

# Management Of Improving Reproductive Healthy Lifestyle In Students' Environment Subang District Junior High School

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## **Abstract.**

*The Maternal Mortality Rate in Indonesia is still high, the number of cases of maternal mortality in Subang Regency is also still far from the achievement target. One of the causes of maternal death in Subang Regency is in the adolescent phase. Lack of knowledge of adolescents about reproductive health becomes an important point and has a widespread impact on women's health conditions in the future. This study aims to determine and analyze how the management of improving reproductive healthy lifestyles at SMPN 1 Subang, SMPN 2 Subang and SMPN 4 Subang. This research uses a qualitative approach with a case study method, the sample is determined purposively with key informants the principal, vice principal of curriculum, science subject teachers, PMR coaches and students. The research location is at SMPN 1 Subang, SMPN 2 Subang and SMPN 4 Subang. Data were obtained from in-depth interviews, document materials, and participant observation. The findings of this study are: 1) Goals and Programs for Improving Reproductive Healthy Lifestyles among students in 3 locations of SMP Negeri Subang, starting with the science education curriculum for grade IX students; 2) Implementation of the Reproductive Healthy Lifestyle Improvement Program in 3 SMP N Subang in the form of implementing learning activities in science subjects. In its implementation, the program to improve reproductive health is carried out through science learning, in collaboration with local health centers for the program of giving blood-added tablets, in collaboration with the health office in providing reproductive health counseling; 3) Problems in implementing the program to improve reproductive healthy lifestyles are teaching materials that are less relevant to the goal of reducing maternal mortality, consumption of blood-added tablets is not monitored properly, health education is not routinely given. 4) Solutions to problems in implementing programs to improve reproductive healthy lifestyles: adding teaching materials, monitoring and evaluating adherence to consuming blood-added tablets, and increasing reproductive health counseling activities. The product of this research is the adolescent reproductive health module for junior high school students.*

**Keywords:** Management, education, reproductive health, youth.

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## **I. INTRODUCTION**

Maternal Mortality Rate (MMR) is an indicator of a country's health status, so it is called because the maternal mortality rate shows the ability and quality of health services. The high MMR and the slow decline in this figure indicate that Maternal and Child Health (KIA) services are urgently needed to be improved both in terms of coverage and quality of services. Maternal death is death during pregnancy or within 42 days of termination of pregnancy, due to all causes related to or aggravated by pregnancy or its management, but not due to accident or injury and not due to other causes per 100,000 live births. [1]The maternal mortality rate in the world in 2017 according to the World Health Organization (WHO) was 287/100,000 live births and in developing countries 600/100,000 live births. Maternal mortality in Southeast Asia accounts for almost 1/3 of the number of maternal deaths that occur globally. Indonesia as a developing country has a higher MMR than ASEAN countries. Based on the 2015 Census Rate Survey (SUPAS) the maternal mortality rate in Indonesia is around 305/100,000 live births. This figure is still high considering that the target for reducing MMR in 2024 is 232/100,000 live births. The number of maternal deaths in West Java in 2018 was 275 cases, an increase of 16 cases compared to 2017 (259) cases. [2]

Based on research conducted by the UN population agency, UNFPA in 2017 almost half of the world's population is under 25 years old, this means almost 3 billion teenagers. In about 57 developing countries, 40% of the population is under 15 years of age. Currently, the number of Indonesian teenagers reaches 65 million people or 30% of the total population of Indonesia, and about 8.5 million teenagers are in

West Java. [3] Efforts to improve reproductive health for adolescents are stated in Government Regulation No. 61 of 2014 concerning Reproductive Health that Reproductive Health is a state of complete physical, mental and social health, not merely free from disease or disability related to the system, function, and reproductive processes. Adolescent Reproductive Health Service is an activity and/or a series of activities aimed at adolescents in the context of maintaining reproductive health. [4]

