



The Influence of School Health Unit Development on Increasing Adolescent Knowledge About Reproductive Health in Junior High School 4 Tasikmalaya

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Abstract. Adolescents are in their infancy and experience many changes, one of which is emotional changes, making them aggressive and easy to react and wrongly determining attitudes towards stimuli. Problems of dangerous behavior in adolescents to create a process for the next generation that can optimally follow learning at school. The purpose of this study was to determine the effect of coaching on increasing adolescent knowledge about reproductive health in 2019. The research method used a quasi-experimental design with one group pretest posttest design. The population in this study were students of Class 1–2 SMP Negeri 4 Tasikmalaya. The sampling technique used purposive sampling with the number of respondents as many as 30 people. The results of the statistical test with the Wilcoxon sign rank test $p = 0.000$. The conclusion is that there is an influence of UKS development on the improvement of adolescents regarding reproductive health. It is hoped that this research can be used as information, as well as education for adolescents regarding reproduction health.

Keywords: adolescent · knowledge · emotional changes

1 Introduction

The description of reproductive health set out in the International Conference on Population and Development is a state of complete physical, mental and social well-being, not only the absence of disease or infirmity, but in all matters relating to the reproductive system and its functions and processes [1].

Maintaining reproductive health is very important, especially for adolescents. Because, adolescence is the best time to build good hygiene habits, which can be assets in the long run. Adolescents are people aged 12 to 24 years. Adolescence is a transition from childhood to adulthood. That is, the process of introduction and knowledge of reproductive health has actually started at this time [2].

School-age children are the next generation as human resources in the future. From a large number of around 20% of Indonesia's population, school-age children are a

potential investment for the nation but are vulnerable because they are in a period of growth and development [3].

Lack of education on matters related to reproduction can in fact trigger unwanted things. One of the things that often happens due to lack of socialization and education is sexually transmitted diseases, pregnancy at a young age, to abortions which result in the loss of teenagers' lives [4].

According to WHO (2017) the highest incidence of reproductive tract infections (ISR) in the world is in adolescents (35%-42%) and young adults (27%-33%). The prevalence of ISR in adolescents in the world in 2016 were: candidiasis (25%-50%), bacterial vaginosis (20%-40%), and trichomoniasis (5%-15%) (Sari, 2013). Meanwhile in Indonesia, according to the BKKBN (2019), it is stated that the incidence of vaginal discharge in Indonesia is quite high, namely as many as 75% of women have experienced vaginal discharge at least once in their lives and 45% of them can experience vaginal discharge twice or more. While in West Java the incidence of vaginal discharge in adolescents reaches 45% [5, 6].

Data from the Tasikmalaya City Health Office (2020) states that there are several reproductive health problems in adolescents in the Tasikmalaya City area, the highest reproductive health problem is vaginal discharge 48% and menstrual menstrual disorders 43%. In addition, there are other adolescent problems, namely pregnancy out of wedlock, use of illegal drugs and sexual violence [7].

According to the National Family Planning Coordinating Board (BKKBN) in (2017) a prominent problem among adolescents is the problem surrounding the TRIAD KRR (Sexuality, HIV and AIDS and Drugs), the low knowledge of adolescents about adolescent reproductive health will affect the attitudes that will be carried out by adolescents. Adolescents related to adolescent reproductive health. The impact if there is no education about reproductive health, adolescents are easier to engage in risky sexual behavior [8].

The World Health Organization recommends that reproductive health education be included in the context of health promotion in schools. One of the efforts of the Indonesian Ministry of Health to overcome reproductive health problems is to create a Youth Care Health Service (PKPR) program in Puskesmas which has been implemented since 2003. To improve health conditions in the school environment, it is hoped that the implementation of School/Madrasah Health Business carried out intensively and with high quality and able to reach all students in Indonesia [9].

School Health Efforts (UKS) are efforts to foster and develop healthy living habits that are carried out in an integrated manner through education programs and health services in schools, religious colleges as well as efforts made in the context of fostering and maintaining health in the school environment. School Health Efforts are part of the main health efforts that are the burden of the work of the Puskesmas aimed at schools with children and their living environment, in order to achieve the best state of health for children and at the same time improve the learning achievement of school children as high as possible [10].

