

Relationship between Perineal Hygiene Behavior and Reproductive Health in Adolescents Who Experience Early Marriage

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Abstract:

Adolescence or puberty is a period of change in attitudes and behavior from childhood to young adulthood. Adolescence is the most beautiful adjustment period, and almost all adults go through this period with unforgettable memories. Still, it is often accompanied by upheavals and problems, both medical and psychological problems. This study analyzes the relationship between perineal hygiene behavior and reproductive health in adolescents who experience early marriage in Tandonsentul Village, Lumbang District, Probolinggo Regency. This research is quantitative with a correlational design using a cross-sectional study approach with 30 respondents using an accidental sampling technique. Data collection included coding, editing, and tabulating, then analyzed manually and by computer with Uji Spearman Rank. Based on data that out of 30 respondents, most perineal hygiene behaviors were lacking, 18 respondents (60%) with reproductive health in adolescents who experienced early marriage well, 0 respondents (0%) had good reproductive health, 13 respondents (43.3%) and those who less than 15 respondents (50%). The result of $p\text{-value}=0.004$ ($\alpha=0.05$) shows a relationship between perineal hygiene behavior and reproductive health in adolescents who experience early marriage in Tandonsentul Village, Lumbang District, Probolinggo Regency. It is hoped that one of the efforts to increase the knowledge and behavior of adolescents regarding motivation to carry out premarital examinations correctly and adequately is to provide health education/health promotion.

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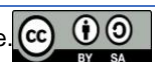
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INTRODUCTION

Adolescents are the next generation, the nation shoots and determines the future, which is the primary capital of the development of the Indonesian government. Therefore, youth groups must be addressed (Soetjningsih, 2014). Adolescence is a transitional phase from childhood to adulthood. This is identified by a change in status from high school to college. The characteristic that can be seen is that many physical and psychological changes occur. In this phase, the achievement of self-identity is prominent, and thinking is increasingly logical, abstract, and idealistic (Diana, 2018; Maharani et al., 2022). Adolescents are certainly in a vulnerable phase and contracting diseases that can affect their quality of life, resulting in increased stress (Afandi et al., 2021; Cahyani et al., 2022). Adolescence is when people can evolve their knowledge, skills, emotional management, and interaction with others. Adolescents range in age from 10 to 24 and are unmarried (Allaili et al., 2021).

Based on the Indonesian Demographic and Health Survey (IDHS, 2018), as much as 28.46% of Indonesia's population consists of teenagers, and 20% of Indonesian teenagers have had premarital sex. There are around 2.3 million abortions performed each year, and 15% of abortions are performed by adolescents aged 16-20 years. The number of cases of HIV/AIDS was 4,159 sufferers, 30% of which occurred in adolescents aged 15-20 years. Adolescents' knowledge level about adolescent reproductive health (KRR) is still low. Only 55% of adolescents know the process of pregnancy correctly, and 42% know about HIV/AIDS. 24% of youth know how to prevent transmission of HIV/AIDS, and only 27% of youth know about STDs. This incident can occur in urban and rural areas (Aliyah et al., 2019). So self-management must be prepared optimally (Kurniawan et al., 2022).

Based on a preliminary study on March 27, 2022, using the interview method of 10 teenagers who wanted to marry (premarital), it was found that of all the teenagers interviewed, they admitted to having dated, 6 out of 10 teenagers said they had been dating since they were in junior high school and none of the students understood closely related to reproductive health. Lack of understanding about reproductive health behavior in adolescents is very detrimental to adolescents and their families because, during this period, adolescents experience essential developments, namely cognitive, emotional, social, and sexual. This development starts from after 12 years to 20 years. This lack of understanding is caused by various factors, including customs, culture, religion, and a lack of experience from suitable sources. This lack of knowledge harms youth groups and their families (Soetjiningsih, 2014).

Reproductive health is defined as a set of methods, techniques, and services that support reproductive health and well-being by preventing and resolving reproductive health problems, including sexual health, life status, and individual relationships, not just consultation and care related to reproduction and diseases transmitted through intercourse sex (Agustin et al., 2020). Adolescent reproductive health education is a realistic, honest, and open discussion, not just a moral dictation. Adolescent reproductive health education aims to educate and direct good and correct sexual behavior (Rahman, 2022). Perineal hygiene factors can cause reproductive problems in young women. Perineal hygiene in adolescents is how adolescents care for and maintain the cleanliness of their reproductive organs so that their well-being can be achieved physically and psychologically. Poor hygiene factors affect the occurrence of reproductive problems such as vulva vaginitis. Most adolescents need to be made aware of the cleanliness of their reproductive organs (Linda et al., 2020). Adolescents are more susceptible to sexual and reproductive health problems like HIV/AIDS (Kurniawan et al., 2023).

