

Effectiveness of Information Services to Improve Students' Understanding of Reproductive Health in Grade IX of Smp Negeri 6 Klaten

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Abstract

This study aims to determine the effectiveness of information services in improving the understanding of reproductive health of grade IX students at SMP Negeri 6 Klaten. The background of this study is based on the low understanding of adolescents on reproductive issues, which can have an impact on increasing the risk of risky sexual behavior, unwanted pregnancy, and drug abuse. The study used the Classroom Action Research (CAR) method which was carried out in two cycles, each consisting of four information service meetings. The subjects of the study were 31 grade IX students. Data collection techniques used observation, interviews, documentation, and questionnaires. The results showed that the average score of student understanding increased from 66, 60% (moderate category) in the pretest to 78.25 % (high category) in the posttest. The increase occurred in all indicators, with the highest increase in the indicator of understanding sexually transmitted diseases. These findings indicate that information services are effective as an educational strategy in equipping adolescents with healthy knowledge and attitudes towards reproductive issues. Therefore, information services can be used as a preventive approach in reproductive health education in schools.

Keywords: Counseling Guidance, Information Services, Reproductive Health



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INTRODUCTION

Adolescence is a critical phase in individual development marked by complex biological, psychological, and social changes. According to (Loutfy dkk., 2020) adolescents experience a significant transition from dependence to independence, which is often accompanied by exploration of self-identity, including in sexual and reproductive aspects. This transformation requires a deep understanding of reproductive health so that adolescents can act responsibly and make the right decisions regarding their bodies and social relationships.

Adolescent reproductive health not only includes physical aspects, but also includes mental and social health related to the reproductive system (Hart dkk., 2023; Kulkarni dkk., 2023). WHO (2023) defines reproductive health as a state of physical, mental, and social health in all aspects related to the reproductive system, as well as the ability of individuals to live a safe, satisfying, and responsible sexual and reproductive life. Therefore, an understanding of reproductive health must be provided comprehensively and in accordance with the development of adolescent age.

Unfortunately, in Indonesia, adolescents' knowledge about reproductive health is still relatively low. The results of the 2022 Indonesian Nutritional Status Survey (SSGI) released by the Indonesian Ministry of Health revealed that many adolescents still do not understand the process of puberty correctly, have false myths about menstruation, and do not understand the risks of premarital sex (Brahme dkk., 2020; Mansour dkk., 2021). In addition, data from the KPAI (2021) shows an increase in cases of unwanted pregnancies (KTD) among students, most of which are caused by a lack of education about healthy and responsible reproduction.

The phenomenon of rampant free sexual behavior among teenagers shows the urgency of more serious handling. According to Kohlberg's moral development theory (Iranifard dkk., 2024; Wang dkk., 2021), teenagers who do not yet have adequate moral understanding and information tend to be in the early conventional stage, where their decisions are greatly influenced by social pressure and group norms. This makes them vulnerable to following unhealthy sexual behavior if they are not equipped with knowledge and critical thinking skills.

The results of initial observations and interviews with guidance and counseling teachers at SMP Negeri 6 Klaten on August 7, 2019 revealed that there were a number of ninth grade students who experienced unplanned pregnancies due to excessive dating behavior and lack of information about reproductive health ("Access to Postpartum Sterilization: ACOG Committee Opinion, Number 827," 2021; Crespo dkk., 2024). This case has serious impacts, such as dropping out of school and early marriage that is not accompanied by emotional or economic readiness. This condition shows that adolescents need support in understanding their bodies and social roles in a healthy way.

Social media and the internet as open sources of information also contribute to worsening this condition. According to research by Unicef Indonesia and the Ministry of Communication and Information (2022), more than 65% of teenagers access sexual content from the internet without adequate supervision or guidance. When the information they get is not filtered properly, it is very possible that misinformation will occur which leads to unsafe sexual behavior.

Previous research has shown the effectiveness of information services in the context of guidance and counseling to overcome these problems. Research by (Kothari dkk., 2024; Linehan dkk., 2023) at SMPN 4 Sleman showed that providing information services through interactive media can increase students' understanding of the dangers of free sex and the

importance of maintaining the cleanliness of reproductive organs. Something similar was found by (Ebinghaus dkk., 2024; Yue dkk., 2022) who stated that after students participated in information services on the theme of reproductive health, there was a significant increase in students' awareness and attitudes towards the risks of premarital sex and sexually transmitted diseases.

In addition, other studies have shown that reproductive education provided formally and in a structured manner has a positive impact. Research by (Dianat dkk., 2020; Nallani dkk., 2023) found that information services delivered through school guidance and counseling can improve students' understanding and positive attitudes towards reproductive health. Similar results were obtained by (Black dkk., 2021; Capalbo dkk., 2022) who stated that information services designed according to students' needs can reduce risky sexual behavior.

