The Effect of Health Education on the Level of Knowledge About Stress Management Students of SMAN 5 Palangka Raya

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ABSTRACT
Stress is a condition or feeling experienced when people to think demands exceed the personal and social resources capable of someone deployed. Stress experienced by students known as academic stress. Stress Management are making changes way of thinking and feel, in a way of behaving. Health education is the effort made to provide knowledge as the basis for behavioral changes that can improve the health status of individuals, families, groups, and communities through learning activities. Objective: The purpose of this research to analyze the effect of health education on the level of knowledge about stress management students of SMA Negeri 5 Palangkaraya.

Methods: The research design used is Pre-Experimental i.e. using the one-group pre-post test design. Sample in this research was 47 respondents, the techniques used in sampling is Stratified Random Sampling. Data were analyzed by using Wilcoxon Signed Rank Test. Results: The results of analysis of education influence health on the level of knowledge about stress management showed a significant influence value 0.000 <0.05, H1 accepted meaning there effect on the level of education health knowledge about stress management students of SMA Negeri 5 Palangkaraya. There is Effect Against Health Education Knowledge Level findings showed influences of Knowledge Level on taxable income given health education. It is recommended for students to manage stress with good stress management.

INTRODUCTION
Stress is a topic of everyday conversation, but the ability to define and forecast stress remains unclear and every individual experiences it. Stress is a stressful situation themselves indivi childhood caused by non - balance between the capabilities of the existing demands [1]. Stress experienced by students is known as academic stress, according to Gadzella [2]. Academic stress is stress related to teaching and learning process. Health education is a form of intervention or effort aimed at behavior, so that the behavior is conducive to health [3]. Health education is oriented to the provision of information so as to increase one's knowledge. Knowledge is recognition, awareness, and understanding. Knowledge can also mean everything that the mind has observed and [4]. Stress management is making changes in
the way of thinking and feeling, in a manner of behaving, and quite possibly in the environment. Implementation of stress management in everyday life so students can prevent stress experienced so as not to arrive at the level of severe stress. The phenomenon that occurs in SMA Negeri - 5 Palangka Raya students do not understand how to manage or manage stress properly. This condition can also be bad because those who live in the dormitory who in their daily life only meet with friends and must adjust to the schedule set by the dormitory and sometimes appear disharmony between peers and older siblings for some reason that may be only because of trivial problems.

Based on studies conducted in developed countries, South Korea is becoming the country with the most unhappy children, the cause is due to the very high educational pressure in the country. A survey of more than 4,000 households with children younger than 18 found that the most relevant factors were academic stress, followed by school violence, Internet addiction, carelessness and cyber violence [5]. The increased stress on adolescents will affect their mental health. Reference [6] show the results of research conducted by in SMA Pasundan 2 Bandung showed there are 48.3% of students whose stress level is very high; 45% of students are in high category; 6.67% of students are in the medium category; and none of the learners (0%) are in low category and very low. The results of reference [7] show study on stress levels among female students of SMA Negeri 1 Padang Panjang in 2011 showed that most of the 109 people (75.7%) had moderate stress, some 35 people (24.3%) had stress mild, and no respondents who experienced severe stress levels. Based on preliminary survey conducted on March 21, 2016 at SMA Negeri 5 Palangkaraya, showed that students do not understand how to manage stress rather unexpectedly and after being tested using the instruments of Depression Anxiety Stress Scale 42 (DASS 42) shows for a stress scale of 2 people respondents experienced moderate stress level and 1 person experienced mild stress level from 10 respondents.

Being a student is not easy, because there will be many demands and school assignments to him, in addition to being a student also means being a hope for family and society. Demands and expectations that are too big can turn into a burden and stress for learners. Stress experienced by students is the result of subjective perception of the mismatch between the demands of the environment with the actual resources owned by students. Dense learning schedules sometimes bring stress to students because students feel tired and saturated due to a day of learning. This condition is added because students live in dormitories, where they must be good at sharing time in following all activities in the dormitory. Various factors that affect learners experiencing academic stress are derived from within, such as: the condition of the body is less healthy, sickly or there is a personal conflict that seizures (disturbs) the mind, and failure in achieving something to be desired; emerge from the family, for example: disharmony between members, authoritarian parents, financial problems or monthly stagnant let alone living away from parents, or loved ones loved to fall ill or die; and neighborhoods and surrounding communities, for example: other class noises during exams, or the loud pounding of music that pains the ears while we are resting, and the streets are jammed while driving to school. The impact of increased academic stress on the learners is in the form of decreased motivation to learn, the competence is not developed, not fulfilled passing standard set by the school and government that can ultimately reduce the quality of education. Impact of physical stress, learners look lethargic, not eager to follow the lesson, and will easily get sick. In line with statements by Kahn [8] academic stress can cause fear to go to school, late, or refuse to attend school (absent), the occurrence of cases where the child is looking for an excuse not to go to school, or go to school later without as parents are absent in school and spend their time outside school. In addition, stress can also lead to maladaptive behavior for learners in personal and social life. Strategies for managing stress are by worshiping, sleeping for at least 7 hours, Time Management, Budget Management, and doing the things you like according to his hobby.

