Teacher’s Ability Profile in Informing Healthy Reproduction for Elementary Students in Semarang City

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Abstract—Professional skills of teachers in creating quality learning greatly determine the success of education as a whole. The quality of learning depends very much on the professional abilities of the teacher, especially in providing students with the ease of learning effectively and efficiently. Syaodih (1998) suggests that teachers play a significant role both in planning and implementing the curriculum. He further stated that teachers are planners, implementers and curriculum developers for their classes. The teacher will use ways to choose learning activities that will be used during the learning process. In this case the teacher will choose the learning activities that will be used during the healthy reproduction learning process. The election is conducted by considering the situation and conditions, learning resources, needs and characteristics of students faced in order to achieve learning goals of healthy reproduction. The teacher plays a role in fostering and informing students. The purpose of this study was to determine the ability of elementary school teachers in informing healthy reproduction to their students. The purpose of this study is to find out how far elementary school teachers of class I (one) to III (three) have the ability to inform healthy reproduction to their students. The purpose of this study was to determine the ability of elementary school teachers in grades I (one) to III (three) in informing healthy reproduction to their students. The purpose of this study was to determine the ability of elementary school teachers in grades I (one) to III (three) in informing healthy reproduction to their students.

Keywords—healthy reproduction, teacher’s ability, informing, elementary students.

I. INTRODUCTION

Policies in improving the quality of education began with improving the quality of education in elementary schools (SD). In an effort to foster and develop education in elementary schools the government develops a coaching system known as the Professional Coaching System (SPP). This system is implemented with a school cluster approach, so that several schools with adjacent locations are grouped into one cluster (3 to 8 schools). The development of education quality is carried out by using the principle of whole school development, seeing schools as a whole. Therefore, development and development are emphasized on all parties and components that determine the quality of education in schools. With learning strategies carried out by the teacher mean the teacher has the ability to convey healthy reproduction information to the students.

Students in elementary school, in a few years they will experience adolescence. Changes in early adolescence became very rapid, the entire body shape resembled that of an adult (Papalia D.E., 1985: 488). Even though emotions and intellectuals are not yet the same level as adults. The real physiological changes in adolescents are sex hormone activities that begin to stand out when adolescents enter puberty at the age of 12-14 years. Some cases in the community, such as sexual abuse of early childhood, such as in JIS (internet 4 September 2014), has become a concern to parents and teachers. Submission of healthy reproduction material to students needs to be done by teachers and parents from an early age, the purpose of which is to equip students with the right knowledge and direction regarding healthy reproduction behavior, in connection with their role as the next generation and potential human development resources. In the life cycle of students, the stages that are being experienced are a critical transition period, where there are many physical and psychological changes simultaneously. In the midst of current globalization and technology, the availability of healthy reproduction behavior feels very lagging behind the incessant information originating from films, books, magazines, television, internet, and other mass media that tend to plunge students (children) into risky sexual behavior until the occurrence of an extramarital pregnancy.

Based on the description, the problem arises to find out how far elementary school teachers of class I (one) to III (three) have the ability to inform healthy reproduction to their students. The purpose of this study was to determine the ability of elementary school teachers in grades I (one) to III (three) in informing healthy reproduction to their students.

II. METHOD

Collecting Data and Information Techniques

Data and information retrieval is carried out by researchers adjusting to the characteristics of each data. Some information to strengthen understanding will be obtained through interviews with teachers. Including to trace documents that may not be able to get researchers through searching information via the internet, libraries, and others.
Population and Samples

Objects of this research are teachers of elementary schools in 17 sub-districts in Semarang city.

1. Population

Population is total of all possible values, the results of counting or measurement, quantitative or qualitative regarding certain characteristics of all members of the group that are complete and clear who want to learn their characteristics, (Sudjana, 1996: 6). In this study, the population is elementary school teachers throughout Semarang City.

