



ESTABLISHMENT OF YOUTH HEALTHY PACKAGE FACILITATOR TO INCREASE HEALTH KNOWLEDGE AND EMPOWERMENT DURING COVID-19 PANDEMIC

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Abstract, Background: Problems in adolescents including physical, psychological, and social problems increase every year. Problems that occur include problems with premenstrual syndrome (PMS), bullying problems, problems in hygiene and healthy living habits. the Covid-19 pandemic has occurred which has caused illness and death. This problem occurs in everyone, including adolescents. The Implementation of youth health packages facilitator was importantly implemented to increase health knowledge and empowerment during the Covid-19 Pandemic.

Methods: A descriptive study of community service activities. Partners have consisted of 48 junior high school students and 50 senior high school students in Lembang City Bandung, West Jawa. The activity consists of fourteen activities during the two-semester.

Results: There is an increase in knowledge about PMS, PHBS, and bullying, especially during the Covid-19 pandemic through the formation of facilitators for youth health packages, Availability of family medicinal plant gardens for the empowerment of school, and establishment of a healthy environment, especially during the Covid-19 pandemic.

Keywords: Facilitator, youth healthy package, Covid-19 pandemic

Introduction

The transition period in the life period is adolescence. Many adolescents are not able to adjust themselves so that problems that have a big impact on adolescent life arise. Problems in adolescents including physical, psychological, and social problems increase every year. (1) Problems that occur include problems with premenstrual syndrome (PMS) and problems in hygiene and healthy living habits, especially during the Covid-19 Pandemic and bullying problems.

Premenstrual syndrome (PMS) often occurs in teenage girls. Menstruation can be irregular, heavy, and or painful, especially in the first few years after menarche. 75% of women of reproductive age are affected, premenstrual

symptoms are very common, ranging from emotional and cognitive to physical symptoms. (2) Premenstrual syndrome PMS consists of emotional and physical symptoms as well as functional impairment following premenstrual symptoms. Women with PMS respond differently to normal hormonal fluctuations. This susceptibility may involve the serotonin system, altered sensitivity of the GABAA receptor to the neurosteroid allopregnanolone, and changes in brain circuits involving emotional and cognitive function. Women with severe PMS had a higher prevalence of personality disorders ($p = 0.003$) than women without symptoms (27 % versus 0%) and were more likely to have personality disorder traits of odd-eccentric, dramatic-erratic, and anxious-timid ($p < 0.05$). (3)

Many factors can influence PMS including physical activity, nutrition, massage, and other factors. (4) Physical activity factors such as exercise can relieve PMS. Physical activity can increase endorphins, reduce estrogen and other steroid hormones, increase oxygen transport in muscles, reduce cortisol levels and improve psychologically. Based on the results of the study, there was a relationship between risk factors, namely sports activity ($p = 0.002$) and the incidence of premenstrual syndrome. (5) Nutritional factors or food intake can also affect PMS, for example, calcium and ginger intake in the form of ginger milk. Calcium can affect mood and behavior during menstrual syndrome. Research also said that giving calcium was shown to significantly result in a 50% reduction in symptoms of premenstrual syndrome. Research states that giving red ginger extract has the effect of reducing the intensity and duration felt by sufferers. (6)

Teenagers also experience psychological health problems, namely bullying. The prevalence of bullying is estimated to be 8% to 50% in several Asian, American, and European countries. In Indonesia, there are still little data that explain the incidence of bullying in schools, especially those occurring in elementary school children. In Indonesia today states that 3.8% of elementary school students experience bullying. (7)

Bullying is the deliberate and repeated abuse of power by a child or more against another child, intending to hurt or cause feelings of stress/stress. Most people consider this behavior to be a common phenomenon in schools. Even though this behavior can cause problems for children. Bullying does not only affect victims, but also the perpetrators themselves. Several research results indicate that bullying is a serious problem that occurs in children. The results of a survey conducted by C.S.Mott Children's Hospital National found that bullying is one of the top 10 worrisome health problems. The results of the research show that bullying has an impact on the perpetrator, the bullying at the elementary level will show violent behavior at the next level of education; perpetrators tend to behave aggressively and engage in gangs and other delinquent activities; perpetrators are vulnerable to being involved in criminal cases when they are teenagers. (8)

