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Date : 09th June, 2017

NOTIFICATION OF ABSTRACT ACCEPTANCE ICOPH 2017 - A - 669

Dear Herawati L,

Congratulations on the acceptance of your abstract for oral presentation and thank you for your interest in the 3rd International Conference on Public Health (ICOPH 2017). On behalf of the Conference Organizing Committee, I would like to formally invite you to attend the 3rd International Conference on Public Health 2017 to present your paper in Kuala Lumpur, Malaysia from 27th – 29th July, 2017. The conference is being hosted by Taylor's University and Mahsa University, Malaysia. It will be organized by The International Institute of Knowledge Management (TIKM) in collaboration with University of Sri Jayewardenepura, Sri Lanka, Sikkim Manipal Institute of Medical Sciences of India, Monash University of Malaysia and International Institute of Health Management Research of India.

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We look forward to meeting you at the conference.

Yours sincerely,



Isanka P. Gamage
Convener ICOPH 2017

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CONFERENCE SCHEDULE BOOK



3RD INTERNATIONAL CONFERENCE ON PUBLIC HEALTH

27th - 29th July 2017

Kuala Lumpur, Malaysia



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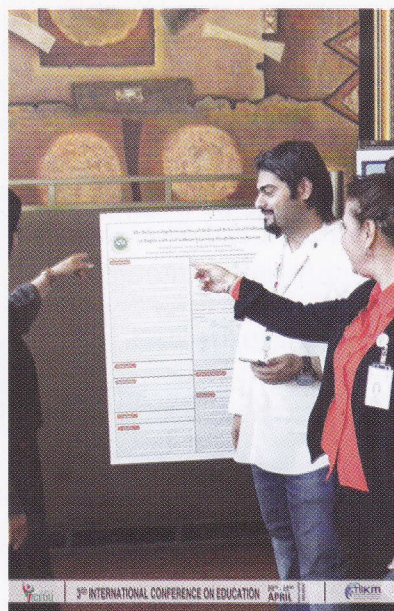
DAY 02

Friday, 28th July, 2017

Coming up in line as Special Features: -

-Poster Session 

-Students' Gathering



✓

Book of Abstracts
The 3rd International Conference on Public Health
(ICOPH 2017)

27th, 28th & 29th July 2017

Kuala Lumpur, Malaysia

Committee of the ICOPH - 2017

The International Institute of Knowledge Management (TIKM)

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KNOWLEDGE AND SKILLS OF YOUNG ADOLESCENTS TO REFUSE SUBSTANCES

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Introduction

The substance users were young adolescent (5.35%). Although the percentage of substance user in young adolescent is relatively small when compared with smokers (69.15%) and alcohol users (13.48%), but the danger for young adolescent is more serious than the other two behaviors. The Indonesian National Narcotics Agency (BNN) data show an increase for substance users: 2.6 million people (2008); 4.7 million people (2013); 5.1 million people (2015). Substance effects deteriorate one's health physically, mentally and emotionally

Indonesian Ministry of Health Degree Act number. 1529/MoH/SK/X/2010 stated: 31 behaviors that should be practiced in rural communities and active alert district known as Clean and Healthy Lifestyle Behavior (PHBS). The number 26: "no smoking, drinking liquor (alcohol), inhaling opium and misusing substance and other hazardous substances"

The Indonesian National Narcotics Agency efforts at provincial level has been forming anti-substance volunteer cadres at various local universities. The Indonesian National Narcotics Agency at municipal/district level, has also conducted activities such as counseling to students and teachers in junior and senior high schools. However, how the students' knowledge and skills to refuse substances have been unknown until now.

