

**RELATIONSHIPS OF KNOWLEDGE ABOUT DRUGS WITH
INTENSIONS USING DRUGS IN ADOLESCENTS
IN MAN 1 PEKANBARU**

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ABSTRACT

This study aims to determine the relationship of knowledge about drugs with the intention to use drugs in adolescents in MAN 1 Pekanbaru. The subjects of this study were students aged 14 years to 16 years at MAN 1 Pekanbaru. The number of subjects in this study were 105 students. The sampling technique is simple random sampling. The instrument for retrieving data in this study was a questionnaire of knowledge compiled based on aspects put forward by Visimedia (2006) and the scale of intention to use drugs arranged based on aspects put forward by the theory of planned behavior (in Ajzen, 2005). Data were analyzed using product moment correlation analysis. The results of the correlation analysis obtained (r) of -0.146 with $p = 0.137$ ($p > 0.01$) which shows that there is no relationship between the knowledge of drugs with the intention to use drugs in adolescents in MAN 1 Pekanbaru.

Keywords: *knowledge about, drug use intentions, drug adolescents*

PRERFACE

According to Badan Narkotika Nasional (BNN), 1.99% of the total population of Indonesia are drug users with a projected number of users in 2013 reaching 2.56%. The age range of drug users is 10-59 years. Teen drug users in Indonesia are around 14,000 people out of 70 million adolescents and aged 12-21 years. According to BNN survey in 2011, the most common age for first time using drugs was 16 years with the most abused types of drugs such as cannabis, ecstasy, methamphetamine and gluing. The rate of ex-drug users in adolescents is 4.3%.

Narcotics (Narcotics and Drugs / Hazardous Materials) is a term used by law enforcement and the community. Hazardous material is material that is not safe to use or

dangerous and its use is against the law or violates the law (illegal).

Adolescence is a critical period in individual development. At this time, many adolescents experience conflict. Teenagers who can not be categorized as independent individuals, need parents or other adults to help them. Families - especially parents or other adults - are expected to become figures or individuals who can provide direction (while instilling the values, norms and attitudes that are held and adopted by the community), monitoring, supervising, and guiding adolescents in facing problems and even challenges that may be outside their abilities. Because the family is the closest environment, it is understandable that adolescents need opportunities to be able to communicate openly with people

they consider to be adults, who are generally their parents.

Knowledge is the result of knowing, and this happens after people perceive a particular object. Sensing occurs through the human senses, namely the sense of sight, hearing, smell, taste, and touch. Most of human knowledge is obtained through the eyes and ears (Notoatmodjo, 2007). According to Notoatmodjo (2007), knowledge covered in the cognitive domain has 6 levels, namely, know, comprehension, application, analysis, synthesis, evaluation, evaluation.

According to Ajzen in his theory called the theory of planned behavior (in Ajzen, 2005), intention is influenced by three factors, namely, attitudes toward certain behaviors (attitude toward behavior), subjective norms (subjective norms),

perceptions about behavioral control (perceived behavior) control).

Teenagers who have high drug abuse intentions are shown by the characteristics of being easily disappointed, often feeling bored, impatient, want to always get recognition, like rebelling, relationships with families are not harmonious, have many problems but are unable to overcome them.

Counseling about drug abuse is often done in schools, but measurements of the knowledge and intentions of drug abuse have never been done. Therefore the purpose of this study is to find out how the relationship of knowledge and intentions of adolescents about drug abuse in MAN 1 Pekanbaru students.

RESEACRCH METHOD

Method of collecting data

Data collection methods in this study use a scale for the variable knowledge of drugs and the intention to use drugs as a process of collecting quantitative data.

Validity and Reliability

Validity

According to Azwar (2010) validity means the extent to which the accuracy and accuracy of a measuring instrument in carrying out its measurement function. Validity calculations are calculated using the SPSS (Statistical Product and Service Solution) computer program. This research is used to test the validity of the SPSS 17.0 for Windows program.

The coefficient of validity according to Azwar (2009) is relative. There is no universal limit that points to the

minimum number that must be met for a psychological scale to be valid.

The minimum requirement is said to be valid if the coefficient of validity is $r = 0.30$. However, if the validity coefficient $r \leq 0.30$ is usually considered as unsatisfactory or invalid.

Reliability

According to Azwar (2010) reability has the origin of the word rely and ability. Reliability is the consistency or confidence of the measurement results which contain the meaning of the accuracy of the measurement. The reliability coefficient of the number is in the range from 0.0 to 1.0. The higher the reliability coefficient close to 1.0 means the higher the reliability. The lower the reliability coefficient close to 0.0 means the lower the reliability.

In this study, the scale reliability coefficient will be obtained using the Cronbach Alpha approach. Reliability calculations are calculated using the SPSS (Statistical Product and Service Solution) computer program.

Data Analysis

Before testing the hypothesis first, a prerequisite test is performed to determine whether the data qualifies as two parametric. The steps in analyzing the data of this study are 1) Test the distribution of normality assumptions, and 2) test the linearity assumption of relationships, 3) hypothesis testing.

