



Peer Educator Group To Increase Life Skill About Adolescent Reproductive Health At Mtsn 1 And Mtsn 2 Kota Bandung

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Abstract Background:At adolescence phase occurs physically changes rapidly which is not balanced with psychological changes This considerable change can confuse adolescent who experience it, so they need understanding, guidance, and support for the surrounding environment. Youth knowledge about adolescent reproductive health is still very low. Inadequate knowledge of puberty will make adolescents to have wrong attitude and have to be negative about sexuality. Based on the results of the study said that the role of peers influences premarital sexual behavior in adolescents. MTsN 1 and MTsN 2 Kota Bandung were partners in this lbM activities. Based on preliminary studies, their students's knowledge was still lacking in terms of adolescent reproductive health. The aim of lbM activity was forming peer educator to increase life skills about adolescent reproductive health.

Method:The partner in this activity is young women and young men at MTsN 1 dan MTsN 2 Kota Bandung. The method was provide knowledge about adolescent reproductive health through the formation and training of peer educator. Adolescent reproductive health booklets were given to the peer educator as a guide to carry out their roles.

Result:Increased knowledge of peer educators about adolescent reproductive health. Peer educators can carry out their role in providing information both in groups and individual discussions.

Conclusion:The results was peer educator has been formed in both partners and they have carried out their roles. Peer educator was formed as a place to discussion among peers related to adolescent reproductive health, so that it can increase life skills or positive behaviors related to reproductive health. This program should maintain independently and continuously

Introduction

The youth population is very large, currently more than half of the world's population is under 25 years old and 29% are between 10-25 years old. Bandung's youth population, aged 10-24 years, based on BadanPusatStatistik in 2011 was 28.55% of the total population, which is around 665,252 people.(1)At adolescence phase occurs physically changes rapidly which is not balanced with psychological changes. This considerable change can confuse adolescent who experience it, so they need understanding, guidance, and support for the surrounding environment. Youth knowledge about adolescent reproductive health is still very low. The results of survey in 2010 showed that only 28% of youth exposed to Adolescent Information Center (Information Center and Youth Counseling). (2)

Knowledge is one component in the formation of a person's attitude, inadequate knowledge will make adolescents to have wrong attitude and it will make adolescents tend to be negative about sexuality. (3)Based on the results of the study said that the role of peers influences premarital sexual behavior in adolescents. (4) MTsN 1 and MTsN 2 Kota Bandung were partners in this community services. Based on preliminary studies, their students's knowledge was still lacking in terms of adolescent reproductive health Based on this, the role of peers is quite important in discussing subjects relating to reproductive health, so the peer educator group formed from groups of students is expected to be a place to discuss subjects relating to reproductive health. In addition, peer educator groups in the school environment can be a liaison between students and teachers who play a role in guidance and counseling for students.

Method

The partner in this activity is young women and young men atMTsN 1 danMTsN 2 Kota Bandung as many as 4 student and 1 counseling teacher in each school. The method was provide knowledge about adolescent reproductive health through the formation and training of peer educator. The training is held once a week, for 4 times, and 3 hours in one meeting. These following steps in this activity:

1. collaboration with counselling's teachers at MTsN 1 and MTsN 2, to select candidate of

peer educators according to the criteria that have been specified.

2. conducts training on reproductive health by involving counseling teachers. The subject presented does not only about reproductive health, but students are also given how to become educators for their peers.
3. Evaluate by mentoring to see that they can act as peer educators for their peers.adolescent reproductive health booklets were given to the peer educator as a guide to carry out their roles.

Result and Discussion

During the training, candidate of peer educators were given questions about pre-test and post-test to assess knowledge before submitting subject and evaluating their understanding after training. The methods used during the training included: brain storming, question and answer lectures, group discussions, games, role play and practice as peer educators. Participation of participants in both partners was very good and active in discussions during training. Participants were also trained to carry out roles as peer educators through role play to all participants.

The subjects presented included: The role of the peer educator in adolescent reproductive health and the principles of communication, physical psychic growth and development of adolescents, reproductive organs, menstruation and wet dreams, maintenance of reproductive organs, myths about reproductive health, sexual behavior teenagers, pregnancy and the risk of early pregnancy and sexually transmitted diseases and HIV / AIDS, and tausiyah love (social signs according to Islamic law).

The level of initial knowledge of the trainees was assessed using a pre-test questionnaire, then participants were given subjects according to the planning, then post-tests were conducted to evaluate participants' understanding before and after being given reproductive health training. The result is a significant increase in knowledge in both partners, as shown in the following graph.

