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Promoters**Neila Ramdhani^{1*}, Nurlaela Widyarini²**

7

¹*Faculty of Psychology Universitas Gadjah Mada, neila_psi@ugm.ac.id*²*Faculty of Psychology Universitas Muhammadiyah Jember, nurlaela@unmuhjember.ac.id***Abstract**

Many studies on the role of peer promoters of reproductive health issue have been conducted, little have focused on predicting determinants of intention toward the behavior to promote the issue. This research aims to investigate the role of determinants of intention toward adolescents' behavior in promoting reproductive health issues. We hypothesized that the determinants of intention can explain the behavior. It consists of two studies, involving peer educators and counselors of reproductive health promotion. Study 1 aims to identify the set of salient beliefs that peer promoters hold about the behavior to promote reproductive health. Study 2 aims to determine which determinants of intention promote reproductive health: attitude toward performing the behavior, perceived norms concerning performance of the behavior, perceived behavioral control in respect to performing the behavior. Our findings show that attitudes and subjective norm determines the behavior of reproductive health promotion $F(3,87)=28.10$; $p<0.05$] and explain 49.2% of variance of the intention.

Keywords: intention, reproductive health, peer promoter, planned behaviour

1. Introduction

Peer involvement is a key element in ensuring reproductive health of adolescent. This can only be achieved through the involvement of adolescents in the program that we conduct. Several advantages of involving adolescents is that it promotes them to be more open in communicating reproductive health issues^[1], increase capability in identifying life problems^{[2][3]}, and increase their sense of responsibility towards their health^[4]. Nevertheless, there are few disadvantages identified in the involvement of young peer agents, such as inadequate knowledge on the issue, particularly those with no appropriate training^[3] and the fear of getting negative judgment from the environment becomes a psychological barrier among peer educators or counselors in playing their role.

Several programs have been initiated to solve these barriers in delivering reproductive health promotion, such as improving adolescents' knowledge on reproductive health through short courses, workshops, or trainings. In Indonesia, the institution responsible for dealing with reproductive health is *Badan Kependudukan dan Keluarga Berencana Nasional (BKKBN)*, which is translated as the

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National Population and Family Planning Board. Consequently, the framework of reproductive health programs for peer agents must be planned by the institution.

This research aims to identify several determinant factors that influence adolescents' motivation to promote reproductive health issues to their friends. By considering the holistic scope of reproductive health issue, the campaign needs to be identified using a comprehensive theory, namely TPB^{[5][6]} which contains attempts of improving the agents' knowledge, attitude, motivation, behavior intention, personal skill, self-efficacy related to adolescent reproductive health^{[7]-[13]}. In general, studies emphasize their evaluations more on the results to find out the effects of a program on knowledge, attitude and behavior^{[14]-[16]}. On the other hand, studies coming with evaluations that give the emphasis to programs' compatibility with the target need are still rare. An evaluation that puts its basis on the aspect of process encompasses program development, program implementation, and target group acceptance^[17]. One of the theories used as the basis for developing intervention and predicting a behavioral change is theory of planned behavior (TPB). According to this theory, individuals' intention to behave in accordance with a reasonable, consistent and even automatic flow is based on his/her behavioral beliefs. A belief is a cognitive base of attitude, subjective norm, perceived behavior control, intention, and behavior. This theory can identify and explain the complex relationship between attitude, subjective norm, perceived behavioral control, intention and behavior itself. The relationship between the three determinants and intention of behavior is shown in the Figure 1^{[5], [18], [19]}. This study based on a series of 2 studies. The study 1 aimed to expose the subjects' beliefs relating to their attitudes, subjective norms and perceived behavioral control in promoting adolescent reproductive health. Based on TPB, the important phase that must be passed is the elucidation of beliefs related to attitude, subjective norm, and perceived behavioral control. This phase is also called formative study^{[6], [20]}, a research that aims to explore themes considered most important as to the beliefs in results to be achieved from certain behavior (behavioral belief), important persons who determine attitude (normative belief), and situation that can determine behavior (control belief). The study 2 aimed to find out the role of factors determining the subjects' intentions to promote the issue of adolescent reproductive health.

2. Methods

Study 1

Participants. As many as 44 subjects participated in this study, consisting of 6 male and 38 female students with their average age of 20 years old; (SD=1.79). Most of them are members and participants of *Pusat Informasi dan Konseling Mahasiswa (PIK-M)*, also known as the Center for Students Information and Counseling. PIK-M is an organization under the National Population and Family Planning Board in collaboration with local government. This is assigned to disseminate information about: 1) the risks faced by adolescents in respect of three issues i.e. sexuality, drug abuse and HIV/AIDS; and 2) Marriage age maturation, life skills, counseling service, life goal and network building.