Early marriage is carried out by someone who is, on average, under 19 years old and is not ready for various aspects of marriage. Early marriage often occurs in children who are going through puberty. This is because adolescents are very vulnerable to sexual behavior that they did before the wedding. This is likely to impact reproductive health for both women and men. Therefore, preparations are needed for various aspects of marriage so that efforts to minimize the adverse effects of early marriage on reproductive health can be minimized (Sekarayu & Nurwati, 2021).

One of the efforts to increase adolescent knowledge and behavior regarding motivation to carry out premarital examinations correctly and adequately is to provide health education/health promotion. Health promotion is essential because the information provided contains knowledge and messages to adolescents to avoid getting caught up in wrong associations. Lack of knowledge and attitudes can cause cases such as cervical cancer. So, this study analyzes the relationship between perineal hygiene behavior and reproductive health in adolescents who experience early marriage in Tandonsentul Village, Lumbang District, Probolinggo Regency.

METHOD

This research design is quantitative with a correlational design using a study approach cross-sectional. The subject is observed only once through measurement or observation simultaneously to see the independent and related (dependent) variables. The independent variable in this study is perineal hygiene behavior; the dependent variable is reproductive health in adolescents who experience early marriage. The population in this study is teenagers who experienced early marriage, as many as 30 people. The sampling technique used in this study namely total sampling. samples were taken are all teenagers who experienced early marriage, as many as 30 people. The primary data in this study were answers to a questionnaire about the relationship between perineal hygiene behavior and reproductive health in adolescents who experienced early marriage in Tandon Sentul Village, Probolinggo. The data collection method that the author uses is a questionnaire. The data processing technique is editing, scoring, coding, and tabulating. The data analysis technique used was univariate analysis with frequency distribution and bivariate analysis with Spearman.

RESULT

Characteristics of Respondents

Table 1. Characteristics of Respondents based on Age and Education (n=30)

Variable	Frequency	Percentage
Age		
15	10	33.3
16	6	20.0
17	6	20.0
18	5	16.7
19	3	10.0
Education		
Elementary School	9	30.0
Junior High School	18	60.0
Senior High School	3	10.0
College	0	0

Table 1 shows that the largest percentage of respondents is mostly 15 years old, namely ten respondents (33.3%). The largest percentage of respondents is mostly junior high school education, with 18 people (60%).

Characteristics of Respondents based on Perineal Hygiene Behavior, Presence of Pure K1, and Reproductive Health

Table 2. Characteristics of Respondents based on Perineal Hygiene Behavior, Presence of Pure K1, and Reproductive Health (n=30)

Variable	Frequency	Percentage
Perineal hygiene behavior		
Good	3	10.0
Enough	9	30.0
Less	18	60.0
Presence of pure K1		
Present	22	73.3
Not present	8	26.7
Reproductive health		
Good	2	6.7
Enough	13	43.3
Less	15	50.0

Table 2 shows that most of the perineal hygiene behaviors are lacking in the 18 respondents (60%). Most respondents on pure K1 present were 22 respondents (73.3%). Most of the reproductive health needs to be improved in the number of 15 respondents (50%).

Relationship between Perineal Hygiene Behavior and Reproductive Health in Adolescents Who Experience Early Marriage

Table 3. Relationship between Perineal Hygiene Behavior and Reproductive Health in Adolescents Who Experience Early Marriage (n=30)

Perineal Hygiene Behavior	Reproductive Health						Total	%	p-value
	Good		Enough		Less				
	F	%	f	%	F	%			
Good	2	6.7	1	3.3	0	0	3	10	0.004
Enough	0	0	6	20	3	10	9	30	
Less	0	0	6	20	12	40	18	60	
Total	2	6.7	13	43.3	15	50	30	100	

From Table 3, it can be seen that of the 30 respondents, most of the perineal hygiene behaviors were lacking; 18 respondents (60%) with reproductive health in adolescents who experienced early marriage, 0 respondents (0%) had adequate reproductive health, 13 respondents (43.3%) and the less number of 15 respondents (50%).

Based on the analysis results of the Spearman Rank test, it was obtained p-value=0.004 ($\alpha=0.05$), there is a relationship between perineal hygiene behavior and reproductive health in adolescents who experience early marriage in Tandonsentul Village, Lumbang District, Probolinggo Regency in 2022.

