Knowledge Regarding Reproductive Health among Adolescent

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ABSTRACT

Introduction: Reproductive health is a very important aspect for all men and women, including teenagers, to know. The phenomenon shows that some teenagers do not know and understand reproductive health, for example, menstruation and pregnancy

Objective: This research aims to determine adolescent knowledge about reproductive health and then their knowledge and attitudes toward reproductive health problems.

Methods: This research is a descriptive study with the variable knowledge of adolescent reproductive health. The population of this study was young men and women aged 10 to 19 years, totaling 39 people. The sampling technique is total sampling. The instrument used for data collection is a questionnaire, which consists of general data and specific data. General data includes biodata, general information about adolescent reproductive health, and information sources used by adolescents to obtain information about adolescent reproductive health. Data analysis was carried out quantitatively and adjusted to the objectives to be achieved in the research.

Results: Knowledge about adolescent reproductive health at the Kasih Allah Tulungagung Orphanage was in the sufficient category of 11 respondents (28.21%) and the insufficient category was 28 respondents (71.79%).

Conclusion: Knowledge about adolescent reproductive health at the Kasih Allah Tulungagung Orphanage is in the poor category. Knowledge of adolescent reproductive health is very important so that adolescents have responsible behavior

Keywords: adolescent, knowledge, reproductive

Introduction

Reproductive Health is defined as complete physical, mental, and social well-being, not merely free from disease and disability in all matters relating to the reproductive system, its functions, and processes (Yarza et al., 2019). Reproductive health is a very important aspect for all men and women, including teenagers, to know. Meanwhile, adolescence is a transition
period from childhood to adulthood. During this period, teenagers experience several changes that occur both physically, psychologically, and socially. This transition period often confronts teenagers in confusing situations, not having a clear place, not belonging to the group of children, and not also belonging to the group of adults (Dinengsih & Hakim, 2020). When adolescents enter puberty, they will experience rapid physical changes. One of these physical changes is the ability to carry out the reproductive process. However, the phenomenon shows that some teenagers do not know and understand reproductive health, for example menstruation and pregnancy (Ernawati, 2018).

The survey conducted by WHO with good and correct information can reduce adolescent problems, one of which is regarding reproductive health in adolescents, almost one-fifth or around 17.5% of the world's population are adolescents (people aged 10-19 years). Meanwhile, in developing countries, this group has a higher proportion of around 23% (WHO, 2012). Based on the results of the 2012 SDKI KRR survey, (Johariyah Afifah & Mariati Titik, 2018) it was stated that adolescent knowledge about reproductive health is still relatively low. There are 4.7% of teenage girls who don't know about their physical changes during puberty, while the figure for adolescent boys is still higher, namely 11.1% (BPS, 2012). Around 32.1% of adolescent girls and 36.5% of adolescent boys aged 15-19 years started dating when they were not yet 15 years old (SDKI 2012). 0.7% of women aged 15-19 years and 4.5% of men aged 15-19 years have had premarital sexual relations. The reasons for premarital sexual relations were mostly out of curiosity/want to know (57.5% of men), it just happened (38% of women) and was forced by their partner (12.6% of women) (SDKI 2012). This evidence reflects adolescents' lack of understanding about healthy living skills, the risks of sexual relationships, and the ability to reject relationships they do not want.

Correct knowledge and understanding of reproductive health for adolescents is very important because adolescents who know have more awareness to do things based on their beliefs compared to adolescents who do not have knowledge, who simply copy other people's actions. Therefore, a lack of knowledge about reproductive health and sexuality is one of the factors that influence the occurrence of unwanted pregnancies in adolescents. Wrong sexual knowledge and understanding can give birth to wrong perceptions about sexuality and will further encourage wrong sexual behavior with all its consequences (Hapsari Anindya, 2019). The level of reproductive health knowledge is one of the factors that can influence premarital adolescent sexual behavior. This phenomenon shows that the premarital sexual behavior of teenagers in various provinces is increasing due to the lack of knowledge about reproductive health among adolescents. These teenage problems have impacts such as pregnancy, young marriage, and high abortion rates so they hurt the reproductive health of teenagers (Lilestina Nasution Sri, 2012). Adolescent reproductive health is increasingly recognized as an important aspect of human development. This is because the formation of knowledge and sexual behavior in adolescents will determine good health and life expectancy after reproductive age (Djannah et al., 2020). According to (Kyilleh et al., 2018) the impact that can occur when teenagers do not know and understand about adolescent reproductive health is the occurrence of infection, disability, and even death.
Adolescent Reproductive Health should be known by everyone in adolescence (Mba et al., 2007). This is so that it can prevent negative impacts that might occur due to the lack of knowledge and understanding that adolescents have. Previous research (Johariyah Afifah & Mariati Titik, 2018) shows that adolescents' knowledge about reproductive health problems is good or not good. This research aims to determine teenagers' knowledge about reproductive health and then their knowledge and attitudes towards reproductive health issues. So that adolescents get clarity about their reproductive organs correctly, it can also help them know themselves, so that adolescents can be more responsible for their reproductive health.

