

## MEASURING THE ROLE OF FAMILY FUNCTION IN PROMOTING ADOLESCENT REPRODUCTIVE HEALTH IN EAST JAVA

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### ABSTRACT

#### Keywords:

family functions,  
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GSEM

A family function has a critical role in adolescent development especially in socializing healthy sexual behavior. However, studies around family function and reproduction health of adolescents are still limited. This research analyzes the link between family function on knowledge, attitude, and healthy sexual behavior among adolescents in East Java Province. Generalized Structural Equation Modelling (GSEM) was applied to the 2019 Performance and Accountability Survey (SKAP) 2019 East Java Province which consists of 32,194 families and 5,300 adolescents aged 10-24 years old. The results show that family functions are not well established, adolescents' knowledge of reproductive health is still low, and most adolescents have a negative attitude toward various population issues. The ability of families to socialize the five family function values is related to adolescent knowledge of reproductive health, positive attitudes toward population issues, and healthy reproductive behavior. This study suggests the importance of strengthening family functions to establish healthy reproductive behavior among adolescents in East Java.

### ABSTRAK

#### Kata Kunci:

fungsi keluarga,  
kesehatan reproduksi  
remaja,  
GSEM

Fungsi keluarga adalah pondasi dalam membentuk nilai dan karakter remaja khususnya kesehatan reproduksi pada remaja. Namun demikian, kajian mengenai keterkaitan fungsi keluarga terhadap kesehatan reproduksi terbatas. Penelitian ini menganalisis keterkaitan fungsi keluarga dengan pengetahuan, sikap dan perilaku seksual yang sehat pada remaja di Provinsi Jawa Timur. Analisis Generalized Structural Equation Modelling (GSEM) diterapkan pada data Survei Kinerja dan Akuntabilitas (SKAP) 2019 Provinsi Jawa Timur dengan jumlah responden 32,194 keluarga dan 5,300 remaja usia 10-24 tahun. Hasil analisis menunjukkan bahwa fungsi keluarga belum dapat diwujudkan, pengetahuan remaja mengenai kesehatan reproduksi masih rendah, sebagian besar remaja masih bersikap negatif terhadap berbagai isu kependudukan. Kemampuan keluarga dalam menanamkan kelima nilai fungsi keluarga berkaitan erat dengan pengetahuan remaja tentang kesehatan reproduksi, sikap positif terhadap isu kependudukan dan perilaku reproduksi sehat. Hasil penelitian ini menyarankan penting penguatan fungsi keluarga dalam rangka membentuk perilaku reproduksi sehat pada remaja di Jawa Timur.

## INTRODUCTION

The future of the Indonesian nation lies in the hands of the youth who are the young generation who will continue the nation. The stage of development toward adulthood, adolescence is an unstable stage due to the transition from childhood to adulthood (1). Three important aspects mark

adolescence, the first being physical and biological changes marked by the development of hormones and sexual organs; the second is psychological development which is marked by the search for identity; and the third is mental development in preparation for facing responsibility as an adult human being (1). These aspects make a person face an unstable situation when they are in their teens.

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The environment in which adolescents grow and develop greatly influences their character and personality during this transitional period. When teenagers do not get a conducive environment to grow and develop into someone who has an identity with strong character and firm values, what emerges is a teenager who is full of problems. One of the common problems in Indonesian society today is poor reproductive health behavior, such as sexual relations outside of marriage.

Studies on sexual behavior in adolescents suggest various factors internal and external to adolescents that cause sexual behavior outside of marriage. Factors in adolescents include a lack of understanding of reproductive health and exposure to pornography (2–4). Ignorance about the risks of sexual intercourse before marriage causes a permissive attitude to have sexual intercourse. A permissive attitude toward premarital sexual behavior from adolescents will encourage adolescents to have sex outside of marriage (5).

