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Analisis Program Pendidikan Keluarga tentang Kesehatan Reproduksi Remaja

Analysis of Family Education Program on Adolescent Reproductive Health

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Abstrak

Upaya promosi dan pencegahan masalah kesehatan reproduksi juga perlu diarahkan pada masa remaja, yaitu masa transisi dari masa kanak-kanak menuju dewasa, di mana terjadi perubahan bentuk dan fungsi tubuh yang cepat. Perlu ditingkatkan penyebaran informasi, konseling, dan layanan klinis untuk menanggulangi masalah kesehatan reproduksi remaja. Jenis penelitian ini adalah penelitian eksperimen semu dengan rancangan one-group pre-test and post-test design. Populasi dalam penelitian ini adalah keluarga yang memiliki remaja di UPT Lawawoi Sulawesi Selatan yang berjumlah 30 responden. Besar sampel penelitian adalah 30 responden yang dipilih dengan teknik purposive sampling. Pengumpulan data dilakukan dengan menggunakan kuesioner. Analisis data dilakukan dengan bantuan SPSS versi 20 menggunakan uji Wilcoxon, dengan taraf signifikansi $p < 0,05$. Hasil penelitian menunjukkan adanya pengaruh yang signifikan antara pendidikan keluarga terhadap kesehatan reproduksi remaja, dengan nilai p sebesar 0,021 ($\alpha < 0,05$). Kesimpulan dari penelitian ini adalah adanya dampak Program Pendidikan Keluarga terhadap Kesehatan Reproduksi Remaja di Puskesmas Lawawoi, Sulawesi Selatan. Diharapkan keluarga dengan remaja dapat memberikan pendidikan untuk membantu meningkatkan kesehatan reproduksi remaja.

Kata Kunci: *Pendidikan Keluarga_Kesehatan Reproduksi Remaja*

Abstract

Efforts to promote and prevent reproductive health problems also need to be directed at adolescence, a transitional period from childhood to adulthood, during which rapid changes in body shape and function occur. Information dissemination, counseling, and clinical services need to be enhanced to address adolescent reproductive health issues. This type of research is a quasi-experimental study using a one-group pre-test and post-test design. The population in this study consisted of families with adolescents at Lawawoi Community Health Center (UPT) South Sulawesi, totaling 30 respondents. The sample size was 30 respondents, selected using purposive sampling techniques. Data collection was carried out using a questionnaire. Data analysis was performed with the help of SPSS version 20 using the Wilcoxon test, with a significance level of $p < 0.05$. The results of the study showed a significant impact of family education on adolescent reproductive health, with a p-value of 0.021 ($\alpha < 0.05$). The conclusion of this study is that there is an impact of the Family Education Program on Adolescent Reproductive Health at Lawawoi Community Health Center (UPT) South Sulawesi. It is hoped that families with adolescents can provide education to help improve adolescent reproductive health.

Keywords: *Family Education Adolescent Reproductive Health*

BACKGROUND

The World Health Organization (WHO) stated that in 2018 there were 1.5 billion adolescents worldwide, with one in five people globally being between the ages of 10–24 (WHO, 2018). The 2021 Indonesian Demographic and Health Survey (IDHS) showed that 75% of adolescents had experienced vaginal discharge at least once in their lifetime, and 45% experienced it more than twice. The highest incidence of genital infections in the world occurs among adolescents, ranging from 35– 42% (IDHS, 2021). Several data sources and studies discuss adolescent reproductive health issues in relation to psychology. A lack of understanding among adolescents regarding

