The Relationship of Knowledge, Parental Support and Self-Acceptance with the Level of Anxiety of Young Women in Facing Puberty at Junior High School 7 Jambi City in 2022

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Abstract

Introduction: *Puberty is a phase of physical and psychological changes. Changes experience by adolescent can cause anxiety. Teenages girl are aware of their development that can cause anxiety, because of that, they need sufficient knowledge, support from their parents and a good concept of self-acceptance, so they are can be ready for puberty.* ***Obective:*** *The purpose of this study was to determine the relationship between knowledge, parents support, self-acceptance and anxiety levels in JHS 7 Jambi City.* ***Method:*** *The study was conducted using a cross-sectional design with a sample size of 161 respondents. Statistical test using chi square test.* ***Result and Discussion:*** *Correlation between knowledge and anxiety levels was obtained (p-value <.001), correlation between parents support and anxiety levels was obtained (p-value <.020), correlation between self-acceptance and anxiety levels was obtained (p-value <.001).* ***Conclusion:*** *Teenages girl have less knowledge that is as much 123 respondent (76.4%), teenages girl have negative parents suport that is as much 118 respondent (73.3%), teenages girl have low self-acceptance that is as much 125 respondent (77.6%). There was a significant correlation between knowledge, parents support and self-acceptance with anxiety levels.*

Keywords: Knowledge; Parents Support; Self-Acceptance; Anxiety levels

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Introduction

Teenagehood is a transitional period from childhood to adulthood. The term "remaja" originates from the English word "teenager," referring to individuals aged between 13 and 19 years old. In Latin, "adolescence" means growing towards maturity (Ministry of Health RI 2016). Adolescent girls begin to enter puberty, which can be identified by the onset of physical changes such as breast development, widening of the hips, the appearance of fine hair in the armpits and around the genitals, and the maturation of sexual organs, marked by the onset of menstruation. The physical changes and increasing maturity of hormones during puberty are reasons for the emergence of sexual impulses in teenagers (Siti Nina Inayah Rohmaniah 2014)

Information about early development into puberty is needed by adolescents (Alifariki 2018). Physiological changes are the most questioned by children at the beginning of puberty (Ningrum 2019). Children entering the early age of puberty with less knowledge about puberty are more susceptible to problems such as stress, low self-esteem and anxiety (Perestroika, Agustin, and C 2012). It is at times like this that adolescents need the role of parents and teachers who are able to guide them to improve their knowledge. So that their growth and development process during puberty becomes healthy and can become a complete adult (Ningrum 2019). Based on research conducted by Suyamti and Weny (2018) showed 56 female students (70.0%) experienced mild anxiety, 21 female students (26.3%) experienced moderate anxiety and 3 female students (3.8%) experienced severe anxiety (Suyamti, Hastuti, and Kunci 2018)

Young women begin to enter puberty can be known by the onset of physical changes such as the start of breast growth, wider hips, fine hair appears in the armpits and around the genitals and the maturation of sexual organs starting with menstruation. Physical changes and the maturation of hormones at puberty are reasons for the emergence of sex drive in adolescents (Siti Nina Inayah Rohmaniah 2014)

Anxiety in puberty has a relationship with changes experienced at puberty, such as physical changes in secondary sex characteristics that develop slowly, making it a source of great concern (Alifariki 2018). Alifariki (2018) suggests that there are several factors that influence anxiety, such as the level of knowledge, social support from parents and self-acceptance (Alifariki 2018)

The impact of anxiety will be felt by young women, if the anxiety is not above correctly, it will greatly disturb young women and provide many negative things, such as young women who lack confidence, difficulty getting along, difficulty concentrating in class causing a decrease in learning achievement, anxiety to come and meet with their friends at school or other places (Ningrum 2019). The impact of adolescent girls' anxiety can also make the experience of puberty a feared and traumatizing experience (Siti Nina Inayah Rohmaniah 2014)

Reducing the level of anxiety of adolescent girls about physical changes during puberty is one of them by preparing young women to face puberty, by providing

knowledge to young women about puberty and the physical changes they will get at puberty through reproductive health coaching for adolescent girls and children who will enter puberty.