Results

Table 1. Respondents Characteristics by Gender, Age, and Origin

Characteristics	Y City		S District		Total	
	Frequency	%	Frequency	%	Frequency	%
Gender						
Male	66	44.6	76	50.0	142	47.3
Female	82	55.4	76	50.0	158	52.7
Age						
12 years old	24	16.2	17	8.2	41	13.7
13 years old	104	70.3	111	73.0	215	71.7
14 years old	19	12.8	22	14.5	41	13.7
15 years old	1	7.0	2	1.3	3	1.0
Average	12.98		13.06		13.02	
SD	0.565		0.555		0.560	
Total	148	49.33	152	50.66	300	100

SD= Standard Deviation

Table 2. Knowledge and Skills to Refuse Substance Based on Respondents Characteristics and Origin

Variable	Knowledge		Skills to Refuse Substances	
	Average	SD	Average	SD
Gender:				
Male (n=142)	65.14	17.96	55.84	16.57
Female (n=158)	67.51	12.01	55.42	16.47
Age:				
12 years old (n=41)	63.82	17.44	56.10	17.53
13 years old (n=215)	66.90	17.46	55.29	17.53
14 years old (n=41)	66.67	17.48	56.41	12.35
15 years old (n=3)	61.11	25.45	61.90	21.82
Origin:				
Y City	69.03	16.03	59.36	12.43
S District	63.82	18.47	51.97	19.00
Total (n=300)	66.39	17.48	55.62	16.49

Discussion

Knowledge of substances: relatively low with an average score of 66.39.

This score was still higher than the young adolescent' knowledge about smoking score in Jayapura, Papua : 60.81. Although the substance of the two studies was different, but both included toxic materials, causing addictive, and widely known among young adolescent. Even reference stated that smoking was the gateway to the use of alcohol and substances.

The subject criteria of the two studies were the same, but they were conducted in different location. The substance research was conducted in Yogyakarta Special Province (Y City and S District), known as the city of students in Indonesia. The smoking study was conducted in Jayapura, Papua Province, known as the people with drinking alcohol habit. Thus, the user behaviors of these harmful substances (smoking, alcohol, substances) tend to be influenced by the culture or customs of local communities

Statistical analysis showed that there was a significant relationship between substances knowledge and skill to refuse substances. This condition could be explained by LW Green which stated that behavior was influenced by predisposing factors (such as knowledge), in addition to two other factors, namely enabling factor (factor predisposing) and reinforcing factor (factor support) Related to gender: Female respondents on substances knowledge were better than male, but the skills to refuse the substances offer were just as good on both gender. In general, gender relates to substances as substance-use component (cigarettes, alcohol, and substances), there is various research with various results.

In the term of age: There was no relationship between the two variables, substance knowledge, and skills to refuse substances offer, with age. There was a tendency that the skills to refuse substances score increasing whiles the person getting older. This study followed Bar's recommendation that substances prevention should be carried out at early age, since age was one of the significant internal determinant factor

Objective

To describe the knowledge of adolescents about substances, to describe the teenager's action to refuse substances, to determine the relationship between young adolescent knowledge about substances and action refuse it, and find out the relationship between knowledge, skills to refuse substances and the teenager's characteristics.

Method

Place: Y city and S district, Yogyakarta province

Time: June-August 2015

Population: 2530 students of grade 7 derived from 71 schools in two areas. (selected randomly using proportional random sampling)

Samples: 300 students were selected. The subject was aged 12-15 years old, in grade 7 to 12 Junior High School (148 students from 6 Junior high schools in Y city; 152 students from 6 Junior high schools in S district)

Knowledge of substances was assessed by the ability of young adolescent to answer six items of questions about the notion of substances; the type; content; its effects on health. (The test validity expressed by 0.719, Cronbach's Alpha value)

Skills to refuse the substance offer was the ability of respondents to choose the correct action on 7 cases items of various forms of substance offer, packaged in a test. (The test validity expressed by 0.702 Cronbach's Alpha value)

Data obtained was analyzed using Pearson correlation and Spearman rho, with 0.05 significant levels.

