



Factors Influencing Risky Actions on Early Adolescent Reproductive Health at Junior High School 30 Kerinci

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<p>Track Record Article</p> <p>Accepted: 06 Mei 2023 Revised: 13 Mei 2023 Published: 14 Juni 2023</p> <p>How to cite: Putri, Eka, M., Ariadi, A., & Lestari, Y. (2023). Factors Influencing Risky Actions on Early Adolescent Reproductive Health at Junior High School 30 Kerinci. <i>Contagion: Scientific Periodical Journal of Public Health and Coastal Health</i>, 5(2), 478–492.</p>	<p style="text-align: center;">Abstract</p> <p><i>Deviations in sexual behavior often occur among adolescents. The development of the current era makes information disclosure through media and electronics have a major influence on adolescent sexual behavior. The research objective was to determine the factors influencing risky actions on the reproductive health of early adolescents at public junior high school 30 Kerinci. This type of quantitative analytic research with a cross-sectional design approach. The research was conducted in November - December 2022 at public junior high school 30 Kerinci with a total sample of 77 people. The sampling technique for this research is total sampling. Data collection using a questionnaire. Analysis of the research data with the chi-square statistical test and multivariate analysis with the binary logistic test. The results showed that there was a relationship between knowledge and risky actions for reproductive health ($p=0.001$), there was a relationship between attitude and risky actions for reproductive health ($p=0.039$), there was a relationship between the role of parents and risky actions for reproductive health ($p=0.014$), there was no relationship between the role of health workers and reproductive health risky actions ($p=0.647$), there is a relationship between the role of peers and reproductive health risky actions ($p=0.027$), the dominant factor that has the most influence on reproductive health risky actions in early adolescents in junior high school 30 Kerinci is the knowledge factor ($p\text{-value}=0.001$; $POR=16.619$). It is suggested that the school activate youth care activity services activities at schools in cooperation with local health workers. It's also suggested that health workers provide health education or youth health seminars at schools to provide information about reproductive health for adolescents. Furthermore, it is suggested to parents of students to control adolescents so that adolescents are correct in receiving health information, especially reproductive health, and seeking information related to adolescent reproductive health together.</i></p> <p>Keywords : Adolescents, Risky Action , Reproductive Health</p>
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INTRODUCTION

Demographic data show that young people make up the majority of the world's population. About a fifth of the world's population are young people between the ages of 10 and 19 years (UNICEF, 2021). Adolescents in Indonesia in 2022 as many as 65.82 million youth in Indonesia (BPS, 2022). and Total population of Jambi Province in 2019, with the largest population being in the 10-14 year age group of 321.772 people with a composition of 163.092 males and 158.680 females (BPS, 2019). In 2021 the population aged 10-24 years is 911.611 people (Dinkes Jambi, 2020).

Lately, there have been many problems that have caused anxiety in society by teenagers, from light action to violence. Some examples of behavior that raise concern include skipping school, acts that are merely disturbing (bike parades, etc.), motorbikes, gangs, theft, watching porn videos, sexual harassment, drug abuse, and even committing murder (Sulastru et al., 2020).

Data from the 2015 World School Health Survey show that 3.3% of adolescents aged 15–19 years have AIDS, and only 9.9% of women and 10.6% of men aged 15–19 have extensive knowledge of HIV. and as many as 0.7% of men have AIDS. 15-19% of young women and 4.5% of young men had premarital sex (Kemenkes RI, 2015). Jambi Province in 2020 with 169 cases of HIV and 32 cases of AIDS. Jambi City is the district/city with the highest number of cases, namely HIV with 122 cases and AIDS with 28 cases, and there are 4 (four) districts/cities that have no cases of either HIV or AIDS, namely; Muaro Jambi Regency, SungaiFull City, Batang Hari Regency, and Kerinci Regency (Dinkes Jambi, 2020).

Behavior in adolescents, namely all adolescent behavior that is assumed to have an adverse impact and pose a risk to health, for example low knowledge about reproductive health including those related to Sexually Transmitted Diseases (STDs), dating too deeply including watching immoral videos to trigger behavior free sex, use of contraception before marriage and marriage at a young age, and unsafe abortion (Tjandra et al., 2018). It is very important for young people to gather knowledge and develop skills regarding reproductive health, especially for students so they can avoid unwanted pregnancies, are protected from sexually transmitted infections (STIs) and can grow into sexually healthy adults (Syamsuddin, 2023).