Therefore, the role of schools is vital in providing appropriate reproductive health education. One effective approach is through guidance and counseling services, especially through information services. In accordance with Government Regulation No. 61 of 2014 article 12 concerning reproductive health, educators and counselors can play an active role in delivering age-appropriate reproductive education.

Information services in guidance and counseling aim to equip students with the right knowledge so that they can make decisions consciously and responsibly. (Krempasky dkk., 2020; Myo dkk., 2023) stated that information services are a form of service that helps individuals understand various important information that is relevant to their development. In this case, information services provided by BK teachers are expected to increase adolescents' understanding of the importance of reproductive health, the risks of free sexual behavior, and how to establish healthy social relationships and respect themselves.

This study focuses on grade IX students of SMP Negeri 6 Klaten, considering that at this level (age range 15-17 years), teenagers begin to show interest in the opposite sex and are in the phase of exploring sexual identity. Based on the results of the interview, cases of excessive dating and teenage pregnancy occur most in this class (Florio dkk., 2020; Rasmussen dkk., 2021). Therefore, appropriate intervention is needed in the form of reproductive health information services as part of personal and social guidance services to help students understand and implement healthy, responsible reproductive behaviors, and are able to avoid the risk of early marriage and other negative impacts.

In modern education and guidance services, the process of providing appropriate information to adolescents is an important strategy for forming healthy understanding and behavior. In line with (Kaiser dkk., 2021; Prinds dkk., 2020), adolescence is a critical phase in individual development, where adolescents experience intense cognitive and emotional transitions towards the formation of self-identity. Reproductive health aspects are an integral part of this process.

According to the World Health Organization (2023), comprehensive reproductive health education must pay attention to the cognitive, social, and emotional aspects of students. Adolescents who have access to correct and age-appropriate information are better able to make responsible decisions regarding their sexuality and health.

On the other hand, Winkel (2015) is still relevant in explaining that information services in guidance and counseling function as a form of service that provides a systematic understanding of issues that are in accordance with students' developmental needs. This view is

reinforced by (Gaskins, 2022; Meilani & Setiyawati, 2023) who shows that information services have been shown to improve students' understanding of sensitive issues, including sexuality.

Furthermore, (Ding dkk., 2023; Grubb dkk., 2020) explains that learning will be more effective if students are given structured information that is relevant to their previous knowledge. Information provided in a directed format helps students develop new thinking patterns, especially related to health and the risks that accompany it.

Based on the theories above, the following research objectives are formulated (Bose dkk., 2023; Çubukçu & Sezer, 2020; Marx, 2021): What is the level of understanding of grade IX students regarding reproductive health before receiving information services, What is the level of understanding of students after being given information services through guidance and counseling, Are information services effective in improving students' understanding of reproductive health, based on an educational and preventive approach.

Information services provided through a systematic and age-appropriate guidance and counseling approach are effective in improving students' understanding of reproductive health, as explained in the theory of adolescent development (Santrock, 2021), reproductive education theory (WHO, 2023), and meaningful learning theory (Grubb dkk., 2020; Li dkk., 2020)

This hypothesis is based on the theoretical basis that information service interventions can facilitate cognitive students in understanding changes in concepts, risks, and healthy actions related to reproduction, as well as encouraging the formation of responsible attitudes and safe decisions in everyday behavior.

RESEARCH METHOD

This study uses a Classroom Action Research (CAR) approach that aims to improve students' understanding of reproductive health through information services in guidance and counseling. The subjects of the study were grade IX students at SMP Negeri 6 Klaten. The study was conducted in two cycles, each consisting of the planning stage, action implementation, observation, and reflection. Each cycle was conducted four times, so that a total of eight information services were provided to students. Data collection was carried out through observation, interview, documentation, and questionnaire techniques. Observations were conducted to assess the service implementation process, while interviews were conducted with BK teachers and students to obtain supporting data. Documentation in the form of activity notes and photos of service implementation (De Rycke dkk., 2022; Segal dkk., 2023). The questionnaire was used to measure the level of students' understanding of reproductive health material before and after the action. The information service material covers important topics such as maintaining the cleanliness of reproductive organs, the dangers of free sex, the impact of drug abuse, the influence of social media on adolescent behavior, and the importance of understanding and maintaining reproductive health in general (Goueth dkk., 2023; Pearson dkk., 2023). Data analysis was carried out descriptively quantitatively, by calculating the percentage increase in students' understanding based on the results of the questionnaire. The level of understanding categories are divided into five scales, namely very low (0–20%), low (21–40%), moderate (41–60%), high (61–80%), and very high (81–100%).

