



High-Risk Factors Affecting Adolescent Reproductive Health

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ABSTRACT

Introduction: Adolescent reproductive health services consist of activities aimed at maintaining the reproductive health of adolescents. According to data from the Central Statistics Agency (BPS), Bappenas, and UNFPA in 2010, 63 million adolescents in Indonesia are vulnerable to unhealthy behaviors. Data from adolescent *posyandu* visits reveal that the majority of adolescents suffer from anemia, malnutrition, or overnutrition, including obesity. However, the specific risk behaviors affecting the reproductive health of adolescents in Cikunir Village remain unknown.

Objective: This study aims to identify the risk factors affecting the reproductive health of adolescents in Cikunir Village.

Method: This research employed a descriptive method. The study population comprised all adolescents in Cikunir Village. A total of 201 adolescents were selected as samples using purposive sampling. Secondary data were sourced from the reproductive health survey conducted as part of the Village Development and Empowerment Grant Program (PHP2D) by the Ministry of Education and Culture of the Republic of Indonesia in 2021. Data were analyzed using univariate analysis.

Results: The study identified several risk factors for adolescent reproductive health: 11.4% of adolescents smoked, 1% had tried drugs, and 15.9% had watched pornographic videos. Additionally, 29.4% of adolescents reported having boyfriends or girlfriends, and 23.4% were influenced by a social environment associated with risky behaviors.

Conclusion: Adolescent reproductive health in Cikunir Village is affected by various risk factors, including smoking, drug use, exposure to pornography, and risky social environments. Parents are advised to provide attention and affection to their children, monitor their social and school environments, and actively engage in guiding them towards healthier behaviors.

Keywords: drugs, pornographic, smoking, social environment, teenagers

Introduction

Adolescent Reproductive Health Services is an activity and/or series of activities aimed at adolescents in order to maintain reproductive health. The aim of adolescent reproductive health services is to prevent and protect adolescents from risky sexual behavior and other risky behaviors that can affect reproductive health, and prepare adolescents to live a healthy and responsible reproductive life (President of the Republic of Indonesia, 2014). According to data from the Central Statistics Agency (BPS), Bappenas and UNFPA in 2010, some of the 63 million teenagers in Indonesia are vulnerable to unhealthy behavior. Data obtained from the 2015 Global School Health Survey (GSHS) shows that 20.38% of students have been taught in class what to do if forced to have sexual intercourse, 63.62% have been taught to avoid harassment, 36.33% have been taught how to refuse intercourse sexually, while only 9.9% of women and 10.6% of men aged 15-19 years have comprehensive knowledge about the Human Immunodeficiency Virus (HIV). The 2017 IDHS results show that 62% of women and 51% of unmarried men aged 15-24 years discussed reproductive health with their peers, 47% of women and 42% of men discussed it with their teachers, others with siblings, parents and relatives, and 15% of women and 28% of men did not discuss the matter with anyone (Ministry of Health of the Republic of Indonesia, 2021)

Risky behavior such as smoking, drugs, drinking, free sex poses risks to the future including dropping out of school, unwanted pregnancy, inadequate self-concept and risks to the social environment such as unemployment and crime. Risky behavior in adolescents can endanger psychosocial aspects which can make it difficult for adolescents to successfully go through their development period. The following are some findings related to risky behavior in adolescents. In general, more male teenagers stated that they had had premarital sex than female teenagers. In his study of teenagers in Indonesia, it was found that 12.5 percent of teenagers who did not have an understanding of reproductive health agreed to the practice of abortion. Adolescents who have an understanding of reproductive health are 0.8 times lower in permissiveness towards abortion than adolescents who do not have an understanding of reproductive health (Kusumaryani, 2017). The risk of HIV/AIDS has an impact on reproductive health in around 20-25% of adolescent cases with the highest STIs aged 15-29 years. Abortions usually occur in big cities, where around 2.6 million people/year have abortions in Indonesia, of which 700,000 are teenagers (Faiztra & Rambung, 2021)

There is no definite data on risk behavior among teenagers in Tasikmalaya Regency. The Covid-19 pandemic has had an impact on limiting youth activities. This condition can be an opportunity to increase unproductive activities which have an impact on the emergence of juvenile delinquent behavior which endangers the nation's future generations. Based on this, it is necessary to conduct research on risk factors for adolescent reproductive health in Cikunir village.

