

## Reproductive Health of Early Adolescents in the Islamic Perspective: A Qualitative Study in Indonesia

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### Abstract

**Background:** Unsafe sexual behavior among adolescents is due to lack of knowledge and understanding of adolescents on reproductive health. Islam teaches parents obliged to educate and illustrate the various matters relating to reproductive health, but parents still consider explanations about reproductive health in adolescents is a 'taboo' and embarrassing. Purpose: This study aimed to explore on adolescent reproductive health in view of the Islamic perspective. **Methods:** The qualitative study of phenomenologi. Study involving 26 partisipans consisting of parents, teachers, religious leaders, and staf of religious ministry. Participants were selected by maximum variation purposeful sampling. Analysis of data using thematic analysis. **Results:** Reproductive healthy have been described in the religion of Islam. It is not taboo to talk about reproductive health issues in Islam and it was already contained in the Al-Qur'an. The Parents feel embarrassed to explain and lack of understanding of reproductive health, and thought it best described by teachers in schools. **Conclusions:** Islam teaches that parents are obliged to provide an understanding early on reproductive health openly with regard to manners and how to deliver. This study recommended reproductive health education model program approach to religion, especially Islam.

**Key words:** reproductive health, early adolescents, Islamic perspective, Indonesia.

### 1. Background

Residents in Pontianak city have the characteristics as a heterogeneous society, both indigenous and migrants, such as Malay, Dayak, Thiongha, Javanese, Bugis, Madurese and other tribes, with 65% of the population Islam (Beureu of statistic centre Pontianak, 2014), and the total population of teenagers in has a sizeable proportions of 169 969 inhabitants teenagers, or approximately 29,51% of the total population of Pontianak. Result of the preliminary survey in one the Public Junior High School (SMP) in East District of Pontianak in 2010, showed that the students of class IX with the number of students 60 persons found that 30% of them already have boyfriends, then, 60% of them had been kissing. The survey results also showed that most of them did not know correctly about the reproductive health such as the introduction of the sexual organs, hygiene during menstruation, signs of puberty and reproductive organ diseases.

Another survey in 2013 in the seventh grade students in two religious based junior high school in the District of Pontianak City, found that 30 students (40.5%) have experienced puberty and 44 students have not reached puberty (59.5%). A total seven of students (23%) who have reached puberty may explain signs of puberty properly. A study conducted by the Institute of Demography showed that 84% of adolescents have menarche experience at age 12-15 years (Badan Pusat Statistik and Macro International, 2007).

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Adolescents need serious attention, because adolescents are at risk of reproductive health problems, such as premarital sexual behavior, drug abuse and HIV/AIDS (Hindin, et al., 2013). 4% of adolescents aged 13-14 years were reported to have had sexual intercourse and the percentage is relative increasing in line with their age (UNICEF, 2012).

Sexuality which is involved the interaction of various aspects such as biological, psychological, social, economic, cultural and religious should receive attention (O'Rourke, 2008). There are various consequences of unsafe sexual behaviors, such as teenage pregnancy, abortion and infectious diseases including sexually transmitted HIV infection (UNFPA, 2012).

Teens must have sufficient understanding of puberty; sufficient knowledge about puberty will make teenagers more readily in facing puberty (Pinyerd, Zipf, 2005). Some behaviors that occur in adolescents associated with unsafe sex is a part of the lack of knowledge had by adolescents (Tripp, Viner, 2005). Surveys showed that providing information about reproductive health can properly prevent teenage pregnancy and sexually transmitted diseases (UNFPA, 2012; Dailard, 2001). The provision of information correctly must be done by parents from the beginning to provide insight on teenagers. Effects are proven to be more powerful when the targets of the program are younger adolescents and more effective if they are not yet actively sexual as target (Aaro, et al., 2005; Nuranty, 2006). There is a significant correlation between parental communication with the knowledge and attitudes of adolescents to reproductive health.

