

## ANALISIS KEBUTUHAN LITERASI KESEHATAN REPRODUKSI MASA PUBERTAS BAGI SISWA TUNA RUNGU

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### ABSTRAK

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**Abstrak:** Pandemi COVID-19 juga memberikan peluang unik untuk membangun kembali sistem kesehatan kita yang lebih baik sehingga lebih inklusif dan responsif terhadap kebutuhan dan hak asasi orang yang mengalami disabilitas dalam segala keanekaragamannya. Penelitian ini menggunakan pendekatan kualitatif menggunakan rancangan fenomenologi. Pada penelitian ini menggunakan kuesioner analisis kebutuhan literasi kesehatan reproduksi masa pubertas bagi siswa tunarungu dan pengumpulan data dilakukan dengan wawancara mendalam. Sumber pendidikan kesehatan mengenai kesehatan reproduksi pada masa pubertas siswa tunarungu berasal dari guru sekolah, teman sebaya dan mencari informasi di internet. Kendala sering terjadi dalam proses pengajaran ini dikarenakan masyarakat yang masih memandang tabu dan malu jika harus berbincang ke ranah sensitif seperti seks, namun bukan itu masalahnya anak pada umumnya saja akan butuh waktu lama untuk diajarkan materi tentang kesehatan reproduksi apalagi anak berkebutuhan khusus yang harus menggunakan cara khusus pula. Inovasi dalam pelayanan kesehatan juga perlu dilakukan untuk memberikan layanan digital yang lebih baik kepada masyarakat termasuk siswa tunarungu.

**Abstract:** The COVID-19 pandemic also provides a unique opportunity to rebuild our better health system to be more inclusive and responsive to the needs and human rights of people with disabilities in all their diversity. This study uses a qualitative approach using a phenomenological design. This study uses a questionnaire to analyze the need for reproductive health literacy during puberty for deaf students, and in-depth interviews collect data. Sources of health education regarding reproductive health during puberty for deaf students came from school teachers, peers, and looking for information on the internet. Obstacles often occur in the teaching process because people still view it as taboo and ashamed to talk about sensitive areas such as sex, but that is not the problem. Children, in general, will take a long time to be taught material about reproductive health, especially children with special needs who have to use this method. Special too. Innovation in health services also needs to be done to provide better digital services to the community, including deaf students.

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### A. BACKGROUND

The Covid-19 pandemic has accelerated the adoption of technology in society. Innovation in health services also needs to be done to provide better digital services to the community, including deaf students. Therefore, health workers in this era are required to be able to innovate in health

promotion, one of which is digital health promotion, to overcome these challenges.

The COVID-19 pandemic also provides a unique opportunity to rebuild our better health system to be more inclusive and responsive to the needs and human rights of people with disabilities in all their diversity. Children with special needs require special

education services of their abilities or potential. Innovation in health services also needs to be done to provide better digital services to the community, including deaf students.[1–3]

Information circulated freely cannot be justified in the health sector and becomes a hoax that misleads the public. Therefore, health workers in this era are required to be able to innovate in health promotion, one of which is digital health promotion, to overcome these challenges. Digital health promotion is an opportunity to improve public health literacy, considering that most Indonesians use smartphones, can access the internet, and have social media.

Reproductive health education for deaf adolescents in Indonesia still rarely gets government attention. This problem can be seen from the lack of literature to comprehensively discuss reproductive health problems for deaf adolescents, even though information on reproductive health is necessary because deaf adolescents also have the same development and sexual drive as adolescents. normal in general.[4–6]

This research is part of research on developing reproductive health education literacy media for deaf students in Jambi Province.

## B. METODE PENELITIAN

This research is explanatory, using a qualitative and phenomenological design approach. The study was carried out at SLB Prof. Dr. Sri Soedewi Masjchun Sofwan, SH Jambi. While the participants were 20 deaf students of SMPLB and SMALB and six parents of deaf students, the sample selection used the purposive sampling

technique. This study uses a questionnaire to analyze the needs of reproductive health literacy needs during puberty for deaf students as a research instrument, and in-depth interviews carry out data collection. The results obtained were analyzed using a content analysis method.