Objective

This study aims to identify the risk factors affecting the reproductive health of adolescents in Cikunir Village.

Method

The type of research used is a quantitative design *descriptive*. The research population was teenagers in Cikunir Village. The research sample uses *purposive sampling* with the criteria for teenagers participating in the village development and empowerment grant program survey (PHP2D) of the Ministry of Education and Culture of the Republic of Indonesia in September 2021 totaling 201 people. This research was located in Cikunir Village, Singaparna Health Center Working Area, Tasikmalaya Regency, West Java Province. Carried out in September – December 2021. Data collection was carried out by using a checklist sheet. The type of data used is secondary data, namely the results of a survey of adolescent reproductive health in the program village development and empowerment (PHP2D) grant from the Ministry of Education and Culture of the Republic of Indonesia in Cikunir Village. Data were analyzed using univariate analysis using the following formula:

$$P = \frac{X}{N} \times 100\%$$

Parameters:

P = Percentage

X = Number of Events for Respondents

N = Total Number of Respondents

Result

Table 1. Risk Factors Affecting Adolescent Reproductive Health

Variable	N	%
Smoking		
Of	23	11.4
No	178	88.6
Trying Drugs		
Once	2	1.0
Never	199	99.0
Video Porn		
Once	32	15.9
Never	169	84.1
Have a Girlfriend		
Of	59	29.4
No	142	70.6
Social Environment		
Risky	47	23.4
No risk	154	76.6

Based on the table above, it is known that there are teenagers who smoke, namely 11.4%, there are 1% of teenagers who have tried drugs, 15.9% of teenagers have watched pornographic videos and there are teenagers who have boyfriends, namely 29.4%. The social environment of teenagers who have friends with risky behavior is 23.4%.

Discussion

Smoking in teenagers

Based on research, it is known that 11.4% of teenagers smoke. This figure cannot be considered small because smoking among teenagers can have an impact on health, especially reproductive health. Cigarettes are basically chemical factories. One cigarette burned will release around 4000 chemicals. The smoke that comes out of a cigarette is divided into two, namely the main smoke (*main steam smoke*) that comes out from the base of cigarettes and side smoke (*side steam smoke*) that comes out of the tip of the cigarette. These dangerous substances include: *Polonium-201* is radioactive material, *acetone* is a paint-making ingredient, *ammonia* as a material used for floor washing, *naphthalene* is camphor material, *DDT arsenic* used as insect poison, *hydrogen cyanide* is a commonly used poisonous gas in the room execution of death sentence, *methanol* is rocket fuel, *cadmium* used for car batteries, *vinyl chloride* (PVC plastic material), *phenol butane* (match fuel), *carbon monoxide* (smoke from vehicle exhaust), *naphthalene* (fights), *toluene* (industrial solvents), and many more (Jabbar, 2008)

The source of information received by adolescents has a significant influence on smoking behavior in adolescents. Information from supervised sources and responsibility such as schools and parents, tend to have a protective effect on smoking behavior. Therefore, it is very necessary to educate teenagers about the dangers of smoking from health workers or teachers or parents so that they can help teenagers understand the dangers of smoking and can avoid this behavior. Meanwhile, information obtained from unsupervised sources, such as peers, siblings, and especially the internet, is actually associated with an increase in smoking prevalence. This is because unsupervised sources spread inaccurate information or even normalize smoking behavior in attractive ways, such as highlighting the social or pleasurable aspects of smoking (de Andrés-Sánchez et al., 2024).

