

The Relations between Parenting Styles with Adolescent Reproductive Health Knowledge in Junior High School “X” in Gianyar Regency

Putu Dewi Diah Pertiwi¹, Ida Arimurti Sanjiwani², Ni Kadek Ayu Suarningsih³

Nursing Study Program
Faculty of Medicine, Udayana University, Denpasar, Bali
dewidiahbandem@gmail.com
Nursing Study Program
Faculty of Medicine, Udayana University, Denpasar, Bali
Nursing Study Program
Faculty of Medicine, Udayana University, Denpasar, Bali

Abstract Adolescence are changes both physically and psychologically. The occurrence of physical changes characterized by changes in reproductive functions and systems causes sexual motivation that makes adolescents vulnerable to diseases and reproductive health problems. Adolescents are expected to have good reproductive health knowledge to avoid various reproductive health problems. Knowledge of reproductive health is influenced by several factors, such as parenting styles. Parents have a big role in providing supervision and nurturing of teenagers in a family environment. This study aims to determine the relations between parenting styles and adolescent reproductive health knowledge. This research was conducted on April - May 2019. This research was cross sectional approach. Respondents numbered are 198 adolescents, obtained through proportional random sampling techniques. Parenting styles and health reproduction knowledge were measured using a questionnaire which has been tested for validity and reliability. Data analysis using chi-square test. The results showed there is a relationship between parenting styles and adolescent reproductive health knowledge ($p < 0.05$). The parenting styles are necessary in providing about reproductive health knowledge to provide information by providing correct information from reliable sources.

Index Terms— adolescents, parenting styles, reproductive health knowledge

I. INTRODUCTION

Adolescent reproductive health issues are the focus of attention because of the magnitude of the problem of unwanted pregnancy (KTD), premarital sexual activity and sexually transmitted diseases including *human immunodeficiency virus* (HIV) that occurs in adolescents in the world that can have a negative impact on health, productivity, and adolescent quality of life[1]. According to WHO as many as 100 million adolescents in the world under the age of 25 are infected with sexually transmitted diseases (STDs) including HIV [2].

According to SDKI [3] it shows that understanding of adolescents about reproductive health in Indonesia is still low, where only 35.3% of adolescent girls and 31.3% of adolescents aged 15-19 years know that women can get pregnant with one relationship. Knowledge about the symptoms of sexually transmitted diseases (STDs) in young men is also quite low, where only 16.4% is known by young men and 15.8% by young women. While knowledge about

PMS symptoms in women is also quite low, where only 6.1% is known by young men and 15.3% by young women out of a total of 10,980 young men and 8,419 young women.

Preliminary study conducted by researchers at the Indonesian Family Planning Association (PKBI) of the Province of Bali, obtained the number of teenage visits to the Kisara Polyclinic from January to December 2018 as many as 396 adolescents with complaints of unwanted pregnancy by 63%, adolescents experiencing PMS by 14% and the rest with complaints of diseases other than STDs. Based on data from the Bali Provincial Health Office (Dinkes) in 2017, the number of STD cases in Bali that occurred in adolescents was 2.45%, and HIV cases were 3.74% of the total 150 thousand inhabitants aged 15-19 years. From these data, Gianyar Regency ranks fourth in the high incidence of HIV in Bali.

Knowledge of reproductive health is influenced by several factors, namely information, parenting and friends. Lack of basic information about reproductive health

knowledge in adolescents can lead to various reproductive health problems such as abortion, CBT, PMS, and sexual violence [4].

A preliminary study conducted at one of the state junior high schools in Gianyar through interviews with the supervisors of UKS teachers, this school is a target school of the Gianyar 1 Community Health Center, which every year receives new information about the KRR. In addition, this school also received awards in the KSPAN and UKS competitions. Although this school routinely gets KRR counseling, there is still a student who *dropped out* in the 2016/2017 school year due to premarital pregnancy. Based on interviews with UKS supervisors, it is said that this might be due to a lack of control from parents, because the primary teenage environment is the family, where most parents have more time to supervise their teenage children in the family environment.

