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## HEALTH EDUCATION TO INCREASE ADOLESCENTS' KNOWLEDGE ABOUT PREVENTING PREGNANCY

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### ABSTRACT

Adolescence is a period of rapid growth and development both physically, psychologically and intellectually. The typical nature of teenagers is that they have a great sense of curiosity, like adventure and challenges and tend to be brave enough to take risks in their actions without prior careful consideration. If the decisions taken in dealing with conflict are inappropriate, they will fall into risky behaviour and may have to suffer short-term and long-term consequences in various physical and psychosocial health problems. The nature and risky behaviour of adolescents requires the availability of caring adolescent health services that can meet the health needs of adolescents, including services for reproductive health. The aim of this community service activity is to increase teenagers' knowledge about preventing teenage pregnancy so that it can reduce the incidence of teenage pregnancy. This health education was carried out via online zoom meeting. This activity is education about preventing pregnancy in teenagers targeting high school and vocational school students in the Surabaya, Sidoarjo and Gresik regions Education attended by 122 teenagers. Before the counselling was carried out, questionnaires were distributed online via Google form. Results were obtained from 122 participants consisting of 54 (44%) high school students, while 68 (56%) were students, of which 13 (10%) % had not received Sex education. And after conducting health education, it was found that 105 (86%) of respondents' knowledge data was good. The influence of the environment, social media, cultural acculturation, and adolescent knowledge is one of the causes of promiscuous sexual behavior. The active role of parents, teachers and the community is needed to invite and provide motivation as well as health education to increase teenagers' knowledge in preventing the occurrence of promiscuous sex so that teenagers can behave more appropriately.

Keywords: *Education, Prevention, Pregnancy, Teenager*

## INTRODUCTION

According to WHO, teenagers are residents in the age range 10-19 years, according to the Republic of Indonesia Minister of Health Regulation Number 25 of 2014, teenagers are residents in the age range 10-18 years and according to the Population and Family Planning Agency (BKKBN) the age range for teenagers is 10-18 years. 24 years old and not married. The number of people aged 10-19 years in Indonesia according to the 2010 Population Census is 43.5 million or around 18% of the total population. In the world, it is estimated that teenagers number 1.2 billion or 1896 of the world's population (WHO, 2014).

Adolescence is a period of rapid growth and development both physically, psychologically and intellectually. The typical nature of teenagers is that they have a great sense of curiosity, like adventure and challenges and tend to be brave enough to take risks in their actions without prior careful consideration. If the decisions taken in dealing with conflict are inappropriate, they will fall into risky behavior and may have to suffer short-term and long-term consequences in various physical and psychosocial health problems. The nature and risky behavior of adolescents requires the availability of caring adolescent health services that can meet the health needs of adolescents, including services for reproductive health.

Reproductive health is a state of complete physical, mental and social health, not merely free from disease or disability related to the reproductive

system, function and process. The scope of reproductive health services according to the 1994 International Conference Population and Development (ICPD) in Cairo consists of maternal and child health, family planning, prevention and treatment of sexually transmitted infections including HIV/AIDS, adolescent reproductive health, prevention and treatment of abortion complications, prevention of and handling infertility, reproductive health for the elderly, early detection of reproductive tract cancer and other reproductive health such as sexual violence, female circumcision and so on.

In the 2017 IDHS data, it was recorded that 80% of women and 84% of men admitted to having been in a relationship. The 15-17 age group is the age group starting to date for the first time, there are 45% women and 44% men. Most women and men admit that when they are dating they do various activities. Activities carried out include holding hands by 64% of women and 75% of men, hugging by 17% of women and 33% of men, kissing on the lips by 30% of women and 50% of men and touching/groped by 5% of women and 22% of men. Apart from that, it was reported that 8% of men and 2% of women had had sexual relations. (Ministry of Health, 2018).