Smoking behavior is a learned behavior. The environment around children is a medium that provides exposure to smoking behavior. The family environment is the closest environment that teaches smoking behavior to teenagers. Next, the peer environment also influences smoking behavior in adolescents. Despite this impact psychological smoking contributes greatly. The condition with the most smoking behavior is when under pressure (stress), namely 40.86% and when gathering with peers 27.96% (Komalasari & Fadilla Helmi, 2022)

Drugs

The research results showed that 1% of teenagers had tried drugs. Even though the number of teenagers who have tried drugs is small, this data should not be ignored. The drug problem in Indonesia is still something that is urgent and complex. The impact of drug abuse does not only threaten survival and the future its misuse only, but also the future of the nation and state, regardless of social, economic strata, age or level of education. These drugs are divided into 2 (two) groups, namely: 1) Narcotics group, their effects cause euphoria, severe drowsiness, constriction of the pupils and shortness of breath. Excessive dosage will result in convulsions, coma, slow and shallow breathing. Symptoms that are free from its effects are irritability, trembling, panic and sweating. Medications such as: methadone, codeine and hydromorphone. 2) Group Depressant, is a type of drug that functions to reduce the body's functional activity. This drug can make the user feel calm and even make him fall asleep or become unconscious (Amanda et al., 2017)

Risk factors for drug abuse in adolescents include negative peer associations, unrealistic beliefs about the prevalence of illicit drug consumption, inconsistent or abusive parenting, school exclusion, and feelings of low self-esteem. Studies of multiple risk factors have found that risk factors have a cumulative effect i.e., the more risk factors a teenager is exposed to, the more likely he or she will engage in delinquent or violent behavior. An indirect risk factor for drug abuse in adolescents is that a low level of parental education predicts a greater risk of drug abuse in the future by reducing adolescents' perceptions of the dangers of drugs. Negligence from the parents' point of view can also cause this problem. Lack of parental supervision, uncontrolled provision of pocket money and the presence of family members who use drugs are the most common factors of negligence that contribute to drug use behavior in adolescents (Anjani et al., 2022). The belief that if you try once you won't get addicted is one of the causes of narcotics use, because once you use narcotics you will become addicted and find it difficult to stop. Therefore, if someone wants to avoid narcotics, they must be able to distance themselves from things that make it possible to try and come into contact with narcotics (Adam, 2012)

Exposure to Porn Videos

The research results showed that 15.9% of teenagers had watched pornographic videos. Today's technological advances make it easier for students to obtain information from mass media. The very rapid development of the internet with all its advantages and benefits also has negative impacts, one of which is the cybersex phenomenon. Cybersex are activities that contain pornographic elements inside it, such as viewing erotic images, engaging in chats about sex, exchanging images or email messages about sex. Increased sexual urges and great curiosity about sexuality often lead teenagers to the problem of promiscuous sex and the consequences of such actions. Problems that arise in teenagers can include premarital pregnancy, increasingly free sexual behavior in teenagers, and the transmission of sexual diseases (Zulfiana et al., 2020)

Adolescents who are addicted to watching pornography experience damage to the front brain cells which function as the center for decision making and analysis. Exposure to pornography can influence Teens' perceptions of sexual relationships, creating unrealistic standards about bodies and relationships. It is also associated with disturbed body image, increased anxiety, and risk of risky sexual behavior. Pornography can increase the risk of aggressive or inappropriate sexual behavior. Additionally, teens who are frequently exposed to pornography tend to start sexual activity earlier, with a higher risk of sexually transmitted diseases or unplanned pregnancies. Excessive use of pornography can interfere with concentration and study time which can cause a decline in learning achievement at school (Haidar & Apsari, 2020).

Some teenagers consider premarital sexual behavior to be normal, although on the other hand they admit that this is wrong, sinful or prohibited by religion. Most teenagers know how to avoid pregnancy, namely by using contraception and terminating pregnancy using traditional methods. Many young men admit that they regularly have sexual relations with several people for the reason of seeking pleasure. The behavior of watching videos or viewing adult sites via the internet is considered normal by teenagers (Hidayangsih, 2014).

