

## An overview of the knowledge of mothers who have young women about sexual behavior and teenage pregnancy in Hamlet IV Batu Malenggang Village in 2022

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### ABSTRACT

Based on the Indonesian Health Profile, the number and percentage of Indonesia's population for adolescents aged 10-19 years (WHO definition for adolescent) is 44 million or 21%, where the problems faced by many adolescents are reproductive health issues, premarital sex, unprotected pregnancy. It is hoped that the number of drug users, the number of people with STDs, HIV/AIDS and cases of abortion show quite worrying symptoms. Research has been carried out which aims to describe the knowledge of mothers who have teenage girls about sexual behavior and teenage pregnancy in the VIII Ward of Menistrim Village, Kec. East Binjai. This research is descriptive using primary data obtained through questionnaires submitted to respondents with a sample of 54 people. The study was conducted in August 2006. From the results of the study, it is known that the majority of 54 respondents are knowledgeable enough as much as 50%, where based on age, the majority are 40-60 years old and 73.91% have good knowledge, based on education the majority are secondary education and 66.6 % knowledgeable enough, and based on the majority of information sources from the mass media and 62.96% knowledgeable enough. In order to obtain better knowledge, it is hoped that mothers who have teenage girls seek correct information, namely from health workers about sexual behavior and teenage pregnancy. based on education the majority of secondary education and 66.6% have sufficient knowledge, and based on information sources the majority are from the mass media and 62.96% are moderately knowledgeable. In order to obtain better knowledge, it is hoped that mothers who have teenage girls seek correct information, namely from health workers about sexual behavior and teenage pregnancy. based on education the majority of secondary education and 66.6% have sufficient knowledge, and based on information sources the majority are from the mass media and 62.96% are moderately knowledgeable. In order to obtain better knowledge, it is hoped that mothers who have teenage girls seek correct information, namely from health workers about sexual behavior and teenage pregnancy.

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### 1. Introduction

The excesses of development that are oriented towards rapid economic growth have resulted in the degradation of the spiritual quality of almost all community groups. The concept of an all-materialistic lifestyle has resulted in a decrease in the sense of social solidarity. The materialistic lifestyle also affects the pattern of education for children (teenagers) which emphasizes pampering in material matters so that aspects of spiritual development tend to be ignored (Danuwisastra, 2003).

One of the characteristics of Indonesian society where most of our youth live is a transitional society that is moving from its traditional situation to a more modern one. Only a small proportion of adolescents, namely those who live in communities that have not been reached by communication infrastructure (isolated tribes or isolated villages), still live in a truly traditional nature. Most of the other teenagers, especially those who live in big cities, have clearly had to deal with a society that is in a state of transition (Sarwono, 2003).

Based on data from the Indonesian Health profile, the number and percentage of the Indonesian population aged 10-24 years (World Health Organization definition for young people) is 64 million or about 31 percent of the total population, while specifically for adolescents aged 10-19 years (WHO definition for young people). for adolescent), amounting to 44 million or 21 percent (Depkes RI, 2003).

The problems faced by many teenagers are reproductive health issues, sex before marriage, unwanted pregnancies, drug users, the number of people with sexually transmitted diseases (STDs), Human Immunodeficiency Virus – Acquired Immuno Deficiency Syndrome (HIV/AIDS), and cases of HIV/AIDS. -Abortion cases show quite worrying symptoms (Etikartina, 2005). The results of a survey conducted by the Indonesian Family Planning Management (PKBI, 2005) in 5 cities in Indonesia (Kupang, Palembang, Singkawang, Tasikmalaya, and Cirebon) reported that 16.35% of adolescents had had premarital sex. Of the number who had sex, 40.1% used contraception and 33.79% said they were ready to have an abortion if pregnancy occurred. Likewise, according to the results of the KRR (Adolescent Reproductive Health) basic survey conducted by the West Java Province BKKBN (2002) in 6 districts/cities (Garut Regency, Cirebon Regency, Purwakarta Regency, Sukabumi Regency, Bogor City and Karawang Regency) it was reported 29.6% teenagers have had premarital sex and 57.3% have known and used to see pornography (Danuwisastra, 2003).

The base line survey conducted by the BKKBN in 2000 showed that in Indonesia there were 2.4 million abortions per year and approximately 21% (700-800 thousand) were carried out by adolescents. Another thing that is more interesting is that approximately 11% of all births in Indonesia are teenagers and 43% of women give birth to their first child less than 9 months from the date of their marriage. It was also reported that the STD rate among adolescents was around 4.18% and 50% of the number of people with HIV/AIDS were aged 15-29 years (Central Bureau of Statistics, 2000).

