DESCRIPTION OF KNOWLEDGE OF HIV/AIDS BY THE ELEVENTH YEAR STUDENT OF SMAN 1 KUTALIMBARU DELI SERDANG DISTRICT 2014

Netty Panjaitan, Surita Br Ginting

Department of Nursing, Poltekkes Medan

ABSTRACT

This study is descriptive research by cross sectional design it is aimed to know the description of students knowledge of the eleventh grade of SMA (Senior High School) of HIV/AIDS. Independent variables are ages, gender and source of information which dependent variables are of students knowledge of the eleventh grade of SMA (Senior High School). The sample of this research is about 38 students. The result shows that good knowledge is about 16 students (42,1%), fair knowledge is about 13 students (34,2%) and lack of knowledge is 9 students (23,7%). Due to this research the respondents' knowledge of HIV/AIDS commonly is good but it is hoped that students especially the eleventh grade of SMA (Senior High School) sustain and increase their understanding of HIV/AIDS in order they are out of HIV/AIDS infection earlier.

Keywords: knowledge, immune deficiency, HIV/AIDS

References: 13 sources

1. The background

immunodeficiency Human virus infection and acquired immune and deficiency (HIV/AIDS) are spectrum of conditions caused by infection with the Human immunodeficiency virus (HIV). Following initial infection, a person may experience a brief period of influenza- like illness. This is typically followed by a prolonged period without symptom. As the infection progresses, it interferes more and more with immune system, making person much more susceptible to common infections like tuberculosis, as well as opportunistic infection and tumors that do not usually affect people who have working immune system.

Human Immunodefisiency Virus is transmitted primarily via unprotected sexual intercourse (including anal and oral sex), contaminated blood transfusions, hypodermic needles, and from mother to child during pregnancy, delivery, or breastfeeding. There is no cure or vaccine. A disease outbreak which is a present over a large in the world and is actively spreading. There are many misconception about HIV/AIDS, need health education

Since its discovery, AIDS has caused an estimated 36 million deaths worldwide as of 2012. And in 2013 it resulted in about 1.34

million deaths. As of 2012 approximately 35.3 million people are living with HIV globally.

The recording which has been held by World Health Organization (WHO) in the last few years show that the teenagers group which are very susceptible to HIV/AIDS. Uncommon HIV/AIDS also occurred in situation of North Sumatra, In the year of 2012, the amount of HIV case in North Sumatra were 3.573 cases. The highest case was dominated by the productive age of 20-29 years (47,8%), followed by the ages of 30-39 years (30,9%), and the group of ages 40-49 years (9,1%). Of this amount, 4.250 cases or 18.7% were dead... Knowing that incubation period of HIV/AIDS which is taken a long time, it is about 5-10 years, it can be realized that the group ages of, 15-19 years has been infected by HIV/AIDS, they are about teenagers (Indonesia Health Profile, 2012

2. The significance of the study

The significances of this study are generally as additional input and information to know the teenagers knowledge of HIV/AIDS so that it can be proposed to have service to the teenagers to realize the danger of HIV/AIDS earlier.

3. Research Method

This study is descriptive which object is to know the description of the eleventh year student of SMA N 1 Kutalimbaru Deli Serdang District knowledge of HIV/AIDS. The design applied is cross sectional at the same time.

4. The method of collecting data

Data collection which has been done in this study is by delivering the questioners, first the researcher introduced herself and explain the objective of the study, provide a letter of agreement as a respondent and give the questioner which should be filled by respondents and returned back to the researchers.

From this research which entitled "Description Of Knowledge Of HIV/AIDS By The Eleventh Year Student Of SMAN 1 Kutalimbaru Deli Serdang District found which has been analyzed and presented in the following table:

Table 4.1
Distribution Of Respondent's Frequency
Based On Age In SMAN 1 Kutalimbaru
Deli Serdang District 2014

Age	Frequence	Percent (%)
< 17	17	44,7
≥17	21	55,3
TOTAL	38	100

From table 4.1 it can be seen that the total respondents which ages <17 years are 17 students (44,7%) and ≥17 years are 21 students (55,3%).