RESULTS AND DISCUSSION

In this study, the research results were obtained which can be presented based on the research objectives, namely regarding students' understanding of reproductive health before

being given information services, students' understanding of reproductive health after being given information services, and information services can improve the understanding of reproductive health of class IX students at SMP Negeri 6 Klaten.

1. Understanding of Reproductive Health Before Being Given Information Services.

In accordance with the objectives of this study, namely regarding the understanding of reproductive health of grade IX students of SMP Negeri 6 Klaten before being given information services, the results of *the pretest before being given treatment* will be described.

Table 1 Overall Data on Students' Understanding of Reproductive Health from *the Pretest Results*

| Score Interval | Category | Frequency | % | Average |
|-----------------------------|-----------|-----------|--------|---------|
| 201.6 < Score \leq 240 | Very high | 0 | 0% | 65.44% |
| 163.2 < Score \leq 201.5 | Tall | 15 | 48.39% | |
| 124.8 < Score \leq 163.1 | Currently | 14 | 45.16% | |
| 86.4 < Score \leq 124.7 | Low | 2 | 6.45% | |
| 48 \leq Score \leq 86.3 | Very low | 0 | 0% | |
| Amount | | 31 | 100% | |

Based on table 1, it can be seen that the results of the calculation of the overall understanding of reproductive health before being given information services are in the moderate category (65.44%), including 15 students (48.39%) in the high category, 14 students (45.16%) in the moderate category, and 2 students (6.45%) in the low category. Meanwhile, the results of observations before being given information services from 31 students in the class from all indicators were able to show that the students were active and not punctual. The general average of students' understanding of reproductive health based on indicators is as follows:



Graph 1. Results of *the Pretest* on Understanding Reproductive Health per Indicator

Based on the results presented in table 1 and graph 1, it can be concluded that students' understanding of reproductive health before being given information services from each indicator is generally in the moderate category (66.60 %). The percentage of each indicator,

including cleanliness of genital organs, is in the high category (78.23 %). This is indicated by students not fully understanding how to maintain and care for their genitals, for example changing underwear 2x a day, cleaning genitals after urinating and defecating with clean water. Access to health education is in the moderate category (66.19 %). This is because students do not yet know what reproductive health is, the purpose of reproductive health education, and the scope of reproductive health. Premarital sexual relations are in the high category (70.97 %).

This is because students do not yet know the impact of premarital sexual relations on themselves, their families, and society. Drug abuse is in the moderate category (64.13 %). This is because students do not yet know the types of drugs, and do not yet know the impact of drug use and abuse on their lives. The influence of mass media is in the moderate category (66.57 %). This is because students cannot utilize social media properly, for example by uploading indecent photos with their partners on their Facebook accounts. Access to reproductive health services is in the moderate category (66.56 %). This is because students cannot utilize reproductive health services available at health centers or hospitals. Harmonious relationships with family are in the moderate category (64.62 %). This is because students do not like being directed by their parents, parents are less concerned about their children's reproductive health education. Sexually transmitted diseases are in the moderate category (55.56 %). This is because students do not know the types of sexually transmitted diseases, and how they cause and how they are transmitted.

Observation results seen from each indicator there are still some students who have not shown an understanding of their reproductive health, they only clean their genitals when bathing, even then with water that is not running (settled), this can cause bacteria and fungi to grow. Students also do not know what reproductive health is, what the goals and benefits of studying reproductive health education are. In addition, it is seen that students do not know the impact of premarital sexual relations on their reproductive health, on their lives, families and communities. Students also do not know the types of narcotics, the impact of abuse and use of narcotics on their lives and on their reproductive health. Students also have not been able to use social media properly, for example there are still students who upload indecent photos with their partners on their Facebook accounts. In addition, students have not been able to use reproductive health services available at health centers or hospitals. The relationship between students and their parents is not very close, so students are embarrassed if they want to talk about reproductive health problems with their parents. In addition, students also do not know the types of sexually transmitted diseases, as well as the causes and how they are transmitted.