**Objective**

This research aims to determine teenagers' knowledge about reproductive health and then their knowledge and attitudes toward reproductive health problems.

**Method**

This research is descriptive research because it aims to describe knowledge of adolescent reproductive health at the Kasih Allah Tulungagung Orphanage. The variable in this study is knowledge of adolescent reproductive health. The population of this study was young men and women aged 10 to 19 years, totaling 39 people. The sampling technique in this research is total sampling. The sample in the study were all young men and women aged 10 to 19 years. The instrument used for data collection was a questionnaire, which was created by the researcher himself and tested for validity and reliability. The questionnaire consists of general data and special data. General data includes biodata, general information about adolescent reproductive health, and information sources used by adolescents to obtain information about adolescent reproductive health. Special data consists of knowledge of adolescent reproductive health. For assessing the level of knowledge in the "Good" category if the value is ≥ 75%, the level of knowledge in the "Enough" category if the value is 56-74% and the level of knowledge in the "Not enough" category if the value is < 55%. Data analysis was carried out quantitatively and adjusted to the objectives to be achieved in the research. In this type of descriptive research, Univariate Analysis is used in the data analysis process.

**Result**

The respondents used in this research were young men and women who lived at the Kasih Allah Tulungagung Orphanage, with a total of 39 respondents, with details of 19 male respondents and 20 female respondents (table 1). Characteristics of respondents in this study include gender, age, source of information, and origin of information about Adolescent Reproductive Health.

<table>
<thead>
<tr>
<th>Variables</th>
<th>F</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Man</td>
<td>19</td>
<td>48.72</td>
</tr>
<tr>
<td>Woman</td>
<td>20</td>
<td>51.28</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 years</td>
<td>1</td>
<td>2.56</td>
</tr>
<tr>
<td>11 years</td>
<td>1</td>
<td>2.56</td>
</tr>
</tbody>
</table>

| Table 1. Frequency Distribution of Respondent Characteristics (n = 39) |
Based on Table 1, it can be explained that 19 respondents (48.72%) were male and 20 respondents (51.28%) were female. The maximum age of respondents was 14 years and 15 years, namely 7 respondents (17.95%). A total of 15 respondents (38.46%) had never received information about adolescent reproductive health and the most, namely, 24 respondents (61.54%) had received information. Of the 24 respondents, the most information came from school teachers, namely 16 respondents (66.67%).

In Table 2, it was found that knowledge about adolescent reproductive health at the Kasih Allah Tulungagung Orphanage was in the sufficient category of 11 respondents (28.21%) and the insufficient category was 28 respondents (71.79%).

### Table 1. Age Distribution (n = 39 respondents)

<table>
<thead>
<tr>
<th>Variables</th>
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</tr>
</thead>
<tbody>
<tr>
<td>12 years</td>
<td>4</td>
<td>10.26</td>
</tr>
<tr>
<td>13 years</td>
<td>3</td>
<td>7.69</td>
</tr>
<tr>
<td>14 years</td>
<td>7</td>
<td>17.95</td>
</tr>
<tr>
<td>15 years</td>
<td>7</td>
<td>17.95</td>
</tr>
<tr>
<td>16 years</td>
<td>6</td>
<td>15.38</td>
</tr>
<tr>
<td>17 years</td>
<td>4</td>
<td>10.26</td>
</tr>
<tr>
<td>18 years</td>
<td>4</td>
<td>10.26</td>
</tr>
<tr>
<td>19 years</td>
<td>2</td>
<td>5.13</td>
</tr>
</tbody>
</table>

### Table 2. Knowledge Level (n = 39 respondents)

<table>
<thead>
<tr>
<th>Knowledge</th>
<th>F</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>Enough</td>
<td>11</td>
<td>28.21</td>
</tr>
<tr>
<td>Not enough</td>
<td>28</td>
<td>71.79</td>
</tr>
</tbody>
</table>

### Discussion

Adolescent knowledge about Adolescent Reproductive Health at the Kasih Allah Tulungagung Orphanage was obtained by 28 respondents (71.79%) in the lack of knowledge category. Adolescent reproductive health is a very important aspect of human development. This is because the formation of adolescent sexual knowledge and behavior will determine good health and life expectancy after reproductive age (Lim et al., 2015). If sexual behavior in teenagers is not accompanied by sufficient knowledge or emotional levels that are still unstable, it will cause very fatal effects, including threats to the health of teenagers' reproductive organs, abortion, sexually transmitted diseases, and others (Lilestina Nasution...
Currently, knowledge of adolescent sexual and reproductive health is very important to prepare adolescents to face globalization and the era of social media which makes everyone see and study any topic without limits. Adolescents must be educated from an early age to protect their bodies and future from inappropriate relationships such as turning to promiscuous sexual behavior, child marriage, extramarital sexual relations, and unprotected sexual relations which make adolescents vulnerable to dangerous diseases such as HIV/AIDS (Djannah et al., 2020).

