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## Parents' Involvement in Sexual and Reproductive Health Education for Children: A Scoping Review

Desi Asih Purwanti<sup>1</sup>, Menik Sri Daryanti<sup>2</sup>, Sri Sundari<sup>3</sup>, Ahsanudin Attamimi<sup>4</sup>

<sup>1,2</sup>Fakultas Ilmu Kesehatan, Universitas 'Aisyiyah Yogyakarta, Indonesia

<sup>3</sup>Fakultas Kedokteran, Universitas Muhammadiyah Yogyakarta

<sup>4</sup>Fakultas Kedokteran Kesehatan Masyarakat Dan Keperawatan, Universitas Gadjah Mada Yogyakarta, Indonesia

Corresponding author: Email: [desiasihpurwanti@gmail.com](mailto:desiasihpurwanti@gmail.com)

### ABSTRACT

**Background:** Parents play important role for educationg children about sexual and reproductive health. Sexual and reproductive health education is very important to be provided for children in early age, so that they could protect themselves from sexual violence. However, the information about sexual and reproductive health should be taught by parents so that children do not misstep in their lives.

**Objective:** to review the evidence of parenting involvement in adolescent sexual and reproductive health education.

**Methods:** The method of scoping reviews have adopted the framework of Arksey and O'Malley (2005), the steps of framework are (1) The identification of scoping review questions, (2) The identification of relevant articles, (3) The selection of articles, (4) Data Charting , (5) Mapping, collating and summarizing. The writer searches for articles in 3 databases and selects the original article for review. The article theme focuses on the parents involvement in sexual and reproductive health education against children in developing countries that conducted in 2009-2019.

**Findings:** Out of the 8 selected articles. Five themes of scoping review are the factors that influence parent and child communication, such as age, gender, education, social, economic, generation and relationship of family gaps. The obstacle of providing reproductive health education and sexual in children due to parents are ashamed, uncomfortable , lack of knowledge , and the influence of culture and norms. HIV/AIDS is a topic that is often discussed by parents. Knowing about sex education is important for children, while parents and teachers are sources of this information. In order to teach sexual and reproductive health education well, parents need good communication and improve their knowledge.

**Conclusion:** In order to provide sexual and reproductive health education, there are several factors and barriers that affect the communication of parents and children. Parents only discuss sexual and reproductive health issues generally. They also teach their children about the dangers of premarital sex.

**Keywords:** *Sexual and reproductive health education; Parents; Children.*

## **I. INTRODUCTION**

Family is the smallest social group that consist of father, mother, and child. The first children environment is home where children always interact with parents and close relatives. Not only at home, the family also play role to influence social life, children will recognize what around and daily life (Achmad et al., 2017). Each of family member has their own functions and roles, such as parents who have responsibilities to their children. Not only fulfill basic necessities of life but also all aspects such as sexual and reproductive health education. Sexual and reproductive health education is very

important to teach to children in early age (Achmad et al., 2017). Children need to know their bodies early on and understand the physical differences between boys and girls. Therefore, children can take care their body and respect others' body. Moreover, to preserve the physical hygiene and health, the sexual and reproductive health education is the way to protect children from sexual crimes (Ratnasari & M.Alias, 2016).

Talking about sexual to children is never been easy. Yet teaching sexual and reproductive health education to children must be given so that children do not misstep in their lives. Many cases of sexual abuse to children must be concern at this time. Sexual harassment is the impact of lack of parents understanding on sexual and reproductive health education in early age (Aprilia, 2015). Many people thought that talking about sex is taboo, so that children can not freely approach their parents to find out about issues related to sex. Moreover, children also accept misinformation from their parents about myths and misunderstandings in their whole lives (Opara et al., 2010).

Sexual and reproductive health education are given to children so they are able to protect themselves from sexual violence. The information about it should be conducted from parents who care a lot to their children.

## **II. OBJECTIVE**

The objective of sexual education is making healthy emotional about sexual problems and guide children and adolescents towards healthy and responsible to their sexual lives (Safita, 2013).

## **III. METHODS**

The method used is scoping review. Scoping review is to identify research gaps on research and identify involvement of decision-making (Tricco et al., 2016). By using the framework of Arksey and Malley (Arksey & O'Malley, 2005), the steps of framework are (1) The identification of scoping review questions, (2) The identification of relevant articles, (3) The selection of articles, (4) Data Charting, (5) Mapping, collating and summarizing.

Step 1 : Identify scoping review questions

The question of scoping review is "What is the involvement of parents in teaching sexual and reproductive health education to children?" to develop searching strategies and formulating question of scoping review by using the Population, Intervention, Comparison and Outcome (PICO) format. The use of PICO can identify separated and provided aspects of situations where the population has certain conditions and objectives related to intervention.

