

THE CORRELATION BETWEEN KNOWLEDGE AND FAMILY SUPPORT ABOUT SECONDARY PHYSICAL CHANGES IN PUBERTY WITH SELF-CONCEPT IN ADOLESCENT WOMEN AGED 13-15 YEARS AT MTSN 9 JOMBANG

Nurul Agustin¹, Ambar Asnaningsih²

^{1,2}Diploma of Nursing, Akademi Keperawatan Kosgoro Mojokerto, Indonesia

ABSTRACT

The physical development of adolescents that is so prominent and not the same for everyone causes anxiety about their physical development it will also affect their self-concept. Lack of knowledge and family support will make adolescent self-concept more negative. The purpose of this study was to determine the relationship between knowledge and family support regarding secondary physical changes during puberty and self-concept in young women aged 13-15. The research design used is correlational research. The population studied was young women aged 13-15 years at MTSN 9 Jombang in 2022 using a purposive sampling technique to obtain a sample of 56 female students. The research instrument used was a questionnaire sheet. The results of the study were then analyzed using the contingency coefficient. The results of the knowledge research showed that most of them had less knowledge, namely 31 respondents (55.4%). The results of the research on family support show that most of them provide less support, namely as many as 32 respondents (57.1%). The results of self-concept research showed that most of the respondents' self-concept was negative, namely as many as 37 respondents (66.1%). The results of statistical tests using the contingency coefficient test show a significance level of 0.000 and $0.000 < \alpha (0.05)$, meaning that there is a relationship between knowledge and family support about secondary physical changes during puberty with self-concept in young women aged 13-15 years at MTSN 9 Jombang in 2022.

Keywords: Knowledge, family support, puberty



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INTRODUCTION

Self-concept develops gradually starting from a baby who can recognize and distinguish others and continues to develop into old age. Self-concept is learned through each individual's personal experience, relationships with other people, and interactions with the world

outside himself. Self-concept consists of self-image (body image), self-ideal (self-ideal), self-esteem (self-esteem), role (self-role), and self-identity (self-identity).¹

Adolescence is a critical time when many things continuously influence self-concept. When someone enters their youth level, teenagers experience so many

changes in themselves. Therefore it is understandable that the self-concept of a teenager tends to be inconsistent and this is because the attitudes of other people perceived by adolescents also change. But in this way, adolescents experience a self-concept development until they finally have a consistent self-concept (Gunarsa 2008, p.236). WHO defines youth as a child who has reached the age of 10-19 years. Adolescence is divided into 3, namely: early adolescence (10-13 years), middle (14-16 years), and late (17-19 years).¹⁻²

Physical changes in adolescents are biological changes that are characterized by the maturity of the primary and secondary sex organs, and these conditions are influenced by the maturity of sexual hormones (Herawati Mansur, 2009). The physical development of adolescents who are so prominent and not the same for everyone causes anxiety about their physical development it will also affect their self-concept.³

Regarding the self-concept possessed by a person, Calhoun and Acocella (1990) suggested several conditions that affect self-concept in adolescence, namely: age of maturity, knowledge, family support, peers, and aspirations.¹

Poor self-concept will result in a feeling of insecurity, not daring to try new things, not daring to try challenging things, fear of failure, fear of success, feeling stupid, low self-esteem, feeling worthless, feeling unworthy of success, pessimistic, and much other inferior behavior.¹⁻³

One of the efforts to prevent negative self-concepts in adolescents is family support. It would be better if family members also helped adolescents talk about the emotions they felt so that various problems in adolescents related to inculcating self-concepts could be resolved. Knowledge about physical changes will also be useful to be given to adolescents. Therefore, teachers, parents, and nurses can provide appropriate information in preparation for entering puberty in adolescents.¹⁻³

Based on the background that has been described, the researcher is interested in research to find out the relationship between knowledge and family support regarding secondary physical changes during puberty and self-concept in young women aged 13-15 years at MTSN 9 Jombang.

MATERIAL AND METHOD

The research design used was correlation analytic with a cross-sectional design because the independent and dependent variables were measured at the same time. The research was conducted at MTSN 9 Jombang, Diwek District, Jombang, East Java. In this study, the sample was taken using a purposive sampling technique and obtained a sample of 56 female students.^{4,5}

RESULT

Distribution of general data frequency of respondents based on age obtained data that the age characteristics of the respondents indicate almost half as old 13 years , namely as many as 24 respondents (42.9 %). Frequency distribution of general data of respondents based on previous information regarding physical changes obtained data that characteristic information regarding physical changes the secondary period of puberty shows that almost half of the respondents have never known , namely as many as 21 respondents (37.5 %).

Frequency distribution of respondents' knowledge about secondary physical changes during puberty data obtained that the respondents' knowledge about secondary physical changes during

puberty showed that most of them had less knowledge, namely as many as 31 respondents (55.4 %). In the frequency distribution of family support for respondents regarding physical changes during puberty, it was found that family support for secondary physical changes during puberty was mostly lacking, namely 32 respondents (57.2%). The frequency distribution of female adolescent self-concept regarding secondary physical changes during puberty was obtained from data that self-concept in young women aged 13-15 years regarding secondary physical changes during puberty shows that most of their self-concepts are negative , namely as many as 37 respondents (66.1 %).