Based on research Sajdah et al., (2022) pointed out an association between the knowledge and attitudes of students at the Third Manado Public High School and their reproductive health behaviors. Students with low reproductive health knowledge and attitudes are five times more at risk than those with high reproductive health knowledge and attitudes.

According to research Fora et al., (2021) stated that there was a relationship between the role of parents and adolescent reproductive health practices ($p=0.048$). The higher the role of parents in the association of their teenage children, the better their reproductive health practices will be. The role of parents is very vital in influencing the activities of adolescents in terms of reproductive health practices.

Research Arista et al., (2020) states that there is a relationship between the role of health workers and risky sexual behavior among adolescents ($p\text{-value}=0.012$). The health practitioner's role as an educator is to educate health professionals, including clients, families, the community, and midwives/nursing students, on the prevention of health problems,

particularly those related to reproductive health, including risky sexual behavior. role of providing guidance, counseling and education to adolescent.

Adolescents tend to seek information on their own about reproductive health problems such as through peers, the internet, tabloids, films that are not good but feel comfortable by adolescents in overcoming problems with reproductive health. This causes adolescents to get inadequate information about their reproductive health which results in adolescent reproductive health problems (Solehati et al., 2019).

Health services for adolescents are an important matter to be given special attention because they can have an impact on adolescent reproductive health. Youth-friendly health services are organized so that youth can access information and health services related to reproductive health, adolescent complaints related to STIs (Sexually Transmitted Infections) and Unwanted Pregnancy (Syamsuddin, 2023).

Junior high school 30 Kerinci is part of the working area of the Lolo Gedang Health Center. As a junior high school, this school has students in the early teens category. As early adolescents, these students are at risk for risky reproductive health behavior because of their high curiosity while they are unable to distinguish between good and bad for the behavior they are doing. Of the 3 junior high school in Gunung Raya District, one of the cases was found at junior high school 30 Kerinci, namely pregnancy outside of marriage which led to early marriage.

Based on a preliminary study conducted in 2021 on November 18, through interviews with the Principal of Kerinci 30 Public Middle School, information was obtained that in 2021 there would be cases of early marriage, where there were students who married while still in school because of deviations in sexual behavior in these students. This will have an impact on the reproductive health of students. The results of interviews with 10 students found that on average all students (100%) had been in a relationship. As many as 6 people (60%) did not know the meaning of reproductive health, and at that age it was feared they did not yet have adequate life skills, so they were at risk of engaging in unhealthy dating behavior, including having premarital sex. In addition, communication between adolescents and their parents regarding reproductive health is also not good so that they tend to be uncomfortable discussing sexual issues with their parents and prefer to discuss them with their peers. On average, students stated that there was still a lack of adolescent reproductive health services.

Based on the background g di above, the researcher is interested in conducting research on the factors that influence early adolescent reproductive health behavior at junior high school 30 Kerinci.

METHOD

This type of research is quantitative analysis with a cross sectional design approach. The purpose of this study was to determine the factors that influence risky actions on reproductive health in early adolescents at public junior high school 30 Kerinci.

The research was conducted at 30 public junior high schools in Kerinci. The time of the research was carried out in November-December 2022. The population in this study were all students from grades 7 to grade 9 at public junior high school 30 Kerinci. as many as 77 people. How to take samples in this study with total sampling, the sample in this study were 77 people. The independent variables in this study are the level of knowledge, attitudes, and the role of parents, health workers, and peers. At the same time, this study's dependent variable is risky reproductive health actions.

The research instrument used to collect data was a questionnaire as a guide for interviewing students. The questionnaire contains several statements and questions that have provided the answer choices. This questionnaire was self-made by researchers who had tested its validity and reliability.

Analysis of research data is univariate analysis with descriptive form of frequency and percentage distribution. Bivariate analysis with chi-square test. And multivariate analysis using logistic regression test. This research passed the ethical test by the research ethics committee of the Andalas University medical faculty with the ethical number 10 33/UN.16.2/KEP-FK/2022 on November 11 2022. All students who were included in this study were given informed consent, an explanation about the research, objectives, benefits, risks, and research techniques to be carried out in the study.