Tabel 1. Fremwork PICO

<i>Population</i>	<i>Intervention</i>	<i>Comparison</i>	<i>outcome</i>
Parents	Sexual Education	-	Involvement
Mother	Reproductive Health		Participation
Father	SRH		Contribution
Fatherhood			Empowerment
Motherhood			
Parenthood			

#### Step 2: Identify relevant articles

The selection of data is based on the inclusion criteria, such as articles that published in 2009-2019, research in developing countries, the published articles in English and Indonesian, original articles, peer-reviewed published in journals and the theme of the article focused on the involvement of parents in sexual and reproductive health education to children. The evidence is conducted by relevant databases such as Pubmed, ScienceDirect, and Ebsco with keywords that required to search for articles.

#### Step 3: Article selection

The process of data selection uses Prism Flowchart. Prism Flowchart can describe the process of finding relevant articles. It is considered appropriate due to its advantage that improve the quality of reporting publications (Peters et al., 2015). The number of articles was 1.316 during the searching on 3 databases and reference lists, then selection was made based on duplicate articles, inclusion and exclusion criteria. Based on the findings of selected contents of the article, the suitability of the population, the method, and the results conducted 8 articles that will be used for Scoping review. The articles are selected later in the critical appraisal to assess articles quality. In order to assess articles quality, the Joana Briggs checklist from the Joana Briggs Institute is needed.

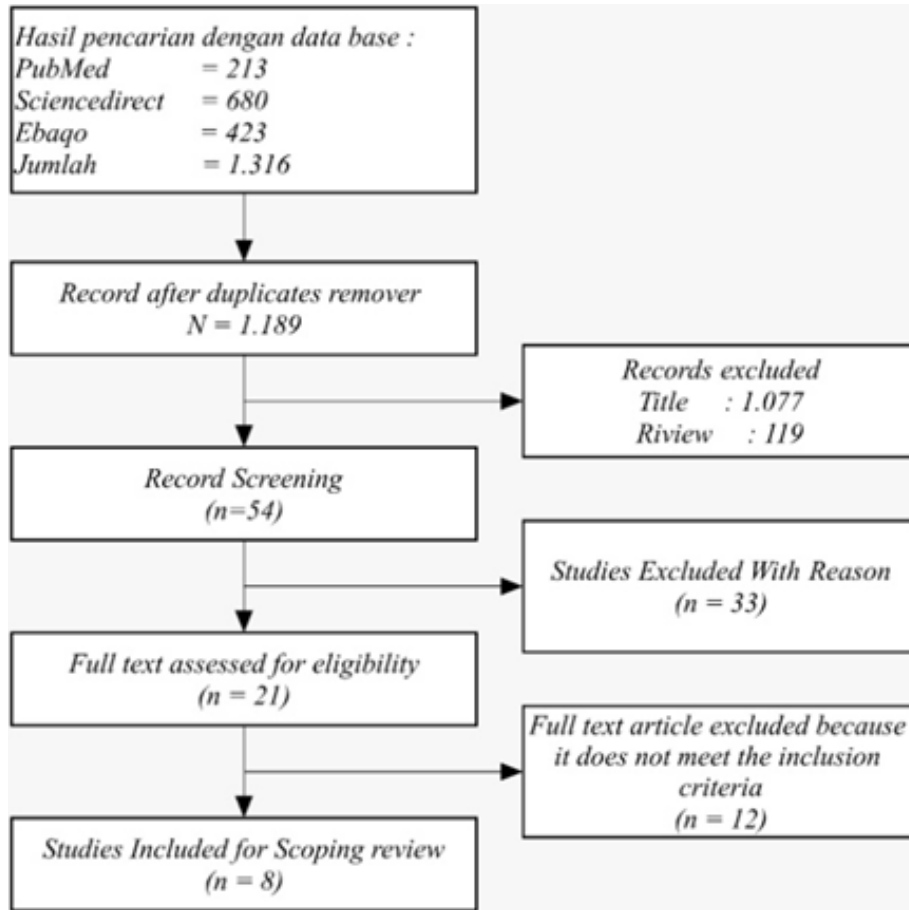


Figure 1. Prism Flowchart

Step 4 : Data Charting

8 articles are grouping to criterias based on year, research location, objectives, methods, results and grade. The writer records all the information and compares data in articles.

**IV. FINDINGS**

Step 5 : Mapping, collating and summarizing.

Based on article review, there is mapping literature with 3 characteristics such as country, method and grade. Eight articles that are suitable and of good quality comes from developing countries based on inclusion criteria. There are 2 selected articles from Indonesia, 1 article from India, 1 article from Iran, 1 article from Vietnam, 1 article from Negeria, 1 article from Tanzania and 1 article from Ethiopia.