2. Health Understanding After Being Given Information Services.

Students' understanding of reproductive health after being given information services for eight meetings followed by a *posttest*, the results of the *posttest* on understanding reproductive health will be described. students, namely:

Table 2 Frequency Distribution of Understanding of Reproductive Health Posttest Results

| Score Interval | Category | Frequency | % | Average |
|-----------------------|-----------|-----------|--------|---------|
| 201.6 < Score ≤ 240 | Very high | 4 | 12.90% | |
| 163.2 < Score ≤ 201.5 | Tall | 27 | 87.10% | |
| 124.8 < Score ≤ 163.1 | Currently | 0 | 0% | 78.04% |
| 86.4 < Score ≤ 124.7 | Low | 0 | 0% | |

| | | | | |
|-------------------|----------|----|------|---|
| 48 ≤ Score ≤ 86.3 | Very Low | 0 | 0% | . |
| Amount | | 31 | 100% | |

Based on table 2, it can be seen that the results of the calculation of students' reproductive health understanding after being given information services are in the high category (78.04%), including 4 students (12.90%) who have a very high category, 27 students (87.10%) have a high category, and no students were found who had medium, low and very low categories. The results of observations after being given information services from 31 students showed that all indicators had increased, such as students were able to maintain and care for their genitals, students were able to understand the nature of reproductive health, students were able to understand the impacts of premarital sexual relations, students were able to understand the impacts of drug use and abuse on their reproductive health, students were able to understand how to use social media properly and correctly, students were able to know that there are many reproductive health services, students were no longer afraid or embarrassed when they had to talk about their reproductive health with their parents, students were able to understand the types and prevention of sexually transmitted diseases.

Table 3 Posttest Results of Students' Understanding of Reproductive Health per Indicator

| INDICATOR | % | CRITERIA |
|-------------------------------|--------|----------|
| Cleanliness of Genital Organs | 80.16% | T |
| Access to Health Education | 79.61% | T |
| Premarital Sex Hub | 77.63% | T |
| Drug Abuse | 78.45% | T |
| The Influence of Mass Media | 77.71% | T |
| Access to Health Services Rep | 78.17% | T |
| Hub. Harmonious With Family | 78.06% | T |
| Sexually Transmitted Diseases | 76.21% | T |
| AVERAGE | 78.25% | T |

Based on the results of table 3, it can be concluded that the understanding of students' reproductive health after being given information services in general is in the high category, namely with a percentage of 78.25 %. The percentage of each indicator and the results of observations made, including cleanliness of genital organs, is in the high category (80.16 %). This is indicated by students being able to understand how to care for and maintain their genitals, by cleaning their genitals after urinating and defecating, changing underwear twice a day. Access to health education is in the category (79.61 %).

This is shown by students being able to know the nature of reproductive health, including the definition, scope and targets. Premarital sexual relations are in the high category (77.63 %). This is shown by students being able to understand the impact of premarital sexual relations on their lives, especially on their reproductive health. Drug abuse is in the high category (78.45 %). This is indicated by students being able to know the impact of drug use and abuse on their lives and reproductive health. The influence of mass media is in the high category (77.71 %). This is indicated by students being able to utilize social media properly and correctly such as Facebook, Twitter and so on. Access to reproductive health services is in the high category (78.17 %). This is indicated by students being able to know the many places that provide reproductive health services such as health clinics, community health centers and

hospitals. So that students can utilize the available reproductive health services properly. Harmonious relationships with family are in the high category (78.06 %). This is indicated by students being able to understand parenting patterns, so that students do not feel afraid or embarrassed when they want to tell their parents about their reproductive health. Understanding of reproductive health is in the high category (76.21 %). This is demonstrated by students being able to understand various types of reproductive health, how they are transmitted and how they can be prevented.

The results of observations after being given information services, students were able to demonstrate an understanding of their reproductive health by caring for and maintaining their genitals, such as routinely cleaning their genitals, not wearing tight pants, not putting cellphones in their pants pockets, and changing their underwear twice a day. Students were also able to understand what is meant by reproductive health. Students were also able to understand the impacts of free association such as free sex, so that students were able to avoid excessive dating and students chose healthy dating, for example dating that can motivate them to study. Students were able to avoid drinking alcohol, because drinking alcohol can damage reproductive health. Students were able to utilize social media properly, for example not uploading indecent photos with their boyfriends on Facebook. Students were able to utilize reproductive health services available at health clinics or the nearest health center. Students were able to share with their parents about their reproductive health, for example when they first menstruate. Students were able to understand the various sexually transmitted diseases, their causes and their treatment, namely by sharing information with their friends about reproductive health.

3. Reproductive Health Understanding Information Service

Based on the results of the descriptive analysis of the percentage and *t-test*, it can be explained that information services can improve students' understanding of reproductive health, more details can be seen in the following table:

Table 4. Percentage Score Results Before and After Treatment

| INDICATOR | Score | | Category | | Go on (%) |
|-------------------------------|----------|-----------|--------------|-----------|-----------|
| | Pre-test | Post-test | Pre-test | Post-test | |
| sexually transmitted diseases | 55.56% | 76.21% | Currentl y | Tall | 20.65% |
| Drug Abuse | 64.13% | 78.45% | Currentl y | Tall | 14.32% |
| Harmonious with family | 64.62% | 78.06% | Currentl y | Tall | 13.44% |
| Access to health education | 66.19% | 79.61% | Currentl y | Tall | 13.42% |
| Access to health services | 66.56% | 78.17% | Currentl y | Tall | 11.61% |
| The influence of mass media | 66.57% | 77.71% | Currentl y | Tall | 11.14% |
| Premarital sexual relations | 70.97% | 77.63% | Tall | Tall | 6.66% |
| Cleanliness of genital organs | 78.23% | 80.16% | Tall | Tall | 1.93% |
| Average | 66.60% | 78.25% | Current tall | | 11.65% |