2. Samples

Sample is partially taken from the population (Sudjana, 1996: 6). The sample in this study did not use elementary school teachers in Semarang as a whole but only partially by random sampling. So that the sample is said to be representative (representing population), the required sampling technique used is purposive sampling technique, meaning the sample is taken based on objectives or more operationally based on the same or similar criteria. The number of samples are determined by only 17 sub-districts from all sub-districts in Semarang.

Collecting Data Procedure

1. Interview

   This interview technique is conducted to collect research data that is non-behavioral. As stated by Furchan (2007: 258) that interview techniques can be used to obtain information about facts, beliefs, feelings, intentions and so on. This interview is primarily aimed at students. This is done by considering that from this informant a number of information and understanding of the focus of research can be obtained. In principle this interview is free but in order to achieve effectiveness it refers to a flexible guide with reference to the focus of the research.

2. Data Analysis Method

   The data analysis technique used in this study is the percentage descriptive analysis technique. Descriptive analysis of percentages is presenting data collected in a study (in the form of a frequency table or graph) or frequency distribution. Descriptive analysis of percentages is an analysis of the initial data to find out the distribution of answers reflected by respondents' scores so that the average minimum score, maximum score and the lowest distance score are identified with the highest score of respondents.

   While for calculating the percentage the writer uses the following formula: $DP = \frac{n}{N} \times 100$

   DP : Descriptive Percentage (%)
   n : Empirical Score (score obtained)
   N : Ideal score or total number of respondents (Ali, 1993: 186)

LITERATURE

Understanding Healthy Reproduction

Reproduction health is a state of complete physical, mental and social well-being and not just the nature of reproduction system and its function processes (WHO). In order to carry out reproduction functions in a healthy, physical sense, and mentally, required:

First, so that there are no anatomical and physiological abnormalities in both women and men. Among other things, a woman must have a hip cavity that is large enough to facilitate the birth of her baby later. He also must have producing glands capable of producing hormones needed to facilitate physical growth and dating functions and reproduction organs. These developments have been going on since a very young age. Hip bone develops since a child has not yet reached adolescence and stops when the child reaches 18 years of age. In order for all growth to take place well, he needs food with good and balanced nutritional quality. This also applies to men. A man needs good nutrition in order to develop into a healthy adult male.

Second, both men and women need an adequate psychological foundation so that their emotional development progresses well. This should start as early as possible, even from infancy. A touch on his skin through palpation and a warm sweep, especially when feeding his mother, will provide gratitude, calm, safe and satisfaction that he will not forget until he grows up. Such feelings will be the basis of his emotional maturity in the future.

Third, everyone should be free from abnormalities or diseases, both directly and indirectly regarding their reproduction organs. Every disease in the reproduction organs will also interfere with one's ability to carry out their reproduction duties. Included here are diseases transmitted through sexual relations - for example AIDS and Hepatitis B, other infections in the reproduction organs, other infections that affect fetal development, the effects of environmental pollution, tumors or cancers in the reproduction organs, and hormonal disorders, especially sexual hormones.

Fourth, a pregnant woman needs a guarantee that she will be able to pass the period safely. Pregnancy is not a disease or disorder. Pregnancy is a physiological process. Even so, pregnancy can also harm or interfere with the health of women who experience it. Pregnancy can cause an increase in high blood pressure, bleeding, and even death. Even though he wanted the pregnancy to come, still his mind was filled with anxiety whether the pregnancy would change the appearance of his body and could create a feeling that he was no longer attractive to her husband. He also feels anxious about facing pain during childbirth, and is worried about what happens to his baby. Will the baby be born disabled, or be born safely or alive. Care for a good pregnancy should be supplemented by counseling that can answer these various anxieties.