Minister of Health Regulation number 39 of 2016 concerning Guidelines for Implementing a Healthy Indonesia with a Family Approach, the Healthy Indonesia Program with a Family Approach consists of 4 (four) priority areas which include: a. reduction in maternal and infant mortality; b. decreased prevalence of stunting under five; c. control of infectious diseases; and D. control of non-communicable diseases. Some conditions that can cause unhealthy conditions for pregnant women include handling complications, anemia, pregnant women suffering from diabetes, hypertension, malaria, and four too young (too young < 20 years, too old > 35 years, too close 2 years apart, and too many children > 3 people). As many as 54.2 per 1000 women under the age of 20 years have given birth, while women who give birth at the age of over 40 years are 207 per 1000 live births. This problem is exacerbated by the fact that there is still a very young age at first marriage (< 20 years) as many as 46.7% of all married women. [5]

The high number of teenagers in Indonesia is accompanied by the problems faced by them. Of the various adolescent problems that are sticking out, sexuality is the one that gets the most attention from various circles. The problem of sexuality is a complicated problem for adolescents, because adolescence is a time when a person is faced with various challenges and problems, both developmental and environmental problems. These challenges and problems will have an impact on adolescent behavior, especially their sexual behavior. Data shows that 15 million adolescent girls aged 15-19 years give birth every year, about 15-20% of school-age adolescents in Indonesia have had sex outside of marriage. The high number of premarital sex among adolescents is closely related to the increasing number of abortions today, as well as the lack of knowledge of adolescents about healthy reproduction. The number of abortions is currently around 2.3 million and 15-20% of them are carried out by teenagers. This also causes the high maternal and infant mortality rates in Indonesia. [6].

The facts show that most teenagers do not know the impact of their sexual behavior. Often teenagers are very immature to have sex, especially if they have to bear the risks of the sexual relationship. Adolescents often lack basic information about reproductive health and access to affordable and confidential reproductive health services. Concerns about guarantees of confidentiality or ability to pay, and the reality or perception of adolescents about the displeasing attitude shown by health workers, further limit access to services, even if these services exist. In addition, there are also legal barriers related to the provision of services and information to youth groups. Many of the youth have less or no stable relationship with their parents or with other adults, with whom they should be able to talk about reproductive health issues that concern them or concern them. [7]

Education is a means of delivering information to individuals or groups with the aim of providing awareness or enlightenment about knowledge and an overview of things that have been, are and will happen. The behavior of adolescents whose biological development has matured, which is naturally ready to reproduce, will have an impact on two things, firstly resulting in an appropriate distribution in its place or deviating. Individual deviations in channeling their potential biological impulses/desires can be caused by ignorance or misunderstanding of their religious views and knowledge of sex. Reproductive health education is important to be given to junior high school students, this is relevant to Permendikbud number 37 of 2018 concerning core competencies and basic competencies of lessons in the 2013 curriculum in primary and secondary education, Government Regulation No. 61 of 2014 concerning Reproductive Health, and Permenkes number 39 of 2016 concerning Guidelines for Implementing a Healthy Indonesia with a Family Approach. [3]

Boyke Nugraha's research in 2018 [8] states that 10-20% of adolescents have very little knowledge of sexuality, so that it can cause adolescents who in their physical development will have very strong sexual urges but on the other hand they are kept away from things that smell sexuality. Likewise, Synovate's

research reveals that about 65% of their information about sex comes from friends and the remaining 35% comes from pornographic films. Ironically, only 5% of these adolescent respondents get information about sex from their parents. [8]

Educational institutions are the right vehicle to provide information to adolescents about adolescent reproductive health. Reproductive health is contained in the Junior High School curriculum for grade IX core competencies and basic natural science competencies for SMP/MTs. Core Skill 3 (KI3) is understanding and applying knowledge (factual, conceptual, and procedural) based on their curiosity about science, technology, art, culture related to visible phenomena and events. And KI 4 is processing, presenting, and reasoning in the concrete realm (using, parsing, assembling, modifying, and creating) and abstract realms (writing, reading, counting, drawing, and composing) according to what is learned in school and other sources same point of view/theory. The derivatives of KI 3 related to reproductive health are found in basic skills 3.1 which reads to connect the reproductive system in humans and disorders of the reproductive system with the application of lifestyles that support reproductive health, basic skill 4 which reads to present the results of searching for information from various sources related to health and reproductive health. prevention of disorders of the reproductive organs. [9]

Conditions that exist in junior high schools in Subang Regency, materials about reproductive health in schools are still lacking, discussions about reproductive health are still considered taboo, there is no relevant media to convey material on reproductive health so that the achievement of reproductive healthy lifestyles is not optimal, students do not know the importance of consuming iron contained in vegetables, students do not know how to maintain cleanliness and reproductive organs, students do not know female and male reproductive organs, and so on. If the information obtained by students is lacking, then there will be a correlation in the attitudes and lifestyle of students in maintaining their reproductive health. So that it will help prevent students from negative things. The root of the problem in this research is the lack of knowledge and reproductive health in junior high schools in Subang Regency, and the lack of relevant media to deliver reproductive health materials for adolescents. [10]

Based on the above background, the authors feel it is important to conduct research on the management of improving reproductive healthy lifestyles in the students of SMP Negeri Subang Regency.

