
REPRODUCTIVE HEALTH EDUCATION THROUGH POCKET BOOKS AS AN EFFORT TO KNOWLEDGE AND ATTITUDES OF YOUTH

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Abstract

Basic health services in Indonesia have not placed adolescent reproductive health as a priority in health services, so it is necessary to carry out health education as an effort to increase knowledge and attitudes among adolescents. The aim of the community service: providing reproductive health education to adolescents, cervical cancer, and anemia in SMA Negeri 1 Kutalimbaru. Education is carried out so that adolescents maintain their reproductive health and are able to prepare themselves as future mothers. Reproductive health education is carried out from August to October 2020 while still implementing health protocols to prevent the transmission of COVID-19. Stages of activity: field observations, identification of partner problems, offering solutions, planning and implementing health education. At the beginning and at the end of the activity, a pre test and post test were carried out. The results obtained: reproductive health in adolescents has a good knowledge of 73%, about 71% good category cervical cancer, and about 75% good knowledge about anemia. The attitude about reproductive health in adolescents is good 73%, about cervical cancer is good 72% and about anemia is good 74%. Reproductive health education activities for adolescents through pocket books to increase the knowledge and attitudes of adolescents in SMA Negeri 1 Kutalimbaru, Deliserdang Regency, an increase occurred. Reproductive health education activities for adolescents need to be carried out continuously by activating School Health Enterprises (UKS) in collaboration with the working area Puskesmas

Keywords:

Keywords one Education-health; Keywords two Adolescents; Keywords Three Reproduction

Introduction

Reproductive health in adolescents in health services has not become a priority like other service programs, for example the immunization program for children, POSBINDU and so on. Besides having a physical impact, adolescent reproductive problems can also affect mental health, emotions, economic conditions and long-term well-being. Reproductive health problems in adolescents can be grouped as: risky behavior, lack of access to health services, lack of correct and accountable information, many access to wrong information without screening, STI problems including HIV/AIDS infection, sexual violence such as rape, abuse sexual and commercial sex transactions. Likewise with early pregnancy and childbirth at risk, maternal and infant mortality, unwanted pregnancies which often lead to unsafe abortion and its complications (Indonesia, K. K. R. 2015; Hasanah, 2017)

Teenagers often feel uncomfortable or taboo to talk about issues of sexuality and reproductive health, but because of their curiosity they will try to get this information. Often teenagers feel that their parents refuse to talk about sex, so they then look for alternative sources of information such as friends or the mass media.

Parents tend to feel uncomfortable and unable to provide adequate information about reproductive organs and reproductive processes. If there is a concern that education that touches on the issue of reproductive organ development and its function is to encourage adolescents to have premarital sex, which will cause fear among parents and teachers (Respati, 2012).

Most parents are not motivated to provide information about sex and reproductive health to adolescents because they are afraid that it will actually increase the occurrence of premarital sex. In fact, children who get sex education from parents or school tend to have better sexual behavior than children who get it from other people (Denno, 2015).

The reluctance of parents to provide information on reproductive health and sexuality to adolescents is also caused by a sense of inferiority due to their low knowledge of reproductive health (sex education). The pre-test results of the basic material for Healthy Reproduction of Children and Adolescents (RSAR) in East Jakarta (urban) and Lembang (rural) show that if parents feel that they have sufficient in-depth knowledge about reproductive health, they are more confident and do not feel awkward to talk about the topic. related to sex problems (Chandra-Mouli, 2015). The main

obstacle is precisely how to overcome the view that everything related to sex is taboo for unmarried people to talk about (Denno, 2015).

Adolescents are a service target group that prioritizes privacy and confidentiality (Jannah, S. R. (2017). This is a complication, considering that the basic health service system in Indonesia has not placed reproductive health, especially adolescents, as a priority in efforts to improve the quality of client-oriented services.

The results of research conducted by Surbakti.E (2018), in adolescents in the city of Medan showed that there was an increase in the mean knowledge after giving pocket books to students by 11.39 ± 4.93 , and the results of the Wilcoxon test statistical test showed that there was an effect of giving book one to an increase. knowledge mean with p value 0.017. Likewise with the attitude there was an increase in the mean of 12.67 ± 12.94 , and the results of the Wilcoxon test statistical test showed that there was an effect of giving book one on the increase in the mean attitude with a p value of 0.001.