This is supported by a study that explains that many adolescents, especially men, think that virginity does not have to be maintained until marriage, or in other words, are permissive toward sexual behavior before marriage, and consider contraception to be the full responsibility of the woman (6). When adolescents have good knowledge and understanding of reproductive health and the risks of free sex, they will tend to be able to reject it and choose healthy relationships of the opposite sex, such as choosing not to date, making friends with the opposite sex without having to involve sexual desire. physically, and refuse to have sexual intercourse in any form (7).

The factor outside the adolescent self that determines whether a teenager can behave in a healthy sexual manner is the family. Family is the main foundation of adolescents, which is very influential in the formation of adolescent behavior (8). A study explains that how parents behave and provide examples to children influences their behavior and sexual development (9). Previous research stated that the family influences activities related to reproductive health in adolescents (10,11). Weak families instill poor values of family functioning and adolescents tend to have a permissive attitude toward unhealthy reproductive activities (10).

A study in four African countries, namely Burkina Faso, Ghana, Malawi, and Uganda, shows that parents have a very important role in children's sexual behavior (12). Parental monitoring is the unit of analysis in this research. Communication relationships in parental monitoring affect adolescent sexual behavior. The better the pattern of communication and upbringing in the family, the lower the tendency for children to engage in risky sexual behavior.

Through several previous studies, it can be understood that the relationship between children and parents affects adolescent sexual behavior. Families that are religious, not permissive toward risky sexual behavior, and have good parenting patterns play a role in adolescent sexual knowledge, attitudes, and behavior (13). Patterns of communication as well as upbringing and internalization of (religious and social) norms for children in a family influence children's knowledge of healthy sexual behavior and avoiding risky sexual behavior. This knowledge relates to attitudes and behaviors adopted by adolescents related to healthy reproductive behavior. In addition, socioeconomic characteristics, knowledge, and access to information influence the implementation of family functions (14).

The 2018 East Java Provincial SKAP Survey Report shows several problems related to adolescents, including low knowledge about reproductive health (15). This is indicated by the youth knowledge index about reproductive health at 55.3% or half of the adolescents in East Java still do not understand reproductive health. SKAP data for East Java Province also state that the knowledge index of the fertile period for adolescents in East Java is only 30.8%, which means that only a few know about the fertile period (16). Furthermore, the ideal age index for marriage and childbirth is low, which is at a percentage of 54%. (16). Data on families also show that only 43% of families know the eight functions of the family, and the high rate of early marriage is still high (17). This youth problem in East Java is a common problem in other provinces in Indonesia.

The National Population and Family Planning Board (BKKBN) is tasked with realizing family resilience through

strengthening eight family functions, including the functions of religion, love, education and outreach, socio-culture, economy, reproduction, environment, and protection. The role of the family is very vital in increasing the knowledge and understanding of adolescents regarding reproductive health, forming their positive attitude toward various population issues and healthy reproductive health behavior. Therefore, to find out in more detail how family functioning, knowledge, and attitudes are reflected and can influence healthy sexual behavior in adolescents in East Java, it is necessary to conduct an in-depth study.

This research aims to analyze the relationship of five family functions to knowledge, attitudes, and healthy sexual behavior in East Java. To the best of the researcher's knowledge, a similar study has never been conducted before. Stakeholders need an analysis of knowledge, attitudes, and healthy sexual behavior in adolescents, especially the East Java Provincial BKKBN and the East Java Provincial Government to understand the condition of adolescents in East Java. Meanwhile, an analysis of the implementation of family functions is important to understand the extent of family resilience in East Java Province, especially regarding the development of adolescent character related to healthy sexual behavior. This study focuses on five family functions related to the goals of character development and adolescent values related to healthy sexual behavior, including the functions of religion, love, reproduction, protection, and social and education.