In addition to interviews with the supervisors of UKS researchers the researchers also conducted interviews using questionnaires to 20 teenage students and eighth grade students about reproductive health, obtained data that 70% of these teens have less knowledge about reproductive health. It can be concluded that although schools have received regular counseling programs from Puskesmas, it does not rule out the possibility of adolescent reproductive health problems still occur due to lack of control from parents.

Parents have a big role because the most free time for teenagers is in the family [4]. Therefore, researchers want to examine further the relationship between parenting parents with adolescent reproductive health knowledge.

II. METHOD

This research is a descriptive correlational research with *cross sectional* approach, with the measurement time of both variables done once. This research was conducted at a state junior high school in Gianyar Regency. The study population is all students of class VIII in one of the SMP in Gianyar, amounting to 392 teenagers. Sampling is done by using a proportional random sampling technique. The sample consisted of 198 students of class VIII who had met the inclusion criteria. The inclusion criteria in this study are (1) teenage students who live at home with parents. (2) youth students who are willing to be respondents.

The variables of this study consisted of parenting variables measured using the parenting questionnaire and adolescent reproductive health knowledge variables measured using adolescent reproductive health questionnaires that had been tested for validity and reliability.

Researchers approach and explain to prospective research respondents, if the prospective respondent is willing to be the subject of research, the researcher asks respondents to sign an informed consent sheet and then the researcher conducts the data collection process by distributing parenting questionnaires and adolescent reproductive health assisted by four assistants research. The

research data collection was carried out for two days, from April 24 until April 25, 2019. The research process was conducted from April to May 2019. This research has passed the ethical test of the Research Ethics Committee of the Faculty of Medicine, Udayana University / RSUP Sanglah.

III. DATA COLLECTION AND ANALYSIS PROCEDURE

The data collection of this research began with measuring the level of knowledge and behavior of the community in preventing dengue on 27 May - 26 June 2019. The researcher was assisted by ten research assistants. After obtaining a research permit, the researcher collected data on housewives who were willing to become respondents. Based on the results of the research on the knowledge level questionnaire and the previous behavior observation questionnaire, respondents with a good knowledge level had a value > 15, while good behavior had a value of 12-16.

IV. RESULT

The results of the analysis using the chi-square test with a confidence level of 95% ($\alpha \leq 0.05$) obtained $p = 0.001$ (less than $\alpha = 0.05$). Therefore the value of $p < \alpha$, it can be concluded that the alternative hypothesis (H_a) is accepted. So, there is a relations between parenting style with adolescent reproductive health knowledge in "X" Public Middle School in Gianyar Regency.

- 1) Based on research subjects of age, gender, father's education level, mother's education level, father's and mother's occupation it were found that from 198 adolescents, 160 students were 14 years old (80.8%), and 111 female adolescents (56.1%). Fathers with a diploma / college education as 95 people (48%) and the last education of mothers are mostly diplomas / colleges as 101 peoples (51%). Most adolescents have fathers who work as entrepreneurs as 104 people (52.5%) and mothers who also work as entrepreneurs are 56 people (28.3%).
- 2) Based on the frequency distribution of parenting styles, most of them 103 (52%) of adolescent parents adopted democratic parenting. Other parenting practices applied were authoritarian parenting as many 33 people (16.7%) and permissive parenting as many 62 people (31.3%).
- 3) Based on adolescent reproductive health knowledge, most adolescents with good reproductive health knowledge were 97 people (49%), adolescents with enough reproductive health knowledge were 40 people (20.2%) and adolescents with less reproductive health knowledge were 61 people (30, 8%).