Problems in community service locations began with a preliminary survey of several adolescents who did not know about reproductive health in adolescents. This is also supported by the results of research (Efendi, 2017) of 100 students, whose hemoglobin (Hb) was measured 40% of students experienced anemia. The impact of low Hb for students will certainly have problems with reproductive health, a decrease in learning concentration and the susceptibility to infectious diseases. Limited information relating to Reproductive Health in adolescents that can be used for health prevention and promotion activities through health education. Many studies suggest that top-down health promotion and disease prevention efforts from the government may be less effective when compared to bottom-up based programs. Therefore, to support reproductive health in adolescents, it is necessary to increase knowledge to give a positive attitude towards health with the principle of prevention is better than treatment. Health education is expected to increase knowledge and attitudes of adolescents about health

Method

The method of implementing community service is carried out in the following stages:

Preparation phase

The preparatory stage begins with conducting field observations, identifying problems and needs of partners, offering solutions to partners, making health education plans implementing and evaluating the health education process through pocket books. Preparation of material in the form of a pocket book on reproductive health in adolescents, cervical cancer, and anemia. Preparing a questionnaire as a material to measure the success of reproductive health education activities in adolescents represented (samples) of participants who are given pocket books.

Implementation Stage

In the implementation stage of community service:

Perform pre test and post test

The pre-test was carried out at the first face-to-face before reproductive health education was carried out. The post test is carried out after the educational activity. The pre and post tests were carried out using the google form in collaboration with the academic department. The number of questions tested during the pre-test and post-test were 31 questions for knowledge (reproductive health 20 questions, cervical cancer 10 questions and anemia 11 questions) and 41 questions for attitudes (reproductive health 15 questions, cervical cancer 16 questions and anemia 10 questions) , for these three topics in the form of multiple choices. The number of participants planned for community service activities is 100 people in SMA Negeri I Kutalimbaru Deli Serdang Regency according to the agreed schedule without disturbing the student learning process and still implementing health protocols. Health education with pocket books is carried out in stages or given in turns to avoid burnout. Each time the material was given through a pocket book, a pre-test was done for the pocket book. When distributing the next pocket book, a post test was carried out for the material that had been studied. And so on until they reach the three pocket books with details: the first stage of reproductive health in adolescents; second stage cervical cancer and third stage anemia in adolescents

Furthermore, reproductive health education for adolescents by providing pocket books on reproductive health in adolescents, cervical cancer, and anemia. After completing health education through a pocket book, a post test is carried out for adolescents who are considered to be representative of all the targets (at least 30% of the target targets). Increase the participation of youth (peer group) to promote reproductive health in adolescents through pocket books.

Evaluation Phase

At this stage, an assessment of the knowledge and attitudes of adolescents about reproductive health is carried out. After studying the 3 topics, a post test was carried out to assess the success of educational activities.

Results And Discussion

Results

Community service as one of the Tridarma Perguruan Tinggi activities carried out at SMA Negeri 1 Kutalimbaru, Deliserdang Regency has been going well by still paying attention to health protocols due to the COVID-19 pandemic situation. The activities carried out are in the form of Reproductive Health Education through Pocket Books as an Effort to Increase Adolescent Knowledge and Attitudes.

The results of community service can be described:

1. Characteristics of Respondents

Characteristics of respondents to adolescents in SMA Negeri 1 Kutalimbaru, Deliserdang Regency can be seen in the table:

Table 1
Distribution of respondents based on characteristics in SMA Negeri 1 Kutalimbaru
Deliserdang Regency in 2020

No	Characteristics	Total	Percentage (%)	
1	Age	≤ 16 years	32	32
		≥ 17 years	68	68
2	Parent of occupation	Farmers	54	54
		Labor	16	16
		Civil servants	10	10
		Employees	8	8
		Traders	8	8
		and others	4	4
3	Tribe	The Karo	68	68
		Java	22	22
		Batak	8	8
		and others	2	2
4	Family income	< Rp. 1.500.000	59	59
		Rp.1.500.000.-	20	20
		Rp. 3.000.000		
		Rp. 3.000.000.-	12	12
		Rp. 4.500.000		
5	Information sources	> Rp 4.500.000	9	9
		Mass media/electronics	66	66
		Print media	23	23
6	Residence status	Health worker	11	11
		Parents' house	92	92
		Boarding house	8	8
		100	100	

In table 1 it is known that the majority of respondents are ≥ 17 years old 68% and aged ≤ 16 years 32%. The jobs of parents are generally farmers 54%, laborers 16% and traders 8%. Based on the 68% ethnicity of the Karo tribe, the income of parents is generally between ≤ IDR 1,500,000, there is 59%. The source of information generally comes from mass / electronic media as much as 66% and 92% of respondents live with their parents.