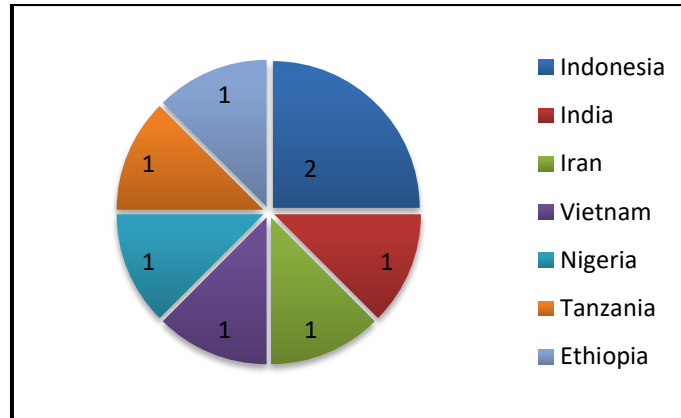


Diagram 1. Country Characteristics

Based on the research method, 4 cross-sectional quantitative research articles, 1 quantitative RCT (Randomized controlled trial) study and 3 qualitative research are needed.

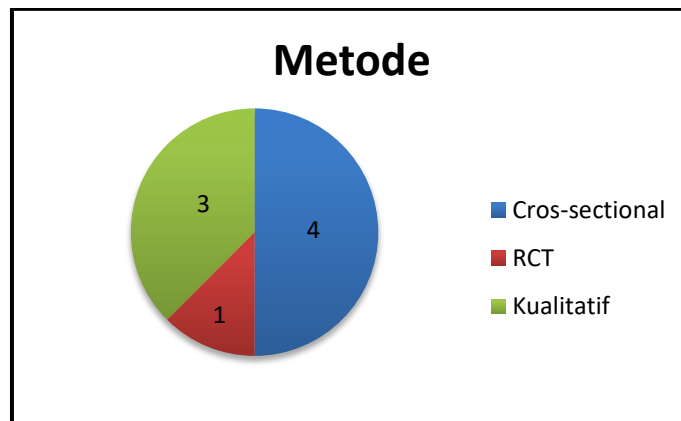


Diagram 2. Method Characteristics

Based on the Grade, out of 8 articles in critical appraisal, the articles that have best quality with score A are 6 articles, there are articles 1, 2, 3, 5, 7, and 8 while

## Data Charting

No	Title/Writer/Year/ Coding	Country	Objectives	Methods	Findings	Score
1	Parents' Perceptions of Timing of Initiation of Sexuality Discussion with Adolescents in Anambra State, South Eastern Nigeria (Emelumadu et al., 2014) <b>A1</b>	Nigeria	This study has objective to determine the perception of time and practice of sexuality discussions between parents in South East Nigeria.	Quantitative cross-sectional, descriptive. Questionnaire Instrument. The sample is 473 parents and adolescents in the study area for minimum of 2 years.	The most common reason for low parenting involvement in sexuality discussions is due to lack of capacity and perceptions to discuss issues such as before puberty is hurts due time. Therefore, the steps must be taken to enrich the capacity of parents to engage conversation of sexuality with their children.	<b>A</b>
2	Mother-daughter communication about sexual and reproductive health issues in Singkawang, West Kalimantan, Indonesia (Nurachmah et al., 2018) <b>A2</b>	Indonesia	The objective of this study is to investigate the parents of girls and children communication patterns about sexual and reproductive health education in West Kalimantan, Indonesia.	Qualitative descriptive research. Interview Technique The sample is 15 girls out of 800 population	The discussion about sexual and reproductive issues between parents and girls in Indonesia is still low. The quality of discussion about common topics between parents and their daughters is one of the important factors related to sexual and reproductive health education.	<b>A</b>
3	Correlation between parent-adolescent communication and adolescents' premarital sex risk (Widyatuti et al., 2018) <b>A3</b>	Indonesia	The objective of this study is to find out the effect of parent-adolescent communication on sexual problems risk.	Quantitative (Cross-Sectional) Questionnaire Instrument The study population consisted of students from a high school in Jakarta. A purposive sampling technique was used, with 253 students as sample.	The communication of parent-adolescent communication and the risk of premarital sex among adolescents. The positive communication between parents and adolescents may have impacts to prevent premarital sexual behavior.	<b>A</b>
4	Attitude of Parents and Teachers towards Adolescent Reproductive and Sexual Health Education (Nair et al., 2012) <b>A4</b>	India	The research objectives is to assess parents 'and teachers' conception on Adolescent Sexual and Reproductive Health Education	Quantitative Questionnaire Instrument The study sample is 795 parents and 115 teachers from four selected schools, who gave their approval to as participants through approval sheet.	The results show though there are more than half of parents and three-four teachers felt the importance of introducing sexual and reproductive health education at school, only 1.1% of parents and 5.2% of teachers literally discussed the sexual aspects with adolescents.	<b>B</b>
5	Mothers' views about sexual health education for their adolescent daughters: a qualitative study (Shams et al., 2017) <b>A5</b>	Iran	This study has objective to explore the perspective of mothers regarding sexual health education for girls in Mahshahr, Iran.	Qualitative Research Methods Semi-structured interview, with FGD The target group of this study is girls (12-18 years), their mothers, and informants of adolescent sexual health. Focused. For each of focus group discussion, 12 mothers were invited, so 28 participants in five groups.	The results show that empowering mothers to teach sexual and reproductive health education is important, the education programs adjusted, based on mothers' opinion, it must be developed and implemented.	<b>A</b>
6	Parent-Youth Communication and Concordance Between Parents and Adolescents on Reported Engagement in Social Relationships and Sexually Intimate Behaviors in Hanoi and Khanh Hoa Province, Vietnam (Kaljee et al., 2011) <b>A6</b>	Vietnam	The objective of this study is to find out the Parent-Adolescent communication related to positive impact for youth involvement in sexual behavior.	Randomized Controlled Trial (RCT) Cohort Instruments 185 random parents-adolescent in four groups in Hanoi and Khanh Hoa	The parents in Vietnam have less communication about sex and reproductive health education. More data is needed to assess the effects of these communication patterns in youth about sexual behavior and for the development of family-centered interventions to enrich parents' knowledge and skills for positive communication.	<b>B</b>