Why Teachers Need to Understand Reproduction Health

During teaching and learning activities in schools, especially during sports lessons students often experience problems related to reproduction. For example, female
students become lazy when attending sports lessons when experiencing premenstrual syndrome, feel pain or embarrassed to do activities such as running or exercising during menstruation and feel awkward wearing sports shirts when her breasts start to enlarge. Conversely, male students can also experience difficulties in sports lessons after circumcision and feel uncomfortable wearing tight sports pants. Most health education teachers do not have adequate knowledge of reproduction health and communication skills to help students deal with these problems. As a result, teachers tend to divert lessons from material related to reproduction, and the teacher may even get mad upon students who actively ask about their reproduction health.

In Censo’s study reported that the high incidence of sexually transmitted diseases among British students was due to the low level of reproduction health knowledge, the absence of accurate and reliable sources of information and the fear and insecurity of educators to teach reproduction health material. Though parents trust the teacher as a source of information relating to reproduction health (Watson, 2001) and students themselves also prefer teachers as a reliable source of information on reproduction health issues than their parents (Pertiwi, 2008). Therefore, the health education teacher should also have knowledge of reproduction health and educational communication skills to teach reproduction health material that is relevant to the competency of education, needs, level of understanding of students and the situation of various school environment conditions.

Factors Affecting Reproduction Health

Broadly speaking, four groups can be categorized as factors that can adversely affect reproduction health:

a. **Socio-economic and demographic factors** (especially poverty, low levels of education and ignorance about sexual development and reproduction processes, as well as remote residential locations).

b. **Cultural and environmental factors** (for example, traditional practices that adversely affect reproduction health, trust many children with lots of fortune, information about reproduction functions that confuse children and adolescents because of opposing one another, etc.).

c. **Psychological factors** (the impact on the breakdown of parents in adolescents, depression due to hormonal imbalances, women's worthless feelings towards men who buy material freedom, etc.).

d. **Biological factors** (birth defects, defects in the reproduction tract after sexually transmitted diseases, etc.).

The influence of all of the above factors can be reduced by appropriate intervention strategies, focused on the application of reproduction rights of women and men with support at all levels of administration, so that they can be integrated into various health, education, social programs and other non-health services related to prevention and prevention reproduction health problems.

Teacher's Ability to Inform Healthy Reproduction for Elementary Students

Explaining the problem of healthy reproduction in children is arguably not easy. Between their curiosity and ignorance about ‘sex’ is a measurement pattern that is difficult to answer for teachers, parents and the closest people. This is where we need an educator who understands the world of adolescence. Not only is it expected to be a mother, but also a friend, educator and their role model.

III RESULT AND DISCUSSION

Analysis stages are carried out using observation methods with several observations, including: in Semarang City area there are 17 sub-districts, namely there are 17 UPTD of the Education Office. According to researchers’ opinion, the ability to implement healthy reproduction for students in Primary Schools requires a certain profile or model.

In this study the first step that will be carried out is to see how far the implementation of healthy reproduction material for elementary school students in Semarang City. The researcher looked at what material was included in thematic learning in Class I, II, and III of Elementary School. By taking samples using purposive sampling technique, it was obtained 3 North Semarang Elementary Schools, 2 Mijen Elementary Schools, 3 Pedurungan Elementary Schools, 4 Banyumanik Elementary Schools, with 15 teachers of Class I, 15 teachers of Class II, 18 teachers of Class III as respondents. Therefore, there are total 48 teachers as respondents.

Healthy reproduction implementation in elementary school learning material

Healthy reproduction material that can be included in syllabus of elementary school grade I, II, and III are stated as follows:

1. Knowing body parts and five senses.
2. Knowing body care, health, and shapes.
3. Sharing individual and families.
4. Appreciating bodies with all motion as a gift from God.
5. Showing respect and polite behavior to teachers, parents, and other people.
6. Understanding name of body parts (head, genitals, to feet).
7. Practicing habits of healthy life, healthy body, and healthy outfits.
8. Having polite behavior and affection towards fellow friends.
9. Having confidence with their body.
10. Understanding descriptive texts about menstrual, wet dreams, ejaculation.
11. Understanding descriptive texts about intercourse, sodomy, masturbation.
12. Understanding descriptive texts about homosexuals and lesbians.