The results of the study showed that most of the knowledge of adolescents at the Kasih Allah Tulungagung Orphanage was in the poor category, namely 28 respondents (71.79%). This is in line with research in Riyadh (Djannah et al., 2020) which reported that more than 60% of adolescents had inappropriate knowledge. One of the reasons is that teenagers' lack of knowledge about adolescent reproductive health is due to the lack of appropriate sources of information about adolescent reproductive health. Of the 39 adolescents aged 10 to 19 years at the Kasih Allah Tulungagung Orphanage, 15 respondents said they had never received information from various sources. The adolescent feels awkward and taboo when asking other people. The right source of information can provide the right direction for adolescents, this is because adolescents are more vulnerable to reproductive health irregularities including substance abuse, sexually transmitted infections, and other risks compared to other ages (Salam, Das, et al., 2016). Lack of knowledge about adolescent reproductive health also results in many adolescent girls committing suicide and adolescent boys committing interpersonal violence (Salam, Faqqah, et al., 2016).

Based on the research results, it was also found that 24 respondents (61.54%) had received information from school teachers, but still had insufficient or incorrect knowledge. According to researchers, this is due to the lack of frequent or repeated habits of discussing reproductive health. According to (Johariyah Afifah & Mariati Titik, 2018) providing the information would be better carried out continuously and packaged more attractively, especially if this is done to adolescents, both male and female. With the continuous provision of information, adolescents tend to make adjustments more easily and this causes an increase in knowledge in adolescence. The impact of good knowledge will make adolescents’ attitudes and behavior in maintaining their reproductive health positive so that adolescents will avoid the transmission of sexual diseases, pregnancies outside of marriage, reproductive system diseases, and disruption of education and work (Hapsari Anindya, 2019). Apart from this, the information obtained from school teachers is that adolescents receive lessons about Natural Sciences. Where the lesson does not fully contain information regarding reproductive health. Some of the information that has been obtained is only basic knowledge. Adolescents need to know fully about reproductive health so that the knowledge gained can influence adolescent behavior not to engage in promiscuous sexual behavior or juvenile delinquent behavior (Puspita Sari Yanti et al., 2015). Knowledge of adolescent reproductive health is very important so that adolescents have responsible behavior (Mittal & Goel, 2010).

According to WHO (World Health Organization) (Hapsari Anindya, 2019), the age of adolescence is 10-19 years, but based on the classification of adolescent age, it is divided into early adolescence, namely 10-13 years, middle adolescence 14-16 years and late adolescence. namely 17-19 years. Most adolescents who have less knowledge are aged 14 years and 15
years, namely 7 respondents (17.95%) and aged 16 years, 6 respondents (15.38%). Where they are included in the middle teens. Middle adolescence is characterized by searching for self-identity, a desire to date, sexual fantasies, and a deep sense of love (Aisyaroh Noveri, 2020). At this age, it is very necessary to provide correct and accurate information and education so that it can encourage independence and self-confidence in adolescents, and provide knowledge so that they can make their own decisions regarding their reproduction and sexuality (Marti Ayu Ira et al., 2020). According to researchers, adolescence is an age that is very vulnerable to deviant behavior because the amount of information obtained without correct and appropriate guidance will cause them to think for themselves which is influenced by the nature and character of adolescents who want to always try new things without considering the effects and impacts in the future.

Conclusion
After completing the research, it was proven that knowledge about adolescent reproductive health at the Kasih Allah Tulungagung Orphanage was in the deficient category. This is because they have never received in-depth information about reproductive health. These findings confirm that knowledge of adolescent reproductive health is very important so that adolescents have responsible behavior. Further exploration and follow-up research can provide health education and additional insight into optimizing adolescent reproductive health knowledge so that adolescents have attitudes and behaviors in maintaining positive reproductive health.

Conflict of interest
There is no conflict of interest.

Ethical approval
This research has received ethical approval form the Health Reseach Ethic Commission of the STIKES RS. Baptis Kediri number 065/24/XI/EC/KEPK-3/STIKES RSBK/2023.

Authors’ contribution
Each author contributed equally in all the parts of the research. All authors have critically reviewed and approved the final draft and are responsible for the content and similarity index of the manuscript.

References