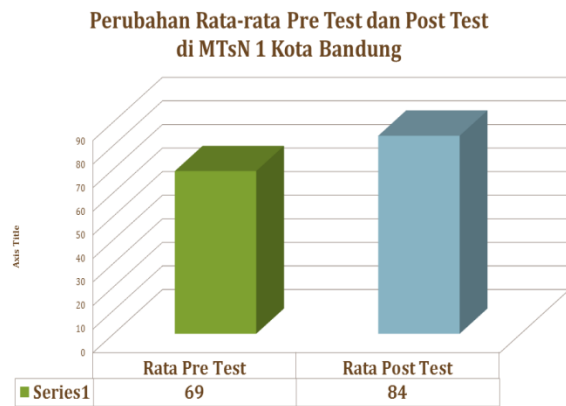


Figure 1. Changes in the Average Pre Test and Post Test in Peer Educator Formation Training at MTsN 1 Kota Bandung

Perubahan Rata-rata Pre test dan Post Test di MTsN 2 Bdg

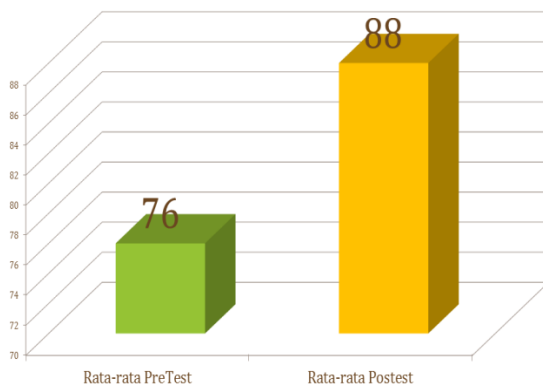


Figure 2. Comparison of Pre Test and Post Test Results in Peer Educator Formation Training at MTsN 2 Kota Bandung

The results of the pre-test and post-test evaluation showed an increase in knowledge in prospective peer educators. With this increase in knowledge, it is hoped that it can become a provision for them to carry out their role as peer educators for their peers, so that in the end, teens can have good life skills related to adolescent reproductive health. This is in accordance with the results which shows that there is a relationship between the role of peer educators and adolescent reproductive health practices at Senior High School 2 Kota Semarang.(5) The role of peer educators greatly influences the change in group behavior within it. With the peer educator in the school environment, it aims to provide information on Adolescent Reproductive Health correctly. Increasing the approach of the role of the Peer

Educator through various positive activities in the school is expected to be able to increase the interest of young people to come to the Health Information especially the health reproductive. (5)The results of Dannayanti's research in Kota Bukittinggi, that the role of peers is positively influential on premarital sexual behavior.(6) The results of the study by Suryati, that supporting peers have a 2.9 times greater chance of supporting hygiene behavior during menstruation compared to peers who do not support it. (7) The results of Sriasih study, that sexuality education by peer educators significantly influences the knowledge and attitude of youth about the dangers of free sex (8) Based on this, the role of peers is quite important in discussing subjects relating to reproductive health.

After the training is complete, provide assistance to assist students in carrying out their roles as peer educators, to see and assess the extent that they can act as peer educators for their friends. Mentoring is carried out in student / extracurricular activities, small group activities in classrooms, women's activities and so on, according to the schedule in each school.

When monitoring and evaluation were carried out, the peer educator was more confident in carrying out their roles among others, they discussed about reproductive health problems individually, they also played an active role in the "keputrian" activities that were carried out every Friday at the fourth week at MTsN 1 to provide health counseling for the younger peers. For the "keputrian" activity, the counseling teacher and religion teachers were greatly helped by the existence of peer educators, because they could become ambassadors for health educators at the women's event. The response from the participants was very good, because they were in the period of entering puberty so that their curiosity related to the problem of growth and physical development of adolescent psychology, reproductive organs, menstruation, maintenance of reproductive organs and myths about reproductive health.

Conclusion

1. The peer educator group has been formed in both partners according to the plan. They have carried out their roles, seen in the activities carried out by peer educators in

each school, among others student / extracurricular activities, individual discussions, government events, small group activities in the class and so on.

2. The existence of the peer educator formed is a place of discussion for peers related to adolescent reproductive health, so that it can improve life skills or positive behaviors related to reproductive health.
3. A youth reproductive health training module has been formed, as a reference for partners in forming the next peer educator group.
4. A booklet for adolescent reproductive health is given to the peer educator as a guide to carrying out its role.

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