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Based on table 4, it can be seen that students' understanding of reproductive health in general has increased before being given information services with an average percentage analysis per indicator falling into the medium category (66.60 %) and after being given information services with an average percentage analysis per indicator falling into the high category (78.25%). From the results of the percentage analysis, it can be concluded that information services can increase students' understanding of reproductive health in all indicators which have increased per indicator by (11.65 %).

Below we will present the results of the descriptive analysis of the percentage per indicator of students' understanding of reproductive health before and after being given treatment.

a. Cleanliness of Genital Organs.

The following is the percentage of students' understanding of reproductive health on the indicator of genital organ cleanliness obtained from the results of *the pretest* and *posttest*, as follows:

Table 5. Frequency Distribution of Cleanliness of Genital Organs

| Interval | CATEGORY | Class IXC | | | |
|------------|-----------|-----------|--------|----------|--------|
| | | Pretest | | Posttest | |
| | | F | % | F | % |
| 84% - 100% | Very high | 8 | 25.81% | 11 | 35.48% |
| 68% - 83% | Tall | 19 | 61.29% | 19 | 61.29% |
| 52% - 67% | Currently | 3 | 9.68% | 1 | 3.23% |
| 36% - 51% | Low | 1 | 3.23% | 0 | 0% |
| 20% - 35% | Very Low | 0 | 0% | 0 | 0% |
| | Total | 31 | 100% | 31 | 100% |
| | Average | | 78.23% | | 80.16% |

Based on table 5, it can be seen that out of 31 students before being given information services, they were in the high category (78.23%), there were 8 students (25.81%) in the very high category, 19 students (61.29%) in the high category, and 3 students (9.68%) in the medium category, 1 student (3.23%) in the low category. Meanwhile, after being given information services, they were in the high category (80.16%), there were 11 students (35.48%) in the very high category, and 19 students (61.29%) in the high category, 1 student (3.24%) in the medium category. Thus, the understanding of reproductive health indicators of genital organ cleanliness after being given information services increased even though at the same level. Before being given services, it was in the lower threshold category and after being given services, it was in the upper threshold category.

The results of observations before and after the provision of services showed differences. Students who did not understand how to maintain and care for the cleanliness of genital organs are now able to understand, as indicated by students not putting their cellphones in their pants pockets, cleaning their genitals with running water, not wearing tight pants, and changing their underwear twice a day.

b. Access to Health Education.

The following is the percentage of students' understanding of reproductive health on the indicator of access to health education obtained from the results of *the pretest* and *posttest*, as

follows.

Table 6. Frequency Distribution of Access to Health Education.

| Interval | CATEGORY | Class IXC | | | |
|------------|-----------|-----------|--------|----------|--------|
| | | Pretest | | Posttest | |
| | | F | % | F | % |
| 84% - 100% | Very high | 1 | 3.23% | 17 | 54.84% |
| 68% - 83% | Tall | 16 | 51.61% | 12 | 38.71% |
| 52% - 67% | Currently | 14 | 45.16% | 2 | 6.45% |
| 36% - 51% | Low | 0 | 0% | 0 | 0% |
| 20% - 35% | Very Low | 0 | 0% | 0 | 0% |
| | Total | 31 | 100% | 31 | 100% |
| | Average | | 66.19% | | 79.61% |

Based on table 6, it can be seen that out of 31 students before being given information services, they were in the moderate category (66.19%), there was 1 student (3.23%) in the very high category, 16 students (51.61%) in the high category, and 14 (45.16%) in the moderate category. Meanwhile, after being given information services, they were in the high category (79.61%), there were 17 students (54.84%) in the very high category, 12 students (38.71%) in the high category, and 2 students (6.45%) in the moderate category. Thus, students' understanding of reproductive health on the indicator of access to health education after being given information services increased to the high category. Before being given information services, they were in the moderate category and after being given information services, they were in the high category. The results of observations before and after the information service was given showed changes. Students who initially did not understand what was meant by reproductive health are now able to understand what is meant by reproductive health, the scope and targets of reproductive health, and the goals and benefits of studying reproductive health education.

