



Analysis of Health Service Utilization Care for Youth (PKPR) : A Review

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Abstract

The Youth Care Health Service (PKPR) is held to provide quality specialist services for adolescents to prevent adolescents from health problems. However, the scope of utilization of PKPR services is still considered low. This systematic review aims to analyze the utilization of PKPR services and see the scope of utilization of PKPR services. The method used in this study is a systematic review. Search articles using the keywords "PKPR", "Adolescent", and "Friendly Health Services" on

the search engine PubMed, ProQuest, Science Direct, Emerald with inclusion criteria for full-text articles indexed by Scopus or at least Sinta 4, Indonesian/English articles published in the 2017-2022 range.

Based on the seven articles obtained and reviewed, the results of the analysis show that the variables related to the use of PKPR services include gender, age, knowledge, attitudes, socio-culture, acceptability, school support, family support, peer support, the role of officers, tariffs, facilities, and education. The coverage of PKPR service utilization in each region with the lowest percentage is 26.4% and the highest percentage is 46.9%. Further research is conducted to explore the factors of health workers and school support, it is also necessary to research a broader scope.

Keywords: PKPR, Adolescents, Utilization, Friendly Health Services

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Introduction

Responding to the population issues experienced by Indonesian youth today, is not without a challenge, until now there are still problems that can threaten the health of adolescents, such as reproductive health problems and nutritional problems which of course have an impact on the quality of adolescents who will later become part of development and readiness to start a family. Puberty or sexual maturity at an early age is an internal cause and the accessibility of adolescents to various media as well as the negative influence of peers as external causes that cause adolescents to be more vulnerable to being affected by sexual risks such as teenagers experiencing unwanted pregnancy (KTD) is one of the causes main aspects to consider.(Ayu, Delita, Rifai, & Liesmayani, 2020)

Adolescents are an important part of the development of a nation, because through youth the progress of a nation can occur with various potentials possessed by adolescents in the future.(Cudjoe, 2018) Adolescence is a stage of change in both physical, intellectual abilities, emotional and social development as well as a phase where a person needs freedom and development in his sexual behavior so that it can lead to various health problems among adolescents, especially if adolescents do not know the risks of the sexual behavior they are undergoing.(Sammon, M, & et al, 2017)

In Indonesia, the main risk factors for various health problems among adolescents are smoking behavior, poor nutrition, lack of physical activity, low individual hygiene, experiencing depression or stress and consuming illegal drugs and consuming alcoholic beverages.(Laili, Alifia Nur & Syamsulhuda, 2019) It is feared that if the various problems that occur cannot be resolved immediately it will have an impact on the progress of adolescents in Indonesia.(Violita & Hadi, 2019)

As an effort to solve the problems that occur among teenagers, since 2003 the Indonesian government has formed a health service aimed at teenagers with the hope that it can be reached by all teenagers packaged in such a way as to make it seem fun, this service is required to serve teenagers with open arms can respect teenagers, can maintain confidentiality, be sensitive to all things that become the needs of teenagers, and provide effective, efficient services and are able to capture and receive well all the needs of the health problems experienced by adolescents (Kementerian Kesehatan RI, 2018).

Throughout Indonesia, the percentage of health centers that have carried out youth care health activities In 2018 has reached 62.08%, this figure has met the target of PKPR implementation, which is 40% (Kementerian Kesehatan RI, 2018). However, data on the coverage of youth accessing PKPR services nationally does not yet exist. The results of another



study revealed that only 24.3% of students used PKPR services at the Makassar City Health Center. (Violita & Hadi, 2019)

Meanwhile, research conducted by Rahmawati (2016) stated that there were 38.47% of adolescents who used PKPR services at the Surabaya City Health Center. Several other studies also show the low coverage of adolescents in accessing PKPR services in Indonesia. (Rahmawati, 2016)