Table 4.2
Distribution Of Respondents' Frequency
Due To Gender In SMAN 1 Kutalimbaru
Deli Serdang District 2014

Gender	Frequency	Percent (%)
male	13	34,2
female	25	65,8
TOTAL	38	100

From table 4.2 can be seen that total respondent who are male are 13 students (34,2%), female are 25 students (65,8%).

Table 4.3
Distribution of Respondents Based On
Source Of Information (SOI) In SMAN 1
Kutalimbaru Deli Serdang District 2014

SOI	Frequency	Percent %)
Electr.Media	6	15,8
Print Media	10	26,3
Medical staffs	22	57,9
TOTAL	38	100

From table 4.3 it can be seen that total respondent who get information from electronic media are 6 students (15,8%), print media are 10 students (26,3%) and medical staffs are 22 (57,9%).

Table 4.4
Distribution Respondent Frequency Based
On Knowledge In SMAN 1 Kutalimbaru
Deli Serdang District 2014

Knowledge	Frequency	Percent(%)
Good	16	42,1
Fair	13	34,2
Poor	9	23,7
TOTAL	38	100

From table 4.4 can be seen that respondent total who have good knowledge are 16 students (42,1%), fair knowledge are 13 students (34,2%) and poor of knowledge are 9 students (23,7%).

Table 4.5
Distribution of Frequency of Respondent knowledge about HIV/AIDS based on age in SMAN 1 Kutalimbaru, Deli Serdang District 2014

Ag	eKno	wledge						(0/)
	Goo	od	Fair		Poc	or	_l to t	a(%)
	F	(%)	F	(%)	F	(%)		
<17	7	7,9	6	15,8	4	10,5	17	44,7
≥17	9	23,7	7	18,4	5	13,2	21	55,3
To t	al 16	42,1	13	34,2	9	23,7	38	100

From table 4.5 it can be seen that respondent the age of <17 years found good knowledge are 7 students (18,5%), fair knowledge are 6 students (15,8%) and poor knowledge 4 students (10,5%).

While at the age of ≥ 17 years found good knowledge are 9 students (23,7%), fair knowledge are 7 students (18,4) and poor knowledge 5 students(13,2%).

Table 4.6
Distribution Of Frequency Of Respondents
Knowledge About HIV/AIDS Based On
Gender In SMAN 1 Kutalimbaru, Deli
Serdang District 2014

Gen	Knowledge						To	
der	Goo	od	Fair		Poo	Poor		(%)
	Tot	%	Tot	%	Tot	%		
Ma le	2	5,3	5	13,2	6	15,8	13	34,2
Fe ma	a 14	36,8	8	21,1	3	7,9	25	65,8
To ta	ıl 16	42,1	13	34,2	9	23,7	38	100

From table 4.6 it can be seen that respondent total can be seen respondent total of male found who have good knowledge are 2 students (5,3%), fair knowledge are 5 students (13,2%) and poor knowledge are 6 students (15,8%). While female found 14 students (36,8%) good knowledge, 8 students (21,1%) fair knowledge and 3 students (7,9%) poor knowledge.

Table 4.7 Distribution Of Frequency Of Respondent Knowledge About HIV/AIDS Based On Information Sources In SMAN 1 Kutalimbaru, Deli Serdang District 2014

mataminara, ben beraang bistrict 2011										
In	Knowledge							(%)		
For ma	Good		Fair		Poor		To tal			
Tion	Jlh	%	Jlh %		Jl h %					
Sour ces	JIII	/0	J 11	1						
Electronic	2	5,3	1							
Me dia	4	5,5	1	2,6	3	7,9	6	15,8		
Print	3	7,9	6	15,8	1	2,6	10	26,3		
Me dia										
Medical	11	28,9	6	15,8	5	13,2	22	57,9		
Staffs										
TO TAL	16	42,1	13	34,2	9	23,7	38	100		

From table 4.7 it can be seen that total who have information of respondent HIV/AIDS electronic media found good knowledge are 2 students (5,3%), fair 1 student (2,6%) and poor knowledge is knowledge are 3 students (7,9%). While those who have information of HIV/AIDS from print media found good knowledge are 3 students (7,9%), fair knowledge are 6 students (15,8%) and poor knowledge is 1 student (2,6%). Then those who have information of HIV/AIDS from medical staffs found good knowledge are 11 students (28,9%), have berpfair knowledge are 6 students (15,8%) and poor knowledge are 5 students (13,2%).