## II. METHODS

The approach used in this research is a qualitative approach, or naturalistic inquiry with a descriptive method, namely research conducted in a natural setting. In this qualitative method, which is based on the philosophy of postpositivism, through natural conditions where the researcher is the key instrument, while in the combined data collection technique (triangulation), the data analysis is inductive / qualitative which emphasizes meaning rather than generalization [11]. The actual data in question is definite data which is a value.

Qualitative approach is a phenomenological philosophy that emphasizes appreciation, understanding of human behavior in a life. [12]. The data collection techniques used are:

### 1) Interview

Interviews were conducted in three schools that became the research locations, namely SMPN 1 Subang, SMPN 2 Subang and SMPN 4 Subang. Informants in the interview consisted of the principal, vice principal of the curriculum section, science subject teachers, PMR or UKS coaches, and students. Before conducting the interview, the writer designed the research grid and interview guide. The interview topics were related to the program to improve reproductive health in schools, program implementation, obstacles found during program implementation and solution design.

### 2) Observation

In addition to interviews, the authors also made direct observations to the research location, SMPN 1 Subang, SMPN 2 Subang and SMPN 4 Subang. Events and required data related to the improvement of reproductive healthy lifestyles in the environment of State Junior High School students in Subang.

### 3) Documentation

Documentation, namely written data that is needed is related to the Management of improving reproductive healthy lifestyles in the Subang State Junior High School students. The author obtained data from documentation regarding school profiles, teacher teacher data, data on the number of students, the curriculum used, especially those related to reproductive health, ongoing programs related to reproductive health including PMR and UKS extracurriculars.

#### 4 Triangulation

Triangulation is a technique of checking the validity of data that takes advantage of something else. Outside the data for checking purposes or as a comparison against the data [13]. In this study, the authors triangulated to check the validity of the data.

The location of this research was carried out at 3 State Junior High Schools, namely: SMPN 1 Subang, SMPN 2 Subang and SMPN 4 Subang, while the research subjects included

- 1) Principal: The principal is the leader in the education unit where this research is conducted, the policy makers and the programs implemented in the education unit. So that the principal becomes part of the key informant in this study to find out
- 2) Deputy Head of Curriculum
- 3) Science Subject Teacher
- 4) PMR and UKS supervisors
- 5) Students

The key informants of this study were the vice principal for curriculum at SMP N 1 Subang, SMPN 2 Subang and SMPN 4 Subang were teachers of science subjects at these schools. The approach of this research is to use a qualitative naturalistic approach as explained by Amirul Hadi, Haryono, [14] that the qualitative naturalistic approach here is not carried out in a laboratory, but in the field where educational events take place naturally (naturally). involved in natural behavior, such as teachers, students, parents, and others.

### III. RESULTS AND DISCUSSION

#### **Goals and Programs for Improving Reproductive Healthy Lifestyles.**

Improvement of reproductive healthy lifestyles among students in 3 locations of SMP Negeri Subang, starting from the science education curriculum for grade IX students listed in the basic competencies, namely: Basic Competence 3.1 : Connecting the reproductive system in humans and disorders of the reproductive system with the application of a healthy lifestyle support health; Basic Competence 4.1: Presenting information search results from various sources related to health and prevention of reproductive organ disorders [15]. Learning Objectives: To guide students to observe (read) problems, analyze, write solutions, and present the results in front of the class about the human reproductive system material with curiosity, discipline, confidence during the learning process and work together in groups.

Extracurricular activities related to health include UKS (School Health Business) and PMR (Teenager Red Cross) but have not touched adolescent reproductive health. The collaboration that was built across sectors and across programs included the Subang District Health Office through the nearest Public Health Center UPTD in the counseling program and the provision of blood-added tablets for young women.