In the learning process which now uses many thematic approaches, teachers will include the material...
above in preparing their teaching, with the implementation program as their concerned. For example, material 1, 2, and 3 may suitable for basic competencies of "myself" in class I. Material 4 to 7 can be included in "living in harmony" theme for sports and health subjects in grade 2 elementary school. Materials 8 to 12 can be included in "having self-esteem as an individual", and "implementing society's norms and values" on the PPKn subjects.

Research on teachers' ability profile to inform healthy reproduction for elementary school students from Grade 1 to 3 is carried out from July to November 2014. The research is divided into several stages. The initial stage conducted observations and documentation. The researcher came to SEKARAN I Elementary School to see and to read syllabus of Class I, II, and III. The second stage, conducted interviews about what material has been delivered to students related to healthy reproduction. The results obtained that healthy reproduction material included in the thematic approach were:

1. Knowing body parts and five senses.
2. Knowing body care, health, and shapes.
3. Sharing individual and families.
4. Appreciating bodies with all motion as a gift from God.
5. Showing respect and polite behavior to teachers, parents, and other people.
6. Understanding name of body parts (head, genitals, to feet).
7. Practicing habits of healthy life, healthy body, and healthy outfits.
8. Having polite behavior and affection towards fellow friends.
9. Having confidence with their body.
10. Understanding descriptive texts about menstrual, wet dreams, ejaculation.
11. Understanding descriptive texts about intercourse, sodomy, masturbation.
12. Understanding descriptive texts about homosexuals and lesbians.

Then for the third stage, the researchers conducted questionnaire that show how far teachers inform healthy reproduction to their students, to the 48 teachers as the respondents. In interviewing teachers, the researchers found out that these respondents were professional teachers who had teaching experience in class I - III of elementary schools. The results of the questionnaire are expressed in the following table:

| Respondents | Material | Training |
|-------------|----------|----------|
| 1.          | 1 1 1 1 | 1 1 1 1 |
| 2.          | 1 1 1 1 | 1 1 1 0 |
| 3.          | 1 1 1 1 | 1 1 1 0 |
| 4.          | 1 1 0 0 | 1 1 1 0 |
| 5.          | 1 1 1 1 | 1 1 1 0 |
| 6.          | 1 1 1 1 | 1 1 1 0 |
| 7.          | 1 1 1 1 | 1 1 1 0 |
| 8.          | 1 1 1 1 | 1 1 1 0 |
| 9.          | 1 1 1 1 | 1 1 1 0 |
| 10.         | 1 1 1 1 | 1 1 1 0 |
| 11.         | 1 1 1 1 | 1 1 1 0 |
| 12.         | 1 1 1 1 | 1 1 1 0 |
| 13.         | 1 1 1 1 | 1 1 1 0 |
| 14.         | 1 1 1 1 | 1 1 1 0 |
| 15.         | 1 1 1 1 | 1 1 1 0 |
| 16.         | 1 1 1 1 | 1 1 1 0 |
| 17.         | 1 1 1 1 | 1 1 1 0 |
| 18.         | 1 1 1 1 | 1 1 1 0 |
| 19.         | 1 1 1 1 | 1 1 1 0 |
| 20.         | 1 1 1 1 | 1 1 1 0 |
| 21.         | 1 1 1 1 | 1 1 1 0 |
| 22.         | 1 1 1 1 | 1 1 1 0 |
| 23.         | 1 1 1 1 | 1 1 1 0 |
| 24.         | 1 1 1 1 | 1 1 1 0 |
| 25.         | 1 1 1 1 | 1 1 1 0 |
| 26.         | 1 1 0 0 | 1 1 0 0 |
| 27.         | 1 1 0 0 | 1 1 0 0 |
| 28.         | 1 1 0 0 | 1 1 0 0 |