c. Premarital Sexual Relations

The following is the percentage of students' understanding of reproductive health on the premarital sexual relations indicator obtained from the results of *the pretest* and *posttest*, as follows:

Table 7. Frequency Distribution of Premarital Sexual Relations.

| Interval | CATEGORY | Class IXC | | | |
|------------|-----------|-----------|--------|----------|--------|
| | | Pretest | | Posttest | |
| | | F | % | F | % |
| 84% - 100% | Very high | 12 | 38.71% | 11 | 35.48% |
| 68% - 83% | Tall | 6 | 19.35% | 10 | 32.26% |
| 52% - 67% | Currently | 6 | 19.35% | 10 | 32.26% |
| 36% - 51% | Low | 6 | 19.35% | 0 | 0% |
| 20% - 35% | Very Low | 1 | 3.23% | 0 | 0% |
| | Total | 31 | 100% | 31 | 100% |
| | Average | | 70.97% | | 77.63% |

Based on table 7, it can be seen that out of 31 students before being given information services, they were in the high category (70.97%), there were 12 students (38.71%) in the very

high category, 6 students (19.35%) in the high category, 6 students (19.35%) in the medium category, 6 students (19.35%) in the low category, and 1 student (3.23%) in the very low category. Meanwhile, after being given information services, they were in the high category (77.63%), there were 11 students (35.48%) in the very high category, 10 students (32.26%) in the high category and 10 students (32.26%) in the medium category. Thus, students' understanding of reproductive health on the premarital sexual relations indicator after being given information services increased to the high category, although there were still some who increased at the same level. Before being given information services, they were in the high category at the lower threshold and after being given information services, they were in the high category at the upper threshold. The results of observations before and after the information service was given showed a change. Students who initially did not know the impact of premarital sexual relations (*free sex*) now understand, by being shown not to date excessively, and not to do *free sex*.

d. Drug Abuse

The following is the percentage of students' understanding of reproductive health on the indicators of drug abuse obtained from the results of *the pretest* and *posttest*, as follows:

Table 8. Frequency Distribution of Drug Abuse

| Interval | CATEGORY | Class IXC | | | |
|------------|-----------|-----------|--------|----------|--------|
| | | Pretest | | Posttest | |
| | | F | % | F | % |
| 84% - 100% | Very high | 2 | 6.45% | 14 | 45.16% |
| 68% - 83% | Tall | 14 | 45.16% | 13 | 41.94% |
| 52% - 67% | Currently | 7 | 22.58% | 4 | 12.90% |
| 36% - 51% | Low | 7 | 22.58% | 0 | 0% |
| 20% - 35% | Very Low | 1 | 3.23% | 0 | 0% |
| | Total | 31 | 100% | 31 | 100% |
| | Average | | 64.13% | | 78.45% |

Based on table 8, it can be seen that out of 31 students before being given information services, they were in the moderate category (64.13%), there were 2 students (6.45%) in the very high category, 14 students (45.16%) in the high category, 7 students (22.58%) in the moderate category, 7 students (22.58%) in the low category, 1 student (3.23%) in the very low category. Meanwhile, after being given information services, they were in the very high category, 11 students (35.48%) in the high category, 10 students (32.26%) in the medium category and 10 students (32.26%) in the low category. Thus, students' understanding of reproductive health on the indicator of drug abuse after being given information services increased to the high category, although there were still some who experienced an increase. Before being given information services, they were in the moderate category and after being given content information, they were in the high category. The results of observations before and after the information service was given showed changes. Students who initially did not know what NAPZA was, the types of NAPZA, the impact of abuse and use of NAPZA. Now students are able to understand it by being shown students avoiding and not using drugs and not drinking alcohol.

e. The Influence of Mass Media

The following is the percentage of students' understanding of reproductive health on the mass media influence indicator obtained from the *pretest* and *posttest results*, as follows:

Table 9. Frequency Distribution of Mass Media Influence

| Interval | CATEGORY | Class IXC | | | |
|------------|-----------|-----------|--------|----------|--------|
| | | Pretest | | Posttest | |
| | | F | % | F | % |
| 84% - 100% | Very high | 1 | 3.23% | 7 | 22.58% |
| 68% - 83% | Tall | 15 | 48.39% | 22 | 70.97% |
| 52% - 67% | Currently | 13 | 41.94% | 2 | 6.45% |
| 36% - 51% | Low | 2 | 6.45% | 0 | 0% |
| 20% - 35% | Very Low | 0 | 0% | 0 | 0% |
| | Total | 31 | 100% | 31 | 100% |
| | Average | | 66.57% | | 77.71% |

