

Analysis of Adolescent Knowledge About Health Reproduction In The Working Area of The Youth Health Center Samarinda

Anik Puji Rahayu*, Shalsa Amalia Basir, Dita Ranissa, Odhilia Jessica, Erina Nur
Rahmad, Siti Rahma Ersha, Nur Asiyah Azhara

Nursing Program Faculty of Medicine, Mulawarman University, Samarinda, Indonesia

Corresponding : anikrahayu17@gmail.com

Abstract

Introduction: Puberty is the period in which adolescent development, physical changes, and sexual maturity occur. Some teenagers undergo these changes at an earlier age than others. This can give rise to problems because adolescents' knowledge about reproductive health is still lacking. **Purpose:** The aim of this research is to know and understand teenagers' knowledge about adolescent health reproduction in the Samarinda Youth Health Center working area. **Methods:** This is a type of quantitative descriptive research with a survey approach. The respondents in this study were teenagers aged 11-19 years, with as many as 30 respondents. **Results:** The research results showed that of the 30 respondents who were in the study, 17 respondents, or (57%), had a high level of knowledge about juvenile reproduction; 12 respondents, or (40%), had a medium level of knowledge; and 1 respondent, or (3%), had a lower level of knowledge about adolescent reproductive health. **Conclusion:** Based on the results of this research, it is necessary to provide health education to adolescents so that they increase their knowledge about adolescent reproduction and can maintain reproductive health and take the correct actions to maintain their reproductive health. This research conclusion must be health education with continuous that health reproduction to adolescent.

Keyword: knowledge, reproductive health, and adolescents.

1. INTRODUCTION

The main problems of adolescent reproductive health (KRR) in Indonesia include a lack of information about reproductive health as well as shifts in adolescent sexual behavior. Teenagers still underutilize reproductive health services. The main factor that pushes teenagers to utilize reproductive health services is their knowledge about the available services. Some teenage students actually received almost twice the information more possible for utilizing service health reproduction teenagers after getting support from family and friends. Provider services should also provide means of socialization for students and older people in a regular

way, as well as social networking. In addition to disseminating and expanding information, providers should also conduct training programs tailored to the specific age groups of each school. According to data from the World Health Organization (WHO) in 2013, a significant number of women in Africa, Bangladesh, India, Nepal, Yemen, Latin America, and the Caribbean began sexual activity at the age of 18, accounting for 40% to 80%. Similarly, in Uganda, teenage boys reported that their genitalia were secondary (Scientific et al., 2022). Collection data or information from Surveys Demographics and Health Indonesia (SDKI, 2017) shows that the majority are women (80%) and men (84%) who have been dating between the ages of 15 and 17.

According to the IDHS information, 8% of the respondents reported having sexual relations for fun, while 2% reported doing so for other reasons. These reasons include 47% who love each other, 30% who are curious or want to know, 16% who just happened, and 3% who were forced or influenced by friends (Komariah et al., 2020). The above statement is proven by the results of research in Indonesia in 2005, which reported that teenagers openly stated that they had committed sex pre-wedding or sex-free among them in Jabotabek 51%, Bandung 54%, Surabaya 47%, and Medan 52%. Every year, approximately 15 million teenagers aged 15–19 give birth; 4 million have abortions; and almost 100 million are infected with sexually transmitted diseases (STDs). Globally, 40% of all cases of HIV infection occur in young people, and recent estimates suggest that every day there are 7000 teenagers infected with HIV (Rahmawati & Goddess, 2020).

According to the Survey Demographics And Health Indonesia (IDHS) from 2012 (Nuryati, 2017), the rate of teenage pregnancy in the 15-19 year age group is 48 out of 1,000 pregnancies. Promiscuity among teenagers can increase the risk of contracting sexually transmitted infections, such as HIV/AIDS. Some teenagers have no knowledge of the truth about reproductive health and sexuality. Friends and the media, whether electronic or print, typically provide them with information that is either insufficient or inaccurate. Inaccurate information can push teenagers towards promiscuity, potentially leading to HIV and AIDS infections (Natalia et al., 2014).

Phenomenon behavior adolescent sexual East Kalimantan itself has been researched by PKBI and LPA. According to results from a study by the Association of Family Planning Indonesia (PKBI) and the East Kalimantan Child Protection Agency (LPA), sexual relations with free teenagers already happen and are critical. In the 2013 study, out of 25 teenage

respondents who had already engaged in sexual activity, four admitted to having done so at the age of 13, eight at the age of 14-15, five at the age of 15-16, six at the age of 17-18, and two at the age of 18. The PKBI and LPA Kaltim research was also carried out in 2013, involving 400 children and teenagers in the out-of-school category in Samarinda (51 percent male and 49 percent female). Among the 400 individuals aged between 12 and 24 that year, 316 resided with their parents, 37 had siblings, and 47 were boarding students. If intercourse results in pregnancy, as much as 285 respondents chose to marry and continue the pregnancy, while 45 people will abort, 46 people will be indifferent, and 24 people will run away. (Madjid, 2020).