Table 3. Relationship between Respondents' Knowledge, Skills to Refuse Substances and Origin

Origin	Substance Knowledge Score	Correlation Coefficient*	Skills to Refuse Substances Score
Y city (n=148)		Sig (2-tailed)	0.209 0.011 [†]
S District (n=152)		Sig (2-tailed)	0.182 0.025 [†]
Y city and S District (n=300)		Sig (2-tailed)	0.217 0.001 [†]

* Spearman Correlation Test (Nonparametric Test), † Pearson Correlation Test (Parametric Test)

[†] significant at the 0.01 level (2-tailed)

Table 4. Relationship between Respondents Characteristic, Knowledge and Skills to Refuse Substances

Variables	Statistic Analyzes*	
	Coef Correlation	Sig (2 tailed)
Gender		
Substances Knowledge	0.068	0.243
Skills to Refuse substances	-0.001	0.991
Age		
Substances Knowledge	0.042	0.469
Skills to Refuse substances	0.028	0.624
Knowledge- Skills to Refuse Substances	0.213	0.001 [†]

* Nonparametric Correlations Test, † significant at the 0.01 level (2-tailed)

Conclusion

- Young adolescent' knowledge about substances and skills to refuse the substances offer still needed to be improved
- There was a significant relationship between substance knowledge and skills to refuse the offer
- Young adolescent' knowledge about substances is slightly higher among female compared to male, but skills to refuse the offer had almost the same result in both genders
- Skills to refuse substances tend to increase in accordance with age, but there is no significant relationship between knowledge and skills to refuse substances offer in different gender and age
- Young adolescent' substance knowledge and skills to refuse the substance offer in Y city are higher than S district, and there was a significant relationship between substance knowledge and skills to refuse the substance offer to the location (urban and suburban)

Suggestion

The result of this research can be used as an input to Health Promotion program at Indonesian Ministry of Health, particularly young adolescent aged 12-15 years, or equivalent to junior high school students, to improve their prevention behavior against substance use, so that their score in substances knowledge and skills to refuse the substance offer increased

Acknowledgment

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- Ethics having been approved by Ethics Committee Faculty of Medicine, Muhammadiyah University, Yogyakarta

1. Metanorani, F. Pola perilaku Merokok Anak Jalanan Kota Semarang. Semarang: Universitas Muhammadiyah Semarang. 2013
2. Nasional, B.N. Pencegahan Penyalahgunaan Narkoba. Jakarta: Badan Narkotika Nasional Pusat Pencegahan Lakhari, 2009.
3. Kesehatan K. Penyalahgunaan Narkoba. Jakarta: Badan Narkotika Nasional Pusat Pencegahan Lakhari, 2009.
4. Notoadmodjo, S. Metodologi Penelitian Kesehatan. Jakarta: Rineka Cipta, 2005
5. Monks, F., Haditono, S. Psikologi Perkembangan. Yogyakarta: Gadjahmada University Press, 2002
6. Herawati, L., Budiman, J. A., Haryono, W., & Mulyati, W. Jayapura Teenagers Smoking Behavior. Journal of Community Health, 2016, 1-5.

7. Astuti, K. Gambaran Perilaku Merokok Pada Remaja di Kabupaten Bantul. Insight, 2012; 10(1): 77-87.
8. Shannon, L.M.; Havens, J.R.; Oser, C.; Crosby, R.; Leukefeld C. Examining gender differences in substance use and age of first use among rural Appalachians drug users in Kentucky. Am J Drug Alcohol Abuse. 2011; 37(2): 98-104.
9. Young AM, Havens JR LC. A Comparison of Rural and Urban Monomedical Prescription Opioid User's Lifetime and Recent Drug Use. Am J Drug Alcohol Abuse All Addict Disord. 2012; 38(3): 200-27.
10. Green, L.W., Ottosen J. A Frame for Planning and Evaluation: Precede-Proceed Evolution and Application of the Model. In: ans journees de sante publique. 10th ed. Montreal, Quebec, 2006.
11. Boys A, Marsden J. Understanding Reasons for Drug Use amongst Young People Functional Perspective. Heal EducRes. 2001; 16(4):457-69.

References