

# Identification Of Reproductive Health Learning Needs For Adolescent Age 13 -15 Years By Parents In The GPM Ebenhaezer Congregation

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**Abstract:** This study aims to identify the needs of reproductive health learning materials that parents will convey to adolescents in the GPM Ebenhaezer Skip congregation. Data obtained through interviews with parents who have adolescents aged 13 s.d. 15 years. In addition, to support the accuracy of the data, interviews were conducted with adolescents. Descriptive analysis of the data, by categorizing the responses of the participants. The results of the study were parents of adolescents aged 13 – 15 years old, needs information about adolescent growth and development and expects the role of parents in the family to provide information on reproductive health materials.

**Index Terms:** Reproductive Health, Adolescents, Parents

## 1 INTRODUCTION

Reproductive health problems and issues have become an interesting topic. In the International Population Development Conference (ICPD) in Cairo in 1994, this issue was discussed by emphasizing the importance of addressing adolescent reproductive health problems and promoting sexual behavior and responsible reproduction [1][2]. These adolescent reproductive health problems, such as sexual harassment, commercial sex transactions, sexually transmitted diseases (STDs) including HIV-AIDS infection, acts of sexual violence and even coercion including rape, pregnancy and childbirth at a young age, which are at risk of maternal and infant mortality, and pregnancy. undesirable which leads to unsafe abortion and its complications that can lead to maternal death[3]. These issues are still the ICPD's attention in its Planing of Action (POA) after 20 years after the 1994 conference in Cairo[4]. Related to the above, nationally, sexual activity among adolescents and its consequences also received serious attention because it has become a very large social burden. These include unwanted pregnancy in adolescents and sexually transmitted infections[5]. In addition, several research results indicate that adolescents are thirsty for information on healthy reproductive health and sexuality, the number of adolescents who engage in sexual activity is increasing as a result of permissiveness, sexual experimentation, and the lack of accurate information on reproductive health and sexual behavior. These things often pose a threat to reproductive health and risky sexual behavior in adolescents.[6]

The results of Sahertian understanding's research on adolescents in the Ambon City Classical environment, regarding the function of the reproductive organs, sexual behavior during courtship, and self-confidence problems, showed that 80% of adolescents stated that they lacked information. Meanwhile, regarding the role of parents who provide information about changes in body organs and entering puberty, 60% of respondents stated that they received from friends and / or read books, and only 40% received from parents [7]. The results of other studies that were similarly

carried out on students of SMP Negeri 20 Ambon City, in learning reproductive health using booklets showed that adolescents aged 14 years did not know the signs of puberty in boys and girls, and teenagers really wanted to know. Adolescents need accurate and correct information on adolescent reproductive health so as not to provide opportunities and threats for them. A study of the Maluku Protestant Church Research Institute (Balitbang GPM), on cross-Class issues, found a high level of problems besides the level of domestic violence, infidelity, divorce, young marriage, youth and youth involvement in drugs and free sex that occurs in families -Christian family. A socio-cultural reality which suggests that the rapid development and cultural distribution of urban communities has slowly changed the mechanical forces in the villages so that social control has shifted from the public sphere (society is becoming more and more ignorant) and is more focused on the family room, and health problems. reproductive organs as another variant of public health conditions whose handling has also been intervened[8]. Several programs were formulated, such as synergizing teaching materials for SMTPI adolescents regarding sex education and reproductive health as well as drafting the concept of parenting education for parents, have become the attention of the church and have been formulated in the Formulation of Service Master Patterns and Service Development Master Plan (PIP-RIPP) (GPM) 2016-2025 [8].

The results of this study indicate that one of the factors causing the emergence of free sex behavior in adolescents is the lack of communication between parents and adolescents. The approach between parents and adolescents sometimes becomes difficult when there are problems in the family, which in turn makes the function of the family as a child educator unable to run optimally, so that communication between parents and children does not work optimally [9]. The Whitakker study, suggests that positive communication between parents and children greatly helps young people to build individual values and to make healthy decisions about their reproduction. Communication between parents and adolescents is one of the reasons for the emergence of problems with sexual behavior deviations and sexual deviations, in normal circumstances, the first environment that a child comes into contact with is his parents, siblings, or perhaps close relatives who live with him [10]. According to Mulatuwa, it turns out that communication about sexual and reproductive health problems is very low, due to cultural

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issues, taboo, embarrassment and a lack of communication skills that affect adolescent-parent communication about sexual matters. [11]

The results of interviews by researchers in a preliminary study with several parents revealed that parents did not have sufficient knowledge about reproductive health to be conveyed to adolescents, even though parents and other adults actually had the knowledge and authority to provide this education to adolescents in need. Some parents need health reproduction education so that it can be revealed to their teenagers, but parents are confused about what reproductive health material to convey to their teenagers. Therefore, research to identify reproductive health material that parents can convey to their adolescents is deemed necessary.