## METHODS

### Data source

This research uses SKAP data from East Java Province for 2019. SKAP is designed for estimation at the provincial and national levels. The target population of this survey is fertile women aged 15-49 years, families, and unmarried youth aged 10-24 years. The survey was conducted using a cluster approach as an enumerator area. The sampling design used is stratified multistage sampling. The sample frame used in the SKAP consists of three types, namely the first stage sample frame is a list of the districts

(kelurahan) throughout Indonesia. Second, the sample frame for the second stage is a list of clusters in the selected district (kelurahan). Third, a list of households listed in the selected clusters. The total number of youth samples in East Java Province is 5,300 teenagers, while the number of family samples is 32,194 families(18).

### Research variable

There are three independent variables ( $y_1$ -3) observed:  $y_3$  is the reproductive health behavior of adolescents as seen from the behavior of not dating, healthy dating, and avoiding free sexual practices;  $y_2$  is the attitude of adolescents toward population and reproductive health issues as measured by the total score of adolescent answers about the need to control the number of births, the bad effects of population growth, age of marriage, the ideal number of children, actions that must be taken so that humans always live a long, healthy, happy and prosperous life;  $y_1$  is adolescents' knowledge of reproductive health, as seen from the number of correct answers to eight questions: knowledge of the fertile period, knowledge of menstruation, knowledge of the ideal age for marriage, knowledge of the consequences of marrying at a young age, knowledge of the dangers and how to avoid HIV-AIDS (19).

The dependent variable ( $x$ ) is the function of the family, including the function of religion ( $x_1$ ), the function of love ( $x_2$ ), the function of protection ( $x_3$ ), the function of reproduction ( $x_4$ ) and the function of social and education ( $x_5$ ). These five family functions are latent variables from each of the following sub-variables. First, family functions (worship, tolerance, doing good, patience, and sincerity). Second, the function of love (loyalty, fairness, family harmony, compassion). Third, the function of protection (physical protection, non-physical protection, health protection, and fulfilling the needs of clothing, food, and shelter). Fourth, is the reproductive function (cleanliness of the reproductive organs, reproductive health, avoiding promiscuity, marrying off children at the ideal age). Fifth, social and educational functions (becoming a role model, sending to school, teaching independence, and training creativity) (17).

## Statistical analysis

The variable family function is a latent variable and is of nominal data type, so Generalized Structural Equation Modeling (GSEM) analysis is used to explain the mechanism of the relationship of family function to knowledge, attitudes, and behavior of reproductive health in adolescents. Root Mean Square Error of Approximation (RMSEA)  $\leq 0.08$  and Comparative Fit Index CFI  $\geq 0.9$  are used as benchmarks for the goodness of fit model (20).

## RESULT

### Description of Family Functions, Knowledge, and Behavior Related to Adolescent Reproductive Health in East Java Province

Table 1 describes the characteristics of families and youth in the 2019 SKAP data for East Java Province. The majority of adolescents come from middle to upper-economic families whose parents work in the informal sector and live in urban areas.

**Table 1.** Social Demographic Characteristics of Adolescent Parents in East Java Province

Variable	%	Min	Mom
<b>Education</b>			
Low	64	0	100
Currently	29	0	100
Tall	7	0	100
<b>Well-being</b>			
Low	16	0	100
Currently	53	0	100
Tall	31	0	100
<b>Work</b>			
Formal	41	0	100
informal	59	0	100
<b>Residence</b>			
Village	47	0	100
City	53	0	100

Source: East Java SKAP, 2019 (processed).

Table 2 describes an overview of family functions, knowledge, and behavior related to adolescent reproductive health in East Java Province. It can be seen that parents place more emphasis on the importance of worship in a ritual sense (97%) compared to other religious values, such as tolerance, doing

good, and being patient and sincere. Most parents do not instill these values in their teenagers.

Likewise, with family functions, not all parents teach the values of loyalty, fairness, and the importance of family harmony and love. Even half of the parents answered that they had not taught the values of loyalty and justice to their teenagers. Similar to the function of the family, it seems that the values related to the function of protection in the family have not been fully implemented, only one of the two families answered that they instilled these values in their teenage children (46-52%).

