

Conference Paper

Home-based Reproduction Health Promotion for Minimizing Adolescent Maternal Mortality in Indonesia

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Abstract

Education about reproductive health is important for pregnant woman and also reproductive woman, including teenagers. During pregnancy, knowledge about reproductive health is important to safe the mother and the baby. For teenagers, reproductive health is important to prevent them from unwanted pregnancy. Unfortunately, health reproduction promotion among pregnant women and reproductive age (especially teenagers) is not sufficient. The lack of knowledge about reproductive health would risk woman and cause maternal mortality.

This research used qualitative method. Through literature review and in-depth interview with 26 informants in Pekalongan, Central Java, Indonesia, this study examines the social marketing efforts on sexual education in Indonesia for children. Based on the previous efforts of sexuality education in Pekalongan, we argue that sexuality educations were still not enough to reduce maternal mortality because it only reached limited target, done by limited fund and limited skills of human resources at school. Therefore, promotion about health reproduction for woman has to be started from early childhood by their own parents because parents who have responsibility to give basic information about sexual matters. Even though bringing sexuality education have many challenges in Indonesia regarding its culture, but basically sexuality education activities are not contrary with some values of Indonesian people if it understood well, so that adults do not have to feel that the issue cannot be discussed with children. To improve children's knowledge and life skill in maintaining their sexual activities properly, parents have increase their skill of communication.

Keywords: Maternal Mortality, Social Marketing, health reproduction, sexual education, pre-marital sex

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1. Introduction

Since 1994, Government in Indonesia has been aware the urgency regarding sexual education for children [11]. There are many institutions, such as BKKBN, the Ministry of Health, Ministry of National Education, Ministry of Religion and the Ministry of Social Affairs and other research Institutes implement reproduction health promotions. They developed diverse form of promotion activities, for instance, "Adolescence Reproduction Health" (ARH) pocket book for adolescents aged 14-19 years and BKKBN (Badan Kependudukan dan Keluarga Berencana Nasional or National Family Planning Welfare Agency) modules. In addition, Indonesia also has been disseminated reproductive health promotion through National Strategy of adolescent health in 2005. The Policy aimed to enhance the skills of health workers in counseling activities for teenagers, LSE, prevention and detection as well as HIV / AIDS management. In 2008, Indonesia also developed Strategic Communication Plan for HIV and AIDS. It shows that since 2005, Indonesia has committed to implement the policy. In practice, the development of social marketing activities related to sexuality education to prevent HIV / AIDS was not simple regarding the culture diversity in Indonesia. However, Indonesia is one of six countries who discussed in detail on sexuality education in its policy and/or national legislation regarding HIV [2]. It explains that social interventions in Indonesia at the policy have been existed and more advanced than other countries in Asia.

Apart of Government Organization, other Human Service Organizations also have implemented reproduction health communities and families. As developed at macro level, social intervention at mezzo and micro level also leads to the issue of HIV/AIDS. Social marketing activities regarding to the issues of Child and adolescent sexuality health problems have not reached wider society. So that there were also some individuals or organizations initiated to reach out parents so that parents have more skills to communicate sexuality education for their children since early age. Especially after the emergence of various cases of sexual abuse of children [24]. It shows that there are many efforts to promote reproduction health and also sexuality education general, but their goals in the end did not aimed to prevent other serious matter: maternal death under 19 years old. Whereas maternal deaths also occurred from adolescent pregnancy who were not ready for their pregnancy [14, 15].

As proposed by Indonesia Demographic and Health Survey (2012) [1], Maternal Mortality Rate (MMR) in Indonesia is the highest in Asia. Based on the results of Demographic and Health Survey Indonesia (2012) and data from the Ministry of Health in Profile Population and Development in Indonesia in 2013, maternal mortality rate was

still high because the lack of public awareness regarding to pregnant women's health. The cases were pregnant women in Indonesia visit health center for examination rarely bleeding, hypertension during pregnancy or eldamsia, and infection. Public awareness of pregnant women's health can basically be improved through a variety of reproduction health programs, such as disseminating the information from "Adolescence Reproduction Health" (ARH) and BKKBN modules. Unfortunately, the distribution of those information resource were limited. Even the receiver of modules was restricted to the marriage people. They did not reach reproductive age and unmarried adolescents optimally. Yet they also have the need to get adequate knowledge about reproductive health. Limited resources of information could cause children and adolescents who are not married do not have enough information about sexuality. Then they would try to be informed from other resources without proper surveillance from adults. Apart of program limitation in Indonesia, delivering sexuality matters in Indonesia is still sensitive issue. So that children and adolescent could not fulfill their curiosity. In the end, the knowledge of children and adolescents about sexuality lead them to negative behavior: premarital sex, unwanted pregnancy, abortion and childbearing [22]. Cases of pregnancy on adolescent was happened in Indonesia and other countries in Asia, but also in America even higher than Europa's country. In fact, in Europe more promiscuity free and impressions on television more vulgar. The distinguish between that is sex education in Europe since early age at seven years.

