

## REPRODUCTIVE HEALTH EDUCATION EARLY PREVENTION OF SEXUAL VIOLENCE WITH PHANTOM MEDIA AT TK ALIF CENTER INTEGRATED

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### ABSTRACT

Kindergarten is a very effective educational forum to introduce children to reproductive health from an early age. The impact of low public understanding of reproductive health causes various health, economic, social, and crime problems that occur increasingly rampant throughout the country. Provide Health Education on proper reproductive health, and limb recognition for each student, using phantom media. Community service activities run in an orderly and smooth manner, material on reproductive health is delivered by the head of the community service, and body recognition practices can be touched on or not guided by Community Service Members and students. The participants in this community service activity consisted of teachers and students TK Alif Integrated as many as ± 23 people. The participants were enthusiastic and communicate with the speakers. Reproductive health education based on phantom media in early childhood is very useful and more effective than counseling without media, because it can significantly increase children's knowledge and understanding as well as skills and awareness.

**Keywords:** Reproduction, Violence, Sexual



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## INTRODUCTION

Kindergarten is a very effective educational forum to introduce children to reproductive health from an early age. Reproductive health education in children aims to train and instill awareness in maintaining health and personal hygiene (hygiene) and environmental hygiene (sanitation) from an early age. Motivate children to be able to maintain personal hygiene by teaching and training children skills to learn to wash their hands and brush their teeth properly, maintain body hygiene such as bathing and shampooing, routinely cutting and cleaning hands and footnails, using footwear when outside the home, using clean water for toilets and not playing in dirty water and not defecating and urinating carelessly, disposing of garbage in its place, as well as prevention of sexual violence / crimes in children from an early age (Peraturan Pemerintah RI, 2014; Aprilia A, 2015 )

The Reproductive Health Improvement Program (Kespro) is currently the focus of attention of the government and the people of Indonesia, because the impact of low public understanding of reproductive health causes various health, economic, social and criminal problems that occur increasingly rampant throughout the country. (Dokter Kecil, 2011) Data on complaints throughout 2017 from at the National Commission for Child Protection (Komnas PA) reached 2,848 cases of violence against children. The Forms of sexual violence against children include; rape, fornication, incest and the most dominating is sodomy. The total number of victims of boys as targets of predators reached 59%, while girls were 41%. The age range that is the most victimized is the age of 6-12 years in the group of kindergarten and elementary school students with the majority of perpetrators of violence against children (80%) being the closest people (Komnas PA, 2019; Handayani N.H, 2012).

The Child Protection Agency (LPA) noted that during 2021 violence against children in East Java increased quite significantly by 100 percent. That increase was calculated in a comparison of cases from 2020 and during 2021. In 2020, violence against children reached 186 cases with 46 of them daring to report. Meanwhile, in 2021 it reached 368, with direct reports of 137. From the

review of perpetrators and victims, in 2020 there were 261 perpetrators and 165 children as direct victims. Then in 2021 the number of perpetrators was 177 people and direct victims of 407 children. (Hastuti S, 2014)

So far, efforts to increase sexual violence education are still very minimal, because generally schools still do not include reproductive health education in their curriculum and some Kespro people are still steadfast talking about it.(Notoatmodjo S.2003). Based on these problems, it is necessary to apply science and technology to the community through community service activities in the form of Reproductive Health Education (Kespro) from an early age with the target of Alif Kindergartens in Jombang. The application of media-based Kespro educational science and technology for children is an educational means for children to learn by utilizing learning media tools, namely counseling activities with lecture and discussion methods using tools, namely illustrated sketch media, music and songs as well as drama videos and role play by involving teachers to participate in Kespro education to create a family environment, Child-friendly schools and communities as an effort to prevent violence against children from an early age to be realized

## METHOD

This community service activity aims to increase knowledge in the field of reproductive health and motivate and guide individuals and the community to familiarize themselves with maintaining themselves in the field of reproductive health for themselves and their families. (Notoatmodjo S.2007) The method used for reproductive health education activities to prevent sexual violence in early childhood at the Alif Center Integrated Kindergarten in Jombang Regency is by providing Health Education about proper reproductive health, as well as limb recognition to each student, using LCD, laptop and phantom media. The material is delivered using language that is easily understood by early childhood so that its use does not require special knowledge and makes it easier for children to be able to apply it in everyday life.

