



Implementation of Ministry of Health Regulation No. 2/2025 on Reproductive Health

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Article Info	Abstrak
<p>Article History: Submitted 5/25/2026 Revised 5/28/2026 Accepted 6/4/2026</p>	<p>Permenkes Nomor 2 Tahun 2025 tentang Kesehatan Reproduksi merupakan regulasi strategis yang bertujuan menjamin pemenuhan hak-hak kesehatan reproduksi bagi setiap individu, termasuk remaja, pasangan usia subur, ibu hamil dan menyusui, lansia, serta penyandang disabilitas. Penelitian ini menggunakan metode literature review untuk mengkaji implementasi kebijakan tersebut berdasarkan berbagai hasil studi sebelumnya yang membahas program, tantangan, dan dampak dari layanan kesehatan reproduksi di Indonesia. Hasil kajian menunjukkan bahwa implementasi Permenkes ini telah memberikan kerangka kerja yang jelas bagi penyedia layanan kesehatan, namun penerapannya belum merata di seluruh wilayah. Beberapa kendala utama yang ditemukan mencakup keterbatasan sumber daya manusia terlatih, infrastruktur yang belum memadai, serta rendahnya literasi kesehatan reproduksi di kalangan masyarakat. Di sisi lain, terdapat praktik baik seperti pendidikan kesehatan berbasis sekolah, pemanfaatan media digital sebagai sarana edukasi, dan program pemberdayaan remaja. Berdasarkan temuan dari berbagai literatur, diperlukan strategi implementasi yang lebih terpadu dan berbasis bukti, penguatan kapasitas tenaga kesehatan, serta keterlibatan aktif lintas sektor untuk mewujudkan pelayanan kesehatan reproduksi yang inklusif dan berkeadilan.</p>
<p>Kata Kunci: Kesehatan Reproduksi, Literature Review, Permenkes No 2 Tahun 2025, Implementasi Kebijakan, Pelayanan Kesehatan</p>	
<p>Keywords: <i>Reproductive Health, Literature Review, Regulation No. 2 Of 2025, Policy Implementation, Health Services.</i></p>	<p>Abstract</p> <p><i>Ministry of Health Regulation Number 2 of 2025 on Reproductive Health is a strategic regulation aimed at ensuring the fulfillment of reproductive health rights for all individuals, including adolescents, couples of reproductive age, pregnant and breastfeeding women, the elderly, and persons with disabilities. This study employs a literature review method to examine the implementation of the regulation based on various previous studies discussing programs, challenges, and the impact of reproductive health services in Indonesia. The findings indicate that although the regulation provides a comprehensive framework for health service providers, its implementation remains inconsistent across regions. Major challenges include the limited availability of trained human resources, inadequate infrastructure, and low reproductive health literacy among the public. On the other hand, several best practices have been identified, such as school-based health education, the use of digital media for public outreach, and youth empowerment programs. Based on the reviewed literature, this study recommends more integrated, evidence-based implementation strategies, enhanced capacity-building for health workers, and stronger cross-sectoral collaboration to achieve inclusive and equitable reproductive health services..</i></p>

INTRODUCTION

Reproductive health is defined as a state of complete physical, mental, and social well-being—not merely the absence of disease or infirmity—in all matters relating to the reproductive system, its functions, and its processes. The scope of reproductive health is maternal and newborn health, family planning, the prevention and management of sexually transmitted infections (STIs and HIV/AIDS), adolescent reproductive health, and the prevention and management of abortion (Fatoni et al., 2015).

However, significant challenges continue to hinder efforts to improve reproductive health services in Indonesia. These obstacles include high rates of early marriage, low levels of sexual and reproductive health literacy among adolescents, and limited access to youth-friendly and inclusive services, particularly for vulnerable groups such as persons with disabilities and communities in remote areas (Palimbo et al., 2017; PUSPITO, 2021).

In response to these conditions, the Ministry of Health of the Republic of Indonesia enacted Minister of Health Regulation No. 2 of 2025 concerning Reproductive Health as a guideline for the implementation of comprehensive reproductive health services. This regulation emphasizes the importance of early reproductive health education, the enhancement of youth-friendly service quality, and the guarantee of equitable access for all levels of society, including marginalized groups (Auri et al., 2022; Fatoni et al., 2015).