Table 1. Implementation Healthy Reproduction Material Delivery for Class I - III of Elementary Schools in Semarang City
### Respondents vs. Material Training

| Respondents | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | Training |
|-------------|---|---|---|---|---|---|---|---|---|----|----|----|----------|
| 29.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 0  | 0  | 0  | B        |
| 30.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 1  | 1  | B        |
| 31.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 1  | 1  | B        |
| 32.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 0  | 0  | S        |
| 33.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 1  | 1  | S        |
| 34.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 0  | 0  | S        |
| 35.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 0  | 0  | B        |
| 36.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 0  | 0  | B        |
| 37.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 0  | 0  | B        |
| 38.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 0  | 0  | B        |
| 39.         | 1 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 0  | 0  | B        |
| 40.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 0  | 0  | S        |
| 41.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 0  | 0  | B        |
| 42.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 0  | 0  | B        |
| 43.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 0  | 0  | B        |
| 44.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 0  | 0  | S        |
| 45.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 0  | 0  | S        |
| 46.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 0  | 0  | B        |
| 47.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 0  | 0  | B        |
| 48.         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 0  | 0  | S        |
| Jumlah      | 48 | 47 | 45 | 47 | 45 | 48 | 48 | 46 | 48 | 34 | 9  | 11 |          |
| Procentage  | 100% | 98% | 94% | 98% | 94% | 100% | 100% | 96% | 100% | 71% | 19% | 23% |

Information:
- B = have never attended a training or workshop on healthy reproduction learning.
- S = have already attended a training or workshop on healthy reproduction learning.

Materials:
1. Knowing body parts and five senses.
2. Knowing body care, health, and shapes.
3. Sharing individual and families.
4. Appreciating bodies with all motion as a gift from God.
5. Showing respect and polite behavior to teachers, parents, and other people.
6. Understanding name of body parts (head, genitals, to feet).
7. Practicing habits of healthy life, healthy body, and healthy outfits.
8. Having polite behavior and affection towards fellow friends.
9. Having confidence with their body.
10. Understanding descriptive texts about menstrual, wet dreams, ejaculation.
11. Understanding descriptive texts about intercourse, sodomy, masturbation.
12. Understanding descriptive texts about homosexuals and lesbians.

Based on the table above we can find out that knowing body parts and five senses is 100% carried out. Knowing body care, health, and shapes is 98% carried out. Sharing individual and families is 94% carried out. While appreciating bodies with all motion as a gift from God is 98% implemented, and showing respect and polite behavior to teachers, parents, and other people is 94%. Then, both understanding name of body parts (head, genitals, to feet) material and practicing habits of healthy life, healthy body, and healthy outfits are 100% delivered. Furthermore, having polite behavior and affection towards fellow friends is 96%, while having confidence with their body is 100% delivered.

For concerned, understanding descriptive texts about menstrual, wet dreams, ejaculation is 71% carried out, while understanding descriptive texts about intercourse, sodomy, masturbation is 19%, and understanding descriptive texts about homosexuals and lesbians is 23% carried out. These were caused by different point of view upon these materials. On the interview with these teachers, they said that they have not provided information about healthy reproduction openly for these three materials, because 40% still think that it is considered taboo (Javanese language = obscene).

The table also shows that 71% of the respondents said they had never attended to a seminar or training or workshop on healthy reproduction learning, and 29% had attended to a healthy reproduction seminar.

### IV. CONCLUSION

Based on the research results of teachers’ ability profile to inform healthy reproduction for elementary school students, especially in class I - III in Semarang City, it shows that healthy reproduction information has been conveyed through themes, that healthy reproduction can be delivered and developed through competence basic. While for healthy reproduction in menstrual material, wet dreams, and ejaculation, 29% corespondents considered taboo. Material about
homosexuals and lesbians, 77% respondents also still considered taboo. In general the teacher has delivered information about healthy reproduction.

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