## RESULT

Community service activities were carried out on June 22, 2022, running in an orderly and smooth manner, material on Reproductive Health was delivered by the Head of Community Service, Body recognition practices that may or may not be touched by Community Service Members and students. Participants in this community service activity consisted of Alif Integrated Kindergarten teachers and 23 Alif Integrated Kindergarten students as many as  $\pm$  people. Participants were very enthusiastic and communicative with the speakers. In community service activities, discussions and questions and answers were also carried out to the participants as well as brainstorming about the importance of early childhood reproductive health, as well as asking participants to practice limbs that may or may not be touched at the Alif Center Integrated Kindergarten in Jombang Regency.



## DISCUSSION

According to WHO, reproductive health is a state of complete physical, mental, and social well-being, not only free from disease or disability, but in all aspects related to the reproductive system, functions and processes. Manuaba (1999), states that reproductive health does not only discuss the biological structure of men and women, but also includes knowledge of reproductive systems and functions, healthy reproductive periods, Sexually Transmitted Diseases (STDs)

including HIV / AIDS, myths and facts about sexuality. (Maryuni., Anggraeni L, 2016)

Reproductive education is education that concerns issues of human sexuality, the process of offspring (reproduction), human social development, sexual behavior, marriage, sex relations and health and psycho-social aspects. (Mutiara Magta, 2018)

Education and providing an understanding of reproductive health issues balanced with moral education must be carried out from an early age. According to Singgih (1995), the delivery of reproductive education material should be given early when children have begun to ask about sex differences between themselves and others, continuously and gradually, adjusted to the needs and age of the child and the child's grasping capacity. (Kurnia Dewiani,2019).

The way of delivering reproductive education materials to kindergarten children are different from elementary, junior high and high school. In kindergarten children, it is usually explained the differences between men and women and the introduction of reproductive organs, for example given by means or taking examples of plants, namely how to grow and develop trees starting from flowers, and seeds, to grow into new plants. Elementary- age parents can explain the process of fertilization and embryo growth, the return period accompanied by wet dreams and menstruation (PKBI, 2017).

The material presented about essential things are:

1. Introduce children's organs
2. Growth and development of reproductive organs
3. How to maintain personal hygiene and reproductive organs
4. How to prevent sexual abuse and violence in children (Purwaningsih W, 2012)



a. Safe and unsafe touch

Children do not yet understand which touch is safe and which is not safe. Give the child an understanding that if someone else touches private areas (mouth, chest, buttocks, thighs and genitals). This limit will make the child understand the parts that can be touched and should not be touched by others. (Rahayu, 2016)

b. Good and bad secrets

Children who are victims of sexual abuse or assault are often unhappy. They tend to keep secrets because they do not want to be known or threatened by perpetrators. Teach children to distinguish between good and bad secrets. Everything that makes them uncomfortable, upset, frightened, and sad must be told or told and must not be kept secret. (Rahayu, 2016)

c. Seek shelter

Children should understand who should be trusted, and be able to provide protection, such as parents, schools, police, child protection commissions, and other agencies. Children are taught to dare to report if someone else suddenly gives a "GIFT" asks to keep a secret, or invites them to leave alone without a clear purpose (Handayani N.H. 2012).



d. Parents, school authorities, and caring environment

When children are victims of sexual abuse or violence they tend to become shy, inferior, and self-blame. Parents should be open about reproductive health and early sex. Make sure children understand who they are complaining to when something unpleasant happens. Parents, schools and the environment must understand if there is a change in behavior in children (Handayani N.H. 2012; Rahayu, 2016).

## CONCLUSION

Based on the results of the implementation of Kespro educational service activities, the following conclusions can be drawn:

Kindergarten schools generally still do not include reproductive health education in their curriculum, so it is necessary to improve teacher training and infrastructure to improve teacher skills and creativity and increase teacher insight.

Media-based Kespro education in early childhood is very useful and more effective than counseling without media, because it can significantly increase children's knowledge and understanding as well as skills and awareness. Kespro education needs to be carried out continuously by involving children, teachers, parents and the surrounding community to create a child-friendly family/home, school and community environment as a mandatory program in the kindergarten curriculum.