The high rates of sexual behavior and pregnancy as mentioned above have a negative impact on adolescent development. The risks faced by adolescents when having sexual relations at a young age are physical and psychological unpreparedness. Pregnancy at a young age has health risks. Part of a teenage girl's body is not ready for a safe and healthy delivery. Young mothers are more likely to suffer from pregnancy poisoning (toxemia) which causes convulsions during pregnancy (Burns, 2000). Besides being able to cause pregnancy, sexual behavior at a young age can cause cervical cancer, contracting venereal diseases such as HIV/AIDS, herpes, chlamydia infection and others (Masland, 2004). Most parents admit that providing provisions for young women so that they are able to face the various turmoils of life is actually not easy. Even though parents have gone to great lengths to provide various facilities, including the best education for their children, parents will not be able to avoid the temptations of the world that are increasingly blocking the lives of today's global youth (Saparie, 2005).

## **2. Method**

### **2.1 Conceptual framework**

The conceptual framework of the research entitled "Overview of Mothers' Knowledge of Teenage Girls on Sexual Behavior and Teen Pregnancy in Hamlet IV Batu Malenggang Village, Hinai District, June - July 2008" is as follows:

**Independent Variables**

Characteristics Age Education Resources
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**Dependent Variables**

Mother's knowledge about sexual behavior and teenage pregnancy
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**2.2 Operational Definition**

Knowledge is everything that is known to the mother about sexual behavior and teenage pregnancy which is measured from answers based on questions given in the form of a questionnaire consisting of definitions, problems given in the form of a questionnaire consisting of definitions, problems that arise, causal factors, diseases due to relationships sexual intercourse, the definition of teenage pregnancy, the occurrence of teenage pregnancy, the causes and consequences of teenage pregnancy, with categories: (Arikunto, 2002).

- a. Good: if you answer the question correctly 76%-100%
- b. Enough: if you answer the question correctly 55%-75%
- c. Less: when answering questions correctly <55%.

Age is the length of the mother's life in a matter of time (years) calculated based on the last birthday until the research is carried out, with categories: (Hurlock, 1998)

- a. Early adulthood: If the mother's age is < 40 years old
- b. Middle adulthood: If the mother is 40-60 years old
- c. Advanced adult age: If the mother's age is > 60 years

Education is the highest level of formal education that mothers have ever completed, with categories:

- a. SD
- b. junior high school
- c. high school
- d. College

Sources of information are sources for mothers to obtain information about sexual behavior and teenage pregnancy, with categories: (Notoatmodjo, 2003)

- a. Health workers: If the mother receives information from health workers
- b. Mass media: If you get information from print media and electronic media

**2.3 Types of research**

This type of research is descriptive by using a questionnaire that aims to obtain an overview or description of a situation objectively.

**2.4 Research Location and Time**

This research is located in Hamlet IV Batu Malenggang Village, Hinai District, Kab. Langkat. The reason the author chose this area is because there has never been any research on sexual behavior and adolescent pregnancy.

**3.5 Population And Sample**

The population in this study were all mothers who have teenage girls and live in Hamlet IV Batu Malenggang Village, Hinai District, Kab. Langkat as many as 40 people, and all of them became the research sample (total population).

**3.6 Method of collecting data**

Collecting data using primary data in the form of a questionnaire by first providing a brief explanation of how to fill out the questionnaire to the respondent and asking if there are things that are not understood by the respondent. The questionnaire includes the respondent's age, education, and sources of information.

### 3. Results and Discussion

#### 3.1 Result

The title of this research is "Overview of knowledge of mothers who have teenage girls about sexual behavior and teenage pregnancy in Hamlet IV Batu Malenggang Village, Hinai District, June-July 2008 Period". Data were obtained from 40 respondents, the results are presented in the table below.

**Table 1.**

Distribution of Respondents' Knowledge about Sexual Behavior and Teenage Pregnancy in Hamlet IV Batu Malenggang Village, Kec. Hinai Period June-July Year 2008

Age	Frequency(n)	Percentage (%)
Well	7	17.5
Enough	19	47.5
Not enough	14	35
Total	40	100

From table 4.1.1, it is known that the majority of respondents have sufficient knowledge about sexual behavior and teenage pregnancy as many as 19 respondents (47.5%) and there are still 14 respondents (35%).