The provision of reproductive health information to adolescents is a very important policy and has become a much-party agreement (Nuranty, 2006; BKKBN, LD-FEUI, Bank Dunia, 2004). Religious leaders believe that reproductive health is an important component of a healthy lifestyle and contributes to reproductive health in general accordance with the norms and principles of Islam and importantly to include the culture of values and religious thereby to form the adolescents *akhlak* (Mairiga, et al., 2007; Nurohmah, 2013). In addition to teachers, parents play an important role in providing information on reproductive health, in Islam it is an obligation that must be done by parents. Some parents still assume that it is taboo, while adolescents are in need of reproductive health information properly.

Islam regards reproductive health is not a taboo to be talked about, even parents should explain to their children about matters relating to reproductive health which has been arranged in religion, although the majority of parents feel embarrassed to explain. Parents hope very much that his son who was educated in the school will have a silence in this aspect of faith. But, good communication between parents and teachers is essential to equip adolescents so that they are ready to face adolescence. The slow pace of information or the low of knowledge about adolescent reproductive health will affect the behaviors of adolescents (Mosavi, et al., 2014).

Reproductive health knowledge and attitude towards reproductive health are closely related to religious values, cultural norms and the social problems (Wong, 2012). Teens need to be equipped with a strong religious understanding so that they have a strong faith and can filter out the bad influences in her life. Islam does not regard reproductive health problems as something pornography, but we should still consider *adab* or norm when conveying information and in accordance with the age of the child. Parents feel confident in conveying such information, although several studies explain that the duty of parents is to educate children and provide understanding and strengthening of religion in the family. Family endurance and religious practices in reproductive health aspects is essential to equip the child. Parents still consider that explanation of reproductive health is something that pornography. Therefore, it is necessary to conduct studies about how Islam regards reproductive health problems. Policy makers need to plan and provide services consistently by considering and emphasizing the cultural values such as taboos issue and religion (Mosavi, et al., 2014).

## 2. Purpose

This study aimed to explore on adolescent reproductive health in view of the Islamic perspective.

## 3. Methods

A phenomenology qualitative research approach was used to explore the views or opinions of adolescent reproductive health from Islamic perspective.

### 3.1 Participants

Participants in this study were selected by considering the maximum variation sampling, aimed to obtain maximum variation and observe the participants of specific groups such as teachers, parents, religious leaders and staf of religious ministri. Research subjects or participants in this research were 26 participants, 10 participants were parents, teachers were 13 participants, two participants were religious leaders, and one participant from the Ministry of Religion of Pontianak City. Participants came from six districts in Pontianak City

### 3.2 Characteristic of partisipants

Some of participants from parents have 3 children whether or not have experienced *akhil baliq*. Participants have a heterogeneous cultural background, such as Malays, Javanese, Maduraese and Batak. Teacher participants teach science, religion (*fiqih*), counseling teachers with different gender, their education level are undergraduate degree and master who had been worked for 5-18 years. Religious leader participants chosen by considering the variations in gender, education, age, occupation, and cultural backgrounds. Other participants were from staf of the ministry of religious of Pontianak City.

### 3.3 Research instrument

Researchers used two types of instruments; they are instruments for data collection in the focus group discussions and in-depth interviews. FGD instruments are used to dig up information on parents and teachers while the instrument of in-depth is religious leaders and stakeholders. The questions explored how to look at reproductive health in Islam persfektive. To guarantee the data reliability, the instruments was tried out and there was some changes in the sentence and the choice of words which were more precise and easily understood by participants. Researchers were involved directly in the process continuously to ensure that the data collection works like it should be. All the discussions and interviews was recorded on a tape recorder and made transcripts of the discussion and interview and notes about important events that occurred during the process of data collection.

### 3.4 Data ccollection

Qualitative data collection was done to explore the various aspects related to views on reproductive health in Islamic perspective. Qualitative studies will describe the natural complexity of a phenomenon including personality, dissent, opinion picture, a growing issue (Schumacher and Milan, 2001; Hancock, 1998). Data collection techniques in this study is Focus Group Discussion (FGD) and in-depth interview. FGD data collection is done participants that is group of parent (10 participants), and a group of teachers (13 participants). In-depth interview on 2 religious figures, and from staf of the ministry of religious of Pontianak City.