7	The structural influence of family and parenting on young people's sexual and reproductive health in rural northern Tanzania (Wamoyi et al., 2015) <b>A7</b>	Tanzania	This study has objective to discuss the structural role of family and nurturing in the sexual and reproductive health of youth.	Qualitative Ethnographic study Participant observation (PO), in-depth interviews (IDIS) and group discussions (GDS). The study needs eight weeks of observation to participants, 26 in-depth interviews, and 11 group discussions with youth aged 14-24 years, and 20 in-depth interviews and 6 group discussions with parents/ guardians of children.	The discussion about family and children, especially their relationship. The interventions that failed to recognize the structural influence of nurturing and family and focus only on the development of youth knowledge, attitudes and skills are tend to reduce the impact of lacking sexual and reproductive health education.	<b>A</b>
8	Parenting perspective on the psychosocial correlates of adolescent sexual and reproductive health behavior among high school adolescents in Ethiopia (Yimer & Ashebir, 2019) <b>A8</b>	Ethiopia	The objective of this study is to investigate the correlation of the risk of sexual and reproductive health education for adolescents.	Quantitative (cross-sectional) Instrument Questionnaire The population was 1721 students. The study population was senior high school in classrooms randomly selected from 9 grader and 10 grader of both schools, especially those who living with their parents. The sample 406 randomly selected 14-19 years old of high school adolescent in Legehida	In order to involve parents in preventive ways to support sexual and reproductive health education for adolescents, the role of authoritative parenting styles, and improving the quality of parent-adolescent relationship, and it is very important to strengthen beliefs of adolescent behavior and parenting knowledge about sexual and reproductive health education.	<b>A</b>

Table 2.3 Data Charting

the articles with score B are article 4 and article 6.

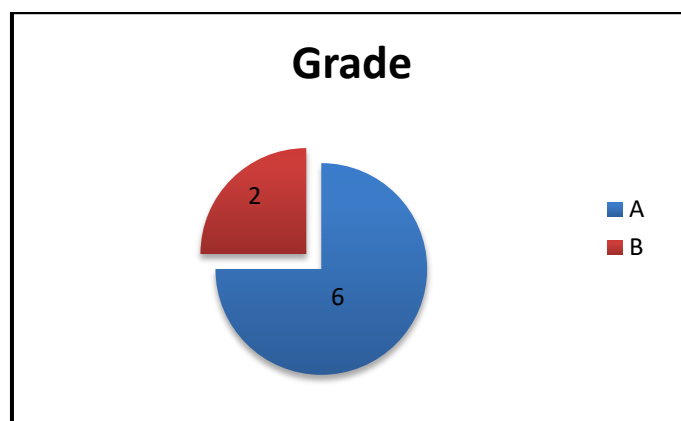


Diagram 3. Grade Characteristics

During this step, the writer classifies the findings of interesting studies reviewed in the journals based on several themes as this following:

1. Factors that influence the communication of sexual and reproductive health
2. Barriers in providing sexual education and reproductive health
3. Frequently discussed topic
4. Requirements of sexual education and reproductive health, and sources of information
5. Recommendation steps in providing sexual education and reproductive health by parents