Meanwhile, this has happened because of the lack of knowledge teenagers related to reproductive health in America is still very little and has not yet familiar. So, for reduce it, experts recommended that the children must gave the sex education and family planning; greater access to contraception; approach choice live, and involvement and the support of a wide community [16]. The case of premarital sex, unwanted pregnancy, abortion and childbearing should be an important concern because they are the root of the problem of maternal mortality, especially for adolescent pregnancy. Unfortunately, reproduction health promotion activities only focused on mainstreaming of HIV in the education sector [2]. Other form of social marketing is important, especially the activities that could strengthening home based sexuality education because the role of parents is important. Parent's role is will be more sufficient if they have skills in communication sexuality education with their children, not only the basic knowledge about health reproduction as part of sexuality education which have a broader meaning then health reproduction. This condition was found in Thailand. Based on research in Chiang Mai, there are 5 factors that influence sex behavior of adolescents. One of them was the parents' limitation in having knowledge and self-confidence to make

a good conversation about sexuality matters with their teenagers. So that, the ones who need sex education was not only the adolescents, but also parent and teachers [25].

Other resource conducted by Whitaker, Miller, May, & Levin, 1999 showed that discussion was conducted parents by their adolescent influence on safer sexual behavior so can prevent HIV and pregnancy in early adolescence. The discussion depends on 2 aspects, what and how the discussion is happen. Open, skilled and comfortable discussions make fluently. Therefore, this article recommended that increasing parent's knowledge about sex education and capability in communicate it for their children.

The article reflects the various efforts of Human Service Organizations in Indonesia to prevent pregnancy under 19 years old that often contributes to the high maternal mortality rate in Indonesia that has not achieve the MDG's target (Indonesian Population and Development Profile, 2013) [18]. Through literature review and in-depth interviews with 165 informants in two provinces, Central Java, we argue that sexuality Educations were still limited and should be supported by home-based sexuality education by parents. Parents are crucial for sexuality education Because they are the closest sub-systems at the micro level in children' development and growth system. The purpose of this article is to describe two important things in the prevention of maternal deaths in Pekalongan. First, the vulnerability of adolescent pregnancy in Pekalongan. Second, gaps in knowledge and behavior of teenager and media messages of health reproduction. Third, efforts in preventing adolescent pregnancy to maternal mortality.

2. Research Method

This article is based on qualitative research conducted in Pekalongan, Indonesia. Both provinces purposively selected because it has the highest MMR. Each province is taken two locations that represent the characteristics of the rural / urban districts and. Each rural / district and the city selected by considering AKI happened. The research was conducted in two years from 2015 until 2016.

Qualitative research in this research used in depth interview, *4-days recall*, observation and Qualitative Geographical Information System (GIS). In depth interview aimed to gather deeper data directly from informants. Then observation aimed to support data triangulation process. Specially to describe research location, health facilitation, and informants' accessibility to health services.

Meanwhile, through Qualitative Geographical Information System (GIS), this study uses Global Positioning System (GPS) to analyze the distance between the location of

residence of pregnant women with the location where health services are available. The analysis tool used ArcGIS 10.

3. Informant Profiles

For in-depth interviews, informants were interviewed as many as 26 people, including pregnant women and women of reproductive age (15-40 years). For pregnant women and women of reproductive age (15-40 years), this study also did the 4-days recall. 4-days recall was conducted to obtain information on what has been consumed by the informant during the last 4 days. In-depth Interviews were also for supporting informant: the husband/family of pregnant women, health workers (nurses/doctors/nurses), community / religious leaders, local Health Department and the Ministry of Health, and Verbal Autopsy to the husband/family of pregnant women who died to determine the events and conditions of the pregnant women and what efforts that have been done to save the them.

4. Theoretical Framework

The study used an ecomap framework as the basis of analyzing the problem of maternal mortality under 19 years old. An ecomap framework is one model in a growing ecological perspective of system theory. In contrast to the general theory system that appears before the ecological perspective, an ecomap framework shows that public entities on basically have various layers composed of micro, mezzo and macro. Each component in each layer is not static. Instead there is an interaction between the components in each of the existing layers and the dynamics of sub-system components. In terms of social interventions, the ecological perspective is very abstract to be applied in practice [10]. However, to identify problems and needs, this perspective is very appropriate to be used as an analysis tool [12].