Data collection is done at a time and place that had been agreed. Location of data collection, especially in the group of FGD is a location that can be reached by participants that are not too far from their home. For the depth interview, researcher approached the participants in the agreed place. Duration of data collection is about 60-90 minutes. During data collection, the researchers used Indonesian and Malay Pontianak, so that the messages can be delivered and received well by the participants. It was needed to build a trusting relationship so that the communication during data collection process can be run smoothly. The trusting relationships conducted between researchers and participants assist in data collection and also need to convince and make them more confident in expressing his opinion. Data validation is done by triangulation, member checking and auditing and analyzed using thematic analysis.

### 3.5 Data analysis

The analysis in this study is thematic analysis that aims to see (a way of seeing), to give meaning to material that might seem meaningless, and analyze information. Stages in the thematic analysis are: researcher making transcripts to capture the essence of which appear in the form of facts and themes, reading the transcript again and again and do the member checking to validate the data and get an idea about the theme created, the next is coding. In the process always record the analysis/views about new ideas that arise and information obtained.

### 3.6 Ethical considerations

The research started after obtaining ethics committee approval of the faculty of medicine Universitas Gadjah Mada, and researchers also have been approved to conduct research by national unity and political entity of West Kalimantan province.

## 4. Result

### 4.1 Reproductive health already in Islamic

Sexuality and reproductive health was one of the most fundamental aspects of life was considered to be a sensitive issue for discussion because of cultural sensitivities. Reproductive health in the context of the study of Islam was seen as a healthy, clean, and kosher. It also related to the understanding of physical readiness, mental and religious related to the overall reproductive organs and their functions. Mental health was concerned with understanding the limits of lawful and unlawful before marriage and after marriage. Physically was the readiness to keep their reproductive organs. This is confirmed by the participants, such as the following statement:

*"... In the Islamic perspective, it is not only about healthy in term of hygiene, but also in the context of a healthy, clean and lawful, physical and mentality readiness and also about their religion understanding. Then, its relation to mental is that they must have an understanding about some limitations that they are not allowed to do before and after marriage". (In-depth interview, Mi, 45 years)*

Another opinion was also said by religious figures related to reproductive health. Health issues in religious point of view was important and not a taboo issue, as a matter of law. Reproductive health was a matter of Islamic law must be explained by parents and teachers. How Islam face reproductive problems such as menstruation, menstrual hygiene. Islam regulated the obligation of parents to explain the worship *thaharah* and taking *janabah* bath which is the basic problem, as quoted from one of the informants below.

*"... But actually, this is not a taboo issue. This is a law issue that must be explained to children in a good way ... menstruation as the example ... this is indeed regulated in Islam, because it is a matter of 'thaharah', the liability issues such as ghusl ... How the recommended actions (sunnah) must be taught by parents or teachers at school ". (In-depth interview, Ah 45 years)*

While religious teachers argued that reproductive health is related to the theme of menstruation and its cycle, vaginal discharge, sexual intercourse for those who are lawful, and related jurisprudence is worship *thaharah* or purification (of unclean and *hadast*). As described by one informant as follows:

*"... So the matter of fiqh is thaharah, it is about purification, purification of the 'najist' and 'hadast',... The causes of heavy 'hadast' are a wet dream, of menstruation, sexual intercourse, after that we have to take holy bath, how to perform the right ablution...then the major ablution, and what the prayer of it is". (FGD, Af 44 years)*

Islam has taught clearly how a human obligation to maintain reproductive health. It need to provide education and guidance on reproductive health and protect the reproductive health in accordance with the Islamic law. Responsibility as religious people in the association of the opposite sex and keep their reproductive organs are the commands of Allah SWT, such as the informant's narrative below:

*"...For me, reproduction issue had been explained in Al-Quran, keeping the genital organs is the God's command, so that it is a command". (FGD, Ay 38 years)*

Reproductive health in Islamic studies can be applied in general to all the good teachings related to reproductive health. There is no religion that teaches about *hadast* and about circumcision except Islam. The program is to educate and guide the teens. It can teach the children about things that must be done in a religious perspective. It is as quoted from the statement of the parent as follows:

*"...It is an emphasizing, that those issues are about Islamic perspective. It explained that there is no others religion but Islam that taught about purification. There is no other religion taught about ablution, and other 'thaharah'. (FGD, Ay 38 years)*

Reproductive health in Islamic studies and state law can also be related to problems of social relationships between opposite sex, such as teenage promiscuity that leads to adultery, and sexually transmitted diseases.