## V. DISCUSSION

### 1. Factors Influencing Communication of Sexual and Reproductive Health

In this review there are several articles assessing factors that influence the communication of parents and children about sexual education and reproductive health. In the study of Emelumadu, the age of child influence communication between parents and children. The results show that about 75% of parents believe that discussing sexuality issues with adolescents should begin when in puberty or after puberty. Half of parents choose not to discuss it due to children are too young to know about it (48.3%) and that information can damage their minds (41.7%). There are other factors such as gender, educational status and socioeconomic factors in sexual communication between parents and children. Parents who often discuss sexual education in children is a mother who has a high social class and higher education. Researchers also explain one reason why parents are more involved in providing sexual education to girls than their boys, due to the girls experience puberty earlier than boys. Therefore, more parents discuss about sexuality with their daughters (Emelumadu et al., 2014).

In addition, the study of Nair (2012) and Yimer (2019) found that the factors that influence parenting communication related to sexuality matters are knowledge. Lack of knowledge and uncertainty about what they are going to teach to children is a reason behind parents who do not discuss about sexual and reproductive health. Not only knowledge, in Kaljee's study, the gap between the traditional generation of parents and more modern children with the internet, access to school, and many NGOs (Non-Governmental Organizations) and government programs on sexual and reproductive



health are a factor that influence communication. The parents said that it impacts to the lack communication with their sons and daughters (Kaljee et al., 2011).

The quality factor of the relationship between parent and child can impact to communication and reduce the possibility of children to commit sexual behavior. This can be assessed from many aspects such as closeness, emotional support, time spent together and communication (Yimer & Ashebir, 2019). Meanwhile, Wamoyi's study states that family structure is important in communication to children. Children who only live with single parent, both mother or father will have lack communication of sexual and reproductive health education because their parents are workaholic and rarely at home. Most parents have less time with their children, especially fathers who are rarely at home (Wamoyi et al., 2015). This is similar with other studies that states some factors influence parents and children in the communication of sexual and reproductive health, such as age, gender, education, socioeconomic, generation and relationships and family structure. Mothers tend to communicate more often than fathers. Mothers also discuss sexuality with their daughters more than boys (Sneed et al., 2013). In addition, the quality of parents relationships also affects interaction and communication then impact on preventing of children sexual behavior (Widman et al., 2016). In a study of Hutchinson, although mother is the main educator in family, it was found that fathers also play important role in the sexual socialization to children. The communication between fathers and daughters is intended to prepare girls for intercourse and delay it also decline frequency of free sex (Faludi & Rada, 2019). In addition, low parental education contributes to adolescent sexual practices. Other studies have found that cultural and religious factors also have an influence on social structures and policies. In addition, obedient behavior towards family influences adolescent attitudes in life. Lack of access to information related to reproductive health has an unwanted impact on the situation (Astuti, Hirst, et al., 2020). This results in adolescents tend to be more often and earlier involved in sexual practices than adolescents who have parents with higher education (Sari & Rokhanawati, 2018).

## **2. Barriers of Providing Sexual and Reproductive Health Education**

The study of Shams (2017) in A5 shows that discussions about sexual health are considered as embarrassing issues, the mothers think it was not easy to communicate with children about this topic. Other barriers come when parents feel uncomfortable to discuss about HIV/AIDS and tend to not discuss sexuality, pregnancy and childbirth to their children (Kaljee et al., 2011). Moreover, parents and teachers have difficulty to discuss this issues with adolescents. They feel uncomfortable discussing these issues, and only 5.2% of teachers and 1.1% of parents discuss sexual issues with adolescents (Nair et al., 2012).

Norms and culture considered that it is taboo to communicate about sexual and reproductive health. The study of Nurachmah states that girls feel ashamed and perceive disrespectful when talking about sexuality that cross their culture, mother tend to avoid discuss this topic, because they feel embarrassed and cross the culture (Nurachmah et al., 2018). The high influence of culture called Heshima that children are raised by having respect to their parents so that children only follow what their parents do and feel afraid to engage in sexual and reproductive issues (Wamoyi et al., 2015).

In Shams's study, there are several barriers in sexual and reproductive health education by parents, such as lack of knowledge about sexuality issues, the temptation that make women engage sexually, and lack of communication skill to talk with girls. A mother said "My daughter once asked me about sexuality issue, but I don't know how to explain to her and talk about sexuality". Almost all of group discussion participants

agreed with that statement (Shams et al., 2017). Parents feel unable and uncomfortable to discuss sexuality and assume that adolescents do not need this information because their children do not actively engage in sexuality activities is the main reason of parents to not providing sexual and reproductive health education (Emelumadu et al., 2014). Other barrier factor of communication is lack of knowledge and unsure of the explanation to their children. More than 50% of parents are unsure whether or not the information of reproductive health should be given to adolescents (Nair et al., 2012).