2. Knowledge

Respondents' knowledge of the topic of reproductive health in adolescents, cervical cancer and anemia if the respondent has the ability to answer the questions given is at least 70% correct. Categorized: Good, by getting a score of 70-100, enough if the respondent gets a score of 35-69 and less if the respondent gets a score <35. Based on the results of the pre test and post test through a questionnaire given to respondents in SMA Negeri 1 Kutalimbaru, Deliserdang Regency, in the table below.

Table 2
Distribution of Respondents' Knowledge before and after Reproductive Health Education through Pocket Books at SMA Negeri 1 Kutalimbaru, Deliserdang Regency, 2020

Knowledge		Pre Test		Post Test	
		f	%	f	%
Reproductive health	Good	5	5	73	73
	Enough	17	17	25	25
	Less	78	78	2	2
Cervical cancer	Good	4	4	71	71
	Enough	28	28	26	26
	Less	68	68	3	3
Anemi	Good	12	12	75	75
	Enough	25	25	22	22
	Less	63	63	3	3
Total		100	100	100	100

Based on table 2, it is known that before the health education (pre test) was carried out, respondents had less knowledge of 78%, enough 17%, good only 5%. Knowledge of cervical cancer is 68% less, 28% enough, only 4% good. Knowledge of anemia, 63% less, 25% enough, only 12% good.

After conducting health education (post test) for adolescents about reproductive health, it is known that they have good knowledge of 73%, enough 25% and there are still 2% less knowledge. Knowledge of cervical cancer, both 71%, enough 26% and there is still less knowledge 3%. Adolescent knowledge about Anemi has good knowledge of 75%, enough 22% and there is still less knowledge of 3%.

3. Attitude

Attitudes of adolescents on the topic of reproductive health in adolescents, cervical cancer and anemia if the respondent has the ability to answer the questions given at least 70% correct answers. Categorized: Good, by getting a score of 70-100, enough if the respondent gets a score of 35 - 69 and less if the respondent gets a score <35. The results of pre-test and post-test through a questionnaire given to adolescents in SMA Negeri 1 Kutalimbaru, Deliserdang Regency on Reproductive Health Education through Pocket Books as an Effort to Increase Adolescent Knowledge and Attitudes, the following results were obtained.

Table 3
Distribution of Respondents' Attitudes before and after Reproductive Health Education through Pocket Books at SMA Negeri 1 Deliserdang Regency in 2020

Attitude		Pre Test		Post Test	
		f	%	f	%
Reproductive health	Good	3	3	73	73
	Enough	22	22	26	26
	Less	75	75	1	1
Cervical cancer	Good	5	5	72	72
	Enough	26	26	26	26
	Less	69	69	2	2
Anemi	Good	10	10	74	74
	Enough	24	24	25	25
	Less	66	66	1	1
		100	100	100	100

After the reproductive health education (post test) was carried out, it was found that reproductive health had a good attitude 73%, enough 26% and there was still a lack of attitude 1%. Cervical cancer is known to have a good attitude 72%, quite 26% and there is still a lack of attitude 2%. Anemia in adolescents, 74% good attitude, 25% enough and 1% lacking attitude.

Discussion

A. Characteristics of Respondents

Characteristics of respondents based on age ≥ 17 years are 68% and age ≤ 16 years 32%. According to the Indonesian Ministry of Health (2009), age is called early adolescence, aged 12-16 years and late adolescence, which is 17-25 years. As you get older, your reasoning and knowledge will increase. The maturity level of a person is one of the factors that can affect the level of knowledge and attitudes of adolescents where mature individuals have great adaptability to want to know something, in this case, reproductive health.

The jobs of the respondents' parents are generally farmers 54%, laborers 16% and traders 8%. Other factors that affect knowledge are also occupation, environment and socio-culture. Someone who works will have broader knowledge than someone who doesn't work because by working someone will get a lot of information from other people and many friends share experiences. Respondents in general are 68% Karo ethnicity, with 59% of parents' income between \leq IDR 1,500,000. This result shows that there is a relationship between work and income where women who are unskilled workers, such as laborers, farmers, pay less attention to reproductive health education for their children. Parents who work as laborers or farmers can be classified into low socio-economic conditions. (Hidayati, 2001), 66% of the information sources generally come from mass media /electronic. Most of the respondents obtained information sources from the internet, but some were from health workers and 92% of respondents lived with their parents.

B. Knowledge

Respondents' knowledge through reproductive health education through pocket books as an effort to increase knowledge and attitudes of adolescents in SMA Negeri 1 Kutalimbaru, Deliserdang Regency in 2020 based on table 2, then (pre-test) respondents have generally less good knowledge of the topics of reproductive health, cervical cancer, and anemia. From the results of the post test after reproductive health education for adolescents, it is known that most of them have good knowledge of $>$ than 70%, although there is still less knowledge about reproductive health, cervical cancer and anemia.