#### 3.2 Overview of Knowledge by Age

**Table 2**

Distribution of Respondents' Knowledge by Age About Sexual Behavior and Teenage Pregnancy in Hamlet IV Batu Malenggang Village, Hinai District, Langkat Regency, June-July 2008 Period

Knowledge	Age						Amount	
	< 40 years old		40 - 60		> 60		F	%
	F	%	F	%	F	%		
Well	3	7.5	4	10	-	-	7	17.5
Enough	7	17.5	12	30	-	-	19	47.5
Not enough	3	7.5	7	17.5	4	10	14	35
Total	13	32.5	23	57.5	4	10	40	100

From table 2, it is known that the majority of respondents have sufficient knowledge about sexual behavior and teenage pregnancy as many as 19 respondents (47.5%) and there are still 14 respondents (35%).

#### 3.3. Overview of Knowledge Based on Education

**Table 3**

Distribution of Respondents' Knowledge Based on Education About Sexual Behavior and Teenage Pregnancy in Environment VIII, Mennomor Village, Kec. East Binjai Period June-August 2008

Knowledge	Education								Amount	
	SD		JUNIOR HIGH SCHOOL		high school		Go High		F	%
	F	%	F	%	F	%	F	%		
Well	-	-	-	-	-	-	7	17.5	7	17.5
Enough	-	-	8	20	11	27.5	-	-	19	47.5
Not enough	8	20	4	10	2	5	-	-	14	35
Total	8	20	12	30	13	32.5	7	17.5	40	100

From table 4.1.3 it is known that the majority of respondents who have good knowledge have higher education (University) namely 7 people (17.5%), the majority of respondents who are knowledgeable enough have secondary education (SMA), namely 11 people (27.5%) and respondents who with less knowledge all have basic education (SD, SMP), ie 8 people (20%) have elementary school education

#### 3.4 Description of Respondents' Knowledge Based on Information Sources

**Table 4**

Distribution of Respondents' Knowledge Based on Sources of Information on Sexual Behavior and Teenage Pregnancy in the VIII Sub-district of Mencharm District, Kec. East Binjai Period June-August 2006

No	Source Information	Knowledge						Amount	
		Well		Enough		Not enough		F	%
		F	%	F	%	F	%		
1	Health workers	17	73.91	10	37.04	-	-	27	100
2	Mass media	6	26.09	17	62.96	4	100	27	100

From the table above, it is known that the majority of respondents who have good knowledge received information about sexual behavior and teenage pregnancy from health officers, namely 17 people (73.91%), respondents who had sufficient knowledge, the majority obtained information from the mass media, namely 17 people (62.96%). and respondents who are less knowledgeable all obtain information from the mass media, namely 4 people (100%).

### 3.5 Discussion

#### a. Knowledge

Based on the results of the research that the author did, the description of the knowledge of mothers who have teenage girls about sexual behavior and teenage pregnancy, shows that the majority of respondents have sufficient knowledge about sexual behavior and teenage pregnancy, as many as 27 respondents (50%) and there are still 4 respondents who lack knowledge. people (7.41%).

According to Notoatmodjo (2003), knowledge is the result of knowing and this occurs after sensing through the five human senses, namely the senses of sight, hearing, smell, taste and touch. Most of human knowledge is obtained through education, self-experience, as well as the experience of others, the mass media and the environment. According to the author, the results of this study indicate that mother's knowledge about sexual behavior and teenage pregnancy still needs to be improved. Mother's knowledge about sexual behavior and teenage pregnancy is very useful in preventing unwanted things from happening to teenagers. With good knowledge, the mother will be able to provide correct information to her daughter and can provide boundaries in her daughter's association.

The majority of parents admit that providing provisions for young women so that they are able to face the various upheavals of life is actually not easy. Even though parents have gone to great lengths to provide various facilities, including the best education for their daughters, parents will not be able to avoid the temptations of the world that are increasingly blocking the lives of global youth today. In the view of most Indonesian people, teenagers have the main task of learning while playing is no longer allowed. This is where friction or ambiguity occurs. Likewise in terms of sex, children are taboo talking about sex, let alone doing it. They were still taboo about talking about sex until they got married. Meanwhile, physically his sex drive has been urged to be channeled since the age of 11-14 years. With a good level of knowledge, mothers can educate their children by means of a persuasive approach. Usually, teenagers with high turmoil are difficult to explain because they are always filled with turmoil of disobedience. For this reason, in a persuasive way, teenagers will be able to accept suggestions from parents. Mothers have a strategic role in educating their daughters to become healthy human beings.