As adolescents, they begin to explore romantic and sexual expressions

and may become sexually active. Decisions regarding their sexual activity—including the choice to remain abstinent or to use condoms and contraceptives if sexually active—shape their relational experiences and their exposure to risks such as sexually transmitted infections (STIs) and unplanned pregnancy. Variations in these experiences and behaviors exist among adolescents based on gender, sexual orientation, race and ethnicity, age, and other factors. For instance, in 2023, reports of current sexual activity varied by race and ethnicity, ranging from 11% among Asian students to 35% among American Indian or Alaska Native students, with 20–25% across other groups. Some adolescents engage in risky sexual behaviors, such as intercourse without a condom, which increases the risk of STIs and unintended pregnancies. According to recent data, although they represent 13% of the U.S. population and approximately 25% of the sexually active population, young people aged 15–24 accounted for nearly half (48%) of all reported cases of chlamydia, gonorrhea, and syphilis (all stages) in 2023. Furthermore, individuals aged 13–24 accounted for 20% of new HIV diagnoses in 2022.

The National Center for Health Statistics (NCHS) of the Centers for Disease Control and Prevention (CDC) tracks births and birth rates across all age groups and periodically publishes data on adolescent pregnancy. Recent data indicates that the teen pregnancy rate in 2019 was 29.4 pregnancies per 1,000 females aged 15–19, a decline from 60.8 in 2010. The majority of adolescents who give birth are in their late teens; of the 143,789 births to females aged 15–19 in 2022, 75% were to mothers aged 18–19.

According to Widiarta et.al (2023), access to information that actively involves

parents has been proven to increase adolescent knowledge regarding reproductive health. Similarly, the use of interactive digital learning media has shown effectiveness in reaching a broad adolescent audience and improving their understanding (Yana et al., 2024). Nevertheless, based on various studies gathered through literature reviews, the implementation of reproductive health policies, including Ministry of Health Regulation No. 2 of 2025, still faces constraints. These include a shortage of healthcare professionals with specialized training, the influence of conservative sociocultural norms, and the underutilization of technology in educational processes (Aprianti et al., 2023; Handayani, 2020; Iswanto et al., n.d.). Despite these hurdles, several innovations have emerged. Digital media-based education programs, cross-sectoral collaboration, and the strengthening of the roles of teachers and parents represent best practices that can serve as implementation models across various regions (Bancin et al., 2022; Ismiyati et al., 2019; Roslianti et al., 2024).

This study underscores the need for a more in-depth, evidence-based evaluation of reproductive health policy implementation to provide policy recommendations that are more inclusive and responsive to the needs of all community groups.

METHOD

The methodology employed in this study is a literature review, involving a systematic search of 21 national and international journals. Data were retrieved from academic databases including Google Scholar, ResearchGate, and through the

Publish or Perish. The selection criteria included articles published within the last decade, spanning from 2015 to 2025. The search strategy utilized specific keywords: 'adolescent reproductive health,' 'implementation of health ministry regulations on reproductive health,' 'regulations on reproductive health,' 'sexual health initiatives,' and 'abortion and sexual violence.' Each journal was analyzed based on its research methodology, findings, and conclusions to provide a comprehensive overview regarding the implementation of the Minister of Health Regulation Number 2 of 2025 about Reproductive Health.

ornamental plants around houses may further support mosquito survival.

Overall, environmental sanitation conditions were relatively good, with most households having access to clean water, functional sanitation facilities, and adequate waste disposal systems. Nevertheless, stagnant water, discarded items, and the absence of covered waste bins were still observed in a proportion of households. These conditions may facilitate mosquito breeding and contribute to the persistence of dengue transmission. Therefore, environmental management, regular cleaning activities, and community-based vector control programs should be strengthened to reduce dengue risk in Pelita Village.

RESULT AND DISCUSSION

The literature review reveals that the implementation of the Minister of Health Regulation (Permenkes) No. 2 of 2025 regarding Reproductive Health continues to face several challenges, particularly in reaching adolescent girls and women with disabilities. A primary concern is the significant lack of fundamental knowledge

among adolescents regarding basic reproductive health, pubertal changes, reproductive organ functions, and the prevention of both premarital pregnancy and sexually transmitted infections (Galbinur et al., 2021; Kristianti & Widjayanti, 2021). A substantial number of adolescents access this information via social media and the internet, which are often age-inappropriate and provide inaccurate data (Vebrianti et al., 2022; Widiarta et al., 2023). While some community service programs have begun developing Media Pembelajaran Interaktif (MPI)—which, when implemented effectively, has been proven to enhance reproductive health knowledge among high school students—these tools remain underutilized within formal teaching frameworks or integrated school programs (IP & SA, 2018).