This is relevant with the statement of some studies that affect the communication of parents and children about sexuality is taboo. They thought that informing children about sex and teaching them how to protect themselves from premarital sex will make them sexually active, although some parents are aware of their role in providing education, but their belief, hope and lack of knowledge make this topic is difficult to discuss (Tesso et al., 2012). Most parents are ashamed and worried that discussing about sexual and reproductive health issues would encourage their children to enjoy sex (Motsomi et al., 2016). This is related to other research that majority of parents have good communication with children, but they do not discuss sexual problems with their children. Older people and tend to have low knowledge about sexual and reproductive health (Astuti, Kurniawati, et al., 2020). Somers and Gleason in previous studies have stated that the parents who are not able to discuss sexuality and the assumption of this issue does not matter to their children due to they are not sexually active is one of causes in the failure of parents to provide information about sexuality (Somers & Gleason, 2001).

### **3. Frequently Discussed Topics Between Parents and Children**

The Emelumadu study explained that frequent discussion between parents and children is HIV/AIDS, Pregnancy and Sexually Transmitted Infection (STI). Many parents worry about the consequences of premarital sex rather than explaining preventive ways. Parents tend to spread fear and state that it is taboo in culture aspect to talk about premarital sex to their children. They expect that this way can prevent their children from premarital sexual behavior (Emelumadu et al., 2014). Youth said that things often discussed with mothers compared to fathers, such as body changes during puberty. They believe that mother have better knowledge about this topic due to their similar experiences (Nurachmah et al., 2018).

This is related to other research that explain topics that frequently discussed between parents and children are HIV/AIDS, Pregnancy, Sexually Transmitted Infection (STI), Contraception. Body changes and puberty explain sexual abstinence in terms of norms and culture. Topics that they talked more with their mothers include teenage pregnancy, menstruation, HIV/AIDS and Sexually Transmitted Infection (STI). Mothers often talk about HIV/AIDS, Sexually Transmitted Infection (STI) and adolescent pregnancy. Meanwhile, fathers more often discuss topics of adolescent pregnancy, HIV/AIDS, Sexually Transmitted Infection (STI) and contraception (Atienzo et al., 2009).

### **4. Needs Regarding SRH and Information Sources**

The one who play important role in teaching education of sexual and reproductive health to children is parents. Teachers and counselors at school are also considered to have an important role in sexual and reproductive health education. Parents believe that sexual and reproductive health education are important and it is the responsibility of parents, teachers and counselors (Nair et al., 2012). Girls prefer their mothers to be a source of information about this topic (Nurachmah et al., 2018).

Other study explained that the involvement of parents in teaching reproductive health can prevent sexual behavior in adolescents (Wight & Fullerton, 2013). Parents are the main source in providing sexual and reproductive health education to children. Parents play important role to communicate this topic to their children. The reproductive health education must be teach continuously (Motsomi et al., 2016). Therefore, improving and optimizing sexual health in children is priority for families, teachers, health services, community, country and worldwide (Pop & Rusu, 2019).

## **5. Recommendations for Providing Sexual Education and Reproductive Health by Parents**

The findings of Widyatuti study (2018) stated that good communication between parents and adolescents is to prevent premarital sexual behavior. In addition, other study said that some participants in the study explained the empowerment to improve parents' knowledge so that they know about issues related to sexual and reproductive health is needed. Moreover, some respondents also agreed on the importance of training mothers to communicate well with their children. Two out of all respondents agreed that training for fathers is needed (Shams et al., 2017).

Similar with some other studies that state parents must be involved in any program of sexual and reproductive health education for their children. This is necessary to help parents in discussing SRH to kids in the future. Either the mother or the father should increase their comfortability when solving sexual problems with their kids to identify the effective communication inhibition to obtain the communication skill in giving the education (Faludi & Rada, 2019). There is a need for cooperation from various parties to remind the importance of reproductive and sexual health education. Sexual and reproductive health education is not only provided in schools, parents at home also have a role in their children's education. Education that is given at home can be done with good communication and an open mind to children and parents (Cahyaningtyas et al., 2020).

## **VI. CONCLUSION**

Parents are the main source in providing sexual and reproductive health education to children. However, there are still many factors and obstacles in communication between parents and children. The topic of sexual and reproductive health that parents discuss to their children is only broad, parents emphasize their child's fear of the dangers of premarital sex. Parents who are considered to often discuss sexual education in children, namely a mother. Children believe that mothers know more about this topic and are more comfortable discussing it with their mothers. In addition, girls receive more sexual and reproductive health education than boys.