## METHOD

This research is an exploratory research on material needs that can be used as information on reproductive health learning for adolescents aged 13 – 15 years. Exploration of information using open-ended interview questions based on interview guidelines for parents and adolescents aged 13 – 15 years. Open questions were chosen in order to understand the material needs needed by parents in learning youth at home in the family. To support the parent interview data, interviews were also conducted with adolescents to support the data and accuracy of the interviews with parents. Parents and adolescents who were interviewed were 3 people each. Respondents were taken according to data from parents in the Ebenhaezer Congregation, which is domiciled in 13 Service Sectors. Taking parents and adolescents as participants from sectors that have adolescents aged 13 – 15 years are Sector I, II and XI in the service area of the Ebenhaezer GPM Congregation. Determination of parents who have adolescents aged 13 – 15 years of age as respondents with the consideration of adolescence in the church service category according to the Adolescent Service Administration and the Catechesis for Boys and Girls classifying youth groups in the age category 13 – 15 years and other considerations are that adolescence in the characteristics of adolescence is still in early adolescence, where in the early adolescence there have been many changes both physically, psychologically and socially as well as other changes that are not realized by them. This changing state often creates anxiety, low self-esteem and other social / socialization problems. Therefore, parents in the family as the closest people and especially those related to the children in the house can be the first and foremost people to observe and explain all these changes to adolescents.

## RESULT

The results of this study will present the characteristics of the participants and information on the needs of parents for reproductive health materials.

### Participants

The research was conducted at the GPM Ebenhaezer Skip congregation, in September 2020 on parents who have adolescents aged 13 – 15 years. The parents in question can consist of either father or mother. Table 1 is the characteristics of the parent respondents.

**Table 1.**  
*Characteristics of Participants*

Partisipan	Status	Sex	Education	Registration Status
Parents C	Mama	P	SMA	Does not Work
Parents M	Papa	L	SMA	Does not Work
Parents P	Mama	P	Sarjana	Workers
Youth K	Child	P	Kelas VIII	Students
Youth P	Child	P	Kelas IX	Students
Youth M	Child	L	Kelas X	Students

He participants of this study were the parents of the teenagers who were meant to be mom or dad. This means that the presence of parents, both papa or mama, provides opportunities and learning opportunities for adolescents to find out about their adolescence. The presence of both father and mother as teachers in the learning process for adolescents. Characteristics of parents based on education level, two parents graduated from high school and one graduated from university. This means that the level of parental education can be the basis for acceptance and knowledge of adolescent reproductive health. With the level of education, parents are expected to have information about adolescent reproductive health. Based on the characteristics of the participants, the work status of the parents, there are two parents who do not work, and parent who works. Even though most of them do not work, this provides space for parents to be closer and always with teenagers at home, and this is an opportunity for parents to always be with youth in assisting and learning reproductive health. Assistance and learning of reproductive health by parents for adolescents in the family, because the family is the first educational fostering institution for children's growth and development. Treating parents who are full of love, the values of life, religion and social are conducive factors to prepare children to become healthy and productive individuals and members of society [12]. Parents in the family provide reproductive health learning to adolescents, because family is an agent of basic education and the responsibility of preparing reproductive learning for adolescents [13]

### Information on Parents' Needs for Reproductive Health Materials

Interview with parents to obtain data on adolescent reproductive health material needs, problems faced by parents, and the role that adolescents expect from their parents. The results of the interviews with parents revealed that parents had difficulty providing reproductive health materials to adolescents because parents did not know where to start and what information to convey. Parents know their role in the family as head of the family, as father and mother because they are taught in religious values, carry out roles as companions, advisors, teachers but in the role of providing information about reproductive health, they are perceived as problems. Parents find it difficult to use good words related to reproductive health to convey to adolescents, because parents are afraid that they will actually make adolescents think negatively about their parents.

### The following is a transcript of the conversation with the parents

"...Beta Sandiri is confused about how to talk to children. Beta clay, there have been changes, but beta zinc knows what to say to people, the beta taste that reaches beta actually tells you things that should be zinc, beta can tell you ... "  
(Parent - C)

(I was confused myself, I wanted to talk to the children, I saw that they had changed, but I didn't know what to say to them, I don't think I should tell them things that I shouldn't be able to tell them).

"... Beta nich is confused, he knows how to talk about eating little time at the dinner table when eating before mo iko goes to school online, he said, last night he kincing without tidor, then beta memamg said, that was a sign that he was lost, But I want to explain, I'm still on the process, beta Sandiri, don't know how to say ... "  
(I was confused, didn't know what to say to my son at home, when it was time to eat at the dinner table before taking the online lesson, he said, last night he peed in bed. I told him, you're a big boy, but want to explain the process like what, I don't know how to tell myself.

Parents admit, so far, information on reproductive health education is rarely conveyed to adolescents. Adolescents show changes in body structure, because they have entered puberty, parents want to convey this information, but find it difficult to communicate about it. Like the mother M.

"... Beta wants to talk to Anana at home about being a teenager, because Ms. is already menstruating, but beta wants to talk about what, beta just looks at it, and beta thinks you will definitely know yourself (Parent-M)

In fact, this is different from teenagers, because teenagers want to hear from their parents about their adolescence.