Based on table 9, it can be seen that out of 31 students before being given information services, they were in the moderate category (66.57%), there was 1 student (3.23%) in the very high category, 15 students (48.39%) in the high category, 13 students (41.94%) in the moderate category, 2 students (6.45%) in the low category. Meanwhile, after being given information services, they were in the high category (77.71%), there were 7 students (22.58%) in the very high category, 22 students (70.97%) in the high category, 2 students (6.45%) in the moderate category. Thus, students' understanding of reproductive health on the mass media influence indicator after being given information services increased to the high category, although there were still some who increased to the high category. Before being given information services, they were in the moderate category and after being given information services, they were in the high category. The results of observations before and after being given information services showed changes. Students who were initially unable to utilize social media properly, are now able to utilize social media properly. Demonstrated by students not uploading indecent photos with their partners, not using social media to view pornography images or videos.

f. Access to Reproductive Health Services

The following is the percentage of students' understanding of reproductive health on the indicator of access to reproductive health services obtained from the results of *the pretest* and *posttest*, as follows:

Table 10 Frequency Distribution of Access to Reproductive Health Services

| Interval | CATEGORY | Class IXC | | | |
|------------|-----------|-----------|--------|----------|--------|
| | | Pretest | | Posttest | |
| | | F | % | F | % |
| 84% - 100% | Very high | 4 | 12.90% | 9 | 29.03% |
| 68% - 83% | Tall | 8 | 25.81% | 14 | 45.16% |
| 52% - 67% | Currently | 16 | 51.61% | 8 | 25.81% |
| 36% - 51% | Low | 3 | 9.68% | 0 | 0% |
| 20% - 35% | Very Low | 0 | 0% | 0 | 0% |
| | Total | 31 | 100% | 31 | 100% |
| | Average | | 66.56% | | 78.17% |

Based on table 10, it can be seen that out of 31 students before being given information services, they were in the moderate category (66.56%), there were 4 students (12.90%) in the

very high category, 8 students (25.81%) in the high category, 16 students (51.61%) in the moderate category, 3 students (9.68%) in the low category. Meanwhile, after being given information services, they were in the high category (78.17%), there were 9 students (29.03%) in the very high category, 14 students (45.16%) in the high category, 8 students (25.81%) in the moderate category. Thus, students' understanding of reproductive health on the indicator of access to reproductive health services after being given information services increased to the high category, although there were still some who experienced an increase in the high category. Before being given information services, they were in the moderate category and after being given information services, they were in the high category. The results of observations before and after the provision of information services showed changes. Students who initially did not know that health clinics, community health centers, and hospitals provide reproductive health services. Now students know about it and can utilize reproductive health services available at health clinics, community health centers, and hospitals.

g. Harmonious Relationship With Family

The following is the percentage of students' understanding of reproductive health on the indicator of harmonious relationships with family obtained from the results of *the pretest* and *posttest*, as follows:

Table 11. Frequency Distribution of Harmonious Relationships with Family

| Interval | CATEGORY | Class IXC | | | |
|------------|-----------|-----------|--------|----------|--------|
| | | Pretest | | Posttest | |
| | | F | % | F | % |
| 84% - 100% | Very high | 3 | 9.68% | 11 | 35.48% |
| 68% - 83% | Tall | 13 | 41.94% | 15 | 48.39% |
| 52% - 67% | Currently | 10 | 32.26% | 5 | 16.13% |
| 36% - 51% | Low | 4 | 12.90% | 0 | 0% |
| 20% - 35% | Very Low | 1 | 3.23% | 0 | 0% |
| | Total | 31 | 100% | 31 | 100% |
| | Average | | 64.62% | | 78.06% |

Based on table 11 it can be seen that out of 31 students before being given information services, they were in the moderate category (64.62%), there were 3 students (9.68%) in the very high category, 13 students (41.94%) in the high category, 10 students (32.26%) in the moderate category, 4 students (12.90%) in the low category, and 1 student (3.23%) in the very low category. Meanwhile, after being given information services, they were in the high category (78.06%), there were 11 students (35.48%) in the very high category, 15 students (48.39%) in the high category, 5 students (16.13%) in the moderate category. Thus, students' understanding of reproductive health on the indicator of harmonious relationships with their families after being given information services increased to the high category, although there were still some who increased to the high category. Before being given information services, they were in the moderate category and after being given information services, they were in the high category.