Separately, the issue of access to inclusive services and information presents a distinct challenge, especially for adolescents with disabilities. The provision of youth-friendly information and education that accounts for specific needs remains highly limited in terms of both facilities and the human resources required for implementation (PUSPITO, 2021). Research in Bukittinggi, for instance, noted that the delivery of Communication, Information, and Education (KIE) for adolescents in premarital counseling has not been optimized and fails to consider the specific characteristics of the recipients (Darmayanti et al., 2020). Institutional factors also contribute to policy ineffectiveness. Healthcare professionals and educators in many regions have not received adequate training in adolescent- and disability-sensitive approaches. Furthermore, not all regions have established derivative or local regulations to

concretely support the implementation of the Permenkes (Fatoni et al., 2015; Iswanto et al., n.d.). Studies emphasize that addressing reproductive health education requires multi-stakeholder involvement. Active participation from parents, teachers, and adolescent *Posyandu* (integrated health post) volunteers can serve as a catalyst for change, strengthening adolescent understanding of reproductive health issues (Bancin et al., 2022; Kirana, 2020). Such collaboration serves not only to expand reach but also to build a system with a more robust social support network.

The adoption of technology through digital media and peer counseling is increasingly being utilized to reach adolescents in a broader and more adaptive manner (Ismiyati et al., 2019; Yana et al., 2024). However, implementing these approaches, particularly peer counseling, faces significant hurdles regarding digital literacy, existing infrastructure, and the availability of qualified facilitators. Overall, while findings from various sources indicate that Permenkes No. 2 of 2025 provides a clear strategic direction, technical, structural, and even cultural obstacles persist in the field. This underscores the necessity of strengthening regional legal frameworks and providing comprehensive training for field-level personnel.

The fulfillment of the right to information and reproductive health services for women with disabilities is a multidimensional issue that reflects structural, social, and policy inequalities. Based on literature reviews and findings from various studies, women with disabilities in Indonesia continue to face diverse obstacles in obtaining equitable and inclusive reproductive health services.

A primary barrier is the low level of reproductive health literacy, which renders women with disabilities more vulnerable to sexual violence, unintended pregnancy, and difficulties in accessing healthcare services. This aligns with research by Galbinur et al. (2021) and Kristianti & Widjayanti (2021), which indicates that the lack of reproductive health education and information leads to deficient knowledge among adolescents—including those with disabilities—subsequently increasing risky sexual behaviors.

Furthermore, research by Dewi R. Bancin et al (2022) and Aprianti et al.(2023) demonstrates that structured educational interventions, even when directed toward health volunteers or parents, can significantly enhance the understanding of reproductive health issues. Such interventions serve as a protective factor against the risks of early marriage and sexual violence. These findings underscore the importance of empowering families and communities as integral components of the support system for women with disabilities.

Another factor hindering access to services is the shortage of disability-friendly facilities and healthcare professionals. A study by Fatoni et al. (2015) reveals that although national-level reproductive health policies exist, their implementation has failed to reach vulnerable groups, including persons with disabilities, primarily due to a lack of inclusive training for healthcare providers. Similarly, Palimbo et al. (2017) argue that adolescent health services remain sub-optimal due to the lack of integration between policy frameworks and technical implementation in the field.

From a social perspective, stigma and discrimination remain formidable challenges. A study by Puspito (2021)

highlights the weak implementation of local policies, such as Bantul Regional Regulation No. 11 of 2015, in guaranteeing reproductive health rights for adolescents with disabilities. Discrimination arising from the perceptions of both the general public and service providers exacerbates the vulnerability of women with disabilities to systemic service inequalities.

As a solution, the literature suggests the importance of digital and interactive educational approaches. Yana et al.(2024) and Widiarta et al. (2023) emphasize that the use of inclusive digital media involving parental participation has proven effective in significantly increasing adolescent knowledge. This strategy can be adapted to reach women with disabilities, who frequently face mobility limitations and communication barriers.