DISCUSSION

Identifying Perineal Hygiene Behavior in Adolescents Who Experience Early Marriage

Most of the perineal hygiene behavior is lacking in the number of 18 respondents (60%); perineal hygiene behavior is sufficient in the number of 9 respondents (30%), while perineal

hygiene behavior which shows good is in the number of 3 respondents (10%). Adolescence or puberty is a period of change in attitude and behavior from childhood to young adulthood. Adolescence is a time of rapid changes in physical, cognitive, psychosocial, or behavioral, and hormonal growth.

The results showed that most of the respondents (50.0%) had poor knowledge about personal hygiene during menstruation; half of the respondents (50.0%) had a negative attitude towards personal hygiene during menstruation; most of the respondents (55.6%) had negative behavior towards personal hygiene during menstruation (Mukarramah, 2020).

The flow of information that is increasingly sweeping the world has inevitably changed the views and sexual behavior of Indonesian adolescents, resulting in deviations that lead to the fading of norms in society that are related to their reproductive health. One of the efforts to increase adolescent knowledge and behavior regarding motivation to carry out premarital examinations properly and correctly is to provide health education/health promotion. Health promotion is important because the information provided contains knowledge and messages to adolescents to avoid getting caught up in the wrong associations. Knowledge and attitudes that are still lacking can lead to cases such as Cervical Cancer (Soetjiningsih, 2015).

Identifying Reproductive Health in Adolescents Who Experience Early Marriage in Tandonsentul Village

The majority of reproductive health is lacking, with 15 respondents (50%), having adequate reproductive health, 13 respondents (13.3%), while reproductive health shows good, two respondents (6.7%). Another study showed that young women's knowledge about early marriage's impact on reproductive health was as many as 50 respondents (53.8%) in the good category and 43 respondents (46.2%) in the poor category. Knowledge of young women about the impact of early marriage on reproductive health is in a good category, 53.8% (Isnaini & Sari, 2019).

Globalization, with the advancement of science and modernization, resulted in very rapid social changes. Social changes include increasing sexual behavior before marriage, unwanted pregnancies, and the practice of abortion, which can lead to the risk of death. The low fulfillment of reproductive rights can be seen by the still high maternal mortality rate (MMR), the infant mortality rate (IMR), and the under-five-year mortality rate (IMR under five). The high MMR and the low understanding of reproductive health are indicators of the government's weakness in protecting, respecting, and fulfilling citizens' rights to reproductive health (Hasanah, 2016).

Analyzing the Relationship between Perineal Hygiene Behavior and Reproductive Health in Adolescents Who Experience Early Marriage

Most of the perineal hygiene behaviors were lacking; 18 respondents (60%) with reproductive health in adolescents who experienced early marriage were good, 0 respondents (0%), reproductive health was sufficient, 13 respondents (43.3%) and the less number of 15 respondents (50%). Teenagers are the next generation, the nation shoots and determine the future, which is the basic capital of the development of the Indonesian nation. Therefore, the existence of youth groups must be addressed. The World Health Organization (WHO) notes that around one-fifth of the world's population comprises adolescents, and 900 million are in developing countries (Soetjiningsih, 2014).

According to the Law of the Republic of Indonesia Number 16 of 2019 concerning Amendments to Law Number 1 of 1974 concerning Marriage Article 1, "Marriage is only permitted if a man and a woman have reached the age of 19 (nineteen) years". In this case, the minimum

age for marriage for women is equated with the minimum age for marriage for men, which is 19 (nineteen) years. So, it is called early marriage if you are still under that age (Yusuf, 2018).

Research shows that the causes of early marriage are pregnancy out of wedlock, premarital sex, self-will, economy, peers, and parallel culture growth in the region. The impact is caused by Anemia, narrow hips, LBW, Hypertension, and other impacts caused by domestic violence (KDRT). Based on the research, it can be concluded that early marriage impacts women's reproductive health (Sari et al., 2020). Another impact occurs when there is a problem, and one must be admitted to the hospital; the service mechanism must be maximized, including during the initial nursing assessment (Putri et al., 2021).

CONCLUSION

This study concludes that 18 respondents (60%) have the poor category of perineal hygiene behavior. Reproductive health in the less category is 15 respondents (50%). A relationship exists between perineal hygiene behavior and reproductive health in adolescents who experience early marriage in Tandonsentul Village, Lumbang District, Probolinggo Regency ($p\text{-value}=0.004$). One of the efforts to increase the knowledge and behavior of adolescents regarding motivation to carry out premarital examinations properly and correctly is to provide health education/health promotion.

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CONFLICT OF INTEREST

There is no conflict of interest in this article.

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