The results of observations before and after the information service was given showed changes. Students who were initially afraid and embarrassed when they had to talk about their reproductive health with their parents, now students do not feel embarrassed and are not afraid when talking about reproductive health with their parents. This is shown by students telling

their parents about their menstruation.

h. Sexually Transmitted Diseases

The following is the percentage of students' understanding of reproductive health in terms of disease indicators. sexually transmitted infections obtained from *the pretest* and *posttest results*, as follows:

Table 12 Frequency Distribution of Sexually Transmitted Diseases

| Interval | CATEGORY | Class IXC | | | |
|------------|-----------|-----------|--------|----------|--------|
| | | Pretest | | Posttest | |
| | | F | % | F | % |
| 84% - 100% | Very high | 0 | 0% | 7 | 22.58% |
| 68% - 83% | Tall | 6 | 19.35% | 18 | 58.06% |
| 52% - 67% | Currently | 7 | 22.58% | 6 | 19.35% |
| 36% - 51% | Low | 15 | 48.39% | 0 | 0% |
| 20% - 35% | Very Low | 3 | 9.68% | 0 | 0% |
| | Total | 31 | 100% | 31 | 100% |
| | Average | | 55.56% | | 76.21% |

Based on table 12, it can be seen that out of 31 students before being given information services, they were in the moderate category (55.56%), there were 6 students (19.35%) in the high category, 7 students (22.58%) in the moderate category, 15 students (48.39%) in the low category, and 3 students (9.68%) in the very low category. Meanwhile, after being given information services, they were in the high category (76.21%), there were 7 students (22.58%) in the very high category, 18 students (58.06%) in the high category, 6 students (19.35%) in the moderate category. Thus, students' understanding of reproductive health on indicators of sexually transmitted diseases after being given information services increased to the high category. Before being given information services, they were in the moderate category and after being given information services, they were in the high category. The results of observations before and after the information service was given showed changes. Students who initially did not understand what was meant by sexually transmitted diseases, types, transmission and treatment. Now students understand, with students sharing information about reproductive health with the aim of avoiding sexually transmitted diseases and avoiding free sex.

The results of the study showed that information services through guidance and counseling were effective in improving the understanding of grade IX students regarding reproductive health. The average pretest score which was in the moderate category (66.60%) increased to the high category (78.25%) in the posttest. This increase covered all indicators of understanding, indicating that information services not only increased students' knowledge, but also formed healthier attitudes and behaviors.

Information services in guidance and counseling function to provide factual, accurate, and relevant information according to the development needs of students (Prayitno & Erman, 2017). According to Winkel (2015), information services are a form of preventive and educational services to help individuals understand various aspects of their lives, including health.

This is in line with David Ausubel's cognitive theory which emphasizes the importance of *advance organizers* in learning, where information provided in a structured manner can

activate students' thinking schemes and help them link new concepts with existing knowledge.

At junior high school age, adolescents are at the stage of *formal operational development* according to Jean Piaget's theory. At this stage, adolescents begin to be able to think abstractly, consider consequences, and understand cause-and-effect relationships. This makes reproductive health information services right on target because students begin to be able to evaluate the risks of the actions they take, such as premarital sex or drug abuse.

Erik Erikson further explained that adolescents are at the *identity vs. role confusion stage*, which is a period of exploring self-identity including in the aspect of sexuality. Without the right information, adolescents can experience identity confusion and get caught up in risky behavior. Research by Fitriani (2020) proves that information services in guidance and counseling are effective in increasing students' understanding of the dangers of free sex at SMA X in Bandung. Likewise, research by Rahmawati & Asrori (2019) found that providing reproductive health information through educational video media can increase students' understanding and positive attitudes towards healthy reproduction. In an international context, a study by Kirby et al. (2007) concluded that reproductive health education interventions in schools can significantly reduce risky sexual behavior and increase knowledge and communication between adolescents and parents.

Positive changes are not only seen from the knowledge aspect, but also from attitudes and behaviors. After being given information services, students began to avoid excessive dating and avoid free sex behavior, students are more courageous in having dialogues with parents regarding puberty and reproductive issues, students are able to use social media wisely, no longer posting inappropriate content, students demonstrate healthy living habits, such as maintaining the cleanliness of reproductive organs, these findings are in accordance with the concept of life skills-based health education that prioritizes adolescents' abilities in making decisions, thinking critically, and building effective communication.

CONCLUSION

The results of this study indicate that information services provided through systematic and continuous guidance and counseling have succeeded in increasing the understanding of reproductive health of grade IX students of SMP Negeri 6 Klaten. Before being given information services, students' understanding was in the moderate category with an average score of 66.60%. After implementing eight information service sessions, there was a significant increase to the high category with an average score of 78.25%. The increase in understanding occurred in all indicators studied, including aspects of reproductive organ hygiene, the dangers of premarital sex, drug abuse, the influence of mass media, and access to reproductive health services. The indicator that experienced the highest increase was understanding of sexually transmitted diseases. This study strengthens the view that information services in guidance and counseling have high effectiveness in delivering reproductive education that is in accordance with the developmental stages of adolescents. This service not only increases knowledge, but also forms more responsible attitudes and behaviors towards reproductive health.

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