The results of interviews with students at SMPN 4 Tasikmalaya during the initial survey where there was a UKS room equipped with first aid kits, medicines, beds, but health education in the form of counseling carried out by the school, especially related

Table 1. Characteristics of Respondents

Characteristics of Respondents		Frequency (f)	Percentage (%)
Age	13 years	8	26,6
	14 years	12	40
	15 years	10	33,4
Gender	Male	14	46,7
	Female	16	53,3
Class	Class 1	15	50
	Class 2	15	50

to reproductive health was still lacking, so it was proven in preliminary survey 7 out of 10 students have knowledge related to reproductive health is still lacking.

Provision of knowledge about reproductive health needs to be done with the right method in order to increase knowledge on reproductive health [11].

Based on the description above, the researcher is interested in conducting research at SMP Negeri 4 Tasikmalaya regarding the effect of UKS coaching on increasing adolescent knowledge about reproductive health with the title “The Effect of UKS Guidance on Increasing Adolescent Knowledge about Reproductive Health”.

2 Research Method

The type of research used is a quantitative approach with a quasi-experimental design (quasi-experimental design) with one group pretest posttest design. The sample in this study was 30 students in Class 1–2 SMP Negeri 4 Tasikmalaya with a sample of students in class 1–2 SMP Negeri 4 Tasikmalaya in January-February 2018 as many as 30 people. The sampling technique in this study used purposive sampling. With inclusion criteria, namely students who are willing to be respondents, students in grades 1–2 at SMP Negeri 4 Tasikmalaya, students at SMP Negeri 4 Tasikmalaya ranging in age from 13–15 years and exclusion criteria are students who refuse to be given UKS guidance. Adolescents using a questionnaire. Analysis of research data using the Wilcoxon test [12, 13].

3 Results and Discussion

Based on Table 1, it can be seen that the respondents aged 13 years were 8 people (26,6%), 14 years old 12 people (40%), and 15 years old 10 people (33,4) consisting of 14 men (46,7%) and 16 women (53,3%). And from grades 1 and 2 each 15 people (50%).

Based on the Table 2, it can be seen that before the UKS Guidance on Increasing Reproductive Health Knowledge most of the respondents had less knowledge of 18 people (60%).

Table 2. Before UKS Guidance on Increasing Reproductive Health Knowledge

Knowledge Category	Frequency (f)	Percentage (%)
Not enoght	18	60
Enough	10	33.3
Good	2	6.7

Table 3. After UKS Guidance on Increasing Reproductive Health Knowledge

Knowledge Category	Frequency (f)	Percentage (%)
Not enoght	0	60
Enough	5	33.3
Good	25	6.7

Table 4. The Effect of UKS Development on Reproductive Health Knowledge Improvement

Knowledge category	Before		After	
	Frequency (f)	Percentage (%)	Frequency (f)	Percentage (%)
Not Enough	18	60	0	0
Enough	10	33,3	5	16,7
Good	2	6,7	25	83,3

Wilcoxon sign rank test

$p = 0.000$

Based on the Table 3, it can be seen that after the UKS Guidance on Increasing Reproductive Health Knowledge most of the respondents have good knowledge of 25 people (83,3%).

Based on the Table 4, it can be seen from the results of statistical tests with the Wilcoxon sign rank test, p value = 0.000, so it can be concluded that there is an effect of UKS development on increasing reproductive health knowledge.

One of the strategic efforts to improve Indonesian people who quality is the guidance program THROUGH improving education and health, in In its implementation, educational institutions are the main forum for realizing the aspirations of the nation. Health education is part of all health efforts that focus on efforts to focus on efforts to improve healthy living behavior. Health Education is an application of the concept of education in the health sector. In terms of education, health education is a practical pedagogy or practical education [11].

Health education is a how to support health programs that can produce change and increased knowledge in time short. Health education concept is a learning process in individuals, group or society from not knowing about the values of health to know, from

not being able to solve the problem health to be able. Health education can play a role in change the behavior of individuals, groups and society according to health values. The expected behavior change is maintain and improve health, prevent the risk of getting sick, protect yourself from the threat of disease, and participate actively in the public health movement so that behavior change is the result of health education [11, 14].