## SUGGESTION

Reproductive health education (Kespro) is not only necessary, but mandatory for children, so parents must be more concerned and increase their knowledge about reproductive health. Currently, parents still consider reproductive health education as taboo, even though it is very important to prevent risky behavior. With enough knowledge, it's a good idea for parents to start providing reproductive health education from an early age so that children know about the changes that occur in themselves.

## DAFTAR PUSTAKA

- Aprilia A, 2015, Perilaku Ibu dalam Memberikan Pendidikan Seks Usia Dini pada Nakan Pra Sekolah (Studi Deskriptif Eksploratif di TK IT Bina Insani Kota Semarang), Jurnal Kesehatan Masyarakat, Vol:3(1):619-628.
- Dokter Kecil, 2011, Pendidikan Seks (Sex Education) Sejak Dini...Kenapa Tidak???,Diakses:<https://dokterkecil.wordpress.com>, 5 Februari 2018.
- Handayani N.H, 2012, Pelecehan dan Kekerasan Seksual, Dikases [http://Guetau.com/informasi/hksr/pelecehan dan kekerasan seksual.html](http://Guetau.com/informasi/hksr/pelecehan%20dan%20kekerasan%20seksual.html), Tanggal 25 Januari 2018.
- Hastuti S, 2014, Pendidikan Seksual Anak Di Tk Dan SD. Jurnal Sanata Dharma Berbagi, Yogyakarta, Vol:1.
- Kemendikbud.2014b.Peraturan Menteri Pendidikan dan Kebudayaan Republik Indonesia Nomor 146 Tahun 2014, tentang Pendidikan Anak Usia Dini.
- Kurnia Dewiani, Y. P. (2019). Pendidikan Seks Dini dan Kesehatan Reproduksi Anak untuk Siswa Sekolah Dasar. Dharma Raflesia Unib Tahun XVII, Nomor 2, 1-6.
- Maryuni., Anggraeni L, 2016, Faktor yang Berhubungan dengan Tingkat Pengetahuan Orangtua tentang Pendidikan Seks secara Dini pada Anak Sekolah Dasar (SD), Jurnal Ners dan Kebidanan Indonesia, Vol:4(3):135-140.
- Mutiara Magta, L. A. (2018). Persepsi Guru terhadap Pendidikan Seksual untuk Anak Usia Dini (Studi Deskriptif Kuantitatif pada Guru TK di Kecamatan Buleleng). Buleleng: Jurnal Ilmu Pendidikan PEDAGOGIKA.
- Nawita, M. (2013). Bunda, Seks Itu Apa? Bandung: Yrama Widya.
- Notoatmodjo S.2003 Ilmu Kesehatan Masyarakat (Prinsip-prinsip Dasar). Jakarta: Rineka Cipta.
- Notoatmodjo S.2007 Pendidikan dan Perilaku Kesehatan. Jakarta: Rineka Cipta. 2010. 22. Maulana Heri DJ. Promosi Kesehatan. Jakarta: EGC.
- PKBI. (2017). 7 Komponen Pendidikan Seksualitas Komprehensif. Dipetik April 10, 2021, dari Perkumpulan Keluarga Berencana Indonesia: <https://pkbi.or.id/7-komponenpendidikan-seksualitas-komprehensif/>
- Purwaningsih W, 2012, Hubungan Pengetahuan dan Peran Keluarga dengan Perilaku Seksual Pra Nikah pada Remaja Anak Jalanan di Kota Surakarta, Jurnal Ilmu Kesehatan, Vol: 9(1): 22-29
- Rahayu, I. P. (2016). Kesehatan Reproduksi dan Keluarga Berencana. Jakarta Selatan:Kementrian Kesehatan Republik Indonesia.
- Ratnasari, R. F. (2016). Pentingnya Pendidikan Seks untuk Anak Usia Dini. Jurnal' Tarbawi Khatulistiwa' Vol.2 No. 2, 55-59.
- Yuliyanti, P. D. (2016). Peran Guru dalam Pendidikan Seksual dan Reproduksi (Prevensi Kekerasan Seksual Anak). Semarang: Eprints Universitas PGRI Semarang)