The program to improve the reproductive health pattern does not seem to have been integrated with the academic program at this school. Student achievement is still a top priority. Meanwhile, the health program is seen as the other side that has not received an important priority.

#### **Implementation of the Program for Improving Reproductive Healthy Lifestyles**

In its implementation, the program to improve reproductive health is carried out as follows:

- 1) Carry out teaching and learning activities in science subjects in class IX according to the 2013 curriculum which contains Basic Competencies 3.1 and Basic Competencies 4.1. In the implementation of teaching and learning activities on the topic of reproductive health, teachers provide lessons by finding sources or learning media that are appropriate to the topic, for example learning videos from YouTube and articles related to the topic. The core of the learning still emphasizes on reproductive

health theories such as cell division, the development of male and female reproductive organs during puberty. In relation to basic competence 4.1, the teacher is not yet confident in providing material about disorders of the reproductive organs, there are several questions from students about irregular menstrual cycles and menstrual physiology and how healthy lifestyles are related to puberty. Students also received a lot of information about myths about reproductive health such as not being allowed to consume certain foods during menstruation, pregnancy would not occur if you only had sexual intercourse once and so on. This is a challenge for teachers to explain scientifically in a language that students can understand. The right knowledge from the right sources really contributes positively in increasing adolescent knowledge about reproductive health. If students do not get information from the right sources, while their curiosity and need for reproductive health is high, it is feared that they will receive incorrect information about reproductive health. Teachers need the right media and the right sources to explain reproductive health to students.

- 2) Cooperating with the puskesmas in giving blood-added tablets for adolescent girls. Efforts to provide iron tablets to schools for young women are carried out to minimize anemia in young women. If a young woman suffers from anemia and then becomes pregnant, she has the potential to give birth to a baby with a short body (stunting) or low birth weight (LBW). This is due to a lack of oxygen and food supply to the fetus during pregnancy. Therefore, girls in grades VII, VIII, IX are given blood-added tablets with the following administration rules: dose 1x/week, taken on the same day for example every Monday; taken after eating; taken with water or orange juice; do not take with tea, milk or coffee; after taking TTD (blood-boosting tablets), eat fruit that contains vitamin C to increase iron absorption.
- 3) Cooperating with the health office in providing health counseling The implementation of counseling by the health office has not been carried out continuously or continuously. Health center officers visit schools and deliver direct counseling to students. The topics given by vinegar vary, not only focusing on reproductive health, such as drug-alcohol abuse, HIV-AIDS. The topic of nutrition in adolescents, the dangers of pregnancy at an early age, maternal death at a young age, has not become a topic of counseling to students.

### **Implementation of programs to improve reproductive health**

Science textbooks do exist, discussing according to their competence, but when students ask more about how to live a healthy reproductive life, the references are still not available. It still needs socialization and hard work from all parties to make students aware that the topic of reproductive health is a very important topic to learn and can be a provision for them to prepare for a healthy reproduction, a bright future.

Blood supplement tablets are given by the puskesmas to schools. The school, through the teacher, gives blood tablets to female students. However, there is no monitoring and evaluation in the administration of the blood-added tablet. Are the tablets actually consumed by students or not. So that this becomes a problem, the program is good in planning and implementation, but monitoring and evaluation are not carried out. Based on the results of interviews with several students, some of them took the blood-added tablet, some did not take the blood-added tablet for several reasons, such as: there is a concern that if they take the blood-enhanced tablet, the stool will turn black; worry about side effects such as nausea; nothing to drink is okay; do not know what the benefits are for; Can be used for red lip color.

In addition, female students do not yet know how to take blood-added tablets. This Fe tablet should not be taken with tea, coffee or sparkling water, because the potency or effectiveness of these drugs will decrease. Students can take this medicine with water or orange juice. Students do not know the benefits and purposes of giving this blood-added tablet, so they do not consider it important.