Furthermore, it is essential to establish sustainable Information, Education, and Communication (IEC) programs tailored to the specific needs of women with disabilities. Damayanti, et.al (2020) emphasizes that the IEC approach is vital in preparing individuals for reproductive realities through adequate and accessible information. Consequently, existing policies must be redirected toward developing reproductive health service systems that are human rights-based, inclusive, and adaptive to the needs of women with disabilities. Interventions such as specialized training for healthcare providers, the provision of accessible facilities, and active community engagement are critical steps toward ensuring the fulfillment of rights and the equitable improvement of their quality of life.

CONCLUSION

Minister of Health Regulation (Permenkes) No. 2 of 2025 establishes a strategic policy framework to safeguard the reproductive health rights of all individuals, including adolescents, pregnant women, the elderly, and persons with disabilities. Through a literature review of relevant studies, it was found that although this regulation provides comprehensive guidelines, its field implementation remains sub-optimal. Persistent impediments include a shortage of specialized healthcare personnel, low levels of health literacy—particularly among adolescents—limited integration of technology in educational efforts, and prevailing stigma and discrimination against vulnerable groups, specifically women with disabilities.

Furthermore, many healthcare services remain inaccessible to persons with disabilities, and healthcare providers have not yet been equipped with adequate inclusive training. The participation of the community, families, and educational institutions has not been fully mobilized to support holistic reproductive health education. Nevertheless, emerging best practices, such as the use of digital media and peer counseling programs, have begun to demonstrate positive impacts, despite facing significant operational challenges during implementation.

REFERENCES

Aprianti, N. F., Faizaturrahmi, E., & Fatmasari, B. D. (2023). Edukasi Kesehatan Reproduksi Remaja Dalam Upaya Pencegahan Pernikahan Dini Di Dusun Lembar, Desa Lembar Selatan Lombok Barat: Indonesia. *Indonesian*

Journal of Community Dedication, 5(1), 1–6.

- Auri, K., Jusuf, E., & Ahmad, M. (2022). Strategi Layanan Kesehatan Reproduksi pada Remaja: Literature Review. *Faletehan Health Journal*, 9, 20–36. <https://doi.org/10.33746/fhj.v9i01.325>
- Bancin, D., Sitorus, F., & Anita*, S. (2022). EDUKASI PENDIDIKAN KESEHATAN REPRODUKSI (KESPRO) REMAJA PADA KADER POSYANDU REMAJA LEMBAGA PEMBINAAN KHUSUS KELAS I MEDAN. *Jurnal Abdimas Mutiara*, 3(1), 103–110.
- Darmayanti, D., Supiyah, S., & Mesalina, R. (2020). Analisis Pelaksanaan Komunikasi Informasi Edukasi (KIE) Kesehatan Reproduksi dan Seksual pada Calon Pengantin di Kota Bukittinggi Tahun 2019. *Jurnal Sehat Mandiri*, 15(1), 62–78. <https://doi.org/10.33761/jsm.v15i1.204>
- Fatoni, Z., Astuti, Y., Situmorang, A., Widayatun, W., & Purwaningsih, S. (2015). IMPLEMENTASI KEBIJAKAN KESEHATAN REPRODUKSI DI INDONESIA: SEBELUM DAN SESUDAH REFORMASI. *Jurnal Kependudukan Indonesia*, 10, 65. <https://doi.org/10.14203/jki.v10i1.56>
- Galbinur, E., Defitra, M. A., & Venny. (2021). Pentingnya Pengetahuan Kesehatan Reproduksi Bagi Remaja di Era Modern. *Prosiding Seminar Nasional Biologi*, 1(2), 221–228. <https://doi.org/10.24036/prosemnasbio/vol1/339>
- Handayani, F. (2020). PENINGKATAN PENGETAHUAN SISWA SMA MUHAMMADIYAH TENTANG TIGA ANCAMAN DASAR KESEHATAN REPRODUKSI