RESULTS

Table 1. Frequency Distribution of Respondent Characteristics at State Junior High School 30 Kerinci

Variabel	f	%
Gender		
Man	27	35,1
Women	50	64,9
Total	77	100
Age		
14 years	21	27,3
15 years	38	49,4
16 years	18	23,4
Total	77	100
Living together		

Grandma and Grandpa	15	19,5
Parent	54	70,1
You	8	10,4
Total	77	100

In table 5.1 it can be seen that more than half of the respondents were women (64.9%) and a small proportion were 15 years old (49.4%) with the majority living with their parents, namely 54 people (70.1%) in adolescents at state junior high school 30 Kerinci.

Table 2. Frequency Distribution of Factors Associated with Actions At Risk for Adolescent Reproductive Health At State Junior High School 30 Kerinci

Variable	f	%
Reproductive Health Measures		
Risky	59	76.6
No Risk	18	23.4
Total	77	100
Knowledge		
Low	42	54.5
Tall	35	45.5
Total	77	100
Attitude		
Negative	48	62.3
Positive	29	37.7
Total	77	100
The role of parents		
Not good	43	55.8
Good	34	44.2
Total	77	100
The role of health workers		
Not good	40	51.9
Good	37	48.1
Total	77	100
Peer role		
Not good	49	63.6
Good	28	36.4
Total	77	100

In Table 2. it can be seen that most of the reproductive health measures are risky, 59 people (76.6%), with more than half the knowledge about reproductive health low, namely 42 people (54.5%), attitudes about reproductive health are mostly negative, namely 48 people (62.3%), more than half of the role of parents on reproductive health is not good, 43 people (58.8%), with the role of peers on reproductive health, more than half is not good, namely 49 people (63.6%).

Table 3. Factors Associated with Risky Actions on Reproductive Health of Early Adolescents Public Middle School 30 Kerinci

Variabel	Reproductive Health Measures						p-value	OR 95% CI (Low-Upp)
	Risky		No Risk		Total			
	f	%	f	%	f	%		
Knowledge								
Low	39	92.9	3	7.1	42	100	0.001	9.750 (2.5-37.6)
Tall	20	57.1	15	42.9	35	100		
Total	59	76.6	18	23.4	77	100		
Attitude								
Negative	41	85.4	7	14.6	48	100	0.038	3,579 (1.194-10.729)
Positive	18	62.1	11	37.9	29	100		
Total	59	76.6	18	23.4	77	100		
The role of parents								
Not good	38	88.4	5	11.6	43	100	0.014	4.705 (1.473-15.022)
Good	21	61.8	13	38.2	34	100		
Total	59	76.6	18	23.4	77	100		
The Role of Health Officers								
Not good	32	80.0	8	20.0	40	100	0.647	1.481 (0.513-4.282)
Good	27	73.0	10	27.0	37	100		
Total	59	76.6	18	23.4	77	100		
The Role of Peers								
Not good	42	85.7	7	14.3	49	100	0.027	3,882 (1.289-11.692)
Good	17	60.7	11	39.3	28	100		
Total	59	76.6	18	23.4	77	100		

Berdasarkan Tabel 3. Hasil penelitian it can be seen that respondents who have reproductive health measures are at risk more have low knowledge (92.9%) compared to respondents who have high knowledge (57.1%). Statistical test results using the *chi square test* at get the value of $p = 0.001$ ($p < 0.05$) which means there is a relationship between knowledge and adolescent reproductive health actions, with an OR value of 9.750, which means that adolescents with low knowledge are at risk of reproductive health actions at risk of 9.750 times compared to adolescents with high knowledge at state junior high school 30 Kerinci.

Respondents who have reproductive health measures are at risk of having more attitudes negative (85.4%) compared to respondents who have an attitude positive (62.1%). The results of statistical tests using the *chi square test* obtained a value of $p = 0.038$ ($p < 0.05$) which means there is a relationship between attitudes and adolescent reproductive health actions, with an OR value of 3.579, which means that adolescents who have a negative attitude are at risk of taking reproductive health measures as much as 3.579 times the risk compared to adolescents who have a positive attitude at state junior high school 30 Kerinci.