Methods

The steps carried out are making a problem formulation. determine the problem in compiling this systematic review using PICO (P: Patient or Population is Youth); Intervention (-); Comparission (-); O: Outcome or Output is the utilization of youth health services/PKPR. In this systematic review, it goes through sequential steps starting with searching for articles in the journal database to reviewing articles. The search places for articles that are used are PubMed, ProQuest, Science Direct, Emerald, using the keywords "PKPR", "utilization", "teenagers", "Adolescent", "friendly health services". By making the criteria that need to be met or inclusion used is a research with variables; access or utilization of adolescent care health services written in Indonesian or English, articles published in the 2017-2022 range, using quantitative research methods with a cross sectional approach, Scopus indexed journals or at least Sinta 4 and articles accessed with full text and has an ISSN (International Standard Serial Number) and criteria that are not used or excluded, namely articles that do not include statistical test results in tabular form with the article review flow as follows:

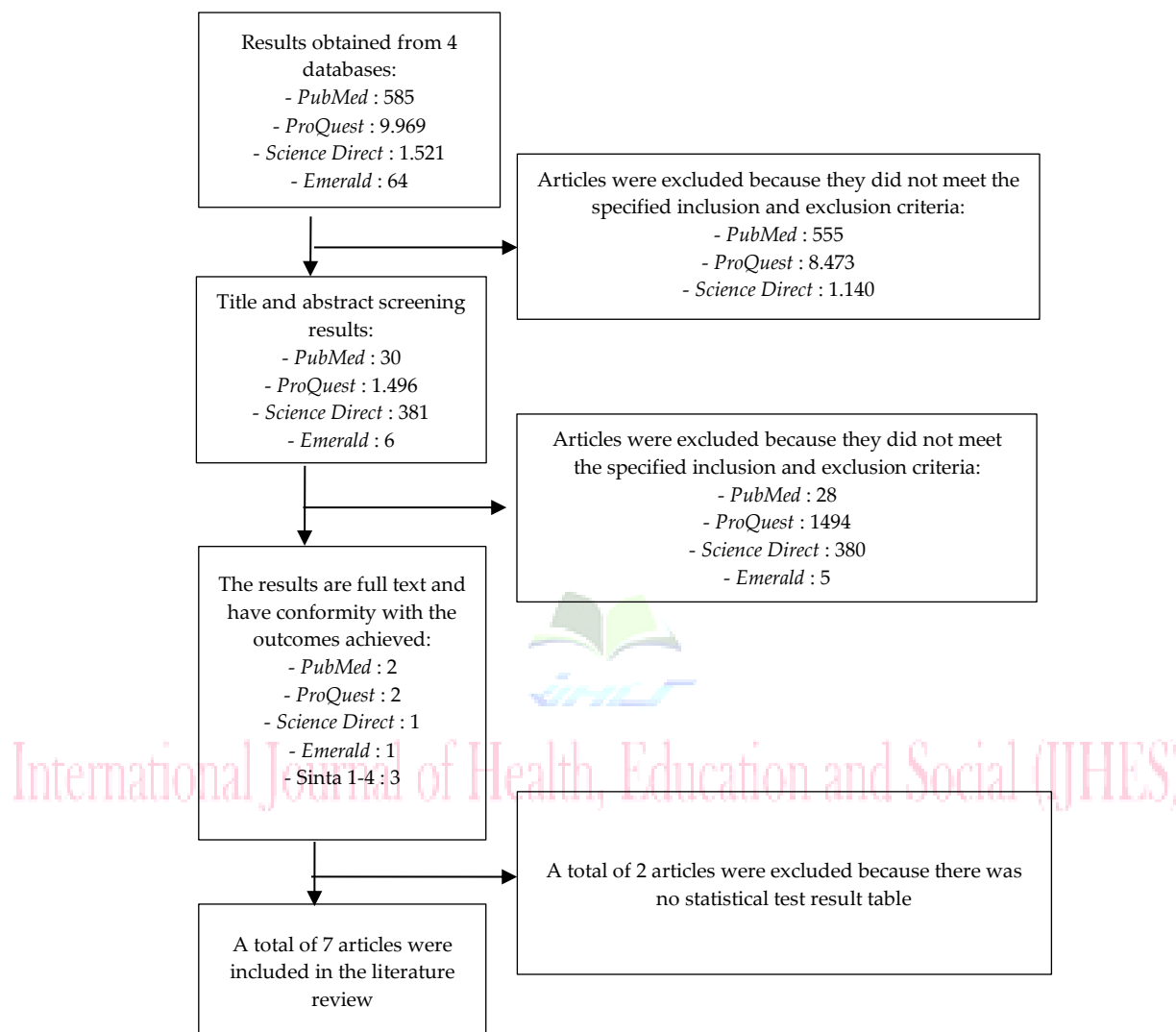


Figure 1. The process of selecting articles

So that there are seven selected articles, then the articles that have been obtained are then reviewed, as well as described and compared with one another.