*"... In my opinion, reproductive health is about the way of making friendship, vital organs, ... I related it to the postulates of the Al-Qur'an or the 'hadist' which prohibits any acts that lead to adultery". (FGD, Do 31 years)*

Reproductive health education should be provided by the parents at home from the very beginning and did not wait for the child to grow up or to wait until the child is married. Provision of communication, information and education about reproductive health and strengthening the resilience of the early teenage self about religious education was also very important to fortify the adolescent reproductive health issues to be faced. Reproductive health associated with menstruation, menstrual cycle, sexual intercourse on a married couple, the problem of whiteness and looked at the reproductive health with regard to worship *thaharah*.

#### **4.2 Causes of reproductive health problems in adolescents**

The occurrence of loss control and delays in the provision of understanding on the potential for the occurrence of adolescent sex behavior that will result in unsafe abortion. Attention and guidance of parents (father/mother) and communication was crucial in the formation of the family, education should be done at school and at home. Parents' monitoring and assisting to their children in the information searching process were necessary. Busyness and lack of parental attention can negatively affect children in reproductive health issues, such as the informant the following expression:

*"... It is included as loss control; they should be given an understanding at the very beginning". (In-depth interview, Mi 45 years)*

Many factors influence adolescents risk behaviors, they are exogenous factors, such as peers risk behaviors, the lack of parental supervision, and permissive behavior patterns of parents. In addition, factors such as hormonal effects endogens, biological development which is not synchronous, psychological and social also can contribute to sexual behavior in adolescents. Teens difficult to control himself to satisfy the urge in him thus, triggering a sense of curiosity and want to try. Self-control in adolescents, educational optimization in the family, and parenting in the family including the strengthening of the foundations of religion, the role of parents in providing examples of good behavior. Children's education is a protective factor that is suspected to minimize sexual behavior in adolescents, as quoted from the informant the following statement:

*"... Instead of internal factors, every teenagers have sexual desire and it cannot be deny because it is their time to experience it. But this internal factor can be minimalized in order to prevent the negative acts if the is an explanation. The external factors, their friendship, and their circumstances also can minimalized negative acts... It should be opened but educated." (In-depth interview, Mi 45 years)*

*"... It is not only about education in family stage, but also the religious support in family stage". (FGD, Um 30 years)*

External factors such as social environment, life style adolescents, multimedia exposure, and peers also affect the behavior of adolescents. Media or internet sites that can be accessed easily. The media has both positive and negative impacts on adolescent's knowledge, beliefs, and attitudes on reproductive health. Enforcement of the rules agreed upon at home, closeness between parent and child is believed to prevent and protect children's negative behavior

*"... The media, environment, and their friendship have big influences. If teenagers make a friendship with the wrong persons, so they will get the wrong information. Because of that, the duty of teachers and parents is giving some advices to their children to get along with good persons, so they will get good information". (In-depth interview, Ah 45 years)*

#### **4.3 Material for Educational of Reproductive Health**

In Islamic studies the materials that need to be informed and taught to adolescents before they *akhil baliq* are a matter of worship *thaharah* or purification, faith, worship approach, the obligation *taqlif mukallaf*, premarital relationships, morals and cultures outside that do not fit with the culture of Indonesia. This statement is like the narrative of religious figures as follows:

*"... Before puberty, certainly the first thing that we planted is about faith, then we solidify their beliefs. In terms of approach to their worship, we teach their worship,... in the 'akhlaq' aspect also can be done, well, even if you have not 'baliq' yet,.. But your behaviors can be assessed by others, that why, guarded your behavior". (In-depth interview, Mi 45 years)*

"... First, Issue of 'thaharah' is important and fundamental. It is about how to clean during menstruation, premarital relationship problems, and then that would lead to reproductive health, such as courtship and others". (In-depth interview, Ah 45 tahun)

Provision of information about reproductive health should be conducted openly with regard to the good manners when present it. Some of the materials can improve the competence of teenagers such as growth and development of adolescents, changes teen's body towards a *akhil baliq*, pregnancy, menstruation and hygiene of the body during menstruation, way of mingle with the opposite sex and the impacts, and restrictions on the activities of others reproductive health prohibited by religion.