Research showed that bullying prevention program interventions were effective in reducing bullying and violent behavior. So far, prevention programs aimed at teachers, parents, and children (both perpetrators, victims, and witnesses, have been developed by the government and other parties that support the protection of children's rights. The program is made in the form of books

and articles that are easily accessible. but these programs seem to just broadcast, because the perpetrators of bullying continue to increase. It is important to provide bullying prevention interventions through education provided to students. Socialization is given in the form of education through small group discussions using modules that are expected to change the knowledge of students in preventing bullying at school. (9) The results show there is an effect of psycho education on changes in anxiety decrease. (9)

One part of this Clean and healthy living behavior is a healthy lifestyle in school, which is a set of behaviors that are practiced by students, teachers, and the community, the school environment must have awareness as a result. The results show that there is an effect of health education on students' knowledge and attitudes towards clean and healthy living behavior in students ($p = 0.000$). (10) A clean and healthy lifestyle is very important for adolescents to do because, since 2019, the Covid-19 pandemic has occurred which has caused illness and death. The World Health Organization (WHO) declared the novel coronavirus disease 2019 (COVID-19) as a public health emergency or international pandemic. This problem occurs in everyone, including adolescents.

The Implementation of the Youth Health Packages facilitator was important to implement to health knowledge and empowerment during the Covid-19 Pandemic.

Methodology

A descriptive study of the establishment of an online Healthy Package through online media. The sample consisted of 48 junior high school students and 50 high school students in Lembang City Bandung.

The solution offered to partners in the transfer of science and technology in the form of providing youth health packages by forming youth health package facilitators or youth ambassadors and mentoring youth health package facilitators.

The details have collaborated with the head of the health center and school principals to carry out activities. Cooperation with the Health Center is in the form of granting activity permits, requests for health workers for assistance, and submission of activity reports so that the puskesmas can follow up. Socialization of activities in partner 1 and partner 2, Socialization or training of youth health package facilitators. Assistance during the implementation of the youth health package program

The formation of package facilitators is carried out through online media, namely WA Group, Zoom, and Youtube. The socialization material for the formation of a healthy package facilitator for teenagers is being given Premenstrual syndrome, adolescent reproductive health problems, the description of the Covid 19 pandemic, the application of clean and healthy

Results and Discussion

After implementing the establishment of an online Healthy Package facilitator, The result is:

1. There is an increase before and after the implementation of youth facilitator formation activities regarding the healthy package.

The result is shown in the following table:

Table 1. Description of youth knowledge on establishment of Healthy Package facilitator

Category	Pre Test Score	Post Test Score	Increase
Group 1 (Junior High School)			
a. Mean	5.77	6.91	1.14
b. Range	2-8	4-10	
Group 2 (Senior High School)			
a. Mean	6.04	7.32	1.28
b. Range	4-8	4-10	

Based on table 1.1 there is an increase before and after the implementation of youth facilitator formation activities regarding the healthy package for adolescents with an increase in the score of 1.14 in group 1 and an increase in the score of 1.28 in group 2. This result is by the results research showing that there is an effect of health education on student knowledge ($p = 0.000$). (10) The research shows that there is an effect of health education on changes in knowledge and attitudes in healthy behavior. A holistic bullying intervention program/guide in schools, using a school bullying prevention intervention approach that is socialized. One part of this program is to provide knowledge about the concept of bullying to students. This socialization can increase students' knowledge about bullying.(11)

Problems in adolescents including physical, psychological, and social problems increase every year. Problems that occur include problems with premenstrual syndrome (PMS) and problems in

living behavior in the Covid-19 Pandemic, the concept of bullying, and the application of bullying in the era pandemic, the practice of maintaining a clean environment, making herb garden, the practice of making ginger milk, the practice of gymnastics, the practice of massage effleurage. Before and after the socialization, the measurement was done using a questionnaire. hygiene and healthy living habits, and problems with bullying. It is hoped that the activity of forming adolescent health facilitators can continue to be improved by the school so that the health of adolescents can always be maintained, both physically, psychologically, and environmentally.