Social marketing as one social interventions also require problem identification stage and a comprehensive need. Identification of problems and needs in social marketing is certainly not the same as marketing in general aimed at economic interests. Social marketing has its own characteristics because the raw material is human. The purpose of social marketing activities is also not just about changing knowledge. Moreover, social marketing is used to change the behavior. Where these behavioral changes support the improvement of the quality of life of recipients of services [3, 21]. In

practice, the implementation of social marketing activities can be devoted to social intervention activities that are promotive and preventive.

Adolescent pregnancy is a risk pregnancy that need to be addressed preventively. One of the efforts is to organize promotional activities for adolescent reproductive health. Implementation of reproductive health activities for teens basically has been organized in various countries. School setting became the most effective place because they could reach adolescence massively. However, the implementation was still reaping the pros and cons, because it is related to moral issues regarding adult keystrokes convey to children that teenagers [4, 23]. In Asia, UNESCO has also been working to develop the policies and strategies for developing sexuality education for children. Thus, children have the information and skills in taking decisions related to various aspects related to the subject of sexuality [2].

Sexuality education is also the systematic attempt to promote healthy awareness in an individual on matters of his or her sexual development, functioning, vigor and attitudes through direct teaching. It involves issues on safe sex practices, the use of birth controls, such as condom and oral contraceptive and the impact of such use on pregnancy outside marriage, teenage pregnancy etc. It deals with emotional relations, reproductive rights and responsibilities-abstinence and birth control, common avenues for parents or caregivers, to teach or be taught via formal schools and public health campaigns (Barbara, 2013 & Ayuk, 2012 in Esther Uko & Ayuk Awunghe Achu, 2013).

Thus, sexuality education basically has a very broad meaning and not just related to reproductive health alone. Instead, reproductive health is part of sexuality education itself. This means there is a preliminary process that needs to be done before children receive reproductive health.

5. Findings and Discussion

5.1. The vulnerable of adolescent pregnancy in Pekalongan

As proposed by the Demographic and Health Survey (2010), adolescent pregnancy was one of the causes of maternal mortality. This showed that cases of pregnancy (under than 19 years) need to get more serious attention. In some cases, in Pekalongan showed that pregnant women who are at high risk can be caused by two things: unwanted pregnancy due to sexual abuse and unwanted pregnancies due to lacking reproductive health knowledge.

Associated with the need of children to meet to cope up their sexuality problems, there is an ecomap framework [10, 12] that can be used to assess the needs and problems of children in a comprehensive manner. The research data is more widely provide information on aspects of the mezzo-micro, but as noted in an ecomap framework, micro aspects in the identification of needs and problems cannot be released in designing an activity that is intended to provide solutions to existing problems.

5.2. Unwanted pregnancy due to missing reproductive health knowledge

Different from Pekalongan City, Pekalongan District was not crowded. Pekalongan District is countryside. There are still paddy field too between houses. Even the highway in the district has been repaired and have good accessibility, but if we go far inside the village away from the highway, the road was still rocky. It is hard for us to get the informants' houses because it was footpath, except we use two-wheeled vehicles or motorcycle for instead. Pekalongan geographical conditions may be one factor to high maternal mortality rate. Moreover, health facilities in areas far from the city center more minimal. Affordability pregnant women to health services becomes more difficult because it is hampered because of the long distances and the number of services were inadequate.

Two cases of maternal death that is located in Pekalongan are also located in areas far from adequate health care. One of the cases was located in the coastal areas. At night, the access road from the highway to the victim's home was very risky. The road that traversed was very dark among a paddy field. One of the health workers in the region said that there were many crimes at that road. So that health workers who were ready to provide aid must have the mental strength when carrying out work at night.

Cases of pregnant women who died in coastal regions have a high risk pregnancy because of her age more than 35 years. The case was unwanted pregnancy and it is unclear who became her husband. During pregnancy, the informant said that the victim had suffered a mental condition was unstable.

Similar to the case, other cases of pregnant women died also in a state of unwanted pregnancy. Unlike the previous case, the victim stays away from coastal areas. However, the affordability of access to equal health. In addition to long distance between the location of the victim's home and health care, the quality of road that passes through rice fields and plantations are also cause for concern. The informant also mentioned that in the region often violent. So the atmosphere at night becomes conducive

for pregnant mothers to access health services, and for health workers / medical in reaching the patient's home.