### **Solutions to problems in implementing programs to improve reproductive healthy lifestyles**

Based on these problems, appropriate teaching materials are needed for teachers to explain the topic of reproductive health for adolescents. It is necessary to collaborate with cross-sectoral and cross-programme, especially experts from health workers who understand reproductive health so that students can understand the process of changing the reproductive system and how to respond to these changes with safe,

good and correct healthy behavior. The author has discussed with the education office and health office regarding the importance of teaching materials or materials that suit the needs of students and can make a positive contribution in reducing cases of maternal and infant mortality in Subang district. The author innovates to create a learning module on reproductive health for junior high school students in Subang district. The modules are designed in accordance with medical scientific principles, and are perfected with good module writing rules that are reviewed by education experts.

It is necessary to disseminate information to the related academic community about the importance of adolescent reproductive health programs that must be integrated into academic programs in schools, have careful planning, clear implementation, monitoring and evaluation are carried out on an ongoing basis [16].

The program for giving blood-added tablets by the puskesmas to female students has been going well. The health workers go directly to the school and give the school blood-added tablets through the teacher. The teacher distributes to the female students. However, there is no follow-up program that monitors and evaluates female students whether it is true that they have consumed the blood-added tablet. The solution to this problem is: puskesmas officers/health workers provide direct socialization to students about the importance of consuming blood-added tablets, what are the benefits of consuming blood-added tablets, what are the disadvantages of not taking blood-added tablets, how to take blood-added tablets, what are the effects side that may occur after taking blood-added tablets, what is recommended after taking blood-added tablets. After the socialization was conveyed to the female students, then a question and answer discussion was opened with the students to dismiss the students' doubts in consuming blood-added tablets. After the students understand the importance of taking blood-added tablets, they don't necessarily take the blood-added tablets. Because only changes in knowledge and attitudes have occurred from not knowing to knowing, from not wanting to be willing. However, the action has not yet been seen. So it needs to be witnessed by teachers and health workers that the students drink the blood-added tablet, then record it.

The outreach program to male and female students needs to be carried out on an ongoing basis. Schools and health centers need to sit together to discuss programs and detailed follow-up in providing counseling to students [17]. The topics presented are also adapted to the needs of the students and are related to efforts to reduce maternal and infant mortality in Subang Regency.

#### **IV. CONCLUSION**

Based on the results of the study in general, it can be concluded that the management of improving reproductive healthy lifestyles in Subang State Junior High School students, substantially the material contained in the science curriculum, basic competence 3.1 and basic competence 4.1, and there is a program for distributing blood-added tablets from the local health center.

#### **V. IMPLICATIONS**

As a consequence of the data from the Management research, Improving reproductive healthy lifestyles in the Subang State Junior High School students as described in the conclusions above, has the following implications:

- 1) If the goals and programs for improving reproductive healthy lifestyles among students at SMPN Subang have not been well integrated into the school system, then in its implementation it is still not a priority and there is no spirit for the urgency of reducing maternal mortality in Subang Regency.
- 2) The implementation of the management of reproductive healthy lifestyles in the Subang Junior High School students depends on the goals and programs prepared by the school.
- 3) The problem of the program of giving blood-added tablets to students of SMPN Subang is not monitoring and evaluating then the program that is already good can't be executed properly, and if students don't consume the blood-added tablets, it is hoped that it will contribute to reducing maternal mortality in Subang Regency will not be achieved.
- 4) Solutions to problems in improving reproductive healthy lifestyles need support from the academic community and other sectors involved such as the Education Office and the District Health Office.

## VI. RECOMMENDATION

The recommendations according to the results of research data on the management of improving reproductive healthy lifestyles in State Junior High School students in Subang Regency include:

- 1) It is necessary to develop teaching materials related to adolescent reproductive health. The author collaborates with the Education Office and the Subang District Health Office to publish a reproductive health module/book for junior high school students.
- 2) Schools need to increase cooperation with local health centers in reproductive health counseling.
- 3) It is necessary to hold an audience with the Regent so that the material on adolescent reproductive health in Junior High Schools becomes a priority program.
- 4) Increasing the role of schools and community health centers in monitoring and evaluation efforts in providing blood-added tablets for students of SMPN Subang.

## VII. THEOREM MANAGEMENT

- 1) Planning goals and programs on an ongoing basis will have a positive impact on the quality of learning
- 2) The correct implementation of goals and programs will have a positive impact on facilitating the learning functions and objectives to be achieved.
- 3) Problems in program implementation need to be carried out according to the root of the problem in order to become a concrete solution.
- 4) The right solution will produce a correct and professional work program.

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