Procedure of the Study. Worksheets were given to the participants to explore their beliefs before we conducted a focused group discussion. They were asked to answer several open-ended questions to analyze their behavioral, normative, and control beliefs, such as: 1) 'Mention 5 advantages and 5 disadvantages that you will get if you promote the issue of reproductive health to other people within the next 1 month' (behavioral belief), 2) 'Mention any person or group who will ask you to communicate the issue of reproductive health with other people', 'Mention any person or group who will not support you in communicating the issue of reproductive health with other people' (normative

belief), 3) 'Mention any factor or condition that eases and hampers you to communicate the issue of reproductive health with your friends.' (control belief).

Results. Content analysis was done to determine the salient beliefs that shapes attitude towards the behavior, subjective norms and perceived behavioral control of peer promoters. Several themes in the behavioral beliefs: a) increasing one's own knowledge about the issue of reproductive health, b) increasing other people's knowledge about the issue, c) fulfilling inner satisfaction, d) increasing skill of communicating the issue, e) developing a sense of pride from being a promoter (M=4.32; SD=3.79) up to (M=7.43; SD=2.00). 2) Normative beliefs are the subjects' evaluations on the person or group who wants them to promote adolescent reproductive health. They are distinguished into two: referent and legitimate power. Referent power are those with whom the participants had horizontal (equal) relation. Meanwhile, legitimate power are those with whom the subjects has vertical relation (at the position higher than the subjects). According to the results, there are two sources of legitimate power, namely co-workers of PIK-M (M=6.20; SD=2.50) and supervisors (M=5.93; SD=2.89). They were evaluated to have been the most decisive in their attempt of promoting the issue of adolescent reproductive health. 3) Perceived behavioral control is the subject's belief in the factors that enable them to promote the issue of adolescent reproductive health. The availability of fund and psychological support from the management of BKKBN and University are the strongest control (M=29.82; SD=11.82).

Study 2

Location of the Study. The study was done at the *Office of Women Empowerment, Child Protection and Family Planning* of Jember Regency and at the Faculty of Psychology, Universitas Muhammadiyah Jember.

Participants. A total of 91 educators, counselors and peer educators who participated in the training were assigned as peer promoters. The average age of the participants is 21.38 years (SD=3.92, range 14-44 years) and most of them were females (61.5%).

Measurement. Participants were asked to complete four scales, namely the attitude, subjective norm, perceived behavioral control, and intention scales that have been constructed based on study 1. The scales consists of 10 items with a loading factor of ($0.73 < \lambda < -0.77$) for the attitude scale, 10 items of subjective norm scale ($\lambda = 0.83$), 14 items of perceived behavioral control scale ($0.77 < \lambda < -.80$) and 4 items of Intention scale ($\lambda = 0.86$).

Results

- 1) Based on sex, we found no difference in the variance of subjective norm [$t(89)=-0.31$; $p>.05$], perceived behavioral control [$t(89)=-1.365$; $p>.05$], and intention [$t(89)=-.04$; $p>.05$] of behaviors in promoting the issue of reproductive health. Both male and female participants have the same evaluation on parties who drove them to decide to promote the issue of reproductive health. Regarding the aspect of control, both male and female participants also have the same evaluation on factors that allows them to conduct reproductive health promotion activities, such as availability of facilities/infrastructures, social support and psychological condition. It was interesting to find that there was a difference in the level of variance in their attitude toward the result, obtained when promoting the issue of adolescent reproductive health [$t(89)=-2.88$; $p<.05$]. The result was the increase of skill and confidence in conducting the promotion. Female has a more positive attitude (M=59.98; SD=7.78) compared to males (M=54.83; SD=9.47).

- 2) A simple regression analysis was done to explore which variables (e.g., attitude, subjective norm and perceived behavioral control) can best explain the intention of doing a promotion to their peers. We found that attitude, subjective norm and perceived behavioral control simultaneously could explain the intention [F(3.87)=28.10; p<.05] and explain 49.2% of variance of the intention. The subjective norm played better role ($\beta=0.18$; p<.05) than the attitude ($\beta=.09$; p>.05) and perceived behavioral control ($\beta=.06$; p>.05).

3. Results and Discussion

The result of regression analysis in Study 2 shows that attitude, subjective norm and perceived behavioral control could explain the intention to promote reproductive health [F(3.87)=28.10; p<.05] and explain 49.2% of variance of the intention. The subjective norm performed a better role ($\beta=0.18$; p<.05) than attitude ($\beta=.09$; p>.05) and perceived behavioral control ($\beta=.06$; p>.05). The results of this research support TPB (Fishbein, 2008; Fishbein & Ajzen, 2010), which states that our belief in the consequences of exerting such effort, perceived social pressure (i.e., supervisor, co-workers), and supporting personal or environmental factor are determinant factors of the behavior. In general, the results of this research has confirmed the TPB, that subjective norm plays a strong role in the tendency of behaving as compared with perceived behavioral control although there is different tendency that the contribution of attitude is less able to explain the tendency of behaving.