Likewise with the reproductive function, which shows that most families have not taught their adolescents about reproductive health and the ideal age for marriage, only one in three families answered that they did. Next is the social and educational function, in which the majority of parents answer that they send their teenagers to school (85%). However, parents are very minimal in teaching exemplary values and teaching creativity to their teenagers.

Adolescents' knowledge about the risks of marrying young and reproductive health is still low. Only one in ten adolescents in East Java Province knows the risks of easy marriage and basic matters regarding reproductive health such as the importance of protecting the reproductive organs (14-17%).

Likewise with the knowledge of adolescents, the attitude of adolescents toward various population issues, such as the need to control the number of births, the negative consequences of population growth, the age of marriage, the ideal number of children, and the actions that must be taken so that humans always live a long, healthy, happy and prosperous life are still worrying. Only one in five adolescents explained that they agreed and supported the need to address these various problems (18%).

Some of the teenagers said that they did not have sexual relations before marriage. But most of them answered dating. One out of two teenagers in East Java Province reports having dated a member of the opposite sex. Those who are dating say it involves holding hands, hugging, kissing lips, and touching/stimulating (98%).

**Table 2.** Description of Family Functions, Knowledge, and Behavior Related to Adolescent Reproductive Health in East Java Province

Variable	%	Min	Mo m
<b>Religious function</b>			
Worship	97	0	100
Tolerance	30	0	100
Doing Good	46	0	100
Patience and sincere	25	0	100
<b>Family function</b>			
Loyal	47	0	100
Fair	41	0	100
Family harmony	69	0	100
Affection	53	0	100
<b>Protection function</b>			
Physical protection	51	0	100
Non-physical protection	47	0	100
Health protection	46	0	100
Fulfillment of food, clothing, boarding	52	0	100
<b>Reproductive function</b>			
Hygiene of the reproductive organs	53	0	100
Reproduction health	35	0	100
Avoid promiscuity	67	0	100
Marry children at the ideal age	26	0	100
<b>Social and educational functions</b>			
Become a role model	43	0	100
schooling	86	0	100
Teach independence	52	0	100
Teach creativity	17	0	100
<b>Knowledge related to reproductive health</b>			
Knowledge of the risks of young marriage	14	0	100
Knowledge of organs and reproductive health	17	0	100
<b>Attitudes toward population issues</b>			
18	0	100	
<b>Behavior related to reproductive health</b>			
Do not have pre-marital sex	100	0	100
Not dating	42	0	100
Positive opposite-sex friendships	2	0	100

Source: East Java SKAP, 2019 (processed).

The results of the analysis show that there is a correlation between the independent and dependent variables. Interesting results are shown from the relationship between family demographic and social variables in the five

family functions. Families living in rural areas tend not to implement the five family functions, while families living in urban areas are better at instilling values in family functions.

Families who work in the formal sector and are educated tend to apply family functions, especially the functions of love, reproduction, protection, and social education, but not the function of religion. Families that are more economically prosperous are better at implementing the five family functions than poor families.