reproductive health can contribute to various problems, such as unplanned pregnancies, sexually transmitted infections (STIs), and risky sexual behaviors, according to data from BKKBN (BKKBN, 2021).
Information dissemination, counseling, and clinical services need to be improved to address adolescent reproductive health problems. In addition, the family and community environment must also care about the condition of adolescents, so they can help provide solutions when adolescents face problems—rather than blaming them. Adolescents should be guided and helped to find appropriate solutions by being introduced to reproductive health service centers where they can receive counseling or clinical care, allowing them to continue living their lives (Ratu Matahari, 2018). Adolescents play a very important role in the future sustainability of a nation. They are individuals who will eventually become part of the productive age population and will act as agents of development; therefore, they must be prepared to become quality human resources. This period involves complex changes, which require proper understanding, especially from the adolescent themselves. Adolescent development is a vulnerable and high-risk phase, and thus requires good personal health.
The current condition of adolescents is inseparable from the many challenges they face in achieving optimal reproductive health. Several issues even pose threats to adolescents, especially those related to reproductive health, which can affect their quality as future development actors and their readiness to build families (Rima Wirenviona, 2020). The role of parents is crucial in maintaining adolescent health, especially reproductive organ health. Parental roles and support serve as motivation for children to live healthily. The support and involvement provided by parents greatly influence their children's health status (Syahda, 2020).
According to a study conducted by Uyun (2013), parents play a crucial role in providing reproductive health education. When adolescents do not receive comprehensive understanding about reproductive health from their parents, they become vulnerable to misinformation about sex from external sources. Islam, both directly and indirectly, teaches principles of women's reproductive health, such as the prohibition of being alone with someone of the opposite sex who is not a mahram, encouragement of marriage, prohibition of sexual intercourse during menstruation, and guidance for women in managing childbirth. The family serves as one of the key support systems for adolescents in maintaining their reproductive health. Parents are a critical success factor in delivering reproductive health education to their children. If they are unable to provide accurate and proper information, adolescents will seek other sources that may be incorrect or harmful—such as pornographic videos, peers, or internet access.

METHOD

The research design used was a quasi-experimental one-group pre-test and post-test design. This study was conducted by observing one group before and after the intervention. The research was carried out in the working area of Lawawoi Public Health Center, Sidenreng Rappang Regency. The population in this study consisted of all parents of adolescents, and the sample was selected using total sampling, totaling 30 respondents. The Chi-square statistical test was used to examine the variable of family knowledge regarding adolescent reproductive health education.

RESULTS AND DISCUSSION

Results

1. Respondent Characteristics

Tabel 1.
Frequency Distribution by Gender and Educational Level

Gender	Frequency (n)	%
Male	9	30,0
Female	21	70,0
Total	**30**	**100**

Education	Frequency (n)	%
SD	4	13,3
SMP	12	40
SMA	11	36,7
PT	3	10
Total	**30**	**100**

Sumber : Data Primer, 2025

In Table 1, there were 9 male respondents (30.0%) and 21 female respondents (70.0%). Regarding educational background, 4 respondents (13.3%) had elementary school education, 12 respondents (40.0%) had junior highs school education, 11 respondents (36.7%) had senior high school education, and 3 respondents (10.0%) had higher education.

2. Univariate Analysis

a. Respondent Distribution Based on Reproductive Health Before Family Education

Tabel 2
Distribution of Respondents Based on Reproductive Health Before Receiving Family Education

Reproductive Health Before Family Education	Frequency (n)	%
Good	17	56,7
Poor	13	43,3
Total	**30**	**100**

Table 2 shows that before the family education, 13 respondents (43.3%) had poor reproductive health, while 17 respondents (56.7%) had good reproductive health.

b. Distribution of Respondents Based on Reproductive Health After Receiving Family Education

Tabel 3
Distribution of Respondents Based on Reproductive Health After Receiving Family Education

Reproductive Health After Family Education	Frekuensi (n)	%
Good	25	83,3
Poor	5	16,7
Total	**30**	**100**

Table 3 shows that after the family education intervention, 5 respondents (16.7%) had adolescents with poor reproductive health, while 25 respondents (83.3%) had adolescents with good reproductive health

c. Analisa Bivariat

Tabel 4
Frequency Distribution of the Impact of the Family Education Program on Adolescent Reproductive Health

Reproductive Health	Family Education				P Value
	Pre		Post		
	n	%	n	%	
Good	17	56,7	25	83,3	P = 0,021
Poor	13	43,3	5	16,7	
Total	30	100	30	100	

Table 4 shows that out of a total of 30 respondents, before the family education program, 13 respondents (43.3%) had adolescents with poor reproductive health, while 17 respondents (56.7%) had adolescents with good reproductive health. However, after the family education program, 5 respondents (16.7%) had adolescents with poor reproductive health, and 25 respondents (83.3%) had adolescents with good reproductive health. Based on the data analysis using the Chi-square statistical test, the Pearson Chi-square value yielded a p-value of 0.021 ($\alpha < 0.05$), indicating that the alternative hypothesis (Ha) is accepted—there is a significant impact of the family education program on adolescent reproductive health.