## 5. Discussion

Some Islamic countries like Egypt, religion and traditional family values are designed to protect teenagers from the negative effects of the association and the media. Some conservative views believed and limited some information about reproductive health and generally assume that teenagers do not need to know until they get married. It is rooted in traditional values and taboos talk about reproductive health (Wahba, Fahimi, 2012). Although the results of the study explained that, the early provision of reproductive health information will protect and prevent teenagers from negative behavior. Sexual behavior becomes a serious problem, especially parents do not always talk with teens about the problems in family business, purity, and guidance aspects of religion became a dominant and urgent factor (Ogunjuyigbe, Adepoju, 2014).

Teens need more information about reproductive health in accordance with their needs and problems often experienced or will be experiencing (Wahba, Fahimi, 2012). Talk about reproductive health issues that are considered taboo in society will interfere the provision of correct information to adolescents (Christie, Viner, 2005). Islam teaches knowledge about reproductive health, about *akhil baliq*, the process of pregnancy, purification, culture relate to the opposite sex, including a prohibition against promiscuity. This study confirms and explains that in Islamic perspective, the duty of parents is to guide their children in order to get the correct information and do not do forbidden actions that prohibited by religion.

The provision of correct information about reproductive health can prevent adolescent behavioral conformity, including teenage pregnancy and sexually transmitted diseases (Dailard, 2001). Materials in adolescent reproductive health can be initiated before they face *akhil baliq* (early adolescents aged 10-14 years). The provided information may be such as a sign of the coming of *akhil baliq* and changes that occur in their body, worship *thaharah* (purification) after they experienced menstruation, wet dreams, or if there is unclean or *hadast* with the correct ways. The importance of purification or conducting worship *thaharah*, to be free from *hadast*, as stated in the Al-Qur'an (Surah Al-Baqarah: 222)

إِنَّ اللَّهَ يُحِبُّ الْمُتَوَّابِينَ وَيُحِبُّ الْمُطَهِّرِينَ

*Meaning: Indeed, Allah SWT loves those who are constantly repentant and loves those who purify themselves.*

Explanation of how the process of menstruation and maintain the hygiene during menstruation period and pregnancy that can happen to a teenage girl. The process of human (pregnancy), as stated in the Al-Qur'an surah Al-Mu'minun: 12-16. Provide information about the importance of circumcision to boys for their reproductive organs cleanliness. The importance of closing the genitals of girls because beside it's the obligations as a Muslim, it can also protect girls from threatening behaviors such as sexual violence. Besides teenager should be able to keep their honors, by equipped with information manner of making an association to the opposite sex in order to avoid the adultery that can cause sexually transmitted disease (STD) and unwanted pregnancy that led to the practice of abortion and complications of other diseases. Sexual behavior before marriage or adultery is forbidden in Islam, it is described that the relationship between men and women are banned alone without mahram between them. As the ban on approaching zina let alone to do so Al-Qur'an (Surah Al-Israa': 32)

وَلَا تَقْرَبُوا الزَّوْجَ إِذْهُوَ كَانَ فَحِشَةً وَسَاءَ سَبِيلًا

*Meaning : And do not approach unlawful sexual intercourse. Indeed, it is ever an immorality and is evil as a way.*

Provision of communication, information, and education about reproductive health and strengthening the self-resilience of the early teenage about religious education is very important.