Respondents who have reproductive health measures are at greater risk than respondents who have parental roles less well (88.4%) compared to respondents who have a parental role good (61.8%). Statistical test results using the *chi square test* obtained a value of $p = 0.014$ ($p < 0.05$) which mean there is a relationship between the role of parents and

adolescent reproductive health actions, with an OR value of 4.705, meaning that adolescents with a poor parental role are at risk for reproductive health measures as much as 4.705 times compared to adolescents with a good parental role at state junior high school 30 Kerinci.

Respondents who have reproductive health measures are at greater risk of having the role of a health worker who is not good enough (80%) compared to respondents who have a role of a health worker good (73%). The results of statistical tests using the *chi square* test obtained a value of $p = 0.647$ ($p > 0.05$), which means there is no relationship between the role of health workers and adolescent reproductive health measures with an OR value of 1.481, meaning that adolescents with a less good role of health workers are at risk of having reproductive health measures at risk as much as 1.481 times compared to the role of good health workers at state junior high school 30 Kerinci.

Respondents who have reproductive health measures are at greater risk than respondents who have peer roles less well (85.7%) compared to respondents who have the role of peers good (60.7%). The results of statistical tests using the *chi square* test obtained a value of $p = 0.027$ ($p < 0.05$), which means there is a relationship between the role of peers and adolescent reproductive health actions, with an OR value of 3.882, meaning that adolescents with less good peer roles are at risk of having reproductive health actions is at risk of 3.882 times compared to the role of good peers at state junior high school 30 Kerinci.

Table 4. Full model multivariate analysis of variables that most influence Adolescent Reproductive Health Actions at State Junior High School 30 Kerinci

Variable	p value	POR	95% CI	
			Lower	Upper
Knowledge	0.001	17,368	3.206	94.093
Attitude	0.037	5.102	1.103	23.593
The role of parents	0.005	10.716	2.040	56.282
Peer role	0.049	4.242	1.009	17.838

The statistical test results in Table 4. show the *full model* for multivariate analysis. The first variable excluded is the role of peers because *the p-value* is the largest. After removing the peer role variable, a logistic regression analysis was conducted again, as shown in Table 5.

Table 5. Final Multivariate Modeling

Variable	p value	POR	95% CI	
			Lower	Upper
Knowledge	0.001	16.619	3.182	86.802
Attitude	0.018	5.899	1.349	25.799
The role of parents	0.004	9.576	2.038	45.001

Table 5. Knowledge is the most influential variable compared to other variables with POR = 16.619, which means that respondents with high knowledge have 16.619 times the

chance to have good reproductive health measures compared to respondents with low knowledge.

DISCUSSION

Relationship between Knowledge and Action on Early Adolescent Reproductive Health at Junior High School 30 Kerinci

The results of the analysis show that there is a relationship between knowledge and actions at risk for adolescent reproductive health at junior high school 30 Kerinci with statistical test results $p < 0.05$. In line with research conducted by Rodr et al., (2022) Adolescent reproductive health knowledge and behavior found to be linked in Colombia . Also in line with research conducted by Hermawan et al., (2020), Research results show a link between knowledge and reproductive health. It is also consistent with research conducted by Putri et al., (2022), Research results show links between knowledge and reproductive health practices. another study was done by Solikhah et al., (2015) study finds links between knowledge and behaviors that place risks for adolescent reproductive health.

Knowledge is the most influential variable compared to other variables with POR = 16.619, which means that respondents with high knowledge have 16.619 times the chance to have good reproductive health measures compared to respondents with low knowledge. Based on research, Sajdah et al., (2022) they found an association between student knowledge and reproductive health behavior in three Manado public high schools. Students with low reproductive health knowledge and attitudes were five times more at risk than students with high reproductive health knowledge.

The lack of information about sexual behavior is caused by the absence of parental roles and the presence of supportive situations. For this reason, there is a need to provide information on how to meet the needs of young people through appropriate programmes, such as education and counseling, protection of young people from sexual violence, provision of information on reproductive health, premenstrual syndrome and prevention of HIV/AIDS. there is. Prevention, Youth Sexual Satisfaction Prevention and Treatment Programs. Help adolescents understand the need to maintain reproductive health and the consequences of irresponsible behavior. From this, we can conclude that lack of knowledge about reproductive health influences adolescents' behavior during premarital sex (Atik et al., 2021).