Results and Discussion

Data on the use of PKPR services in Indonesia is currently not available, in the strategic plan of the Ministry of Health in 2018 one of the indicators is the percentage of Puskesmas holding youth health activities but data on the percentage of adolescents who access or utilize PKPR



services has not been followed. It is not yet known how much coverage of PKPR services nationally.

Based on the seven studies used in this literature review, it was found that the percentage of daily use of PKPR services is still less than 50% and does not explain the PKPR services available and utilized by adolescents, even though the types of services available at each health service can affect youth access. The types of services that should be available in PKPR services include providing information and education, medical clinical services, counseling, healthy life skills education (PKHS), training for peer educators and peer counselors, referral services, monitoring and evaluation. (Yuliana, 2017)

Table 1. Summary and Synthesis of Results Systematic Review

No	Title	Author	Publication year	Method	Findings
1	<i>Predictors of education and utilization of adolescent-friendly health services among youth in Kumbungu District, Ghana</i>	Martin Nyaaba Adokiya, Francis Kronzu Cudjoe, Vida Nyagre Yakong	2022	Quantitative research with a cross-sectional approach	Factors related to the use of adolescent health services include gender, feeling ashamed to get adolescent health services, fear of being seen when receiving adolescent health services, hearing about adolescent health services and their needs.
2	<i>Factors associated with utilization of adolescent-friendly services in Bhaktapur district, Nepal</i>	Krishtee Napit, Khadga Bahadur Shrestha, Sudip Ale Magar, Rashmi Paudel, Barsha Thapa, Bhup Raj Dhakal, Archana Amatya	2020	Quantitative research with a cross-sectional approach	Factors related to the use of adolescent health services include gender, feeling ashamed to get adolescent health services, fear of being seen when receiving adolescent health services, hearing about adolescent health services and their needs.
3	<i>Disparities in utilization of sexual and reproductive health services among high school adolescents from youth</i>	Hayu Haile, Mulugeta Shegaze, Tesfaye Feleke, Mustafa Glagn, Eshetu Anderge	2020	Quantitative research with a cross-sectional approach. The sampling technique used was multistage cluster sampling. Data	Factors that influence the use of adolescent health services include knowledge, attitudes and mother's education



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	<i>friendly services implemented and non-implemented areas of Southern Ethiopia</i>			analysis using the chi-square test.	
4	Youth Participation in Youth Care Health Service Activities	Zurria Kirana	2020	Quantitative research with a cross-sectional approach. Data analysis using chi-square test	The results showed that the level of knowledge, adolescent behavior, perception of seriousness of the disease, need and availability of facilities were related to youth participation in PKPR activities
5	<i>Determinants of adolescents reproductive health service utilization by senior high school students in Makassar, Indonesia</i>	Fajrin Violita, Ella Nurlaela Hadi	2019	Quantitative research with a cross-sectional approach. The sampling technique used was random. Data analysis using chi-square test	Faktor yang berhubungan dengan pemanfaatan layanan kesehatan remaja diantaranya pengetahuan, dukungan keluarga dan dukungan teman
6	<i>Health Reproductive Health Services and Its use in Public Health Center Areas of Kupang City</i>	Yuliana Dafroyati	2017	Quantitative research with a cross-sectional approach. The sampling technique used is simple random sampling. Data analysis using chi-square test	Factors related to the use of adolescent health services include access (affordability), acceptability (acceptance), adolescent needs, adolescent attitudes and adolescent expectations.