### GSEM Analysis Results

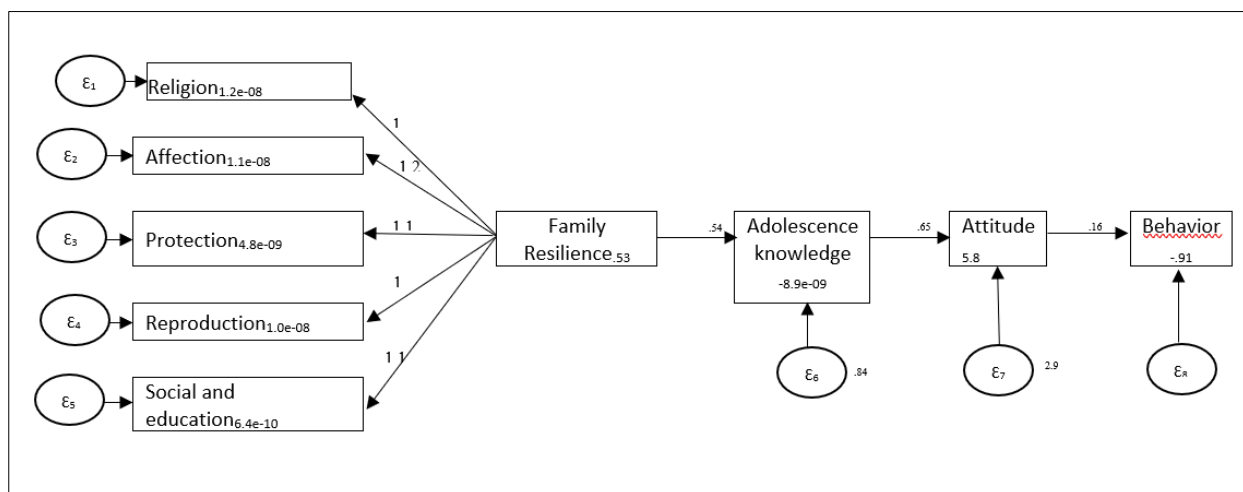
Figure 1 describes the results of the GSEM analysis while Table 3 shows the relationship between the variables forming family function, adolescent knowledge of reproductive health, and their reproductive health behavior. The first analysis that needs to be done is to see whether the model parameters are compatible enough or not or often referred to as the goodness of fit. The goodness of fit model is quite good as indicated by the value of RMSEA=0.07 (RMSEA value  $\leq 0.08$ ) and CFI=0.97 (CFI value  $\geq 0.9$ ). Therefore, we can carry out further analysis with this model.

The next analysis looks at the relationship between research variables. As shown in Figure 1 and Table 1, all latent variables forming family functions show a positive and significant relationship (p value  $< 0.001$ ). Families that provide, educate, and teach adolescents the values of religion, love, protection, social and reproductive health, and education have better resilience compared to families that lack in providing, educating, and teaching adolescents about religious values, love, protection, reproductive health as well as social and education.

The five family functions are related to knowledge of adolescent reproductive health (p value  $< 0.001$ ). Adolescents who live in families that teach and instill religious values, love, protection, reproductive health, as well as social and educational knowledge related to reproductive health and the risk of getting married easily are better than adolescents who live in families that do not teach and instill the five values - the value of the function of the family.

**Table 3.** GSEM Analysis Results

Variable	Coef.	OIM SE	z	p.svalue	95% CI	
					Lower	Upper
Adolescent knowledge about reproductive health→family resilience	0.54	0.03	15.83	0.000	0.48	0.61
Adolescent attitudes toward population issues→Adolescent knowledge about reproductive health	0.65	0.04	16.06	0.000	0.57	0.73
Behavior related to reproductive health→Adolescent attitudes towards population issues	0.16	0.01	12.49	0.000	0.13	0.18
Religion→family resilience	1.00	<i>(constrained)</i>				
Love→family resilience	1.18	0.03	34.17	0.000	1.11	1.25
Protection→family resilience	1.11	0.03	32.35	0.000	1.04	1.18
Reproduction health→family resilience	1.01	0.03	29.22	0.000	0.94	1.08
Social and educational→family resilience	1.10	0.03	31.99	0.000	1.03	1.17
RMSEA	0.07					
CFI	0.97					
Chi-Square	194.80			0.000		



**Figure 1.** GSEM analysis results

Adolescents who have knowledge about reproductive health and have knowledge about the risks of marrying young have a more positive attitude toward the need of controlling the number of births, the bad consequences of population growth, age at marriage, the ideal number of children, and actions that must be taken so that people always live a long, healthy, happy and prosperous life(p value <0.001).

Adolescents who have a positive attitude toward various population issues tend to have better attitudes toward reproductive health than adolescents who do not support the need for controlling the number of births, the bad consequences of population growth, age at marriage, the ideal number of children, and actions that must be taken so that people always live a long, healthy, happy and prosperous life(p value <0.001).