V. DISCUSSION

The most parenting styles adopted in this study are democratic parenting. The most parenting patterns adopted are democratic parenting [5]. One of the factors influencing democratic parenting is the level of education [6]. The results of data analysis in this study most of the education of parents of students is a diploma / college as

many as 95 people in fathers and 101 people in mothers. Parents with a high educational background in the practice of parenting seem to often read articles or technological advancements regarding the development of their teenagers so that in caring for them they become more prepared and have a broad background in knowledge. Authoritarian parenting applied by teenage parents as many as 33 people. Most parents who apply authoritarian parenting and are followed by basic data on parental education, namely there are some parents of students with a high school education background. Parents with low levels of education prefer authoritarian parenting [7]. Parents with low educational background have limited knowledge and understanding of the development needs of their teenagers [6]. The parents of adolescents of class VIII at the school also applied permissive parenting as many as 62 people. In addition to educational factors, other factors that influence parenting are the parents' talents and abilities. Parents who have the ability to communicate and relate appropriately with children tend to develop appropriate parenting with the child. Vice versa, if parents lack the ability to communicate and relate to children, the parenting that is applied tends to be less precise [8].

In addition to educational factors, another factor that influences parental care is parental occupation. Parent's work is a factor that influences parental care. Based on the data most parents of students work as entrepreneurs. Parents who are too busy working will get less time with their teenage children, so they cannot provide attention and affection for their children, so children tend to be free without any control from their parents [9]. Based on the results of the study it was found that the majority of respondents had good reproductive health knowledge. Adolescents with good reproductive health knowledge tend to be able to avoid various reproductive health problems because these adolescents know the adverse effects of various diseases due to reproductive health [10]. While adolescents with poor reproductive health. This is because in adolescence the lack of teenage interest in information about reproductive health. Information about reproductive health knowledge they can get one of them by joint discussions with their parents [11].

A total of 111 adolescent girls of 56 adolescent girls have good reproductive knowledge. It can be caused of students who are female has a curiosity greater because they feel more of the physiological changes in themselves such as menstruation for the first time so that they will try to find information either from parents, books or through seminars or lectures on reproductive health and also with peers [12]. The results of this study obtained data that the majority of adolescents aged 14 years have good knowledge of reproductive health. At this time adolescents begin to pay attention to physical changes and adolescents seem to feel free and at this time adolescents begin to think illusely (abstract) so they need to have good reproductive health knowledge. The results of this study indicate that there is a significant relationship between parenting parents with

adolescent reproductive health knowledge in Gianyar "X" Public Middle School. This is supported by research conducted which states there is a relationship between parenting parents with the level of adolescent knowledge about adolescent reproductive health [13].

Democratic parenting tends to have teenagers who have a moderate and good level of knowledge about adolescent reproductive health. The same research results were also found, who stated that most parents who apply democratic parenting to teenagers have an attitude about good reproductive health [14]. In this study, the results show that parents who apply authoritarian parenting tend to have children with adequate and insufficient reproductive health knowledge. According to Baumrind theory, authoritarian parenting tends to be very demanding, often punish and force to adhere to absolute standards of behavior [15]. Authoritarian parenting is often associated with suboptimal child outcomes, including lower self-efficacy, rebellion and more externalizing problems [16].

The results of this study obtained data that parents with permissive parenting have adolescents who have less reproductive health knowledge. According to Baumrind theory, this is due to permissive parenting, parents showing psychological autonomy, being accepting and showing weak control behavior [17]. According to other study parents who are included in the permissive type place few behavioral demands on the child and avoid coercion as much as possible [15]. Children with permissive parenting types tend to have lower achievement and lower autonomy. Permissive parenting tends to let the child develop by itself. Permissive parenting, most adolescents have poor reproductive health knowledge [7].

VI. CONCLUSION

It is expected that adolescents in the school will further increase their knowledge of reproductive health and establish better communication with parents regarding reproductive health so that they are able to apply it properly in order to avoid a variety of adolescent reproductive health problems

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