No	Self concept	Positive		Negative		Total	
		f	%	f	%	f	%
1.	Well	11	19,6	0	0	11	19,6
2.	Enough	5	8,9	9	16,1	14	25
3.	Not enough	3	5,4	28	50	31	55,4
Total		19	33,9	37	66,1	56	100

p-value = 0,001

The results of cross-tabulation of the correlation between knowledge about secondary physical changes during puberty and self-concept in young women aged 13-15 years at MTSN 9 Jombang showed that half of the respondents had insufficient knowledge and a negative self-concept , as many as 28 respondents (50 %). *Contingency coefficient* test results

shows the results p value = 0.000 or less than $\alpha = 0.05$ which means that H_0 is rejected and H_1 is accepted, meaning that there is a relationship between knowledge about secondary physical changes during puberty and self-concept in young women aged 13-15 years at MTSN 9 Jombang.

The results of cross-tabulation of the correlation between family support regarding secondary physical changes during puberty and self-concept in young women aged 13-15 years at MTSN 9 Jombang showed that most of the respondents had insufficient family support and negative self-concept, namely 31 respondents (55.3 %). *Contingency coefficient* test results shows the results of p value = 0.000 or less than $\alpha = 0.05$ which means that H_0 is rejected and H_1 is accepted, meaning that there is a relationship between family support about secondary physical changes during puberty with self-concept in young women aged 13-15 years at MTSN 9 Jombang.

Knowledge variable about physical changes during puberty shows p -value $0.001 < \alpha (0.05)$, thus H_0 rejected and H_1 accepted, which means there is a correlation between knowledge of secondary physical changes during puberty and self-concept in young women aged 13-15 years at MTSN 9

Jombang. The results of the beta exponential analysis show that $OR = 3,681$ means that the variable good knowledge has 3.6 times the possibility of influencing the self-concept of young women when compared to sufficient knowledge.

Variable family support about the physical changes of puberty indicates p . value $0.005 < \alpha (0.05)$, thus H_0 rejected and H_1 accepted, which means there is a relationship between family support

No	Self concept Family support	Positive		Negative		Total	
		f	%	f	%	f	%
1.	Well	6	10,7	0	0	6	10,7
2.	Enough	12	21,4	6	10,7	18	32,1
3.	Not enough	1	1,8	31	55,3	32	57,1
Total		19	33,9	37	66,1	56	100

p-value = 0.005

regarding secondary physical changes during puberty and self-concept in young women aged 13-15 years at MTSN 9 Jombang. The results of the beta exponential analysis show that $OR = 11.477$ means that the variable good family support has 11.4 times the possibility of influencing the self-concept of young women when compared to adequate family support.

DISCUSSION

Knowledge is considered to influence self-concept because someone who has knowledge and intellectual

ability will be able to increase ability and self-confidence. Improving self-ability will help the individual a lot. Family support, especially parental support, is needed to communicate openly and provide a correct and clear understanding of what happens to children when they enter their teenage years. Support from parents and the environment will be information material for children to assess who they are. Therefore, often children who grow up and are raised in wrong and negative parenting or a less supportive environment tend to have a negative self-concept. So, children judge themselves based on what is experienced and what is obtained from the environment. If the environment provides a good and positive attitude, then the child will feel that he is valuable enough, so a positive self-concept grows.⁶

The results showed that there was a relationship between knowledge and family support regarding physical changes secondary to puberty and self-concept in young women aged 13-15 years. The lack of knowledge of the respondents affected their self-concept of the respondents. This has an impact on the respondent's lack of confidence in accepting the physical changes that occur within him. Lack of family support causes the respondent to have a negative self-concept because the

respondent feels that his family does not care about his condition, including the physical changes that occur to him. This situation causes the respondent to feel less confident about the physical changes that occur to him.⁶⁻⁷

Knowledge is considered to influence self-concept because someone who has knowledge and intellectual ability will be able to increase ability and self-confidence. Improving self-ability will help the individual a lot (Nala, 2013). Family support, especially parental support, is needed to communicate openly and provide a correct and clear understanding of what happens to children when they enter their teenage years. Support from parents and the environment will be information material for children to assess who they are. Therefore, often children who grow up and are raised in wrong and negative parenting or a less supportive environment tend to have a negative self-concept. So, children judge themselves based on what is experienced and what is obtained from the environment. If the environment provides a good and positive attitude, then the child will feel that he is valuable enough, so a positive self-concept grows.⁷

The results showed that family support has a greater influence than knowledge on self-concept. Thus the

respondent's negative self-concept is easier to eliminate if the family provides support. Knowledge is not a factor/variable that gives greater influence because knowledge is not able to eliminate the respondent's negative assessment of the physical changes that occur in him as well as family support. Support is a form of attention that is manifested either by providing facilities or by mentoring and is manifested either by providing facilities or by continuous assistance and attention.⁸⁻⁹

This causes the respondent to feel emotionally helped and get encouragement so that they can eliminate negative self-concepts towards themselves which have an impact on self-doubt and lack of acceptance of the physical changes they experience. In contrast to knowledge even though the respondent knows and understands the physical changes during puberty but this knowledge is not able to strengthen them mentally and emotionally until they can eliminate the negative self-concept towards themselves. It takes encouragement and support from the family Mainly parental support. This is what causes family support to be the most influential factor in the respondent's self-concept.⁹⁻¹⁰

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