- REMAJA (TRIAD KRR). *Jurnal Pengabdian Masyarakat Kebidanan*, 2(1), 9. <https://doi.org/10.26714/jpmk.v2i1.5363>
- IP, L., & SA, W. (2018). Pendidikan Kesehatan Reproduksi Dengan MPI (Media Pembelajaran Interaktif) Untuk Meningkatkan Pengetahuan Kesehatan Reproduksi Pada Remaja SMA. *Jurnal Pemberdayaan Masyarakat Mandiri Indonesia (Indonesian Journal of Independent Community Empowerment)*, 1, 1–6. <https://doi.org/10.35473/jpmmi.v1i1.18>
- Ismiyati, I., Sunjaya, D., & Susannah, S. (2019). KEBUTUHAN SUBSTANSI MODUL KONSELING SEBAYA TENTANG KELUARGA BERENCANA DALAM KESEHATAN REPRODUKSI PADA REMAJA. *JPP (Jurnal Kesehatan Poltekkes Palembang)*, 14, 1–6. <https://doi.org/10.36086/jpp.v14i1.278>
- Iswanto, R. K. D., Shaluhiah, Z., Widjanarko, B., & Purnami, C. T. (n.d.). *KOMUNIKASI ORANG TUA DAN REMAJA TENTANG KESEHATAN REPRODUKSI: SCOPING REVIEW | JURNAL KESEHATAN IBU DAN ANAK (KIA)*. Retrieved May 15, 2026, from <https://ejournal.unaja.ac.id/index.php/KIA/en/article/view/1041>
- Kirana, Z. (2020). Partisipasi Remaja dalam Kegiatan Pelayanan Kesehatan Peduli Remaja. *HIGEIA (Journal of Public Health Research and Development)*, 4(Special 4), 919–928. <https://doi.org/10.15294/higeia.v4iSpecial>
- Kristianti, Y. D., & Widjayanti, T. B. (2021). Hubungan Pengetahuan Tentang Kesehatan Reproduksi Remaja Dengan Perilaku Seksual Beresiko pada Remaja. *Jurnal Ilmiah Kesehatan*, 13(2), 245–253. <https://doi.org/10.37012/jik.v13i2.486>
- Palimbo, A., Sukanto, S., & Susanti, E. (2017). *The Analysis Of Implementation Program Of Adolescent Reproductive Health Service In North Barito Regency, Center Kalimantan Of Indonesia*. 1–11. <https://doi.org/10.2991/smichs-17.2017.1>
- PUSPITO, H. (2021). ANALISIS IMPLEMENTASI PERDA KABUPATEN BANTUL NO.11 TAHUN 2015 TENTANG PEMENUHAN HAK PENYANDANG DISABILITAS PADA KESEHATAN REPRODUKSI REMAJA DISABILITAS. *Jurnal Keperawatan Dan Kesehatan Masyarakat Cendekia Utama*, 10, 217. <https://doi.org/10.31596/jcu.v10i3.754>
- Roslianti, E., Srinayanti, Y., Sunarni, N., & Raina, A. (2024). Pendidikan Kesehatan Tentang Kesehatan Reproduksi Remaja dan Dampak Seks Bebas pada Remaja di Man 2 Ciamis. *Daarul Ilmi: Jurnal Pengabdian Kepada Masyarakat*, 2, 39–46. <https://doi.org/10.52221/daipkm.v2i1.567>
- Vebrianti, V., Majid, R., & Jumakil, J. (2022). HUBUNGAN PENGETAHUAN, SIKAP, MEDIA SOSIAL DAN PERAN GURU TENTANG KESEHATAN REPRODUKSI REMAJA DENGAN PENCEGAHAN KEHAMILAN PRANIKAH DI SMA NEGERI 2 PARIGI KABUPATEN MUNA TAHUN 2022. *Jurnal Wawasan Promosi Kesehatan*, 3(3).

<https://ojs.uho.ac.id/index.php/winsjournal/article/view/29347>

Widiarta, M. B. O., Megaputri, P. S., & Armayanti, L. Y. (2023). *AKSES INFORMASI MELALUI ORANG TUA DAPAT MENINGKATKAN PENGETAHUAN REMAJA TENTANG KESEHATAN REPRODUKSI*. 13(1).

Yana, E., Prasetyo, D., & Zulvayanti, Z. (2024). UTILIZATION OF DIGITAL-BASED EDUCATIONAL MEDIA TO INCREASE ADOLESCENT REPRODUCTIVE HEALTH KNOWLEDGE: A LITERATURE REVIEW. *Media Penelitian Dan Pengembangan Kesehatan*, 34, 464–479.

<https://doi.org/10.34011/jmp2k.v34i2.2070>