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Health Promotion and Preventive Contents Performed During Reproduction System Learning; Observation in Senior High School

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Abstract. The higher numbers of cases around sexual behavioral deviance on adolescence are significantly related to their knowledge level about the health of the reproduction system. Thus, teenagers, especially school-aged, have to receive the complete information which emphasizes on recognize promotion and prevention knowledge. This article aims to describe information about health promotion and prevention, which delivered by the teacher in Senior High School learning process on topic reproduction system. The data gained through focused observation using observation sheet and camera recorder. Further, data analyzed descriptively. The result show promotion and preventive approach have been inadequately presented. There are two reasons. Firstly, the promotion and preventive value are not technically requested in the final assessment. The second, the explanation tend to refer to consequences existed in the term of the social and religious norm rather than a scientific basis. It can be concluded suggestion to promote health reproduction and prevent the risk of health reproduction need to be implemented more practice with a scientific explanation which is included in a specific program for adolescence reproductive health improvement.

1. Introduction

Teens sexual behavior is influenced by knowledge about reproductive health. Learners who have knowledge of reproductive health know about themselves, the maturity of their reproductive organs, understand their physical and psychological changes, avoid themselves from risky behavior (free sex) and be responsible for the reproductive process [1]. WHO (World Health Organization) added that healthy reproduction is not solely free from disease or disability in all matters relating to the reproductive system, as well as its functions and processes, but also has a complete physical, mental, and social well-being.

Although there is no statistical data that explains the correlation between low knowledge of reproductive health and sexual behavior distortion, [2] have proven a link between reproductive health knowledge and sexual behavior. A research involving 2000 adolescents aged 18-24 in West Java in 2004 -2006 informs about respondents’ reproductive health, in general, that is "very low" (over 75% of respondents) and indicates lack of information and education related to sexual and reproductive health, so that risky adolescent sexual behavior is feared to increase [3]. These concerns are proven by the increase in free sex behavior and the spread of HIV/AIDS in Padang City, West Sumatera which gained in the eighth position in the term of HIV/AIDS cases in Indonesia [4]. In 2015, 227 HIV cases
were found, consisting 181 men and 46 women, and 81 cases of AIDS, consisting of 63 men and 18 women [5].

Several studies have highlighted the important role of reproductive health promotion programs, including schools, on knowledge of the reproductive health of school-age adolescents. Teenagers who drop out, tend to experience unprotected sexual behaviors that are at risk for HIV and pregnancy. Several studies existed has developed HIV prevention school-based program along with an evaluation project related to sexual and reproductive health promotion for South African and Tanzanian adolescents [10]. In addition, a school-based HIV prevention program in South Africa which suggested that the program can be more effective if directly targeted to actual targets-adolescents who are sexually active, proposed that research on linking school quality to academic performance on aspects of sexual desire, pregnancy, and marriage is likely limited. A survey study informed that parents and schools are a source of reliable information for a number of young women in Nigeria [7].

The availability of today's reproductive health knowledge resources can be said to be varied and easily accessible. Television turned out to be the main source of information on reproductive health for some high school students in Banguntapan [6]. Not many different, Nigerian girls in Nigeria favor the internet [7] because online sources are easily accessible [8]. Both of these media may provide unlimited reproductive health information, but do not automatically guarantee the performance of healthy sexual behaviors. For example, the majority of students in Iran have an adequate level of confidence about the risks of AIDS and other sexually transmitted diseases, but they had low ability to practice healthy life behaviors [9]. Respondents were also aware of the importance of reproductive health knowledge, unfortunately services for this were not sufficient.

Refer to these phenomena, schools have vital role to participate reproductive health education because educational institutions are an integral part [11]. Sex education programs have been implemented in secondary schools [12]. This research touched on the pedagogical aspects of learning materials on high school reproduction system. Specific study in the term of learning process contribution is required because more students prefer teacher explanation around health reproduction information, besides school involvement is needed to provide a more responsible sources. Therefore, our research aims to describe how promotion and preventive of health reproduction are performed by teacher during learning process. On the substance of the national high school curriculum, adolescence health reproductive education is contained in the standard contents, namely Basic Competence 3.12, 3.13, and 4.12. The ideas contained in the principles of competence are the principles of human resource quality improvement; and to present analysis result of free affairs, disease, disorders on structure and function of reproduction organ, the technology of the reproductive system.