In the current global era, the enabling factor that influences premarital sexual behavior among teenagers is technological advances. Technology makes it easy for teenagers to access information

including print media, TV, internet, DVD and social media. Technology has invaded teenagers by packaging it in such a way that sexual activity is considered normal and fun. Starting from kissing, hugging, touching vital organs and having sex, everything is available in various information media. Exposure to this wrong information is then misused as a result of a lack of self-control and a lack of understanding of sexuality information. (Najwa, 2020).

Hang Tuah Surabaya College of Health Sciences as a higher education institution has an important role (Tri Dharma of higher education) in devoting itself to society in the form of social activities, one of which is in the form of community service activities in the form of youth health education in order to form a healthy and superior Indonesian generation.

## OBJECTIVES

### *General Purpose*

The aim of this community service activity is to participate in improving the level of community health in some form community service in the form of health education for students about teenage pregnancy.

### *Special Purpose*

Increase teenagers' knowledge about preventing teenage pregnancy so that it can reduce the incidence of teenage pregnancy.

## PLAN OF ACTION

### *Strategy Plan*

Event preparation



Showing Hang Tuah Stickers



Distribute Registration Form 122 participants



Event Opening by MC



Teenage pregnancy material



Discussion and Q&A



Documentation



Filling out the evaluation form

Figure 1. Flowchart of Community Service for Adolescents

## *Implementation*

The Implementation of this education is on Friday – Saturday, 21 - 22 January 2022 with Zoom Meeting Link This implementation at 08.00 - 13.00 WIB.

## *Setting*

Community Service with the theme "Session 5 Healthy Talk about Pregnancy in Teenagers. Activities carried out before providing health education were: Before the education was carried out, teenagers' knowledge of healthy sex was measured. 122 participants took part in the activity. The measuring tool used is an instrument of adolescent sexual knowledge developed by the author from various previous studies.

## *Target*

Community service activities in the form of education about preventing pregnancy in teenagers targeting high school and vocational school students in the Surabaya, Sidoarjo and Gresik regions.

## RESULTS AND DISCUSSION

The implementation of activities went well and smoothly. The health

education provided includes the meaning of sex, risky adolescent sexual behavior, the impact of free sex. The media used is material in the form of PowerPoint and leaflets. Evaluation of activities is carried out to provide adolescent knowledge about preventing teenage pregnancy. The results of giving the educational questionnaire were attended by 122 teenagers. Before the counselling was carried out, questionnaires were distributed online via Google Form. Results were obtained from 122 participants consisting of 54 (44%) high school students, while 68 (56%) were students, there were 13 (10%) have not received sex education. After conducting health education, the knowledge data showed that 105 respondents (86%) had good knowledge.

**Table 1. Adolescent Classification**

Teenagers	Frequency	Percentage
High school	54	44 %
College	68	56 %
	122	100%

Based on table 3.1, the results obtained from 122 participants consisted of 54 (44%) high school students, while 68 (56%) were college students.

**Table 2. Results of Adolescent Sex Education Information**

Sex education	Frequency	Percentage
Got it	109	90%
Not yet	13	10%
	122	100%

Based on table 3.2, the results obtained from 122 participants were that 109 (90%) had received sex education

before, 13 (10%) % had not received sex education.

**Table 3. Results of measuring adolescent knowledge**

Knowledge	Frequency	Percentage
Good	105	86%
Less	17	14%
	122	100%

Based on table 3.3, it was found from the results of community service that after the health education was carried out, the knowledge data of 105 (86%) respondents were good.

Adolescent reproductive health services aim to prevent and protect adolescents from risky sexual behavior and other risky behavior that can affect reproductive health. Risky sexual behavior includes premarital sex which can result in unwanted pregnancy, sexual behavior with multiple partners, unsafe abortion, and risky behavior of contracting sexually transmitted infections (STIs) including HIV. Other risky behaviors that can affect reproductive health include abuse of narcotics, psychotropic substances and addictive substances (drugs) and poor nutritional behavior which can cause nutritional problems, especially anemia. Preparing teenagers to live a healthy and responsible reproductive life which includes physical, psychological and social preparation for marriage and becoming parents at a mature age.

