perceive a certain object (sense of sight, hearing, smell, taste, and sense of touch). Most human knowledge is obtained through the eyes and ears (Notoatmodjo, 2007). By providing counseling on efforts to prevent degenerative diseases in adolescents, adolescents can know what degenerative diseases are, their impact, and prevention efforts so that adolescents are motivated to reduce the risk of degenerative diseases by implementing healthy living behaviors in their daily activities (Ambarwati et al., 2014; Azwar, 2007; Budiarto, 2003; Susanto et al., 2016). This motivation will arise if adolescents look to the future and see that they have the opportunity to prevent the onset of degenerative diseases later and providing leaflets, utilizing existing social media as a form of degenerative disease prevention efforts is expected to increase information about degenerative diseases, so as to increase adolescent knowledge.

The conclusion of this discussion can be proven that providing counseling on efforts to prevent degenerative diseases can increase adolescent knowledge so that healthy living behavior can increase at SMAN 2 Karanganyar at a confidence level of 95%. The limitations of this study include the presence of confounding variables that cannot be controlled such as socio-economic level, customs, and respondents' beliefs, however, the authors hope that the increase in knowledge can also be followed by an increase in clean and healthy living behavior in a more positive direction (Wang et al., 2013; Nasiatin et al., 2021; Moore et al., 2016; Ruhm, 2005).

Conclusion

Efforts to increase clean and healthy living behavior in adolescents require counseling to adolescents, especially regarding various kinds of degenerative diseases and prevention efforts that must be done, getting access to information must be precise and fast in order to help students increase their knowledge and understanding of how to prevent and overcome degenerative diseases, especially among adolescents. Teenagers should be more active in seeking information about health through other media besides counseling and leaflets (print media), both from other print media such as newspapers, tabloids, magazines, and other electronic media such as television and radio. And for the Health Office, it is hoped that it can collaborate with the Puskesmas to further streamline counseling activities on degenerative diseases to high school students and the equivalent.

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