The results above indicate that the level of knowledge of respondents is generally in the good category and has reached the target of 70%, although there are still many deficiencies in its implementation due to the COVID-19 pandemic situation. This is because the respondent has been exposed to information both from printed media, electronic media or information from health workers and their experiences.

Behavior that is based on knowledge will last more than behavior that is not based on knowledge. Providing information through pocket books can increase one's knowledge (Notoatmodjo, 2010). According to Lewellyn (2002), adolescent knowledge about reproductive health is very important because it is part of the life cycle that is important for adolescents. Health promotion can be carried out through reproductive health education by using pocket books as an effort to improve adolescent knowledge and attitudes, to facilitate acceptance of the health promotion material provided, with the aim of increasing adolescent understanding, attention and knowledge, interest and attention on reproductive health. The pocket book media used in this community service is the result of 2018 research, namely the Effectiveness of Reproductive Health Education through Social Media on Student Behavior in Medan City in 2018, one of which is using a pocket book. It is hoped that the promotional media for the pocket book will be persuasive so that it can influence more people to carry out Reproductive Health efforts. There was an increase in the ability of adolescents to participate in reproductive health education using pocket book media (Kornia, 2011).

In adolescents there is an inner drive and encouragement to develop themselves (Zulkifli, 2012) Reproductive health education through this pocket book encourages adolescents to recall the material and pictures in the pocket book with the aim of being able to understand it more easily.

Pocket books are the most natural way to communicate with other people, besides pocket books are the most commonly used way for various health knowledge and facts. Pocket book media is a way of delivering material and has long been used in an effort to transmit knowledge in writing. The use of pocket book media is often used in delivering health material and can be used for a large audience (Mubarak, 2012).

Increasing knowledge by using pocket books is possible because the material in the handbook that is delivered is packaged in a language that is easy to understand for young people, equipped with pictures and examples in pictures. Even so, there are still youths who have low knowledge, it is possible that the pocket books are not read, because there are many tasks from other subjects.

C. Attitude

From table 3 it can be seen that at the initial state of the pre-test, reproductive health education interventions have less attitude, but at the end of the activity (post test) have a better attitude. Adolescent's readiness or awareness to act in the initial state is sufficient. Although initial knowledge is generally lacking, readiness or readiness about genital hygiene, menstruation, cervical cancer and anemia in adolescents has shown good readiness or willingness to act.

Even though it is assumed that attitudes are evaluative predispositions that determine how to act, attitudes and real actions are often much different. Because real action is not only determined by attitude alone, but by various other external factors (Saifuddin, 2008). Basically, attitudes are more personal in nature, while actions are more general or social.

The increase in respondent's attitude after being given treatment is the result of providing reproductive health education using pocket books. Adolescent reproductive health education is expected to be one way to prevent adolescents from dealing with risky sexual behavior. One of the reproductive health education settings, namely in school settings, should have a great opportunity to influence adolescent reproductive health behavior because most adolescents spend their time in school and make socialization and community at school. In addition, schools are the right place to get information about adolescent reproductive health.

In Indonesia, adolescent reproductive health education is integrated into the existing curriculum in schools; intra-curriculum, extracurricular, and counseling guidance. Some materials related to reproductive health and adolescence are in the subjects of biology, physical health and religion. There is no policy related to the reproductive health curriculum, so that each school carries out reproductive health education in accordance with the capacity and facilities of each school. This allows for variations in the implementation of adolescent reproductive health education. Diversity in adolescent reproductive health education will allow for different outcomes (outputs) from this education, including knowledge, attitudes, and further adolescent reproductive health-related behaviors, such as risky sexual behavior. Based on this description, it can be said that adolescent reproductive health education in schools is one of the factors that influence adolescent sexuality knowledge, attitudes and behavior. This is also supported by the L. Green Model, a health planning model that identifies health intervention strategies and the factors that influence them (Green, L., et al, 2000).

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Conclusion

Community service activities through reproductive health education in adolescents to increase knowledge and attitudes through pocket books can be concluded: Tri Dharma Perguruan Tinggi activities have been carried out well according to plan. Knowledge and attitudes of adolescents about reproductive health, cervical cancer and anemia have increased. This can be seen from the better knowledge and attitudes of adolescents about reproductive health in adolescents, cervical cancer and anemia. Reproductive health education has been running well and youth are willing to participate in continuous learning.

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