## C. RESULTS AND DISCUSSION

### 1. Access to Reproductive Health Information during puberty

Student interviews were carried out in stages and accompanied by teachers who taught deaf students. The results were obtained with the description:

**TABLE 1**

Frequency Distribution of Access to Reproductive Health Promotion for Deaf Students Reproductive Health (n=20)

No	Statement	f	%
1.	Experience of getting Reproductive Health Promotion/education at puberty by Health Workers		
	Ever	0	0
	Never	20	100
2.	The experience of being asked/discussed changes in puberty by parents		
	Ever	2	10
	Never	18	90
3.	The experience of being asked/discussed changes in puberty by the teacher		
	Ever	17	85
	Never	3	15
4.	The experience of being asked/discussed changes in puberty by friends		



Ever	20	10
Never	0	0
5. Experience Finding out reproductive health information via the internet/social media		
Ever	20	10
Never	0	0

"... I have received counseling about dental health once, but it has been a long time..." (an. RY, 15 years old)

"... I have received counseling about toothbrushes, I have never had about reproduction, I got information about reproduction from searching on my cellphone or the internet, as well as discussions with friends..." (AR, 17 years old)

Sources of health education regarding reproductive health during puberty experienced by deaf students come from school teachers, peers, and looking for information on the internet.

Adolescents need to receive education about reproductive health starting when they need to know and protect their reproductive organs. How convey information about sexual changes during puberty must be done extra carefully and patiently. Use simple, straightforward, and easy-to-understand language. Adolescents in any condition have the right to live, grow, develop, and participate by their dignity and worth. If this process is carried out without guidance, adolescents will have difficulty adapting to their environment. Many parents are reluctant to tell their child about puberty, which results in the child looking for information about puberty on their own through the internet and other media, which can have bad results.[4,5,7]

Participants stated that they had received health promotions from health workers regarding dental health before the COVID-19 pandemic.

All participants expressed hope that they would be able to access health promotions from health workers more often with more diverse topics. Students with hearing impairments also said they were very curious about taking care of their health. Participants expressed their confusion when they entered puberty because there was no information about what changes they would experience at puberty.

Health promotion activities by health workers for deaf students experience obstacles, namely the lack of ability of health workers to communicate with deaf students. However, multimedia development can now overcome the difficulty of communicating with deaf students. Multimedia will minimize the shortcomings of the deaf.

Health workers can also maximize health promotion activities through social media that maximizes interesting writing and images. Research has proven that social media technology can facilitate more social interaction between deaf students and their social environment, thus assisting social and educational integration. It is suggested that social media be adopted in online



and mixed learning contexts. Adoption of Social media can go beyond classroom studies. Deaf and deaf students can use social media to help them access academic and social interactions to reduce feelings of isolation.[8]

Few studies have looked at disability in rural areas, but some have explicitly focused on disability and healthcare access. More remarkable quantitative research contributions to assessing and improving access to health care for persons with disabilities need to be prioritized. People with disabilities have significantly lower well-being scores, and limited access to health services, employment, rehabilitation, education, government social welfare, and disaster management are higher than non-disabled persons. Disability and negative family attitudes are identified as barriers for people with disabilities. People with disabilities participate in work, community meetings, religious events, and social events.[8]

"...I was never told that I would menstruate when I was older. When I first started bleeding after taking a shower, I was confused and scared, and then I was told to wear sanitary napkins. I was taught how to use it, but I was not invited to discuss other matters (an.FM, 18 years old)...."

Most of the students who were the resource persons stated that they had never been invited to discuss what changes would occur when they entered puberty. The female resource persons stated that they were only

taught to use sanitary napkins and how to bathe after menstruation, especially those who were Muslim. Male resource persons who are Muslim are only taught how to "Full ablution" without ever being invited to discuss what they experience and feel in the changes of puberty.