It is proven in research that there is a relationship between knowledge and adolescent reproductive health actions. The low knowledge of students can cause this, so students do not know that their actions are at risk to reproductive health. By the opinion of Nursalam in Untari

(2017), they explained that the background knowledge factor is only a complement to explain more deeply the determinants of risky human actions. This matter can be based on factors other than knowledge. Adolescents generally enter their teenage years without adequate knowledge about sex, and during courtship relationships, that knowledge not only does not increase but will increase with wrong information so that it will be at risk for actions that pose a risk to adolescent reproductive health (Untari, 2017)

Based on this, according to the researcher's analysis of this research, it is proven that the level of student knowledge will affect reproductive health. If students have good knowledge, there will be a tendency for students to act on reproductive health not at risk. Conversely, if students have poor knowledge, there will be a tendency for students to act reproductive health at risk. Thus, so that actions that pose a risk to students' reproductive health are not at risk, it is necessary to make efforts to increase students' knowledge to be better. One of them is through health education, youth reproductive health seminars, and assisting youth in increasing knowledge about adolescent reproductive health.

Correlation between Attitudes and Actions on Early Adolescent Reproductive Health at Junior High School 30 Kerinci

The analysis results showed a relationship between attitudes and risky actions for adolescent reproductive health at junior high school 30 Kerinci with the results of statistical tests obtained $p < 0.05$. In line with research conducted by Maina et al., (2020) in Kenya found a relationship between the role of parents and adolescent reproductive health measures. Also in line with research conducted by Rodr et al., (2022) in Colombia found that there was a relationship between attitude and adolescent reproductive health measures. Also in line with research conducted by Pandey et al (2017), the study's results show a relationship between attitudes and reproductive health, also in line with research conducted by Pradana et al., (2021) on students of junior high school 30 16 Kupang. The results of the study show that there is a relationship between attitudes and reproductive health practices.

There is a relationship between attitudes and reproductive health actions at risk for students. This can be caused by students' poor response to reproductive health, so students think that they do not need to pay attention to reproductive health so that there will be a tendency for students to act reproductive health at risk. In accordance with the opinion of Notoatmodjo (2014) that a person's attitude will influence a person's actions where a negative attitude has a tendency to act unfavorably while a positive attitude tends to act is good (Notoatmodjo, 2014).

Based on this, according to the researcher's analysis, with good student attitudes, students will respond well to their reproductive health and will not take risky reproductive

health actions. Conversely, if the attitude is not good, students will be at greater risk in carrying out risky reproductive health actions. Thus to minimize risky reproductive health actions, it is necessary to form a good attitude of students towards reproductive health.

The Relationship between Parental Role and Adolescent Reproductive Health Measures at Junior High School 30 Kerinci

Parents play an important role in communicating information about sex and sexuality, as they are the first sources of information their children learn about sex and are mentored into their teenage years. Parents need to equip themselves with knowledge about matters related to the development of adolescent sexuality. Parents' knowledge and attitudes regarding sexuality and reproductive health greatly influence the knowledge and attitudes of children/adolescents towards these problems (Hasanah et al., 2020).

The results of the analysis showed that there was a significant relationship between the role of parents and risky actions on adolescent reproductive health at junior high school 30 Kerinci with the results of statistical tests obtained *p value* <0.05 The results of this study are in line with research Anwar et al., (2020) which states that there is a significant relationship between the role of the family and the behavior of adolescents in maintaining their reproductive health. This is because the role of parents in following children's development, starting from the stage of children to teenagers must be very active, especially mothers. Children must be equipped with good knowledge to carry out their reproductive functions so that children can be responsible for themselves.

Research Hasanah et al., (2020) states that there is a relationship between the role of parents and students' premarital sexual behavior in high school (*p-value* = 0.001). Djwandono (2018) mentions that the tendency of bad premarital sexual behavior today is one of them influenced by the wrong role of parents in raising teenagers. Many parents do not provide information about sex and reproductive health to their children, for fear that it will actually increase the occurrence of free sex among adolescents. Parents also think that sex is something that does not need to be discussed. Lack of sex education causes children to seek outside information which can actually lead them to harm and harm them.