7	Factors Affecting the Utilization of Adolescent Reproductive Health Services in Jayapura City	Yunita Kristina	2017	Quantitative research with a cross-sectional approach. Data analysis using chi-square test	The results of the study show that variables related to the utilization of adolescent reproductive health services include pocket money, residence status, socio-cultural, staff, needs, attitudes and tariffs.
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Utilization of PKPR Services

Based on Kristina's research (2017) revealed that the age variable is related to the use of PKPR services by adolescents ($p = 0.037$) (Kristina, 2017). These results are in line with the research results of Napit et al (2020), where age is one of the factors associated with the use of AFS services. Age can affect the use of PKPR services because each age development in humans has different characteristics. At the age of adolescence there are changes both physically, cognitively and emotionally.

Research on attitudes in three studies found that attitude was one of the factors related to the use of PKPR services. The results of other studies show that there is a relationship between attitudes and the use of PKPR services with $p = 0.000$. The development of a person's attitude can be through three ways, namely from group associations, personal experience and other influential groups. Broadly speaking, attitudes are divided into positive attitudes and negative attitudes. A positive attitude is an attitude of approval, acceptance or pleasure. On the other hand, a negative attitude is an attitude of disapproval, rejection or disapproval. (Haile, Bayu, & et al, 2020; Lestari, 2019; Motuma, Aboma, & et al, 2016; Napit, Krishtee, & et al, 2020)

In the knowledge variable, there are three studies that show a relationship to the utilization of PKPR services. Knowledge of PKPR services can influence adolescents in using PKPR services for health checks and counseling. The level of knowledge has an influence on the use of PKPR services. This is in line with the research of Winangsih et al (2015) where knowledge about PKPR among respondents is still low, so most students do not know the form of PKPR services correctly. This affects them to take advantage of PKPR services at the health center to the maximum. (Winangsih, Rini, & et al, 2015)

Another study revealed that social and cultural factors have a relationship with the scope of use of adolescent-friendly services (AFS). AFS. Research shows that teens who are afraid of being seen when using the service and who are embarrassed to use the service are less likely to use AFS. Researchers mentioned that they felt uncomfortable sharing SRH issues with their parents or teachers. They are instilled with the concept that sexual and reproductive health is a private matter and should not be discussed openly with others. Similarly, most parents are reluctant to discuss SRH-related matters with their children. Because of this, young people lack adequate knowledge and information about SRH and related services. In addition, they feel



uncomfortable using the service because of the negative attitude of the general population about SRH as a result of conventional culture and beliefs (Napit et al., 2020)

The results of the study also revealed that the variable of access (affordability) had a significant relationship, where adolescents who were easy to access health services were three times more likely to use PKPR services (Kirana, 2020). The intended access is not limited to physical mileage and travel time, but the intended access is the condition of several elements such as geographic or physical location, economic status, service administration, as well as a process of obtaining knowledge and psychosocial services (Yuliana, 2017)

Subsequent research with results on the variables of family, peer and school support. This support has a positive impact on the utilization of PKPR services. Therefore, it is important to increase support from the family by conducting socialization for parents of teenagers and encouraging parents to be more open in conveying various health problems experienced by their children in this case reproductive health problems and support from peers really needs to be improved. considering that in everyday life, teenagers spend most of their time in the school environment together with teenagers of their age, thus having teenagers who become peer counselors can spur the use of PKPR services. (Lestari, 2019)

The role of health workers is also related to the interest of adolescents in utilizing PKPR services. Friendly behavior possessed by officers is able to open opportunities for adolescents to be able to use PKPR services as much as 8 times greater than officers who have less friendly behavior. AFHS officers are required to be able to serve all adolescent clients by giving equal respect regardless of status and AFHS officers must be non-judgmental, attentive and easy to approach adolescents (Indriyanti, Wangi, & Simanjuntak, 2019; Ruwadya, 2017). The completeness of facilities in PKPR services also determines the assessment of user satisfaction, one of the factors that hinders the use of PKPR services is the condition of incomplete infrastructure, for example not having a special counseling room so that teenagers feel uncomfortable and cannot maintain the confidentiality of the recipients of counseling services (Kristina, 2017)

Conclusion

Utilization of PKPR services is influenced by age, knowledge, attitudes, socio-culture, access, school support, parental support, peer support and the role of officers and facilities. PKPR utilization is still low, it can be seen from the perspective of youth and service officers in order to identify existing problems and increase the scope of utilization of PKPR services. It is also necessary to explore socio-cultural variables and school support in the use of PKPR services.



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