Based on a preliminary survey conducted on 8 adolescent girls at JHS 7 Jambi City with questions about puberty knowledge, parental support, body image and anxiety, it was found that more than half of adolescent girls had anxiety. Therefore, researchers want to conduct a study to determine the "Relationship of Knowledge, Parental Support and Self-Acceptance with the Level of Anxiety of Young Women in Facing Puberty in JHS 7 Jambi City".

Method

This type of research is an observational study using a quantitative approach with a *cross sectional* method. The population in this study is all grade VII, VIII and IX students at JHS 7 Jambi City in the 2022 period as many as 577 people. The sample in this study was class VII, VIII and IX students at JHS 7 Jambi City as many as 161 respondents. The sampling technique used in this study was *proportional random sampling*. This technique is used because the population distribution pattern is less proportional, so that each smallest part of the population has the same chance to be sampled in this study.

Data collection using questionnaires compiled and processed by researchers themselves. Data is processed using spss program version 26. Presentation of data in the form of tables and narratives based on research variables. Data analysis was performed by univariate analysis and bivariate analysis using *Chi Square* with meaning limit $\alpha = 0.05$ (Ernia 2018)

Results and Discussion
Result
1.   Univariate Analysis

The following is an overview of the characteristics of 161 responses consisting of class, age, weight and height presented in the following table:

Table 1
General description of respondent characteristics

Characteristics of Respondents	Total	Percentage
Class		
VII	54	33.5
VIII	53	32.9
IX	54	33.5
Age		
12	38	23.6
13	57	35.4
14	56	34.8
15	9	5.6
16	1	0.6
Weight		
30 kg – 53 kg	135	83.9
54 kg – 76 kg	26	16.1
Height		
125 cm – 140 cm	4	2.5
141 cm – 155 cm	89	55.3
156 cm – 170 cm	68	42.2

Based on table 1, it shows that the characteristics of the respondents, there were 54 grade 7 respondents (33.5%), 53 grade 8 respondents (32.9%) and 54 grade 9 respondents (33.5%). Characteristics according to age, 38 people aged 12 years (23.6%), 57 people aged 13 years (35.4%), 56 people aged 14 years (34.8%), 9 people aged 15 years (5.6%) and 1 person aged 16 years (0.6%). Characteristics according to body weight, 135 people weighed 30 kg – 53 kg (83.9%) and 26 people weighed 54 kg – 76 kg (16.1%). The following is a table of frequency distributions of the variable's levels of anxiety resistance, parental support, and self-acceptance

Table 2
Univariate Analysis Results

Variable		N	%
Anxiety Level	Anxious	114	70.8
	No anxiety	47	29.2
Knowledge	Less	123	76.4
	Enough	38	23.6
Parental Support	Negative	118	73.3
	Positive	43	26.7
Self-Acceptance	Low	125	77.6
	Tall	36	22.4

Based on table 2, it can be seen that the largest proportion of respondents with anxious anxiety levels is 70.8%, has less knowledge as much as 76.4%, has negative parental support as much as 73.3%, has low self-acceptance as much as 77.6%.

2. Bivariate Analysis

By using the *chi-square test.* The following is a table of bivariate analysis results between the independent variable and the dependent variable.

Table 3

Results of Bivariate Analysis

Variable	Anxiety Level				Total	Cl	PR	P-(Value)
	Anxious		No Anxiety		N	95%		
	N	%	N	%				
Knowledge								
Less	102	82,9%	21	17,1%	123	1.633-4.222	2,626 (1,633-4,222)	0,000
Enough	12	31,6%	26	68,4%	38			
Parental Support								
Negative	90	76,3%	28	23,7%	118	1.028-1.816	1.367 (1.028-1.816)	0,020
Positive	24	55,9%	19	44,2%	43			
Self-Acceptance								
Low	99	79,2%	26	20,8%	125		1.901 (1.278-2.827)	0,000
Tall	15	41,7%	21	58,3%	36			

Based on table 3, it can be seen that in the knowledge variable, respondents who are anxious have the most knowledge as many as 102 respondents (82.9%) compared to respondents with good knowledge. The results of the bivariate analysis showed that there was a significant relationship between knowledge and anxiety levels with *a p-value of* 0.000, meaning that respondents with knowledge levels were approximately 2.629 times more at risk of experiencing anxiety levels than adolescent girls with sufficient knowledge (95% CI = (1,633-4,222)).