How convey information about sexual changes during puberty must be done extra carefully and patiently. Use simple, straightforward, and easy-to-understand language. Adolescents in any condition have the right to live, grow, develop and participate pretty following their dignity and worth. If this process is carried out without guidance, adolescents will have difficulty adapting to their environment. Many parents are reluctant to tell their child about puberty, which results in the child looking for puberty information on their own through the internet and other media, which can have bad results.

Reproductive health material is taught earlier through the family, which is the primary role in educational orientation. Obstacles often occur in the teaching process because people still view it as taboo and deemed inappropriate to talk about sensitive areas such as sex. Many assume that children will understand who he is, what to do if this happens, and what it is called, but that is not the problem for children. It will take a long time to be taught about reproductive health, especially for children with special needs who use unique methods. The delay in reproductive health knowledge will impact several aspects later,

especially since many people take advantage of this to commit indecent behavior.[3,5,8]

## 2. Literacy Needs for Reproductive Health Education in Puberty for Deaf Students

**TABEL 2**

Analysis of Literacy Needs for Reproductive Health Education in Puberty for Deaf Students  
(students n=20, Parents n=6)

No	Pernyataan	Siswa		Orang tua	
		f	%	f	%
1.	Reproductive Health Information Needs Puberty Need	20	100	6	100
	No need	0	0	0	0
2.	Reproductive Health Education Topics (you can choose more than one option)				
	Reproductive Organs Introduction	15	75	6	100
	Changes in Puberty	20	100	6	100
	How to care for reproductive organs	20	100	6	100
Target Media promotion					
	Only Students	3	15	0	0
	Only Parent/Companion	0		0	0
	For students and parents/guardians	17	85	6	100
Expected health promotion media					
	Print media	2	10	3	50
	Digital Media	0	0	0	0

Interactive 18 90 3 50  
Multimedia

All participants agreed that literacy is needed to prepare their children to face puberty.

"... I admit that I am perplexed about how to prepare our child for puberty, with the shortcomings that our child has plus the topic is a sensitive feeling to talk about..." (Parent, TY, 39 years old)

Problems Parents have difficulty preparing their children for puberty and communication difficulties and are still bound by a "taboo" culture in discussing reproductive health, not only experienced by parents with children with special needs but also experienced by parents of teenagers in general. Advances in technology, including the availability of information via the internet, have dramatically improved the quality of life of persons with disabilities in developed countries. New technologies must also be accessible to all persons with disabilities, including developing countries.

WHO recommends increasing access to information and communication related to health promotion for persons with disabilities to include the following: sign language or text to improve access to health resources and public health information; Information is presented in a simple and easy-to-understand graphic format; Large print or braille material; information provided by

radio, video, other than printed information. [8]

The results also show that participants who come from deaf students and participants who come from parents agree that they want interactive multimedia-based literacy that can be accessed anytime and anywhere.

This result is in line with the research results Kurniati et al. (2018), which stated that information on reproductive organ health of SLB B students in Bali was obtained from parents and teachers. The obstacle faced by students when receiving lessons at school is the difficulty of understanding a concept being explained, let alone using many lips. They want an explanation through video or visual media and accompanied by an interpreter. From the teacher's side, the obstacles they face are curriculum changes, time constraints, difficulty in applying the health care module, extended training, some teachers move, and the material provided is not age-appropriate. Meanwhile, they do not understand how to explain to their children from the parents' side. [9]

The literature study conducted by the research has not found any media for promoting the reproductive health of deaf adolescents issued by the Ministry of Health or government agencies. Currently, there is a need for promotional media to promote reproductive health by considering more attractive media and the existence of information technology

that will expand the scope of targets for health promotion.

#### **D. CONCLUSIONS AND SUGGESTIONS**

Sources of health education regarding reproductive health during puberty experienced by deaf students come from school teachers, peers, and looking for information on the internet. All participants agreed that literacy is needed to prepare their children to face puberty.

Innovation in health services also needs to be done to provide better digital services to the community, including deaf students.

The target of health promotion media is not only needed by deaf students but also parents and companions (families, teachers, and therapists).

Reproductive health materials during puberty are conveyed not only when students have experienced changes in puberty but are also needed as preparation for entering puberty.

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