In accordance with the opinion of Maharjan et al., (2019) that most adolescents consider their parents to be important people to them. Therefore, education about risky actions for reproductive health, including about sex education, is best done by parents to their children. Communication between parents and adolescents is the process of conveying messages or information in the form of beliefs, attitudes, values, expectations and knowledge. Parents are expected to be able to provide an overview or views regarding reproductive health risk actions

that do not deviate, such as one regarding sexual risk actions. Parents inform teenagers about good and bad sexual behavior so that they can prevent teenagers from carrying out risky premarital sexual acts. Parents who are less able to communicate with children will cause conflict so that it has an impact on adolescent sexual risky actions (Sejati, 2022).

Based on this, according to the researcher's analysis of this study, where the role of good parents will be able to limit students from bad outside influences so that students' risky actions will be controlled and students will act reproductive health is not at risk.

The Relationship Between the Role of Health Workers and Early Adolescent Reproductive Health Measures at Junior High School 30 Kerinci

The results of the analysis showed that the role of officers was not significantly related to risky actions on adolescent reproductive health at junior high school 30 Kerinci with the results of the statistical test $p > 0.05$. In contrast to research conducted by Sunarsih et al., (2020) in Ghana found that the role of health workers greatly influences adolescent reproductive health. It is also different from the research conducted by Wulandari et al., (2018) with the title factors related to the sexual risky actions of adolescents living in the Argorejo Resocialization Environment, Semarang City. The results of the study show that there is a relationship between the role of health workers and actions that pose risks to adolescent reproductive health.

The role of officers does not influence the actions of adolescent reproductive health. Significantly, this can be caused by the lack of the role of officers in providing information about adolescent reproductive health to students so that students do not feel the role of officers in their reproductive health actions.

Even though the role of health workers is very important for students, Syamsuddin (2023) stated that health services for adolescents are an important matter to be given special attention to because they can impact juvenile reproduction. Youth-friendly health services are organized so youth can access information and health services related to reproductive health, adolescent complaints related to STIs (sexually transmitted infections), and unwanted pregnancies.

Health services targeted at adolescents consist of promotive, preventive, curative and rehabilitative efforts such as counseling, counseling, healthy life skills education, peer counselor training, health checks, supporting examinations, referral services, and holding dialogue or discussion events with adolescents. Adolescents' lack of responsibility for their own reproductive health is due to a lack of knowledge and appropriate information about adolescent reproductive health (Friskarini et al., 2016).

Based on this, according to the researcher's analysis of this study, it is necessary to increase the role of health workers in preventing risky actions on adolescent reproductive health, such as involving the role of officers in adolescent care health services activities at schools in the form of assistance by local health workers so that students will more easily access information about reproductive health so that risky reproductive health actions for students can be minimized.

The Relationship Between Peer Roles and Early Adolescent Reproductive Health Measures at Junior High School 30 Kerinci

The analysis results show a peer relationship with risky actions on adolescent reproductive health at junior high school 30 Kerinci with the results of statistical tests obtained *p value* <0.05 . In line with research conducted by Akuiyibo et al., (2021) in Nigeria found that peers influence adolescent reproductive health. Also in line with research conducted by Labego et al., (2020) at state high school 1 Tagulandang, the results of the study show that there is a relationship between the role of peers and risky premarital sexual behavior, which is also in line with research conducted by Kunaryanti et al., (2021) on young women at junior high school 2 Sidoharjo. research finds link between peer roles and adolescent reproductive health.

Teenagers are very open to peer groups. They holding discussions about romance, philosophy of life, recreation, jewelry, clothing, for hours. Peer influence becomes a very strong bond. The role of peers in adolescents is very large in the daily lives of adolescents. Teenagers are more out of the house with their peers as a group, the influence of friends - peers on attitude, talk, interests, and actions are at greater risk of family influence.

According to the researcher's analysis , this can be caused by: the risky actions of peers in the group become a reference or norm of behavior expected in group. Peer dating style is a model or reference used by a teenager in courtship.

CONCLUSION

The results showed that there was a relationship between knowledge, attitudes, the role of parents, the role of peers towards risky actions for reproductive health except for the variable role of health workers, there was no relationship. The knowledge variable is the most influential factor on reproductive health risk actions.

They were suggested to the school to activate Youth Care Activity Services activities at schools in collaboration with local health workers. Parents can position themselves as partners to confide in for their children regarding personal issues such as good communication and listening to each other and control so that adolescents are aware of receiving health

information, especially reproductive health, and seeking information related to adolescent reproductive health together.

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