Have a Girlfriend

Based on the research results, it is known that there are 29.4% of teenagers who have boyfriends. Teenage dating can have a negative impact on various aspects of their lives, especially if the relationship is unhealthy or involves conflict. Disturbances in academic achievement can occur in teenagers because romantic relationships can divert study concentration. Teenage dating can also lead to violence in relationships. This includes violence physique, emotional or sexual that can cause trauma psychological and mental health disorders such as depression and anxiety. Adolescents who are dating are more susceptible to early sexual activity behavior. Spiritual strengthening in adolescents' family, school and residential environments can be the best filter to prevent adolescent risk behavior (Astutik et al., 2017).

Teenagers will experience things they have never experienced before, such as menstruation, wet dreams, sexual urges, feelings of attraction or embarrassment towards the opposite sex, more sensitivity, more closed off from parents, increased need for freedom, more attention to personal appearance and so on. The need to give and receive feelings of love becomes very important as a result of the function of gonadotropic hormones produced by the hypothalamus gland, namely the emergence of feelings of mutual attraction between male and female teenagers. Dating experience can cause a person to be permissive towards sexual behavior. This makes experienced teenagers more courageous in carrying out behavior such as hugging when dating. Adolescents who are in a relationship and have previously been in a relationship have a greater chance of engaging in risky dating behavior (Sirjammuniro, 2020).

Social environment

The research results found that the social environment of teenagers who had friends with risky behavior was 23.4%. Adolescence is a transition period from childhood to adulthood. Teenagers, if well directed, then they will become individuals who have a sense of responsibility, but if they are not directed, then they can become individuals with a bleak future. Many problems are faced by teenagers because teenagers try to find teak himself (his identity).

The factors that cause juvenile delinquency are caused by internal factors, which are things that cause teenagers to behave in certain ways that come from themselves. Absence of inner youth abilities adapt with the surrounding environment so that they will carry out wrong self-defense by means of rebellion and resistance. This is where aggressive behavior, violating applicable rules and norms, crime and violence will arise. Second, factors from outside (external) adolescents such as the family, school and community environment. In everyday life, teenagers are in three environments, namely family, school and society which will have a huge impact and contribution in shaping the personality and behavioral attitudes of teenagers. A good environment will shape good attitudes and behavior in teenagers and vice versa. Therefore, to handle and prevent juvenile delinquency, these three environments must operate in balance and must not be separated (Prasasti, 2017)

Limitations

This research cannot explain the relationship between variables. Research only describes the phenomenon of adolescent risk behavior in reproductive health. The sample

was non-random and this means that the research results cannot be generalized to a wider population.

Conclusion

The conclusion of the research indicates that a small percentage of teenagers have smoked (11.4%), 1% have tried drugs, 15.9% have watched pornographic videos, and 29.4% reported having boyfriends or girlfriends. Additionally, 23.4% of adolescents are influenced by a social environment associated with risky behavior. It is recommended that parents provide attention and affection to their children, closely monitor their social environments, and collaborate with teachers to ensure a positive influence on adolescents. Health workers are encouraged to work with schools and village officials to provide education on risk factors affecting adolescent reproductive health. This collaborative effort can enhance adolescents' knowledge and help prevent negative behaviors.

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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.

Conflict of interest

The researchers stated that there is no conflict of interest related to the implementation and publication of the results of this research. The entire research process, from planning, data collection, analysis, to report preparation, was carried out independently without any influence or pressure from any third party. A commitment to research ethics is upheld throughout the research process, ensuring transparency, accuracy and honesty in reporting results. Respondents' participation was voluntary with informed consent, and their confidentiality and privacy were maintained in accordance with applicable research ethics standards. With this statement, researchers hope that the research results can be trusted and used as a valid reference for the development of science and health practices related to ethnomedicine and reproductive health.

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