Different with pregnant women who died in the coastal region, the second case was a pregnant woman who died at the age less than 19 years. It was an unwanted pregnancy because of pre-marital sex. The death of the victim at the time of childbirth. At the time of pregnancy, the informant said that the victim was carrying out a routine examination of her pregnancy. After the checking book examination (Maternal and Child Health book), which has become a standard of the Ministry of Health in Indonesia, it was found an empty examination book. The informant also added that the victim was pregnant when still doing his job as usual and at the same job as when she was not pregnant at a factory. Vehicles that are used when work is the motorcycle of her husband. Then, after the victim died, abandoned child was raised by his biological mother. There was no news from her husband after the victim died.

Based on the case, there were some things that should not be done by pregnant women who died. First, the book is available KIA should be filled so that pregnant women and their immediate family can control the health of the mother or fetus is in the womb. Second, pregnant women should have the right to get time off from work. Load the same job with the mother before pregnancy conditions would give a negative impact on the health of pregnant women. Third, using motorcycle on bad road each day was not safe for women who are pregnant. All three of these conditions should be anticipated if pregnant women have enough knowledge on how should undergo pregnancy. As Machdum, Cholid, Annisah, & Imelda (2015) pointed out that there are various factors of adolescent pregnancy who make a pregnant woman does not have the readiness of physical, psychological and social. Unpreparedness is then a problem that can harm pregnant mothers through pregnancy and birth of her child. Therefore, the most important thing that needs to be done to minimize MMR is to do with the prevention of adolescent pregnancy, especially unwanted pregnancies.

In Pekalongan, cases of adolescent pregnancy also occur. As stated by one informant:

"many cases ya.. a pregnant teenage. ... halim (another word of pregnancy at Java to cover up the word of pregnancy) let the people do not know.. Until now there is still many at the west side (of their location)... we could only advise them, carefully to find a husband they pregnant then do not use herbs, massage, (should) go to midwives and so forth... a children still 18, 17 years old then her son was died" (Ra, Kader, Pekalongan)

Same with cases in Pekalongan, adolescent pregnancies in her area were caused by unwanted pregnancy and pre-marital sex. Although the informant attempted to show that adolescent pregnancy and not married is a natural thing, but the term '*hamil*' for pregnant women was changed to '*halim*'. It shows that adolescent pregnancy and not married is not a matter of normal in the region. Informants also questioning the knowledge of teenagers about their own health during pregnancy. Although teen pregnancy was not the main case that of maternal mortality in Pekalongan, but the limited knowledge of teen parents could risk the children and themselves.

Based on the results Qualitative data collection through Geographical Information System, a data pregnant mothers died in Kota Pekalongan also not small. The picture can be seen on Figure 1.