Based on parental support variables, respondents who were most anxious had negative parental support, at 90 (76.3%) compared to respondents with negative parental support. The results of the bivariate analysis showed that there was an association between parental support and anxiety levels with *a p-value of* 0.020, meaning that respondents with negative parental support were 1.367 times more likely to experience anxiety levels than positive parental support (95% CI = (1,028-1,816)).

Based on the self-acceptance variable, respondents who were anxious the most had low self-acceptance, namely 99 respondents (79.2%) compared to respondents who had high self-acceptance. The results of the bivariate analysis showed that there was a relationship between self-acceptance and anxiety levels with *a p-value of* 0.000, meaning that respondents with low self-acceptance were 1,901 times more likely to experience anxiety levels than those with high self-acceptance (95% CI = (1,278-2,827)).

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Discussion

1. The Relationship of Knowledge to Anxiety Levels

Based on the results of statistical tests in this study using the *chi square* test with a p-value of 0.000 (p <0.05), it shows that there is a relationship between knowledge and anxiety levels in adolescent girls in JHS 7 Jambi City and from the results of the analysis also get a PR value of 2.626 (95% CI = (1,633-4,222)), meaning that respondents with a level of knowledge approximately 2,629 times more at risk of experiencing anxiety levels than Young women with sufficient knowledge.

The results of the research and arguments from the author are also supported by Nainggolan (2022) whose research was obtained *p-value* = 0.00 It is concluded that there is a relationship between the level of knowledge and the level of anxiety of adolescent girls in facing menarche, this is also because there is a medium closeness category with a correlation coefficient value of 0.494 located in the range of 0.40 – 0.599.(Nainggolan 2022) Another study that is in line is research by Hayati (2020) which states that most of them are obtained by (42.5%) people with good knowledge about the first menstruation (menarche), most of them are obtained as many as (75%) people with anxiety about the first menstruation (menarche) moderate, so conclusions can be drawn there is a significant relationship between knowledge and anxiety levels of adolescent girls in JHS 13 Jambi City in dealing with menarche with *p-value* 0.001 (95% CI) (Hayati and Gustina 2020)

A person's knowledge of things and objects is contained in two aspects, namely the positive aspect and the negative aspect. These aspects will then provide a determination of the anxiety experienced when adolescent girls go through puberty. With enough positive knowledge about puberty, young women are able to avoid anxiety and vice versa if young women get negative knowledge about anxiety, young women can experience anxiety because of the negative knowledge they have (Mubarak et al. 2011)

Based on the description above, it can be seen that knowledge becomes fundamental and urgency for a person when experiencing puberty, because if the teenager has knowledge related to puberty, then personally it will be easier to face puberty, but if it is not balanced with a good attitude then of course puberty can be a negative thing, This is because if they have been equipped and have enough relevant knowledge and balanced with a positive attitude from young women, then young women will not be easily anxious and will not cause other negative reactions. Therefore, increasing adolescent knowledge about puberty really needs to be considered, increasing adolescent knowledge can be done by providing special material or learning about puberty and reproductive health or conducting counseling about reproductive health.

2. The Relationship of Parental Support with Anxiety Levels

Based on the results of statistical tests using *the chi square* test conducted in this study obtained a *p-value* of 0.020 (p <0.05), This shows that there is a relationship between parental support and anxiety levels in adolescent girls in JHS 7 Jambi City. PR

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= 1.367 (95% CI = (1.028-1.816)) obtained from the analysis showed respondents with negative parental support were 1,367 times more likely to experience anxiety levels compared to positive parental support.