A stronger determinant of the intention to promote reproductive health is subjective norm ($\beta=.18$; p<.05). Co-workers and supervisors played important roles in giving consent to promote reproductive health. Those considered to have the power to decide are those who have either a vertical or horizontal relationship with the adolescents. The vertical relationship indicate that those people have the authority to approve of the students' act in promoting reproductive health issues to their peers. Those having vertical relationship with them are, among others, teachers or consultative lecturers and leading persons of the related institutions such as the *National Population and Family Planning Board* (BKKBN) and *Women Empowerment, Child Protection and Family Planning Office* (DP3AKB) of the local governments. It was also strengthened by the result of our observation that the supervisor from institutions carried out assistance by regularly giving a variety of trainings. Planning and authorization of programs were done by their respective teachers or lecturers. Those having horizontal or equal relationship were friends or co-workers in reproductive health organizations at schools or universities. In line with the previous studies, one of the sources of knowledge and reference for communicating any problems of sexuality and reproductive health needs could be from people with authority^[21]. It can be understood that they will direct peer promoters in choosing and confirming their beliefs based on referent or of authority to determine their willingness to act^[22].

The attitude of promoters toward promote reproductive health to their peers refers to the possible consequences of the action, which are the increase of knowledge, skill and confidence. Interestingly, we found that there was variance in the attitude toward the result (t(89)=-2.88; p<.05). Female participants has a more positive attitude (M=59.982; SD=7.78) compared to males (M=54.829; SD=9.47). Contrarily with previous study, male adolescents are more open to discuss their problems of sexuality and reproductive health with their peer friends than females. Openness in communicating problems of sexuality and reproductive health is a normal thing for male adolescents. However, we found that the ability to speak about these problems is a positive achievement for female adolescents^[21].

Intention is determined by the belief in the ability to perform the behavior and to overcome any obstacle from situation. The result of this study showed that the availability of programs, assignment,

attention from fellow members of organizations, permission from schools, academic tasks and shyness were the factors related to situations that determined the prediction of promoting the issue of reproductive health. Regression analysis shows that the belief in perceived behavioral control had less impact on the tendency to act ($\beta=.06$; $p>.05$). It can be understood that perceived behavioral control is very closely related to the context in which the ability to control behavior is determined by the existing role and relation within a group or community. Peer promoters as parts of reproductive health communities at schools or universities have different roles from their roles as students. Borrowing Triandis perspective about subjective culture and interpersonal relationship^{[23][24]}, there are different cultures among societies that hold different norms and values with reference to determine how individual makes a decision. In this study, the role of reproductive health promoters has norms and values that are different from the role of students in an academic setting. Special situation reported by the subjects was related to their position as students in which decision making should follow the prevailing academic rules. In more specific way, it can be explained that when they face consent and academic tasks, decision making must be compliant with the prevailing academic provision. Such had been the weakness of this study too, that personal and situational factors revealed two different situations. On the other hand, this study also confirmed that the contribution of the earlier study to finding the strongest beliefs was a process that should be done to gain a clear description of the important factors affecting an individual to act. It became the foundation for the study that made use of *theory of reasoned behavior* for explaining and predicting certain behavior^{[6], [20], [25]}

Table 1. Regression Analysis in Predicting Intention to Promote Reproductive Health

	R	R ²	Adjusted R ²	F	Unstandardized beta	Standardized beta	SE	t-value
Regression	.702	.49	.48	28.10**				
Attitude					.09	.19	.05	1.86
Subjective Norm					.18	.42	.06	3.08**
Perceived Behavioral Control					.06	.17	.05	1.28

4. Conclusions

This series of studies show that female participants has a more positive attitude compared to males. The status of organization stewardship that consists of administrators, member, and supporters of counseling and reproductive health organization did not determine the attitude, subjective norm, perceived behavioral control, intention and behavior to promote the issue. Similarly, the subjects' last formal education background (e.g., junior high school, senior high school, and university) did not determine the previous variables.

Regression analysis results show that the attitude, subjective norm and perceived behavioral control could simultaneously explain the tendency to promote reproductive health. The subjective norm played better and more consistent role than the other variables in explaining the behavior of promoting the issue of reproductive health. It shows that the parties related to adolescent reproductive health organizations, such as BP2KB/DP3AKAB of the regency, BKKBN, supervisors of reproductive health

organizations, educators and organization administrators, are factors that play a significant role in determining the willingness of adolescents to promote the issue of reproductive health to their peers as compared with other factors.

Based on this research, the factor playing the best role in determining the willingness of peer reproductive health promoters is their subjective norm. Thus, it is necessary to involve every influential party in the issue of reproductive health in the implementation of programs from planning, execution and evaluation of activities.

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