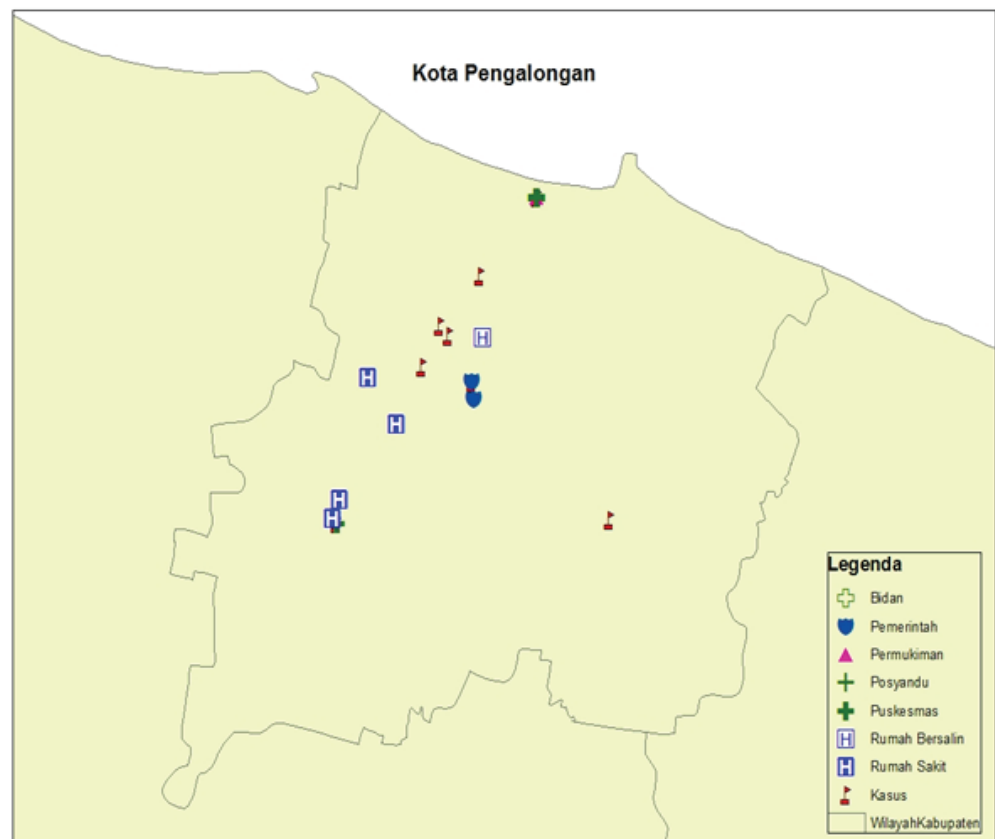


Figure 1: Distribution of Maternal Death Cases and Health Care Facilities in Pekalongan. (Sources: Imelda, Machdum, Cholid, & Annisah, 2015).

Based Qualitative Data Geographical Information System, the city of Pekalongan have health facilities that are accessible to pregnant women. But surprisingly, the presence of maternal deaths is closed with the facilities. Based on interviews, the informants said that the occurrence of death in pregnant women does not always

depend on the number of available health facilities. Geographical problem in Pekalongan city into its own problems. Although adjacent to health facilities, pregnant women cannot reach it because the pair of sea water in his house. Aid was delayed because of the geographical problem as it was not anticipated early. Facing this kind of case could not depend on medical health officers and local. Initiatives of pregnant women and families who became his main supports were also very important. Therefore, the maturity of pregnant women as one of the main subjects that play a role in the health of pregnant women is very important.

5.3. Unwanted pregnancy due to sexually abused

Based on previous cases, a teen mother who experienced unwanted pregnancy not often get sanctions for violating social norms in the region. But there is a cadre who reveals that: "Already many cases at this time. 15 years old already pregnan... Five teenagers were... If 13 years old were marriage. It was already usual thing.. " (Fat, Kader, Regency Pekalongan).

Based on the informant's narrative, premarital sexual cases in his village that is located in Pekalongan are still in rural areas numbered 5 people. The case of pre-marital sex by the informant is not a taboo anymore. As a solution, children who experience premarital sex has to be marriage. Health Officer in Pekalongan also said, "pregnant children are advise to be marry so that families are not ashamed... yes, rarely is it rare that risk pregnant are rarely, pregnant extramarital are many... children are not at risk it, because there is a risk pregnant because of rape..." (gynecologist, Pekalongan). This means that there are other problems that cause children to experience a pregnancy outside of marriage, namely sexual harassment.

A cadre in Pekalongan also said that in his village there is a 13-year-old boy who experienced an unwanted pregnancy on the child because the child is being sexually abused by adults who already have wives. Therefore, do not have enough knowledge in sexuality, the child became a victim of sexual abuse. If the child has pregnant, its not only their health, their babies' health also being at risk. Moreover, the children would not be able to ge enough education. Moreover, there are obstacles of a social environment that makes children are not free to attend school. Because of adolescence pregnancy, the children would feel ashamed to get enough education and information. Central Java Provincial Health Office (2015) also stated that AKI occur in women who are less educated. Figure 2 shows:

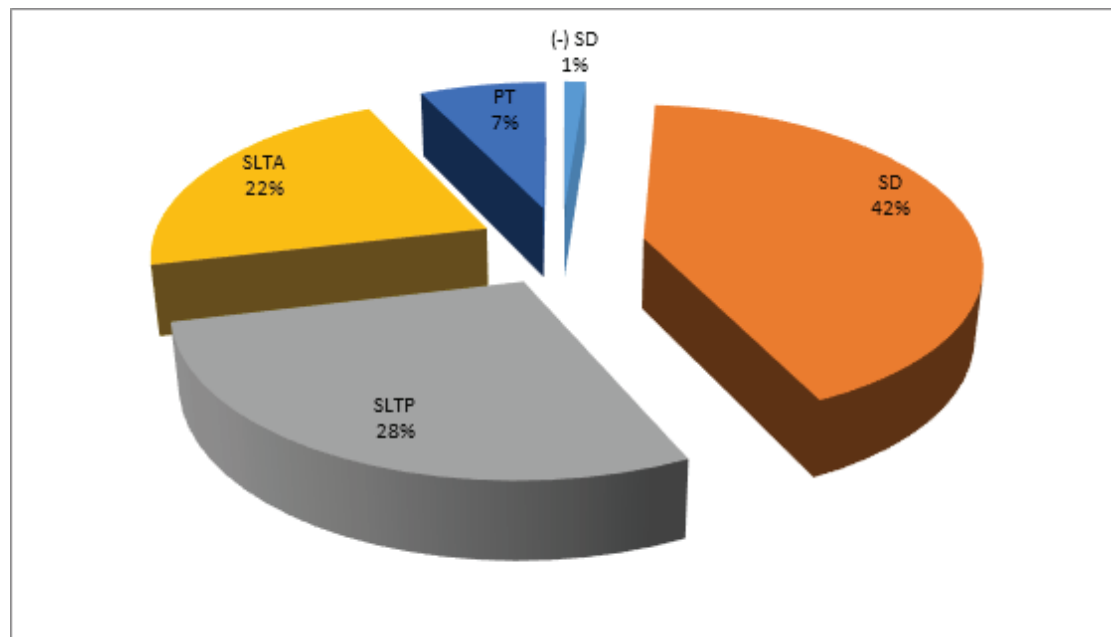


Figure 2: Maternal mortality by level of education. *Source: Central Java's Provincial Health Department (2015) ("Kebijakan dan Strategi Dalam Akselerasi Penurunan AKI dan AKB di Jawa Tengah," 2015).*

The low educational level would not support efforts to keep the mother in good health at the age of reproduction and pregnancy consciously. Although the government through health workers and medical officers had tried to socialize through the book *Mother and Child Health*, a variety of information and tools in the book will be less useful if the mother is not optimal maximizing the book.

5.4. Pregnancy in women who marry at an early age

In addition to impacts on health, low educational issues will also result in economic problems. The opportunity to access the job to be greatly reduced because human resources are not adequate. Economic conditions will ultimately be minimal even harder for them to be able to run a healthy lifestyle. Neglected health of reproductive age up to undergo during pregnancy will ultimately impact negatively on infant growth and health of the mother who conceived him also. Therefore, pregnancy at an early age gives more negative impact.

6. Gaps in Knowledge and Behavior of Adolescence about Reproductive Health and Social Marketing Activities

To prevent a high risk as a result of cases of adolescence pregnancy, there are a variety of activities that have been carried out by the government. Some of the activities include the dissemination of reproductive health in schools and communities

6.1. The roles education institution and health services

In Pekalongan, dissemination activities on reproductive health have been conducted in schools, at junior high and high school. Dissemination activities on reproductive health was carried out by the Centre for Reproductive Health Information. This suggests a serious effort in the dissemination of the urgency of reproductive health for adolescents. In addition to the activities of a massif, counseling activities are also often carried out as much as twice a year. However, counseling was very limited because the funds are inadequate when carried out in a sustainable manner. Coverage is also a new school 6 school. Students are involved to follow the activities of counseling is also only 10 people per school.

Dissemination activities on reproductive health in schools is done by the local government's awareness of the influence of globalization that can come from various sources, such as television and the internet. Government also organize a health center for the handling of juvenile named the Center for Reproductive Health Information.

But sexuality education in Indonesia has not been as expected. Materials provided more directed to things biologist about sexual reproduction. Whereas reproductive health submitted should be broader than that. also said that teachers who have been involved in training are also very limited. It is certainly unfortunate because sexual education should not be restricted only during training or when a teacher / trainer gives the material in the classroom [2].

Activity Adolescent Reproductive Health Services provided in schools in Pekalongan is activity held under PHC. These activities have been carried out for two years in the form of extension activities. As mentioned earlier, they also carry out consultative activities that involve students individually. However, consultations are intended for students who have experienced a pregnancy. R (Kapuskesmas, Regency Pekalongan) said that "If the ministry reproductive health for service frankly for that until she consultations here is still a little bit so more towards socialization in junior high school...consultations are still lacking... usually cases 'M B A' ('married by

accident'/pre-marital sex), so the consul but it has happened... ". RH dissemination activities aimed at preventing unwanted pregnancies in adolescence so new methods of outreach. While individual methods for prevention of unwanted pregnancy have not been performed.

6.2. The role of cadres in community

In addition to sexuality and reproductive health education in schools, the government was also encouraging social marketing at the community level. At the community level, social marketing is done related to health problems for pregnant women and women of reproductive age. Preventive activities are carried out in the community, among others, outreach activities held each year. Extension materials vary, among other characteristics and constraints on pregnant women at every stage, symptoms at the time of the mother to give birth, a taboo for pregnant women in early pregnancy age. The material given by the officer of the health center every week in the three meetings. At the last meeting, held Puskesmas officers' gymnastics for pregnant women.

Health care workers and medical use facilities in any organized community health education. For example, they used mosques to make announcements to the public that there is a free examination of the midwife. People who come more than middle class people. They also come for treatment. While the health inspection activities less desirable, although the cost of health checks are very expensive. In these conditions, health cadres tried to encourage people to be more active.