The role of nurses in an effort to improve the health level is running activities in the field of promotive, preventive, curative, and rehabilitative. The phenomenon of stress among learners can be reduced by promotive and preventive measures. Promotive Effort is an activity undertaken to provide knowledge to the students about stress management so it is expected to help learners in reducing stress levels, whereas preventive or prevention efforts by a nurse in reducing stress levels of students is to help students face the symptoms of stress they experience namely by providing health education to
increase knowledge. It is expected that by providing health education about stress management students can reduce or reduce the stress level so that it is within the limits of tolerance or not until harm and negative impact for himself and the people around him. Therefore, researchers interested to examine about how the effect of health education to the level of knowledge about stress management in SMA Negeri - 5 Palangka Raya.

METHOD

The research design used was pre experimental research with One-group approach of pre-post test design that is kind of research which reveal causal relationship by involving one group of subject. This research was conducted in SMA Negeri - 5 Palangka Raya. Sampling of syringe in this study using random sampling with the subject of research amounted to 47 students SMA Negeri - 5 Palangka Raya. The research instrument used is a questionnaire in the form of double (only 1 correct answer) to be given to the research respondents. The questionnaire used contained of questions about stress management. This study uses a knowledge level questionnaire about stress management. The first stage of the questionnaire was given before the health education on stress management in the second stage of the questionnaire was given again to the same question after health education on stress management. Category of knowledge: Good: if a score of > 75% is obtained. Enough: if a score of 56% - 75% is obtained. Less: when a score of < 55%

RESULTS AND DISCUSSIONS

1. Characteristic Respondents by Ages
   Characteristics of respondent’s ages were obtained through questionnaires given to 47 respondents. The results are as follows:

   ![Bar Chart]

   Based on the above data it can be seen that from 47 respondents, as many as 12 respondents (26%) aged 14-15 years, as many as 35 respondents (74%) aged 16-18 years, and no respondents aged 19-20 years.

2. Characteristic Respondents by sex
   Characteristics of respondent’s sex were obtained through questionnaires given to 47 respondents. The results are as follows:
Based on the above data it can be seen that from 47 respondents, 26 respondents (55%) were male, and 21 respondents (45%) were female.

3. Characteristic Respondents by Had Received Information.

Characteristics of respondent’s had received information were obtained through questionnaires that given to 47 respondents. The results are as follows:

Based on the above data it can be seen that from 47 respondents, as many as 21 respondents (45%) had received information about stress management and as many as 26 respondents (55%) never get information about stress management.

4. Characteristic Respondents by Information Sources

Characteristics of respondent’s information sources were obtained through questionnaires given to 47 respondents. The results are as follows:

Based on the above data it can be seen that from 47 respondents who have received information, as many as 2 respondents (8%) got information from school, as many as 4 respondents (16%) got information from TV / Radio, as many as 3 respondents (12%) got information from Newspaper / Magazine, as many as 6 respondents (24%) got information from counseling, as many as 8 respondents (32%) got information from the internet, and 2 respondents (8%) got information from other.

5. Result of Identify Level Knowledge Before Given Health Education.
Data below show the result of identify level knowledge before given health education. Data obtained through questionnaires given to 47 respondents. The results are as follows:

![Pie chart showing the distribution of knowledge levels before health education.]

Based on the data above the level of knowledge before the given health education, students with less knowledge as much as 1 respondent (2%), knowledge level as much as 31 respondents (66%), and knowledge level as much as 15 respondents (32%), with 47 respondents.

6. Result of Identify Level Knowledge Before Given Health Education

Data below show the result of identify level knowledge after given health education. Data obtained through same questionnaires with before. The results are as follows:

![Pie chart showing the distribution of knowledge levels after health education.]

Based on the above data the level of knowledge after being given health education, students with knowledge level is enough as much as 3 respondents (6%), and knowledge level of 44 respondents (94%), with 47 respondents.

7. The Effect Of Health Education On The Level Of Students Knowledge About Stress Management

Data below show the result of the effect of health education on level knowledge. The results are as follows:

<table>
<thead>
<tr>
<th>Test Statistics</th>
<th>Post_Test - Pre_Test</th>
</tr>
</thead>
<tbody>
<tr>
<td>Z</td>
<td>-5.145*</td>
</tr>
<tr>
<td>Asymp. Sig. (2-tailed)</td>
<td>.000</td>
</tr>
</tbody>
</table>

Based on the results of the above data obtained Sig analysis results, (2-tailed) 0.000 which means less than p value 0.05, so significant <p value (0.000 <0.05) then H1 accepted means there is effect of Health Education on Stress Level Knowledge on Students of SMA Negeri - 5 Palangka Raya.