RESULTS AND DISCUSSION

Hypothesis Results

Based on the results of the Pearson Product Moment correlation test, it appears that there is no relationship of knowledge about

drugs with the intention to use drugs in MAN 1 Pekanbaru, which showed no significant relationship, namely (r) of -0.146 with $p = 0.137$ ($p > 0.01$). From these results, it also appears that there is no significant relationship between knowledge about drugs with the intention to use drugs in adolescents in MAN 1 Pekanbaru. This means that teenagers who have good or bad knowledge about drugs are equally likely not to use drugs, because bad knowledge does not affect the desire to try on students, but does not rule out students who use drugs are students who have minimal knowledge about drugs.

Discussion

The relationship of knowledge about drugs and the intention to use drugs is not significant, and states that good or

bad knowledge about drugs is equally likely not to use drugs, because bad knowledge does not affect the desire to try on students, but does not rule out the possibility of drug users are students who have minimal knowledge about drugs.

Descriptions of the above studies, 105 subjects who have knowledge in the very low category are 9 people or 8.56%, the low category is 19 people or 21.90%, for the medium category 33 people or 31.42%, the high category is 37 people or 35.23%, and in the very high category as many as 7 people or 6.7%.

The intention to use drugs is stated in the very low category by 0 people or 0%, the low category by 39 people or 37.14%, the moderate category by 27 people by 25.71%, the high category by 30 people by

28.57%, the very high category by 9 people or 8.58%.

This result is in line with research conducted by Yeli Asti (2013) who stated that there is no positive relationship between knowledge and attitudes towards drug abuse. In the research of Yeli Asti (2013), there are internal factors that cause adolescents, including the group of drug abuse, are factors of curiosity (60%), want to be appreciated and depressed (20%) and lack of religious values (60%). External factors causing adolescent drug abuse are the influence of peers (65%), lack of parental attention (52%), broken home (45%), and mass media (80%).

According to Narendra (in Yeli Asti, 2013) knowledge about drug abuse is the result of experience, and this happens after someone senses

information about drug abuse. Knowledge about drug abuse can come from various sources, such as the acquisition of information sources, living in a residence with high crime rates, the behavior of parents who are also drug users, peer group influence, and low levels of education.

According to Luis (in Yeli Asti, 2013) knowledge can be developed by humans because humans have language that is able to communicate the information that has been obtained. Obtaining sources of information about drug abuse among respondents can come from media such as the internet, print media, electronic media, mobile phones, and counseling. The low level of knowledge shows that respondents are considered to still not know and understand about drug

abuse even though the means of providing information such as counseling or other means of information media are also easily accessible.

According to Festinger (in Yeli asti, 2013) in the theory of 'cognitive dissonance' that there is a human tendency to avoid behavior so it is not in accordance with attitudes and behavior. Humans are basically always logical and assumed so that they try to maintain the consistency of the knowledge they have, but it turns out they have to deal with the fact that human behavior is often irrational. For example, someone who has good knowledge will not necessarily be good even though knowledge and attitude are considered two related things. Meanwhile, even if someone has good knowledge about drugs, if there

is a tendency that person has the desire to try to consume drugs, for example due to environmental influences that are vulnerable to drug abuse or imitating role models such as parents, attitudes can be contrary to knowledge so it's negative.

According to Lawrence Green's theory cited in Notoatmodjo (2007) knowledge is not the only factor influencing behavior. Factors that play a role in influencing behavior are affective (feeling), trust, means, and figures that can be considered as role models. According to the theory of 'reasoned action' proposed by Ajzen and Fishbein (1975) attitudes influence behavior through a decision-making process that is probable and reasoned, and its impact is limited to three things, namely 1) behavior is not much determined by general

attitudes, but specific attitudes towards something, 2) behavior is influenced not only by attitude, but also by subjective norms. Subjective norms are beliefs about the opinions of others about the action to be taken, and 3) attitudes toward behavior together with subjective norms form intentions or intentions to behave in certain ways.

If correlated with some of the opinions above, it can be used as a basis that the level of knowledge does not affect the intentions of a teenager to use drugs, there are several other factors that are more likely to influence a teenager to use drugs.

CONCLUSION AND RECOMMENDATION

Conclusion

Based on research, it can be concluded that there is no

relationship between knowledge about drugs with the intention to use drugs in adolescents in MAN 1 Pekanbaru.

Recommendation

Based on the discussion in the previous chapter and the conclusion of the above research results, there are number of things that can be made as suggestions based on the findings of the research data, namely:

1. Students

Students have to continue to increase their knowledge of the dangers of drugs and know the long-term effects so they do not have any intention to use drugs.

2. Parents and teachers

Parents have to always pay attention and tell their children about the dangers of using drugs. Parents have to supervise the envi-

ronment of their children's friendships, so they will not fall out into a wrong way.

3. The next researcher

It is recommended for the next researchers to expand the research topic and to explore other factors.

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