## VII. REFERENCES

- Achmad, A. N. A., Sulfasyah, & Nawir, M. (2017). Peran Orang Tua Terhadap Pengetahuan Seks Pada Anak Usia Dini. *Equilibrium: Jurnal Pendidikan*, 4(2), 223–232. <https://doi.org/10.26618/equilibrium.v4i2.504>
- Aprilia, A. (2015). Mother's Behavior in Providing Early Age Sex Education in Pre-School Children (Exploratory Descriptive Study in TK IT Bina Insani Kota Semarang). *Jurnal Kesehatan Masyarakat (e-Journal)*, 3(1), 619–628.
- Arksey, H., & O'Malley, L. (2005). Scoping studies: Towards a methodological framework. *International Journal of Social Research Methodology: Theory and Practice*, 8(1), 19–32. <https://doi.org/10.1080/1364557032000119616>
- Astuti, A. W., Hirst, J., & Bharj, K. K. (2020). Indonesian adolescents' experiences during pregnancy and early parenthood: a qualitative study. *Journal of Psychosomatic Obstetrics and Gynecology*, 41(4), 317–326. <https://doi.org/10.1080/0167482X.2019.1693538>
- Astuti, A. W., Kurniawati, H. F., & Fitriani, H. (2020). Knowledge about Sexual and Reproductive Health (SRH), Practice of Premarital Sexual Relationship and Pregnancy among Indonesian Adolescents : A Qualitative Exploratory Study. *International Journal of Advanced Science and Technology*, 29(7), 191–204.
- Atienzo, E. E., Walker, D. M., Campero, L., Lamadrid-Figueroa, H., & Gutierrez, J. P. (2009). Parent-adolescent communication about sex in Morelos, Mexico: Does it impact sexual behaviour? *European Journal of Contraception and Reproductive Health Care*, 14(2), 111–119. <https://doi.org/10.1080/13625180802691848>
- Cahyaningtyas, D. K., Astuti, A. W., & Hani, U. (2020). Parents involvement and barriers of programme interventions to reduce adolescent pregnancy. *Journal of Health Technology Assessment in Midwifery*, 3(2), 73–86. <https://doi.org/10.31101/jhtam.1312>
- Emelumadu, O. F., Ezeama, N. N., Ifeadike, C. O., Ubajaka, C. F., Adogu, P. O. U., Umeh, U., Nwamoh, U. N., Ukegbu, A. U., & Onyeonoro, U. U. (2014). Parents' perceptions of timing of initiation of sexuality discussion with adolescents in anambra state, south eastern nigeria. *Journal of Pediatric and Adolescent Gynecology*, 27(5), 294–300. <https://doi.org/10.1016/j.jpag.2013.12.008>
- Faludi, C., & Rada, C. (2019). Gender differences in sexual and reproductive health education in the family: a mixed methods study on Romanian young people. *BMC Public Health*, 19(1), 1103. <https://doi.org/10.1186/s12889-019-7321-0>
- Kaljee, L. M., Green, M., Lerdboon, P., Riel, R., Pham, V., Tho, L. H., Ha, N. T., Minh, T. T., Li, X., Chen, X., & Stanton, B. (2011). Parent-youth communication and concordance between parents and adolescents on reported engagement in social relationships and sexually intimate behaviors in Hanoi and Khanh Hoa Province, Vietnam. *Journal of Adolescent Health*, 48(3), 268–274. <https://doi.org/10.1016/j.jadohealth.2010.06.021>
- Motsomi, K., Makanjee, C., Basera, T., & Nyasulu, P. (2016). Factors affecting effective communication about sexual and reproductive health issues between parents and adolescents in zandspruit informal settlement, Johannesburg, South Africa. *Pan African*