PKBI (Indonesian Family Planning Association) East Kalimantan, 4 February 2013, said that behavior had improved. In East Kalimantan, teenage premarital sex has significantly increased over the past two years. According to Purwanto's research, And Calcium says that sex behavior is free in East Kalimantan, which is the largest contributor to HIV/AIDS sufferers, and Samarinda has an aged population with the highest teens compared to other cities. Based on research conducted by Purwanto and Kalsum (2016) on 125 respondents, it was found that the majority of respondents were female (57.6%), attended high school or vocational school (69.6%), and were 19 years of age or older (20.0%). Respondent: Which do you consider sexual activity: Holding Hands" 97.6%, "Hugging and Caressing" 97.6%, "Kissing" as much as 68.0%, "Kissing with Tongue" as much as 56.0%, "Fumbling Tool Sex" as much as 45.6%, "Masturbation" as much as 35.2%, "Oral Sex" as much as 44.0%, "Sex through the Anus" as much as 34.4%, and "Sex through Vagina" as much as 45.6%?

According to Purwanto & Calsum (2018), 11.2% of the major respondents experienced their first sexual encounter at the age of 17, and the youngest participant was 12 years old. According to the World Health Organization (WHO), adulthood begins when the age range is between 10 and 19 years. The onset of adulthood signifies a unique phase, characterized by a transition between stages, a relatively small age, and a significant change in physical appearance, behavior, and mental development (Organization, 2023). For this reason, teenagers need to know about adolescent reproduction in order to understand their reproductive health conditions.

2. METHODS

This is descriptive-quantitative research. This research used a survey approach. This study is done. The purpose of this study is to determine the extent of teenagers' knowledge

about health reproduction in the Samarinda region, specifically in the Work Health Center. Data collection is carried out with instruments in a study form questionnaire with a total of 30 respondents.

3. RESULTS

Table 4.1 Distribution Frequency Teenager Based on Age Age Frequency Presentation (%)

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Age	Frequency	Percent (%)
10	4	13%
11	4	13%
12	9	30%
13	6	20%
14	2	7%
15	1	3%
16	1	3%
17	1	3%
19	2	7%
Amount	30	100

Based on the results of the study, which has been done, the majority age is 12 years, with 9 respondents, or as much (30%); age 13 years, with 6 respondents, or as much (20%); then age 10 and 11, with 4 respondents, or as much (13%); then age 14 and 19 years old, with 2 respondents, or (7%); and age 15, 16, and 17, with 1 respondent, or (3%).

Table 4.2 Distribution Teenager Based On Level Education

Education	Frequency	Percent (%)
Elementary School	14	47%
Junior High School	10	33%
Senior High School	3	10%
Amount	30	100

Based on the table above, the majority of respondents are based on level of education, namely at the elementary school level, as many as 14 people, or as many as (47%), and respondents at the junior high school level, as much as 10 people, or as much as (33%), and then respondents at the senior high school level, as much as 3 people, or as much as (10%).

4. DISCUSSION

Wrong One element that influences knowledge is age. Psychological (mental) characteristics will change with age. Four main categories can be used to classify physical growth: change in size, change in proportion, loss of physical characteristics, and the development of new traits (Pariati & Jumriani, 2021). After research, the majority is found. There were 14 respondents, or 47%, at the elementary school level, and 10 respondents, or 33%, at the junior high school level. At the Senior High School level, there were only 3 respondents, representing 10% of the total. Education can influence an individual's behavior and shape their life patterns. In general, the more education somebody has, the higher their level of knowledge, understanding, and caring will tend to be. Education is an intentional and organized effort to create an atmosphere for study and the learning process, enabling students to actively develop their potential, religious and spiritual strength, self-control, personality, intelligence, sublime values, and other necessary abilities for their own and the public's benefit (Rahman et al., 2022).

The research results indicate that students possess a high level of knowledge about the health reproduction sector. 17 students, or as many as 57%, possess a high level of knowledge; in contrast, 12 respondents, or as many as 40%, currently possess a low level of knowledge, and 1 respondent, or as much as 3%, possess a low level of knowledge. The knowledge respondents possess about health reproduction indicates that most of them are already familiar with the topic. Matter: This show is knowledge, teenager-classified, and good. Many factors influence knowledge, including age, social level, education, exposure to mass and electronic media, and individual economic conditions. Understanding knowledge alone results from knowing; this happens after an individual senses something specific or an object. Sensing occurs through the five human senses: vision, hearing, smell, flavor, and touch (Silitonga & Nuryeti, 2021).

5. CONCLUSION

Based on the results of this research, it is necessary to provide health education to adolescents so that they increase their knowledge about adolescent reproduction and can maintain reproductive health and take the correct actions to maintain their reproductive health.

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