2. Availability of family medicinal plant gardens for youth empowerment.

During the Covid-19 pandemic, environmental resilience is needed that supports public health. In this community service activity students have been trained to make compost and given toga plants that can be cultivated. Partners have also been provided with the knowledge to make ginger milk so that partners can process the products of the toga garden in addition to being able to sell the plants.

Family medicinal plants (TOGA) are one of the people's choices for planted in the yard, with the consideration that it can be used for health. Medicinal plants can be used as safe drugs, do not contain chemicals, are cheap, and are easy to obtain. To deceive and encourage the active role of the community in efforts to develop traditional health directing people to be able to carry out health care independently and properly through the use of medicinal plants as traditional medicines in the form of herbs, Standardized Herbs (OHT), and phytopharmaca. And the use of traditional medicine as an effort for health maintenance, disease prevention, and treatment health, including during public health emergencies and/or disasters National Corona Virus Disease 2019 (COVID 19).

3. The establishment of a healthy environment, especially during the Covid-19 pandemic.

During the pandemic, socialization about the covid-19 pandemic was carried out to students so that students could maintain a healthy environment. In addition, masks are given as a stimulant so that partners always maintain the PHBS pattern during the Covid-19 pandemic.

Conclusion

There is an increase in knowledge about adolescent health through the formation of an online youth health package facilitator. There is an empowerment of youth facilitators with the Availability of toga gardens and The establishment of a healthy environment during the Covid-19 pandemic.

The Implementation of the Youth Health Packages facilitator was important to implement to increase adolescent knowledge about their health.

References

1. Reuveni. Emotional regulation difficulties and premenstrual symptoms among Israeli students. *Emot Regul difficulties premenstrual symptoms among Isr students*. 2016;19(6):1063–1070.
2. Acikgoz A, Dayi A, Binbay T. Prevalence of premenstrual syndrome and its relationship to depressive symptoms in first-year university students. *Saudi Med J*. 2017;38(11):1125–31.
3. Lanza Teresa. Pre-Menstrual Dysphoric Disorder. *Med Clin North Am*. 2019;103(4):613–28.
4. Azima. Create account Sign-in Comparison of the Effect of Massage Therapy and Isometric Exercises on Primary Dysmenorrhea: A Randomized Controlled Clinical Trial. *J Pediatr Adolesc*. 2015;28(6).
5. Rizka S. Hermawati. Rachmawati. Faktor-Faktor Resiko Kejadian Premenstrual Syndrome Pada Remaja Sma Darul Hijrah Puteri. *J keperawatan dan Kesehat*. 2016;4(2).
6. Benzie. *Herbal Medicine: An Introduction to Its History, Usage, Regulation, Current Trends, and Research Needs*. Prancis: Taylor and Francis Grup.; 2011.
7. Khairani A. Modul program pendidikan: Pencegahan perilaku bullying di sekolah dasar. Universitas Indonesia; 2006.
8. Nissa A. Effect Social Control on bullying behavior. *Kriminologi Indones J*. 2009;5(9):56–66.
9. Evans CBR, Fraser MW, Cotter KL. The effectiveness of school-based bullying prevention programs: A systematic review. *Aggress Violent Behav*. 2014;19(5):532–44.
10. Umiziah LD. Pengaruh Pendidikan Kesehatan Terhadap Pengetahuan Dan Sikap Tentang Perilaku Hidup Bersih Dan Sehat (Phbs) Pada Siswa Smp Muhammadiyah 1 Kartasura. 2016; Available from: http://eprints.ums.ac.id/42020/1/NASKAH_PUBLIKASI.pdf
11. Rigby. Bullying in School: Addressing Desire Not Only Behaviors. *Educ Psychol Rev*. 2012;24(2).