Forms of cadres' efforts visible in its efforts to protect the health of pregnant women. They will monitor the pregnant women whose home is located adjacent to the cadres. Actively, the cadres will ask pregnant women about the examination schedule and the results of the medical examination. Based on the results of the examination submitted pregnant mothers, health cadres will give some information. Similarly, the high-risk pregnant women. Medical personnel in Pekalongan revealed that the problem of maternal mortality is not always caused by medical factors. There are also social problems that make pregnant women to be coming late, so it cannot be handled properly. Active efforts of health workers, as well as medically, is very important in reducing maternal mortality.

Similarly, if there is the problem of unwanted pregnancies that occur in children in the region. A cadre in Pekalongan never make observations routinely to children who have become pregnant outside of marriage. Cadres in the town of Pekalongan understood that the case of pregnancy outside of marriage is not accepted by most in

the community, these cadres also actively approach so that the child can maintain the health of themselves and their babies.

The same with Pekalongan City, cadres from one village in the district of Pekalongan also provide assistance to children who have unwanted pregnancies. They will provide counseling. From the style of his speech, cadres who become informants showed that cases of unwanted pregnancy is a matter that could happen in their communities. Mothers who become pregnant at a young age also get access to health services. In Nusa Tenggara Barat too. There is no discrimination against women who are pregnant at a young age. But for a pap smear examination and IFA, one of the medics in Pekalongan Health Center said that they have a condition, in which patients who are married only. If there is a patient who is not married, or medical health officer of the health center will do a home visit to resolve the problems experienced by the patient. In the process, the health center will cooperate with the Office of Religious Affairs. Health Center staff also tried to ease the process of adolescence pregnancy. They only ask for Resident Identity Card of pregnant women and prospective partners to formalize the relationship as husband and wife.

7. Implication of Study

Adolescence pregnancy in Pekalongan not suffer discrimination when accessing health services. Although in Pekalongan found that adolescent pregnancy who are not married into resistance, but the medical health officer and attempt to find a solution so that patients get adequate health care. In addition to the services, preventive services have also been made by the government and society. Points socialization during this time used is the school and community. Besides using the methods that are massive, socialization urgency reproductive health for adolescents also use individual approach. But individual approach used is still aiming for curative services, which is only for children who are already experiencing an unwanted pregnancy. While preventive care to prevent the negative impacts of adolescent pregnancy still done massive.

Another problem encountered on preventive activities that had been carried out is the program range. Preventive activities that had been carried out have not been able to reach children and adolescents widely. So that together with the activities that have been developed through Adolescence Reproduction Health (ARH) pocket book for adolescents aged 14-19 years and modules BKKBN, the socialization of reproductive health and counseling in Pekalongan are still limited. Therefore, activity that is

necessary is to reach parents - or the key figure to train parents in community - so parents themselves to reach their children at home.

7.1. Sexual education at home: For one excellent step a head

In connection with efforts to minimize maternal mortality rate in Indonesia, sexuality education in order to avoid an unwanted pregnancy at adolescent pregnancy is very important. Therefore, social marketing involves issues sexuality and reproductive health education for adolescents needs to be expanded to issue more general and not just related to HIV / AIDS. Its implementation also involves not only the school and the education officer or health. Moreover, the involvement of parents as a subsystem that is closest to children and adolescents are needed [10]. Unesco (2012, p. 25) explains "it is certainly unfortunate and preventable. One of the way to prevent unwanted pregnancies is a social marketing activities that reproductive health communication for children and adolescents".

Increasing the role of parent to sexuality education for children can reduce the burden of health care workers and medical. Moreover, in the previous activity, sexuality and reproductive health education for teens in elementary school has not been done. Therefore, parents who can reach children early in their homes. In addition to reducing the role of health and medical personnel, the role of parents will also fill a shortage of natural approaches are very important in the growth process of children who are facing a stage of adolescent.

One theory to analyze the development of adolescence is social learning theory by Bandura. Bandura stated that the development of adolescence influenced by three factors, person in this case is the ability of their cognitive, behavior, and environment, which are reciprocal relation [16]. Cognitive will influence behavior, and conversely. So with the behavior and environment. So that, to pattern a save sex behavior on adolescence was needed a whole knowledge (cognitive) about sex and reproduction, and figure who can make a role model for them. Besides being figure, parents have other role as an information resources for their children. Hence, one step the beginning and basic for preventing pregnancy on adolescence is education about the safe sex starting from home.