The results of this study are supported by Ernia (2018) who stated that in her research obtained values *p-value* 0.006 (<0.05) which means there is a relationship between parental support and anxiety. Of the 37 people (100%) positive parental support, 29 people (78.4%) had normal anxiety and 8 people (21.6%) had clinical anxiety. A total of 15 people (100%) negative parental support was obtained, 5 people (33.3%) normal anxiety and 10 people (66.7%) clinical anxiety.(Ernia 2018) Another study that is in line is research conducted by Tinambuan (2020) which reaffirms that there is a relationship between parental support and anxiety levels in students at SD Assisi Medan in 2020. Test *Fisher Exact Test* What is done and earned value *p-value = 0.002, adolescent female parental support has a strong influence on young women's personal and actions, parental support can be in the form of teaching young women about puberty can reduce children's anxiety levels during puberty* (Tinambunan 2020)

In Taylor (2004) suggests that the social support received by a person can reduce psychological distress (anxiety and depression). The anxiety felt by young women about puberty can be overcome by the support they get from parents to young women. The support provided can be in the form of emotional support, instrumental support, information support and appreciation support (Taylor et al. 2004)

Based on the description above, it can be seen that the existence of other individuals, especially families and parents have a strong influence, especially on children, individuals are social creatures who need the existence of other individuals and are unable to prepare their life interests alone, but parental support is called positive if parents can and are able to explain well about puberty in puberty children, So that children understand puberty and the actions that must be done. Parents have a duty to teach and guide their children to understand reproductive health, especially puberty, in order to strengthen the understanding of children's reproductive health. Therefore, parents should give full support to their young women to participate in providing knowledge related to reproduction.

3.   The Relationship of Self-Acceptance with Anxiety Levels

Based on the results of statistical tests using the *chi square* test conducted in this study, a *p-value* of 0.000 (p <0.05) was obtained. This shows that there is a relationship between self-acceptance and anxiety levels in adolescent girls at JHS 7 Jambi City. A PR score of 1,901 (95% CI = (1,278-2,827)) obtained from the analysis showed respondents with low self-acceptance were 1,901 times more likely to experience anxiety levels compared to those with high self-acceptance.

The results of this study are supported by Alifariki (2018) who states that 42 anxious adolescent students (51.9%) and 39 non-anxious adolescent students (48.1%), 52 people

less self-acceptance (64.2%) and 29 people good self-acceptance (35.8%), less parental support 53 people (65.4%) and good parental support 28 people (34.6%), less peer support 48 people (59.3%) and good peer support 33 people (40.7%), knowledge is lacking as many as 53 people (65.4%) and good knowledge as many as 28 people (34.6%) (Alifariki 2018)

The theory put forward by Nevid, Ratus and Greene (2005) there are four main factors that influence anxiety, namely: biological, behavioral, social environment and cognitive emotional. In emotional and cognitive factors there is a belief or belief about *self defeating* or a bad assumption, having bad thoughts and reactions to things to come, wanting to look perfect so that it is difficult to accept yourself as you are, because the benchmark of happiness is perfection. So that a person will feel happy if he succeeds in realizing something that he considers perfect and flawless and rarely to feel enough (Nevid, Greene, and Rathus 2005)

Based on the description above, it can be seen that the concept of self-acceptance during puberty is very influential on the level of adolescent anxiety, because self-acceptance can be self-coping, namely a person's knowledge about himself that affects a person's behavior in responding to information and providing treatment. This self-acceptance is initially manifested from values derived from the surrounding environment and within oneself. Thus, a teenager should be given special guidance so that adolescents have a good self-concept and are able to understand that self-acceptance is something that has a high urgency to minimize the anxiety of a teenager in facing puberty.

Conclusion

Based on the research conducted, it can be concluded that there is a significant relationship between knowledge, parental support and self-acceptance with anxiety levels.

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