#### b. Overview of Knowledge by Age

Based on the results of the study, the majority of respondents with good knowledge were aged 40-60 years, namely 17 people (73.91%), the majority of respondents with sufficient knowledge were aged <40 years, namely 15 people (55.56%), while the respondents who had less knowledge were the majority aged < 40 years old that is 3 people (75%).

According to Hurlock (1999), age is the length of life in years calculated from birth. Early adulthood is a period of seeking stability and a reproductive period where a career begins and is a reproductive period. Middle adulthood begins at the age of 40-60 years. This period is a time of achievement. Usually the peak of their career is reached between the ages of 40-50 years, namely after being satisfied with the results obtained and enjoying the results of their success until they reach their 60s. Old age (old age) begins at the age of 60 years of retirement until death. It is retirement. With increasing maternal age, more experience will be gained, so that in the end it can

increase mother's knowledge (Ahmadi, 2002).

According to the author, the results of the study are in accordance with Hurlock's statement above that mothers aged 41-60 years (middle adults) are a time to excel in their work patterns and lifestyles as well as for those who pursue the field of knowledge so that they reach the peak of their careers and enjoy their success. But that doesn't mean that with getting older (over 60 years old), knowledge will get better; this is related to the human condition itself, where the older you get, the memory will gradually decrease or become senile.

#### **c. Overview of Knowledge Based on Education**

Based on the results of the study, it can be seen that the majority of respondents who have good knowledge are highly educated (Academy/College), namely 10 people (43.48%), respondents who have sufficient knowledge - the majority have secondary education (SMA), namely 18 people (66.67%), and respondents who have less knowledge are all basic education (SD, SMP) that is 4 people (100%).

In the opinion of Hurlock (1999), that a person's level of education will determine the mindset and insight. In addition, the level of education is also part of work experience. The higher a person's education, it is expected that the stock of human capital (knowledge and skills) will increase. Education has an important role in determining human quality. Through education, humans are considered to gain knowledge. The implication is that the higher the education, the higher the quality of human life. According to the author, the results of this study are in line with Hurlock's statement above, where the higher a person's education, the higher the level of knowledge. Education affects a person's perception of being more receptive to new ideas and technologies (Notoatmodjo, 2002).

With a high education, mothers are able to determine what is good and what is bad for their daughter. Mothers can be aware of bad things happening to their daughters by analyzing a problem based on the education she has received. In addition, mothers can pass on the knowledge they have gained during their education to their daughters about healthy sex and teenage pregnancy. So with the information obtained from his mother, the teenager can restrain himself from doing things that can damage him. Providing sex education to children and adolescents is not easy. Many parents feel confused and do not understand when and how to start, some of them even think that talking about sex, especially to teenagers, is something dirty and inappropriate. Whereas sex education is not teaching how to have sex, but rather as an effort to provide understanding to teenagers, regarding the functions of sexual organs and the problems of natural instincts that are starting to arise as well as guidance on the importance of maintaining and maintaining their intimate organs.

In addition, it also provides an understanding of healthy social behavior and the various risks that can occur around sexual problems.

#### **d. Overview of Knowledge Based on Information Sources**

Based on the results of the study, it was found that the majority of respondents who had good knowledge had information about sexual behavior and adolescent pregnancy from health workers, namely 17 people (73.91%), respondents who were knowledgeable enough the majority obtained information from the mass media, namely 17 people (62.96%) and respondents who are less knowledgeable all obtain information from the mass media, namely 4 people (100%). Information obtained by mothers regarding information about sexual behavior and teenage pregnancy comes from health workers and through mass media. Information obtained through health workers can be in the form of health counseling about adolescents. While the information obtained from the media comes from electronic media (radio, television, VCD), while the print media in the form of brochures, books,

According to the author, the results of this study indicate that the information obtained by mothers from health workers tends to be better than the information obtained by mothers from the mass media. This is also related to the source of information itself, where information from health workers is more accurate and on target. While the information obtained from the mass media, although more numerous, tends to be excessive and not limited, so that mothers find it more difficult to filter it.

## **4 Conclusion**

From the results of the study, it can be concluded that the majority of respondents with high school education have sufficient knowledge as many as 18 people (66.67%). From the results of the

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study it can be concluded that the majority of respondents have sufficient knowledge of 27 people (50%).

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