Effective communication between parents and adolescents as part of efforts to increase knowledge about reproductive health has been identified as a key strategy in promoting responsible sexual behavior (Burgess, et al., 2005). Teens must have religious values to fortify themselves in the face of life, lack of religious values that should be the control means for teenagers can lead teenage to wrong association even prohibited by religion. Islam has explained about good manners of socialization or association in the Al-Qur'an (Surah: An-Nur: 30)

قُلْ لِلْمُؤْمِنِينَ يَغُضُّوْا مِنْ أَبْصَارِهِمْ وَيَحْفَظُوْا فُرُوْجَهُمْ ذٰلِكَ اَزْكٰى لَهُمْ اِنَّ اللّٰهَ خَبِيْرٌۢ بِمَا يَصْنَعُوْنَ

*Meaning: Tell the believing men to reduce [some] of their vision and guard their private parts. That is purer for them. Indeed, Allah SWT is Acquainted with what they do.*

Predisposing factors such as exogenous factors, can influence risk behavior in adolescents, among other risky behaviors of peers, the lack of parental supervision, and permissive behavior patterns of parents (Igra, Irwin, 1995). In addition, some factors such as hormonal effects endogens, the biological development that is not synchronous, psychological, and social also can contribute to sexual behavior in adolescents. Teens difficult to control himself to satisfy the urge in him thus, triggering a sense of curiosity and want to try it. Self-control in adolescents, optimization of education in the family, and parenting in the family including the strengthening of the foundations of religion, the role of parents in providing examples of good behavior, reinforced by communication between parents and teachers in children's education are the protective factor that is suspected to minimize sexual behavior in adolescents.

Teens need to be given serious attention, adolescence as a transition period greatly increased the risk of reproductive health problems (Badan Pusat Statistik dan Macro International, 2007). It is the responsibility of the various parties, community, religious leaders, government, parents, and teachers. Religion is one of the factors that can shield adolescents from sex behavior. This opinion is contrary to the results of research conducted, which states that the religious factor of a teenager not significantly influence sexual behavior, the effect was precisely the knowledge of adolescents on reproductive health. Religious family has no effect on adolescent sexual activity. While found that there was a significant relationship between religion and reproductive health (Hartati, 2014).

In this study, researchers found that religious factor that teenager espoused must be accompanied by a deepening and obedience in running religious rules that teach kindness, not merely embrace one religion. If it goes well, religion and knowledge can fortify teens from risky behavior. The provision of information correctly and openly will increase the understanding of adolescents on reproductive health and the right religious guidance from teachers and parents can strengthen the resilience of adolescents to become one of the protective factors to prevent free sex. The study recommends conducting reproductive health education or reproductive health promotion models accompanied by approach to religion values, especially Islam. The provision of reproductive health information may be performed concurrently with the guidance of religion, involving teens, teachers, parents to be able to work synergistically so that it will obtain the optimal results.

## 6. Conclusion

Reproductive healthy have been described in the religion of Islam. The study found that It is not taboo to talk about reproductive health issues in Islam and it was already contained in the Al-Qur'an. Precisely, it is the thing that is required to be informed to the adolescent, who stepped on adolescence in good ways. The parents lack understanding of reproductive health, feel shame and taboo to describe them. The provision of reproductive health information can be performed simultaneously with the guidance of religion, involving adolescent, teachers, parents, in order to work synergistically so that it will obtain optimal results.

Religion also teaches clearly about menstruation, hygiene during menstruation, perform of circumcision on male for hygiene and health, worship *thaharah* or purification of heavy *hadast* and light *hadast*, the importance of closing the genitals and maintain the honor and prevent sexual violence, the manners of civilized interaction between men and women who are not *mahram*, forbid adultery, which can be ended by abortion or sexually transmitted diseases.

An understanding of the true reproductive health and the right resources can protect teenagers from the risks of reproductive health problems that may occur. The provision of adolescent reproductive health information will improve their knowledge of the religion that sufficient provision would protect and guarantee the rights of adolescents in order to run their reproductive functions in a healthy and responsible. This results of study recommended reproductive health education model program approach to religion, especially Islam.

The provision of reproductive health information can be performed simultaneously with the guidance of religion, involving teens, teachers, parents, in order to work synergistically so that it will obtain optimal results.

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