DISCUSSION

Adolescents often face various reproductive health problems as a result of risky behaviors. One strategic approach to improving adolescents' understanding of reproductive health is through health education. Health education is an essential aspect in efforts to increase knowledge and awareness of adolescent reproductive health (Harahap, Hadi, & Ahmad, 2024). Reproductive health refers to a person's ability to properly utilize their reproductive organs, including fertility, undergoing pregnancy and childbirth safely without risks, and returning to a healthy condition after giving birth. Reproductive health is not merely defined as being free from disease, but also includes the ability to have a safe and satisfying sexual life, both before and after marriage (Meilan, Maryanah, & Follona, 2018).

The research results show that out of a total of 30 respondents, before receiving family education, 13 respondents (43.3%) had adolescents with poor reproductive health, while 17 respondents (56.7%) had adolescents with good reproductive health. However, after the family education intervention, 5 respondents (16.7%) had adolescents with poor reproductive health knowledge, while 25 respondents (83.3%) had adolescents with good reproductive health knowledge. The researcher assumes that families—particularly parents—play a vital role in adolescent reproductive health, serving as one of the key support systems in maintaining it. Parents need to understand the attitudes and

behaviors of adolescents, especially starting from puberty and menstruation, and provide accurate information regarding reproductive health education. This helps prevent adolescents from seeking information from other sources that may be incorrect or harmful, such as social media, pornography, or peers. Ideally, parents should also serve as a safe space or trusted confidants for their children—like a friend to whom they can talk openly.
One key component of reproductive health is adolescent reproductive health. Efforts to promote and prevent reproductive health problems must be directed toward adolescence— a transitional phase from childhood to adulthood—when physical and functional changes in the body occur rapidly. This phase is marked by the development of secondary sexual characteristics and rapid physical growth, which make adolescents physically capable of reproduction but not yet mature enough to take responsibility for its consequences. Information dissemination, counseling, and clinical services must be enhanced to address these adolescent reproductive health issues. In addition, the family and community environment must be attentive to adolescents' conditions, so they can help provide solutions when adolescents encounter problems. Instead of blaming them, adolescents should be guided and helped to find appropriate solutions by being introduced to reproductive health service centers for counseling or clinical care—enabling them to continue living their lives (Ratu Matahari, 2018).

Adolescents play a crucial role in shaping the future of a nation. They are the next generation of productive-age individuals who will eventually become the drivers of national development, and therefore must be prepared to become high-quality human resources. This period is filled with complex changes, requiring proper understanding—especially from the adolescents themselves. Adolescent development is highly vulnerable and risky, thus requiring strong personal health. The current condition of adolescents is inseparable from the many challenges they face in achieving optimal reproductive health. In fact, several issues pose serious threats to adolescents, particularly those related to reproductive health, which can affect their quality as future development actors and their readiness to build a family (Rima Wirenviona, 2020).

This study is in line with Umaroh et al. (2023), although it employed a different method. The method used was qualitative with a case study approach. The research informants were selected through purposive sampling and consisted of nine adolescents who follow @Tabu.id. The research instrument was a semi-structured interview, with data collection carried out using in-depth interview techniques. Data analysis was conducted using thematic analysis with the help of OpenCode 4.02 software.

CONCLUSION

1. Before the family education program, 13 respondents (43.3%) had adolescents with poor reproductive health, while 17 respondents (56.7%) had adolescents with good reproductive health.
2. After the family education program, 5 respondents (16.7%) had adolescents with poor reproductive health, while 25 respondents (83.3%) had adolescents with good reproductive health.
3. There is an impact of the Family Education Program on Adolescent Reproductive Health at UPT Pasangkayu 1 Public Health Center, West Sulawesi, in 2025 (*p-value = 0.021*).

RECOMMENDATIONS

1. For Respondents / Adolescents It is recommended that this study serve as input for families to consistently provide education to adolescents regarding reproductive health.
2. For the Researcher This study is expected to broaden the researcher's insight into the importance of family education in improving adolescent reproductive health. Additionally, this research fulfills one of the requirements for completing an undergraduate degree in nursing.
3. For Institutions / Educational Bodies It is recommended that this study be used as a source of information, scientific documentation, and a foundation for future research.
4. For Future Research It is recommended that future studies involve a larger sample size and a longer research period in order to obtain more accurate and comprehensive results.

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