Efforts to foster and develop healthy living habits are carried out regularly integrated, both with educational programs in schools through sports education and health, through the efforts made in the context of fostering and maintenance of student health. School health efforts are a state school health and an environment that can provide learning opportunities and grow harmoniously, efficiently and optimally [15, 16].

Improving healthy life and high health status requires efforts instilling the principles of healthy living through health services and coaching healthy school environment. Health Business Schools (UKS) are: activities carried out to improve children's health school age in each type and level of education. In order to improve the quality education and student achievement in school [17, 18].

UKS is an important strategy to improve the health of school-age children because schools are organized community groups where information can be more easily disseminated. According to the age of students at each level of education, it can be instilled in maintaining reproductive health [19].

The results of this study are supported by the research results of Muhammad Arief Budiono (2014), namely it is known that knowledge respondents are good because the average is 85.65% respondent answered the correct answer of the 25 questions given, where is the result of the question the knowledge shows respondent's knowledge related to reproduction health. Thus, UKS development through reproductive health education can increase students' knowledge related to reproductive health [20].

In general, after receiving UKS guidance, students know about the physical changes that occur, psychological changes, how to maintain the cleanliness of the reproductive organs, get to know more about menstruation, recognize physiological and pathological vaginal discharge, recognize adolescent problems and deviations in adolescents. This result is also in line with the results of the study Yarnita (2018) which states that Health Training on School Health Efforts (UKS), Clean and Healthy Life Behavior (PHBS) and First Aid in Accidents (P3K) can increase respondents' knowledge. One of the strategic efforts to improve the quality of Indonesian people is the existence of education and health improvement programs. The school as a place for the teaching and learning process to take place must become a "Health Promoting School" for all students and components in the school so that schools can improve the health of their school residents. UKS as a vehicle to improve the ability to live healthy and the health status of students as well as create a healthy environment with the UKS program has the UKS Trias which includes health education, health services and UKS development as education and health efforts must be implemented in an integrated, planned, directed and responsible for instilling, cultivating, developing and guiding to live, enjoy and implement the principles of healthy living in the daily lives of students, including reproductive health [21–23].

The results of this study are also strengthened by According to Sitepu (2015) To realize the school health business program, an important aspect that must be considered is quality human resources, to create quality human resources, one must have a good

knowledge. To get quality Human Resources, efforts are needed, one of which is the activity of fostering School Health Business (UKS) through reproductive health education. This can support the implementation of the UKS program in schools in order to realize the health of all school members in the school environment [24–26].

4 Conclusion

From the results of this study, it can be concluded that There is an effect of UKS development on increasing adolescent knowledge about reproductive health in 2019 seen from the results of statistical tests with the Wilcoxon sign rank test $p = 0.000$. It is hoped that this research can be used as information, knowledge and education for adolescents regarding reproductive health.