5. Discussion

5.1.Respondents of the age <17 years found have good knowledge about 7 students

(18,4%), fair knowledge 6 students (15,8%) and lack of knowledge 4 students (10,5%). While the ages of \geq 17 years found good knowledge 9 students (23,7%), fair knowledge is 7 students (18,4) and lack of knowledge 5 students (15,2%).

Age causes the character, at the age of above 17 years known as adult age which the ability and the way of thinking in learning, understanding and receiving the change easily, so it influences the knowledge. This findings are relevant Notoatmodjo's idea.

5.2. Respondents as male found 2 students (5,3%) they have good knowledge, having fair knowledge about 5 students (13,2%) and lack of knowledge is about 6 students (15,8%). While female found 14 students (36,8%) have good knowledge, 8 students (21,1%) fair knowledge 3 students (7,9%). Of the result of interview the researchers found the female knowledge is better than the male because female feel willing to know highly. There is the gab between theory which proposed by Cameron (2005), the research has been done on the knowledge of gender.

Female is better in counting, and more aggressive. While female have verbal language better than male or they usually do their emotion in facing the problems. The result show that have lack of knowledge they are 6 students (15,8%). It is caused by they are lack of active and they have lack willingness to know something.

5.3. Information sources of HIV/AIDS found from electronic media, print sources and health staffs. Of the third sources of information, media or other information source can influence the respondent knowledge to get

information of HIV/AIDS, that is by close friends with the respondents such as parents, teacher, friends and non government organization, Because the act of close friends can influence and imitate by other people.

From the result of the research it shows that the majority of respondents who have good knowledge who get the information of HIV/AIDS are from medical staffs about 11 students (28,9%).

Respondents who have lack of knowledge, they may be influenced by lack of knowledge to have information of HIV/AIDS which found by respondents. Information is needed to advance the knowledge of HIV/AIDS, in order the respondents realize the danger of HIV/AIDS earlier.

Good information can give influence of the change or the increasing of knowledge which is relevant with Notoatmodjo's idea, that is source of information influence knowledge if information of other people or other media

study is done by three assessments knowledge of respondents HIV/AIDS, the researchers devided into three categories they are, good, fair and poor. Based on the research it is found that the respondents who have good knowledge are dominant good knowledge they are 16 students (42,1%). Respondents who have good knowledge have less affected by HIV/AIDS, because the have known the HIV/AIDS and its preventive, while the respondents who have lack of knowledge have more influenced to have HIV/AIDS because of their understanding of HIV/AIDS.

6. Conclusion

Of the result of the study which entitled "description of the eleventh year student of SMAN 1 Kutalimbaru Deli Serdang District knowledge of HIV/AIDS in 2014" can be found the conclusion as follows:

- 1. Respondents who have good knowledge are the dominant they are at the age of ≥ 17 years, they are 23,7%.
- 2. Respondents who have good knowledge at female are 36,8%.
- 3. Respondents the good knowledge of HIV/AIDS are found from medical staffs they are 28,9%.
- 4. The description of respondents knowledge of HIV/AIDS, generally are good. Respondents who have good knowledge are 42,1%, fair knowledge are 34,2% and lack of knowledge are 23,7%.

7. Suggestions

- 7.1. It is hoped that the government (health and educational department) medical staffs/ and relevant institutions to advance the teenagers' knowledge by having service and good books of HIV/AIDS.
- 7.2. It is hoped that the parents to possess the knowledge of HIV/AIDS in order they can guide and teach their children at home.
- 7.3. It is hoped that non government organization (NGO) is active to advance the teenagers knowledge by having the service for the teenagers in their environments in order they are not infected by virus HIV/AIDS.

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