The results of statistical tests in this study indicate an increase in the level of knowledge of respondents at the time of pre-test (before getting health education) and post-test (after getting health education). This is indicated by the significant difference seen from the mean of pre-test and post-test at p-value = 0.000 (<0,05). So it can be concluded there is the influence of health education on the level of knowledge about stress management in SMA Negeri - 5 Palangka Raya. This proves that
health education about stress management is quite effective and efficient and give influence to increase the knowledge of student in a short time and according to existing theory, besides packing interesting material, delivery of material and language of delivery which is adjusted to education level, age of respondent influence to increase of respondent knowledge.

Increased knowledge of respondents in this study because of the provision of information, where therein the learning process. Learning process according to reference [9], can be interpreted as a process to increase knowledge, understanding, and skills that can be gained through experience or conduct studies (teaching and learning process). By studying the individual is expected to explore what is hidden in him by encouraging to think and develop his personality by freeing himself from his ignorance.

This study is also in line with research conducted by reference[10], which examines the effect of health education on the knowledge and attitude of high school adolescents X in preventing HIV / AIDS in Karanganyar District. This study indicates that there is a difference in the level of students' knowledge about HIV / AIDS prevention between before and after health education, as evidenced by Wilcoxon signed rank test, with pre-test and post-test results in experimental group p-value = <0.05 is 0.000 which means there is influence of health education to level of respondent knowledge.

According to Machfoedz, Health education is a process that includes the dimensions and intellectual, psychological, and social activities necessary to enhance the individual's ability to make decisions consciously and which affect the well-being of self, family and society. In general, the purpose of health education is to help individuals, families, and communities achieve an optimal level of health. Health education aims to change individual behavior. family, and society from unhealthy behaviors become healthy. Behavior that is inconsistent with health values becomes behavior that conforms to health values or and negative behavior to positive behavior. Education is a factor that affects a person's level of knowledge, which means the guidance that someone gives to others on something. In order for people to have a better understanding of the existence and changes of the system and how to use it efficiently and effectively. In order for people to learn what they can do for themselves and how, without always asking for help to the formal health care system. Health education affects the level of one's knowledge. Knowledge (knowledge) is the result of human sensing, or the result of knowing a person to the object through the senses he has (eyes, nose, ears, and so on). Factors that affect a person's level of knowledge, consisting of education, information or mass media, social, cultural and economic media, environment, experience, and age.

Education is a learning effort to the community so that the community will take actions (practices) to maintain (overcome the problems), and improve their health [9]. The changes or maintenance actions and health improvements generated by health educators are based on their knowledge and awareness through the learning process.

The results of this study are not in line with the reference [11] entitled the effect of health education on the level of adolescent knowledge about reproductive health in Islamic Junior High School Ciputat. The result of her research by using Wilcoxon test obtained Sig value. of 0.051 (p> 0.05). Thus it can be concluded that there is no significant difference in the students' knowledge between before and after intervention. Success in conveying information is determined by the nature and quality of information received and in this case is determined by the nature and quality of the information submitted by the researcher to the students. Other factors that may also affect the results of research is the perception, motivation and experience that according to reference [9] is a factor that affects one's knowledge. During the process of health education, SMA Negeri - 5 Palangka Raya students followed well, when the researchers gave their material a good listening and very enthusiastic answer when occasionally given a question by the researcher who delivered the material about stress management. Respondents' demographic data based on information sources has shown that most students have been informed about stress management from various sources such as from School, TV or Radio, Newspapers or Magazines, Counseling, Internet, Others. Most students get a source of information about stress management from the internet and counseling. This is in line with the opinion according
to Notoatmodjo, that the level of knowledge is influenced by several factors, one of which is experience. The experience in question is the presence of exposure to information obtained by individuals both in formal and non-formal activities that resulted in a memory[12]. Based on the description above, there is the influence of health education on the level of students' knowledge about stress management. The existence of the influence of the education of kesetahan to the level of knowledge due to the good cooperation between researchers and respondents, when researchers provide health education about stress management, respondents follow very well and no respondents are not cooperative during the activity.

CONCLUSION AND SUGGESTION

Before being given general health education students' knowledge is in enough categories. This is because respondents have heard or read about stress management from several sources such as TV, Magazine or Newspaper, Internet, and counseling. After being given health education the students' knowledge level is in the good category. This is because the respondents followed well the health education activities about stress management and also actively ask questions. From result of data analysis, there is show the effect of health education to level of knowledge about stress management of student at SMA Negeri - 5 Palangka Raya.

REFERENCES