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References

1. Widiyastuti, dkk. Kesehatan Reproduksi. Yogyakarta. Fitramaya. 2009
2. Kemenkes R. Situasi Kesehatan Reproduksi Remaja (<http://www.depkes.go.id/download.php?file=download/pusdatin/infodatin%20reproduksi%20remaja-ed.pdf>): Pusat Data dan Informasi Kementerian Kesehatan RI. (online) 2015.
3. BKKBN. Kajian Profil penduduk Remaja (10–24 tahun) : Ada apa dengan remaja. Policy Brief Puslitbang kependudukan-BKKBN; 2011;1
4. Centers for Disease Control and Prevention.(a) Sexual Risk Behavior: HIV, STD, and Teen Pregnancy Prevention. Tersediadalam: https://www.cdc.gov/healthyyouth/sexualbehaviors/index.htm?s_cid=hyhomepage-004; 2015.
5. Riset Kesehatan Dasar (Riskesdas). Badan Penelitian dan Pengembangan Kesehatan Kementerian RI tahun 2017
6. Dinas Kesehatan Provinsi Jawa Barat. Badan Penelitian dan Pengembangan Kesehatan tahun 2019
7. Dinas Kesehatan Kota Tasikmalaya. Badan Penelitian dan Pengembangan Kesehatan tahun 2019
8. Badan Kependudukan dan Keluarga Berencana Nasional, Badan Pusat Statistik, Kementerian kesehatan I. Survei Demografi dan Kesehatan Indonesia: Kesehatan Reproduksi Remaja. Jakarta; 2017.
9. Setiowati, Tri Ayu. 2017. Perbedaan Perilaku Reproduksi Antara Remaja Yang Kesehatan Mengikuti dan Tidak Mengikuti Pusat Informasi dan Konseling Remaja di SMA 1 Sewon
10. Kementerian Pendidikan dan Kebudayaan. Pedoman Pembinaan dan Pengembangan UKS/M. Direktorat Jenderal Pendidikan Dasar dan Menengah Kementerian Pendidikan dan Kebudayaan. 2019
11. Notoatmojo, S. Pendidikan dan Perilaku Kesehatan. Jakarta: PT Rineka Cipta; 2007.
12. Arikunto, S. Prosedur Penelitian, Suatu Pendekatan Praktek. Edisi Revisi V. Jakarta: Rineka Cipta; 2010
13. Sugiyono. Memahami Penelitian Kualitatif. Bandung: Alfabeta. 2008
14. Notoatmodjo, S. Kesehatan masyarakat ilmu dan seni. Jakarta: Rineka Cipta. 2017

15. Kementerian Kesehatan RI. Pedoman Akselerasi Pembinaan dan Pelaksanaan UKS. Jakarta. 2016
16. Kementerian Kesehatan RI. Pedoman Akselerasi Pembinaan dan Pelaksanaan UKS. Jakarta Nasrul, Zainul, Hafid F, Taqwin. 2016
17. Wijayanti. 2014. Pelaksanaan Program Usaha Kesehatan Sekolah (uks) Pada Sekolah Dasar Negeri Di Wilayah Kerja Puskesmas Kecamatan Doloksanggul Kabupaten Humbang Hasundutan.
18. Syatawati, N., T. Respati, DS. Rosyada. 2017. Efektivitas Metode Promosi Kesehatan dalam Meningkatkan Pengetahuan Tentang Kesehatan Reproduksi Siswa SMP Negeri. Vol.1 No.1.
19. Candrawati, et al. Pelaksanaan Program UKS Dengan Perilaku Hidup Bersih Dan Sehat (PHBS) Siswa Sekolah Dasar Di Kecamatan Kedung Kadang Kota Malang. Jurnal-CARE Vol3(1). 2015
20. Muhammad Arif Budiono, Muji Sulistyowati. Peran Uks (Usaha Kesehatan Sekolah) Dalam Penyampaian Informasi Kesehatan Reproduksi Terhadap Siswa Smp Negeri X Di Surabaya. Departemen Promosi Kesehatan dan Ilmu Perilaku Fakultas Kesehatan Masyarakat Universitas Airlangga. 2014
21. Yarnita Y. Pelatihan Kesehatan Tentang Usaha Kesehatan Sekolah (Uks), Perilaku Hidup Bersih & Sehat (Phbs) Serta P3k Di Sman 05 Tapung Kab. Kampar.. Jurnal Pengabdian Untuk Mu Negeri, Vol 2 No.1, Mei 2018
22. Kementerian Pendidikan dan Kebudayaan. Pedoman Pelaksanaan UKS di Sekolah. Jakarta. 2012
23. Kementerian Pendidikan dan Kebudayaan. Pedoman Pelaksanaan Usaha Kesehatan Sekolah (UKS) SMK Tahun 2018. Jakarta. 2018
24. Kementerian Kesehatan RI. Rencana Strategi Kementerian Kesehatan Tahun 2015–2019. Jakarta 2015.
25. Kusmiran, E. Kesehatan Reproduksi Remaja dan Wanita. Jakarta : Salemba Medika. 2011.
26. Priyato. Perubahan Dalam Prilaku Kesehatan; Konsep dan Aplikasi. Yogyakarta: Graha Ilmu. 2015

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