

## HEALTH EDUCATION HEALTH REPRODUCTION IN ADOLESCENTS AT SMPK SANTU STEFANUS KETANG

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### Abstract

Teenage is a dynamic development in an individual's life that is characterized by accelerated physical, emotional, and social growth. Physical changes that occur are the process of maturation of the genitals, besides that psychological changes also occur. This causes changes in attitudes and behavior, such as attention to appearance, interest in the opposite sex, seeking attention and seeking love, which then leads to sexual desire because adolescence tends to have a high level of sexuality due to maturity. sex hormones and development of the reproductive organs. This Community Service is carried out to increase the knowledge of teenagers about reproductive health.

**Keywords:** Health, Reproductive, Teenager.

### INTRODUCTION

Youth is one of the stages of human development. At this time humans experience changes or transitions from childhood to adulthood, which include biological changes, psychological changes, and social changes (Notoatmojo, 2007). Adolescence is a dynamic development in an individual's life characterized by accelerated physical, emotional, and social growth. Physical changes that occur are the process of maturation of reproductive organs, besides that psychological changes also occur. This leads to a change in attitude and behavior, because a person begins to pay attention to appearance, begins to attract the opposite sex, tries to attract attention, and feelings of love arise which then cause sexual desire because in adolescence there is a tendency. to have a high level of sexuality, due to the maturation of sex hormones and the development of the genitals.

According to the World Health Organization, young men or women are 10-19 years old. According to the 2010 census, there are around 67 million youth aged 10-2 years in Indonesia, or 27% of the total population (Central Bureau of Statistics, 2013). Many young people also have complex problems with the transition period, where the phenomenon of self-discovery in relationships with friends and others occurs, so that if misinformed, it is easy to fall into risky behaviors such as sex, and drugs. violence and HIV/AIDS. Based on this, the government stated the importance of understanding adolescent reproductive health from an early age, which includes what adolescents know, and how to maintain reproductive health to avoid health

problems. Reproductive health, like health in general, is a human right. To achieve this, adequate and comprehensive knowledge about reproductive health is needed. This knowledge is obtained in various ways, one of which is through education.

Education is the most important and effective way to acquire knowledge. The community, especially young people, really needs information about reproductive health. According to a study conducted by the World Health Organization (WHO) in 2010, the young age group (10-19 years) makes up one-fifth of the world's population and 83 percent of them live in developing countries. Adolescence is the age most vulnerable to reproductive health problems such as early pregnancy, unsafe abortion, sexually transmitted infections (STIs), including human immunodeficiency virus (HIV), sexual abuse, and rape. With the help of training, it is hoped that it can prevent such problems. In Indonesia, reproductive health education has not been widely carried out. Since 1996 Indonesia has agreed on the definition of reproductive health, namely a state of complete physical, mental, and social well-being that is not solely free from defects in all matters related to the reproductive system and its functions and processes (BkkbN). 2012. Reproductive health received special attention at the International Conference on Population and Development held in Cairo, Egypt in 199 (SKRRI, 2012).

The results of the RISKESDAS survey (2010) show that Indonesia has the highest rate of young marriage in the world, ranked 37th and second in ASEAN after Cambodia. In NTT Province, especially Kupang City, according to 2015 data, adolescent reproductive health problems are menstrual disorders: 78 cases, premarital sex: 117 cases, unwanted pregnancies: 9 cases, adolescent childbirth: 33 cases, sexually transmitted diseases: 20, reproductive health infections: 50 cases (Kupang City Health Council, 2015). The importance of education in the prevention of reproductive health problems. While reproductive health education in Indonesia is usually provided by non-school institutions such as BKKBN and PKBI in the form of counseling. Guidance is mostly carried out at the high school and non-high school levels, although the number of high school students in Indonesia is higher than high school students. Young people in the early stages of secondary school are at risk of extramarital sexual intercourse, either intentionally or unintentionally. Therefore, the best time to provide reproductive health education is at the end of primary school. It also helps young people who are unable to go to secondary school. Based on the above information, we are interested in doing community service about the influence of health education on adolescent reproductive health at SMPK Kota Ruteng. The purpose of this PKM is to increase adolescent knowledge about reproductive health. It is hoped that this study can reduce the prevalence of venereal diseases and teenage pregnancy. The results of this PKM will be a reference for health workers to carry out health promotion in the field of adolescent reproductive health.

## **IMPLEMENTATION METHOD**

The implementation of PKM is carried out in several stages which are divided as follows:

1. Method of implementation
  - a. This activity takes place face-to-face
  - b. The activity begins with a pre-test. Participants were given a questionnaire
  - c. After conducting the pretest, participants were given educational material "Reproductive Health in Adolescents"

d. Posttest is done in writing and orally

## 2. Implementation

This PKM activity was carried out for 2 days, namely May 17 and 19, 2022. The activity took place during school hours, 11.00-13.00 WITA with 50 participants, where these participants were grade 7 students of SMPK Santu Stefanus Ketang.

The pretest was held on May 17, 2022, and participants were distributed a questionnaire containing 20 questions related to reproductive health.

From the pretest results, it can be concluded that the participants do not understand the theory of Breast cancer, and knowledge level results are in the medium and low categories. On May 19, education about reproductive health was carried out with media we used were Powerpoint and LCD. After that, the team also showed videos of intimate organ care to prevent diseases that can occur in the genitals. After that, the team conducted a post-test using the same questionnaire of 20 questions containing reproductive health. The implementation of pre and post-tests is carried out to see and compare the knowledge of adolescents after and before education. In addition to being given a written post-test, on the second day, an oral evaluation was also carried out. Some participants were asked to answer questions directly according to the questions given by the PKM team.