The preliminary survey of researchers in December 2016 towards high school students in Padang indicated that the students rarely known that regularly bathing as way to maintain health reproduction. This achievement indicated that students’ knowledge were far from coverage of reproductive health component

2. Method
This study describes the promotion and preventive reproductive health information delivered in the learning of human reproductive system in Senior High School level, consisting of 2 high schools in the city of Padang. The selection of sample and sites is based on the assumption that both school could represent the average state of learning of reproduction system materials, as both school exist on higher and lower category. Data are collected from observation to learning, interviews and student responses during learning. Those, we used the instrument in the form of check list of promotion content and reproductive health preventive, interview guides and video recording. The reproductive health promotion and preventive content in the check list refer to the 2008 national curriculum content standards and promotion- preventive concept according to Kholid, 2015; Mubarak, 2007, and Irianto, 2015. Instrument validity reviewed by educational experts and medical fields. Data analysis adopted qualitative description techniques.
3. Results and Discussion

Based on observational data, the delivery of reproduction system materials has integrated promotion and preventive values. The promotion value in this study consisted of knowledge of the internal and external human organs of reproduction in men and women (including disorders and disorders), and knowledge of human reproductive functions including spermatogenesis, oogenesis, menstruation, fertilization, pregnancy, lactation, sexually transmitted diseases and contraception. The appearance of promotion value on aspects of knowledge about reproductive organs arises through verbal explanation, task discussions in Student Activity Sheets, and teacher-student questions and answers.

With these methods, teachers verify students' knowledge of the structure and function of internal and external reproductive organs in men and women. Through the study of female reproductive organs, the teacher presented the importance of selecting safe sanitary napkins because of the existence of threat on carcinogenic constituents. In addition, students are emphasized to maintain the reproductive organs in the sense of avoiding contact with risky sexual behaviors and behaviors that affect HIV, such as consuming narcotics and drugs.

However, promotion and preventive health knowledge of reproductive health have not been completely presented in the promotion and preventive indicator. In addition, the explanation is not technical, such as guarding the reproductive organs by wearing cotton underwear, do not wear tight underwear and thick and hot, change underwear 2-3 times a day, do not wear humid underwear, cut pubic hair regularly, wash with clean utensils every finished urination / large, do not consume alcohol, consume nutritious food, exercise regularly, do not use drugs, and do not smoke [13].

The teacher's promotion appearance on the knowledge aspect of the reproductive function has included knowledge of gametogenesis, menstruation, pregnancy, birth, contraception, and sexually transmitted diseases. An interesting finding of researchers captures the statement "Do not arouse before the time comes, because coercive things are not going to be good results" and "Do not do premature ejaculation" that arises when discussing spermatogenesis. The statement indicates that there are two different views of the teacher on spermatogenesis. First, teachers equate spermatogenesis with sperm release, which can be stimulated through sexual activity. Whereas spermatogenesis is a process of sperm formation in the testes that are routine processes that occur internally male reproductive organs. Second, the teacher's warning that students do not do premature ejaculation reflects that premature ejaculation is understood as a sexual activity. Whereas premature ejaculation is a condition of the disorder of the workings of the organ that causes sperm out early.

Overall, the promotion approach on the sub-topic of male reproductive function has included preventive content. The use of the words "do not" has a preventive effect that maintains the cycle of gametogenesis. The next promotion approach is shown when discussing menstruation. Along with the explanation of the normal menstrual cycle, the explanation of menstrual disorders successfully attracts students' attention. This is proven by the emergence of 2 (two) questions related to menstruation "Suppose I menstruate on April 4. What is my date of ovulation "? and "Does painful menstruation (dismenore) can lead to infertility" ?. Content analysis of both questions indicates that female students have an awareness of recognizing the reproductive function that occurs in themselves. The menstrual discussion is associated with pregnancy because adolescents who have experienced menstruation have a chance of having a pregnancy. But must be passed by referring to religious and social norm so as not to risk with abortion behavior in case of pregnancy out of wedlock. "... halalness in marriage. Do not try to have young age marriage." This series of explanations is actually very potential if associated with the necessity of the ideal age to marry. However, there is no record of promotion knowledge about the risk of young age marriage. In addition, teacher said, "getting married is not only physically ready but also emotionally ready". More, there is no scientific explanation.