"... Beta seng have ever heard mom or dad talk about what to do if you say you're a teenager, you have never talked about it if you have hair growing on your kidneys or genitals ..."  
(Teen K)  
(I never heard mom or dad talk about what will happen to us after we enter adolescence, they never talk if we teenagers will grow hair on armpits or pubic)

### Likewise adolescent M, revealed

"... Beta nich likes it if beta has daddy and mom, can teach katong to the teacher and the teacher at school, maybe if you are just like a teacher at school, katong can be a smart kid with someone else..."

(I like / like it If my mom and dad can teach us with the teachers at school, we can be smart kids just like everyone else) (Teen-M)

Adolescents need communication between parents and adolescents about reproductive health. Families, in this case parents, are expected to be able to provide information on

reproductive health education and at the same time provide guidance on attitudes and behavior to adolescents, therefore parents must be given sufficient knowledge and skills to be able to interact with adolescents [14]. Research in Ghana on the communication of sexuality education for children by parents found that parents talk about sexuality, but their conversation topics are limited, so that educational programs should encourage parents to expand the topic of sexual communication [15]. Kusheta's research on parent-adolescent communication about sexual and reproductive health problems among high school students, shows that the proportion of adolescents who communicate with their parents is 35%. The results of this study concluded that adolescents mostly did not communicate with their parents about reproductive health, even though they were aware of the existence of adolescent reproductive health services [16]. The debate about sexual education in reproductive health rests on the idea that sexual education is the responsibility of whom. The roles of the family and the state legally and morally are two poles that must be responsible for the education of children. Although there are other influencing factors such as media, culture and peers, their influence can have a negative impact [17]

Interviews with parents to find out the material needs that parents need to be able to convey to adolescents, parent D revealed that they need material related to growth and development that is often seen in adolescents, various changes and parental preparation to be able to provide explanations to adolescents. The following is the expression of Mrs. D

"... say your parents, can you talk about what if you say Sandiri Tar you know what money happened to you too, mom ?, beta pung ana parampuang, he's like lazy taking a shower, beta can only say if he takes a bath, he bobou, But beta, I think if that change means something has changed in your back, you think your parents should also know about what Katong Pung Anana is experiencing, you have to learn about the changes you are experiencing so that Katong Seng is stupid. when giving an explanation, pa dong ..."  
(Parent-D)

(We parents, can't talk to children if their parents don't know what happened to them, right mom? My daughter is lazy to take a bath now, I can only say that if you don't shower it will cause body odor, but I feel it is a change in adolescents, we parents also need to know about what their children are experiencing, so we also have to learn about the changes they are experiencing so that we don't experience difficulties when explaining to them)

Parent C admitted that he did not understand the material needs of adolescents reproduction

"... Beta personally feels, beta is really embarrassed to know about adolescents with things related to changes. But you really have to know about changes in your reproductive

organs, a boy, he takes a shower at the Tabuka door while beta sees that there is already a change in his back, beta feeling beta must learn about it so beta can talk for him ... "(Parent C)

I feel that I don't really know teenagers about things related to their changes. But I felt I had to know about the changes in her reproductive organs, the boy took a shower with the door open and I saw that there had been changes in her reproductive organs, I felt I had to learn about her reproductive changes in order to talk to her.

When confirmed with adolescents, adolescents said they needed their parents to provide information in adolescent development. The following are their expressions:

"... Katong hopes, daddy with mama can sit down and read the story, Seng is just angry but hear what Katong says, beta wants to say par mama said, there are male friends who like, but beta takutang mama with papa angry katong ... (Teen P).

(We hope that papa and mama can sit and tell stories with us, not only angry but can hear what is being said by us, I want to tell mom that there are male friends who like me, but don't dare because I'm worried, mama and papa will anger us)

Parents as the main source of educators in the family provide reproductive learning for adolescents. Adolescents need parents to play a role in providing reproductive health learning. Reproductive health material for early adolescents conveyed by parents about adolescent growth and development or healthy reproduction, does not mean providing sexual education that teaches adolescents to do irresponsible things, it becomes education that teaches teenagers to be able to protect themselves. Adolescents get reproductive health information about the reproductive process and various existing factors, because with the right information it is hoped that adolescents will have responsible attitudes and behaviors about the reproductive process. Reproductive health learning for adolescents who enter early adolescence, requires parents in their guidance. A teenage boy needs a model, namely his father and teenage girls need a model, namely his mother. It is important for parents to treat a child both growth and development. Reproductive health is not only related to the reproductive organs of men and women, but includes reproductive organs, changes in puberty, physical, psychological and other changes. Parents in the family convey to adolescents about the reproductive organs that God has given to humans with their respective functions. Dr. Hugh Jolly in (18), explains that physical changes during puberty should be completed with information about what happens to the opposite sex at the same age. The most important thing in reproductive health education for adolescents by parents is how parents can act as information providers for adolescents in dealing with the changes that occur to them.

## CONCLUSION

Based on the results of research on the identification of reproductive health material needs that will be conveyed by parents to adolescents in the Ebenhaezer GPM Congregation, it can be concluded that: adolescents aged 13 – 15 years old, needs information about adolescent growth and development and hopes for the role of parents in providing information on reproductive health materials.

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