## RESULTS AND DISCUSSION

This community service was carried out at SMPK Santu Stefanus Ketang for 2 days, namely May 17 and 19, 2022. The number of participants in this activity are students of Kela 7. The school is very supportive of this activity when the speakers are directly directed to the place of activity. The speaker explained the purpose of this activity and asked the participants to fill out a questionnaire containing 20 questions. On the first day, a pretest was carried out. The purpose of this pretest is to see the participants' knowledge about reproductive health. The implementation of this pretest can be seen in figure a. the implementation of this pretest was carried out for 30 minutes, where students were asked to fill out a questionnaire containing questions about basic knowledge about adolescents such as the development of adolescent reproductive organs, how to maintain the cleanliness of intimate organs, puberty and diseases that often attack the core organs. Some teenagers are in the medium and low categories and many answer the wrong question about how to maintain sex organs, whether male or female.

Based on data from the pretest results, the speaker also prepared material about knowledge about adolescents and the development of primary and skunder genital organs and included special videos about genital organ care in addition the speaker also prepared material about what can happen if you do not take good care of the genital organs. The participants were very enthusiastic in this activity, this counseling activity lasted for approximately 2 hours. During the counseling, participants were allowed to ask questions, and 3 participants asked questions in this activity. The first question of the teenagers is about venereal disease, menstrual irregularities, and the causes of late menarche menstruation.

At the end of the second day's session, a post-test was carried out with the same questions given during the pretest. From the results of the post-test, it was found that there was a significant increase in knowledge from adolescents. From the results of the post-test, 80% of

participants were able to answer correctly the questions on the post-test. The results of the paired samples statistical test show a p-value of 0.000 so it can be concluded that there is an influence of Health Education on adolescent knowledge about reproductive health in adolescents at SMPK Santu Stefanus Ketang.

The importance of adolescent knowledge about reproductive health is useful to avoid adolescents from negative effects such as abortion, drug abuse, and threats to reproductive health caused by immature emotional development. Therefore, adolescents need to be given Health Education to increase their knowledge. Piaget's theory explains that adolescent cognitive abilities are included in the formal operational stage, where the behavior displayed by adolescents is a critical sense, everything must be implemented rationally and clearly. In conducting Health Education, the media is also a thing that supports success in counseling.

Health Education is a dynamic process of behavior development to change or influence human behavior which includes components of knowledge, attitudes, or practices related to the goal of healthy life bail individually, in groups, and communities, and is a component of the Health program. The delivery of Health Education to the community consists of 3 (three) individual education methods, group education methods, and mass education methods (Notoatmodjo, 2012). Health Education conducted in this study is using the lecture method/technique (group education method) because the lecture method is a very effective method for all targets both high education and low education. In delivering the material, researchers use material aids that have been prepared by researchers using media power points that are equipped with pictures related to reproductive health.

Based on the results of this counseling, the media used in good Health Education is a lecture, In preparing counseling media, one of the things that must be considered is the content of the material we prepare as much as possible by the appropriate developmental age so that the material delivered is by the expected goals. In addition, presenters are advised to increase the diversity of methods, because the use of a single method throughout the activity is expected to reduce the level of attention of respondents, therefore we also use video media in the implementation of this Health Education.



**Figure 1 Briefing before PreTest**



**Figure 2 Doing the Pretest**



**Figures 3 and 4 Listening to the speaker present the material**

## **CONCLUSION**

After community service activities in the form of providing education like this are carried out, it can be concluded that providing education can have an impact on increasing adolescent knowledge and understanding about reproductive health. A good understanding of adolescent health helps adolescents to improve the health of reproductive organs and promote association to prevent unexpected occurrences. Socialization using a direct approach and utilizing existing resources can be useful, especially in accelerating the delivery of information to target participants as made in this activity where

## **REFERENCES**

- Health Research and Development Agency.2010. Basic Health Research 2013.Jakarta: Ministry of Health of the Republic of Indonesia
- Central Bureau of Statistics. (2013). Number of Indonesian Adolescents. Jakarta. BPS
- Benita, Nydia Rena (2012). The effect of counseling on the level of reproductive health knowledge in adolescent students of Gersaw's Christian Junior High School. Semarang
- Budi Widiyanto, Purnomi, Arum Muria Sari (2013). The effect of adolescent reproductive health education on knowledge of sexual behavior. Journal of Community Nursing Volume 1
- Delli Yuliana and Iyos Sutisna (2017). The Effect of Health Education Lectures on the Level of Adolescent Knowledge about Reproducer Health at SMP Negeri 2 Tanjungsari Sumendang. Journal of Comprehensive Nursing: volume 3 no 1
- Imron, Ali. (2012). Adolescent Reproductive Health Education Peer Educator and the Effectiveness of the PIK-KRR Program in Schools. Yogyakarta: Ar-Ruzz Media.
- Ministry of Health of the Republic of Indonesia. Indonesia Health Profile 2009. Jakarta: Ministry of Health R.I.; 2010
- Kunartinah. (2010). The influence of education and training, organizational learning on performance with competence as mediation. Journal of Business and Economics ( JBE) Volume 17 Number 1, March 2010

Nursalam, (2013). Nursing Research Methodology, 3rd Edition. Salemba Medika, Jakarta

Saekoko, Walder Dedy. (2017). Overview of the Implementation of the PIK R / M Program  
(Center for Information and Counseling for Adolescents / Students) Growth Stage in  
Kupang City. Kupang. Unpublished thesis

Setiadi, (2007). Concept and Writing of Graha Ilmu Nursing Research, Yogyakarta