Two subtopics that are not explicitly discussed are interference in the reproductive system and an explanation of contraception. The subtopic diseases of male and female reproductive organs are not discussed in detail, set forth in the independent reading duty instructions on Sexually Transmitted Diseases, HIV and AIDS. In fact, the exposure of disorders and disorders can serve as a warning and raises students' awareness. The contraceptive subtopic is only implicitly mentioned when discussing
the female reproductive organs that continue with the call to protect the reproductive organs from HIV infection, using condoms. But the teacher stressed that it does not mean there is any suggestion of using condoms that may be misleadingly interpreted as "using a condom safe for sexual intercourse".

Observational facts suggest that the promotion and preventing approach to reproductive health tends to be oriented towards adherence to social values, not content-oriented. Generally, teachers choose a normative approach rather than a logical content approach. Teachers are worried about the overt delivery of knowledge about organs and reproductive function can inspire teens to try to show deviant sexual behavior. In contrast to Ann's et. al study results, 1995, who found that practical knowledge of reproduction such as contraception is not proven to encourage risky sexual behavior, rather purity-oriented knowledge has been shown to encourage sexual experimentation. Other similar studies based on the results of a study of empirical literature that examines the effects of HIV / AIDS and health and sexual education on adolescent sexual behavior among informants that education on reproductive health or HIV / AIDS does not increase adolescent sexual activity and begins before sexual activity desires [14].

High school students are teenagers who are being formed thinking realistically, critically and scientifically. The knowledge of reproductive health should be presented in the context of biological science and its consequences to the physiological disorders of the body. For example masturbation and masturbation problems. These two sexual activities are categorized as sexual activity that is prohibited in religious teachings because such behavior deviates from the fairness. Fulfillment of sexual desire is through marriage which is regulated by the religious norm. This statement actually has a scientific explanation that the effects of masturbation vary according to individual circumstances. Masturbation is seen as instrumental in maintaining the functioning of the circulatory system, the nervous system, and the muscular system [15]. Other experts argue masturbation is dangerous if the intensity is excessive. Another example, the logical approach to the ban on marriage at an early age. What should be said is the risk of a young pregnancy that can lead to high blood pressure, infant disability, cervical cancer, premature birth, anemia and even maternal deaths because the reproductive system is immature to experience pregnancy and childbirth. This explanation can be attributed to the statement "Do not approach adultery. It is a great sin, not only in the world, but also the till hereafter, since you have been embarrassed." Teachers should explain that the impact of adultery is early pregnancy which finally cause some dangerous.

The application of non-specific promotion and preventive approaches relates to the topic demands being tested in the final exam. The results of the interviews indicate that promotion and preventive materials are not subject to the subject matter test. For that, teachers should prioritize the delivery of materials that become indicators of the final evaluation of learning outcomes. However, if there are questions related to reproductive health, it will be answered in accordance with the needs of students.

4. Conclusion

This study is limited in terms of the number of research sites to be observed simultaneously because the learning of the reproduction system material is relatively simultaneous in all SMAs. Nevertheless, it can be concluded that the appearance of promotion and preventive approach to reproductive health in biology teaching reproduction system material tends to be implicit and more to make religious and social norms as a preventive reference. The study of preventive content has not provided adequate provision for adolescent-aged schooling because reproductive health education has not been a legitimate mandatory program as school responsibility. Although the proportion of urban adolescents with a high risk of sexual risk is only 16.7% (out of 350 responders), [4] survey shows that West Sumatra occupies the eighth position of HIV / AIDS in Indonesia indicating an increased risk of HIV risk if there is no clear prevention program. In relation to research findings in which teachers have not explicitly implemented promotion and preventive health reproduction, the recommendation of training program improvement and teacher supervision need to be considered [16]. Further, the researcher emphasizes the need for national level programs to take advantage of the subject matter, introducing alternative teaching methods, helping to improve teacher-student relationships and community-
community counsellors. In fact, we need to think together to implement the concept of "promoting school health" for school-age teenagers who have been internationally existing and proven to be effective [17].

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