- Nair, M. K. C., Leena, M. L., Paul, M. K., Vijayan Pillai, H., Babu, G., Russell, P. S., & Thankachi, Y. (2012). Attitude of parents and teachers towards adolescent reproductive and sexual health education. *Indian Journal of Pediatrics*, 79(SUPPL. 1), 60–63. <https://doi.org/10.1007/s12098-011-0436-7>
- Nurachmah, E., Afyanti, Y., Yona, S., Ismail, R., Padang, J. T., Suardana, I. K., Dewit, Y. I., & Kusuma Dharma, K. (2018). Mother-daughter communication about sexual and reproductive health issues in Singkawang, West Kalimantan, Indonesia. *Enfermeria Clinica*, 28, 172–175. [https://doi.org/10.1016/S1130-8621\(18\)30061-5](https://doi.org/10.1016/S1130-8621(18)30061-5)
- Opara, P. I., Eke, G. K., & Akani, N. A. (2010). Mothers perception of sexuality education for children. *Nigerian Journal of Medicine: Journal of the National Association of Resident Doctors of Nigeria*, 19(2), 168–172. <https://doi.org/10.4314/njm.v19i2.56513>
- Peters, J. P. M., Hooft, L., Grolman, W., & Stegeman, I. (2015). Reporting quality of systematic reviews and meta-analyses of otorhinolaryngologic articles based on the PRISMA statement. *PLoS ONE*, 10(8), 1–11. <https://doi.org/10.1371/journal.pone.0136540>
- Pop, M., & Rusu, A. (2019). Couple Relationship and Parent-Child Relationship Quality: Factors Relevant to Parent-Child Communication on Sexuality in Romania. *Journal of Clinical Medicine*, 8(3), 386. <https://doi.org/10.3390/jcm8030386>
- Ratnasari, R. F., & M.Alias. (2016). Pentingnya Pendidikan Seks Untuk Anak Usia Dini. *Jurnal' Tarbawi Khatulistiwa'*, 2(2).
- Safita, R. (2013). The role of parents in providing sexual education to children. *Edu-Bio*, 4(2), 32–40. <https://doi.org/10.1017/CBO9781107415324.004>
- Sari, D. E., & Rokhanawati, D. (2018). The correlation between age of first dating and sexual behavior of adolescents and young adults in indonesia. *Journal of Health Technology Assessment in Midwifery*, 1(1), 23–28. <https://doi.org/10.31101/jhtam.441>
- Shams, M., Parhizkar, S., Mousavizadeh, A., & Majdpour, M. (2017). Mothers' views about sexual health education for their adolescent daughters: A qualitative study. *Reproductive Health*, 14(1), 1–6. <https://doi.org/10.1186/s12978-017-0291-8>
- Sneed, C. D., Somoza, C. G., Jones, T., & Alfaro, S. (2013). Topics discussed with mothers and fathers for parent-child sex communication among African-American adolescents. *Sex Education*, 13(4), 450–458. <https://doi.org/10.1080/14681811.2012.757548>
- Somers, C. L., & Gleason, J. H. (2001). DOES SOURCE OF SEX EDUCATION PREDICT ADOLESCENTS' SEXUAL KNOWLEDGE, ATTITUDES, AND BEHAVIORS? *Education*, 121(4), 674–681. <https://doi.org/10.1111/j.1442-2018.2010.00556.x>
- Tesso, D. W., Fantahun, M. A., & Enquesslassie, F. (2012). Parent-young people communication about sexual and reproductive health in E/Wollega zone, West Ethiopia: Implications for interventions. *Reproductive Health*, 9(1), 1–13. <https://doi.org/10.1186/1742-4755-9-13>

- Tricco, A. C., Lillie, E., Zarin, W., O'Brien, K., Colquhoun, H., Kastner, M., Levac, D., Ng, C., Sharpe, J. P., Wilson, K., Kenny, M., Warren, R., Wilson, C., Stelfox, H. T., & Straus, S. E. (2016). A scoping review on the conduct and reporting of scoping reviews. *BMC Medical Research Methodology*, *16*(1), 1–10. <https://doi.org/10.1186/s12874-016-0116-4>
- Wamoyi, J., Wight, D., & Remes, P. (2015). The structural influence of family and parenting on young people's sexual and reproductive health in rural northern Tanzania. *Culture, Health and Sexuality*, *17*(6), 718–732. <https://doi.org/10.1080/13691058.2014.992044>
- Widman, L., Choukas-Bradley, S., Noar, S. M., Nesi, J., & Garrett, K. (2016). Parent-Adolescent Sexual Communication and Adolescent Safer Sex Behavior: A Meta-Analysis. *JAMA Pediatrics*, *170*(1), 52–61. <https://doi.org/10.1001/jamapediatrics.2015.2731>
- Widyatuti, Hafilah Shabrina, C., & Yuni Nursasi, A. (2018). Correlation between parent-adolescent communication and adolescents' premarital sex risk. *Enfermeria Clinica*, *28*, 51–54. [https://doi.org/10.1016/S1130-8621\(18\)30036-6](https://doi.org/10.1016/S1130-8621(18)30036-6)
- Wight, D., & Fullerton, D. (2013). A review of interventions with parents to promote the sexual health of their children. *Journal of Adolescent Health*, *52*(1), 4–27. <https://doi.org/10.1016/j.jadohealth.2012.04.014>
- Yimer, B., & Ashebir, W. (2019). Parenting perspective on the psychosocial correlates of adolescent sexual and reproductive health behavior among high school adolescents in Ethiopia. *Reproductive Health*, *16*(1), 1–9. <https://doi.org/10.1186/s12978-019-0734-5>