## DISCUSSION

This study aims to explain and analyze the relationship between family functioning and adolescent knowledge regarding reproductive health, adolescent attitudes towards population issues, and their behavior related to reproductive health in East Java Province using SKAP 2019 data.

As explained in the family sociology literature, the role of the family is very important in the internalization of values in children. The family is at the forefront for children, especially in their teens to get to know about reproductive health(1). Therefore, the family plays an important role in carrying out these family functions.

The important results of this research show that most families in East Java have not fully inculcated the five family functions. Most families in East Java have not taught very important family values, such as doing good and the importance of teaching creativity to their teenagers. Related to reproductive health, most families in East Java Province have not taught their teenagers about reproductive health and the ideal age for marriage to their teenagers.

There is a contradiction in the understanding of family functions by most parents in East Java who place more emphasis on the role of parents in internalizing religious values in the limited scope of ritual activities, for example praying five times a day, going to the mosque or church. Internalization of other essential religious values, such as the importance of tolerance, doing good, and being patient and sincere, is less emphasized in educating their teenage children (5).

This phenomenon is interesting when it is associated with the modern culture that has developed in urban areas in Indonesia and East Java, especially those known in the hedonic culture of the millennial generation, as reported by sociologists. Strong individualistic attitudes and hedonism are characteristics of the millennial generation, generation Z and the current Alpha generation. The role of the family which is expected to be able to fortify teenage children against the various challenges of modernity seems to have yet to be realized in regard to what is expected (7).

If you look deeper into the characteristics of the family, it seems that the

educational factor plays an important role. The majority of families participating in the 2019 SKAP are families with low educational backgrounds. More than half of the families have junior high school/equivalent education or lower. Half of them also work in the informal sector. The characteristics of East Javanese culture are dominated by the santri culture where religious rituals are absolute and are upheld by every family. But unfortunately, these ritual activities seem to have often not been implemented into values in other family functions. Therefore, the application of religious values in family life is very important and a big challenge for the people of East Java.

Another important finding from this study is the low knowledge of East Java adolescents on reproductive health. This study found that most adolescents who do not know and understand various things about reproductive health are those who live in families where their parents do not instill the values of family function. Thus, the role of parents in instilling the values of family function is very important to equip their teenage children with knowledge about reproductive health (7).

Another important finding is that the attitude of the majority of adolescents toward various population issues in East Java Province still tends to be negative. Most East Java teenagers tend to care less about the need of controlling the number of births, the bad consequences of population growth, the age at marriage, the ideal number of children, and the actions that must be taken so that people always live a long, healthy, happy, and prosperous life. This finding is not surprising because the 2018 SKAP findings also show relatively the same information. As previously reported by previous studies, the main factor for this problem is that most East Java adolescents have not been well-exposed to various information regarding this population issue.

Finally, healthy reproductive behavior is largely determined by the knowledge of adolescents about reproductive health and their attitudes, all of which are inseparable from family functions. The results of the GSEM analysis show the mechanism of the relationship between these variables. The findings reinforce previous studies which confirmed that the family is the foundation for

the formation of a strong and quality young generation (7).

## CONCLUSIONS AND SUGGESTIONS

### Conclusion

This study concludes that, in general, families in East Java Province have not been able to realize family functions. In addition, the knowledge of adolescents regarding reproductive health is still low and adolescent attitudes toward various population issues tend to be negative. The GSEM results show that the ability of families to instill the five values of family functioning is closely related to adolescent knowledge about reproductive health, positive attitudes toward population issues, and healthy reproductive behavior.

### Suggestions

The results of this study suggest the importance of efforts to strengthen family function in order to increase knowledge and understanding of healthy reproductive behavior in adolescents, increase adolescent awareness of various population issues and form healthy reproductive behavior in families and adolescents in East Java Province.

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