Utilization of the role of parents in the education of sexuality very good potential in Pekalongan. In Pekalongan, parental advice is still to be heard by children. Based on the case, the various myths associated with food taboos and how to care for children are socialized by their parents are hereditary. For children who do not have enough

knowledge about the food and drinks are healthy and good for pregnant women, the various myths that socialized parent generation to be carried out by a child with a perception that older people have much more experience. But if the parents socialized material related to sexuality and reproductive health education needed by children, then the bargaining power in the elderly will benefit. But, on problems that meet in sex education on adolescence at home are knowledge and skilled of parents in delivered information about sex education is still limited. Whereas, like stated by [26], the parent's capability to delivered it, is so crucial in the successful of sex education and sex behavior. Beside it, other problem is awareness of parents still minimal. It seen from the barriers that were found health and medical workers to socialize the contents of a book maternal health and children that cover about the health of pregnant women. Pregnant women get the book that it does not use them well. This condition suggests that parents' awareness level to understand health is still low.

Another problem that would arise if the parents will implement sexuality education at home is, whether they have sufficient knowledge and skills to do so? Instead of related material sexuality education, health and medical personnel found it difficult to disseminate the contents of the book *Mother and Child Health* to review the health of pregnant women. Though the contents of the book *Mother and Child Health* is very compact and dense. However, pregnant women who get the book less used it well.

In addition to the awareness of parents who are less in increasing knowledge as parents, other obstacles to be faced in promoting sexuality education is the general public perception towards sexuality education. As stated by Unesco (2012, p. 25), According to in the case of Indonesia reducing reproductive health and sex education is still taboo.

In addition to containing materials related to health problems for pregnant women, *Mother and Child Health* books are provided by the Ministry of Health in Indonesia also includes the topic of sexuality education. Materials developed more leads on how to deal with and avoid sexual harassment that afflicts children.

This material is very useful for users of books in enhancing of parenting skills (Health Ministry Republik Indonesia, 2016, p. 86). However, sexuality education is basically not only related to sexual relations problems. Moreover, sexuality education is able to apply generally related to how the introduction of the child against his own body. Even basically any parent can synergize related to the fundamental understanding of religious education and sexuality education needed by children early. Sexuality education can be synergized with religious education, for example the introduction of the gender differences of men and women, the introduction of body parts that are vital and need to be maintained and not be touched by other people, the cleanliness

BAGAIMANA MELINDUNGI ANAK dari KEKERASAN FISIK dan KEJAHATAN SEKSUAL?



Figure 3: Sex Education for Parent in Mother and Child Health books. (Source: Health Ministry Republik Indonesia (2016, p. 85)).

of the body, splitting the beds between girls and boys, regulations upon entering the room parents, and so forth [24]. Religious Education can also be synchronized with social customs and traditions that exist in the province, who often use culture Merariq time to marry his daughter.

In the end the parents also need to be a place to ask first when the child has questions about reproductive health obtained from anywhere, including from school. Otherwise, the condition that happens is the gap between the knowledge of parents with children’s knowledge related to reproductive health. In the process, sexuality



Figure 4: Preventing sexual abuse for parenting skills in Mother and Child Health books. (Source: Health Ministry Republik Indonesia (2016, p. 86)).

education for children of parents do not constitute part of the parenting process that requires the attention of the parents of the child since the age of early, particularly in creating a two-way communication. Thus, if the child was a teenager, the parents are ready to communicate with the child according to his needs.

8. Conclusion

- The maternal mortality rate is a complex problem and should be solved. A comprehensive sexuality education could prevent children from unwanted pregnancy, marriage before 19 years, and reducing sexuality abused cases.
- There was sexuality education for teenagers from government, such as reproductive health education, through counseling activities, counseling, books and modules.
- Schools and communities have always been a marketing place for sexuality education and socialization activities on reproductive health for adolescents. Activities that have been implemented are still limited due to a lack of funding and human resources skills. It needs to be re-evaluated for the implementation of social marketing in schools and communities have a dependence on medical and health officer
- Parental involvement is very important in the process of sexuality education. Parents still have responsibility to educate their children in sexuality aspect because they are the closest adult in children's welfare system. There are several things that need to be considered in developing sexuality education activities at home, i.e. the knowledge and skills of parents
- Knowledge of parents become a problem because of the lack of awareness of parents to continue to hone their parenting skills. In addition, a sense of taboo against sexuality education also exists in older people in Indonesia because it has a negative perception of the term sexuality education. Though sexuality education is part of the education in the religion
- Efforts to increase the knowledge of parents through sexuality education can be developed by synergizing sexuality education with basic education in the religion of the rules of the relationship between fellow human beings, both at home and in the social environment.
- Association with parents' skills, sexuality education for children at home need two-way communication process. Therefore, parents need to familiarize the two-way communication process with their children from the beginning before the children become a teenager

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