Data regarding the adolescent reproductive health situation mostly comes from the Demographic and Health Survey, especially the Adolescent Reproductive Health (KRR) component, which interviews adolescents aged 15-24 years and who are not yet married. For teenagers aged 15-19 years, the largest proportion had



Figure 2. Community Service Flyer Regarding Teenage Pregnancy



Figure 3. Educational process regarding Adolescent Reproductive Health

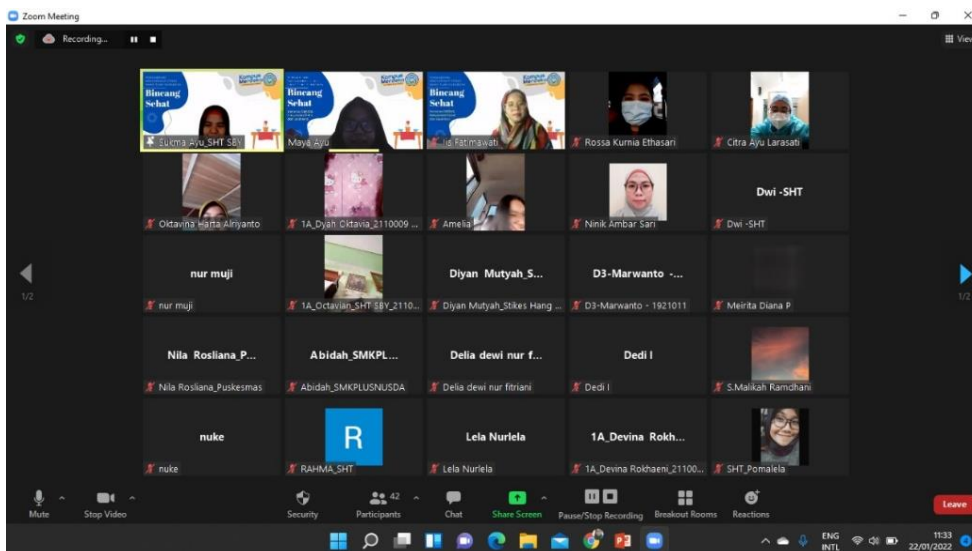


Figure 4. Zoom Meeting Participants Regarding Teenage Pregnancy Prevention

their first relationship at the age of 15-17 years. Around 33.3% of teenage girls and 34.5% of teenage boys aged 15-19 years started dating when they were not yet 15 years old. At this age, it is feared that they do not have adequate life skills, so they are at risk of unhealthy dating behavior, including having premarital sex.

Indonesian teenagers are currently experiencing rapid social change from traditional society to modern society, which is also changing their norms, values and lifestyle. Teenagers who were previously strongly protected by the existing family system, cultural customs and traditional values, have experienced erosion caused by rapid urbanization and industrialization. This was also followed by a media revolution that was open to a diversity of lifestyles and career choices. These various things have resulted in an increase in adolescents' vulnerability to various diseases, especially those related to sexual and reproductive health, including the increasing threat of HIV/AIDS.

The promiscuous sexual behavior of teenagers today is quite serious. The role of religion and family is very important in anticipating the behavior of teenagers aged 15-24 years who are vulnerable to the risk of health problems such as HIV/AIDS, drug use and other diseases. This premarital sex lifestyle data also shows that of the 15,210 AIDS sufferers or people living with HIV/AIDS, 54 percent are teenagers.

To support government programs, collaboration is needed between health workers, teachers and the role of the teenager's parents. Parents need to know properly about preventing risky behavior and teenage pregnancy. Efforts to fulfil this knowledge require the role of nurses as counsellors and educators in providing information about preventing teenage

pregnancy. The role of health workers is expected to be more active in providing education and consultation to teenagers. Parents should pay attention to their children, especially they are teenagers who need direction from their parents.

## CONCLUSION

This activity was that the activity ran smoothly and the teenagers were very enthusiastic about providing education so that they had good knowledge about preventing pregnancy in teenagers. The high hopes of the Principal and Teachers are that community service activities like this will be carried out regularly.

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