Family Skills Improvement in Adolescent Reproductive Health with a Family Strengthening Program

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Abstract
Families play a role in improving adolescent reproductive health and preventing problems. The objective of this program is to improve family skills in optimizing adolescent reproductive health through a family strengthening program. The program partners were 20 families with adolescents, consisting of fathers, mothers, and their adolescent children. The program method was a family strengthening program consisting of three meetings. The results of the program showed that before the family strengthening program was implemented, the majority of families communication skills with their adolescent children were in the poor category (82%), the majority of families skills in personal genital hygiene were in the poor category (86%), and the majority of adolescents skills in fulfilling balanced nutritional needs were in the poor category (72%). After the family strengthening program, the majority of families communication skills with their adolescent children were in the good category (64%), the majority of families skills in personal genital hygiene were in the good category (73%), and the majority of adolescents' skills in fulfilling balanced nutritional needs were in the good category (67%). This proves that the family strengthening program is able to improve family skills in optimizing adolescent reproductive health through communication skills in adolescents, personal genital hygiene skills, and skills in fulfilling balanced nutritional needs in adolescents.
Keywords : Family Strengthening Program, Health Reproductive, Adolescents

Abstrak
Keluarga berperan dalam meningkatkan kesehatan reproduksi remaja dan mencegah timbulnya masalah terkait. Tujuan program ini adalah meningkatkan keterampilan keluarga dalam mengoptimalkan kesehatan reproduksi remaja melalui program penguatan keluarga. Mitra program ini terdiri dari 20 keluarga yang memiliki anak remaja, yang mencakup ayah, ibu, dan anak remaja mereka. Metode yang digunakan adalah program penguatan keluarga yang dilaksanakan dalam tiga kali pertemuan. Hasil program menunjukkan bahwa sebelum pelaksanaan program, sebagian besar keluarga memiliki keterampilan komunikasi dengan anak remaja dalam kategori kurang (82%), keterampilan menjaga kebersihan organ reproduksi dalam kategori kurang (86%), dan keterampilan remaja dalam memenuhi kebutuhan gizi seimbang juga dalam kategori kurang (72%). Setelah program penguatan keluarga dilaksanakan, sebagian besar keluarga memiliki keterampilan komunikasi dengan anak remaja dalam kategori baik (64%), keterampilan menjaga kebersihan organ reproduksi dalam kategori baik (73%), serta keterampilan remaja dalam memenuhi kebutuhan gizi seimbang dalam kategori baik (67%). Hal ini membuktikan bahwa program penguatan keluarga mampu meningkatkan keterampilan keluarga dalam mengoptimalkan kesehatan reproduksi remaja, khususnya dalam aspek komunikasi dengan remaja, kebersihan organ reproduksi, dan pemenuhan kebutuhan gizi seimbang bagi remaja.
Kata Kunci: Program Penguatan Keluarga, Kesehatan Reproduksi, Remaja

A. INTRODUCTION

Adolescents represent the nation's future generation and need to be adequately prepared, including in reproductive health. During adolescence, physical, social, psychological, and intellectual changes occur. A lack of awareness of the impact of these changes, a strong sense of curiosity, and a drive to face challenges without careful consideration put them at risk of experiencing problems. Early marriage, unplanned pregnancies, and reproductive infections are common problems experienced by adolescents (Maurida & Silvanasari, 2023). One of the factors that influences this

condition is the lack of family skills to improve reproductive health in adolescents (Salamung et al., 2021)

The number of adolescent girls who received information about reproductive health from their mothers was 58% and from health workers 23%. According to Aprilia (2020), 41% of adolescents received information about menstrual hygiene from their mothers, 23% from sisters, 21% from friends, 5% from television, and 3% from books. Based on interviews conducted with 20 adolescent at the community service implementation location, data was obtained that 80% of adolescent obtained information about reproductive health from social media and another 20% obtained information from peers. Skills to improve reproductive health need to be taught early, in accordance with developmental stages. During adolescence, the family plays a primary role in determining adolescents' decisions regarding sexual behavior (Maurida et al., 2023). Therefore, families need to have skills in communicating with teenagers, personal genital hygiene and fulfilling balanced nutrition for teenagers.

The government, through its Pelayanan Kesehatan Peduli Remaja (PKPR) program, has regularly conducted outreach programs to optimize adolescent reproductive health. The implementation of the Pelayanan Kesehatan Peduli Remaja (PKPR) program is already underway. There is a need for optimization and strengthening of cross-sectoral roles in the implementation of PKPR. However, families also need to be involved in shaping adolescent behavior. One method that can be used is a family strengthening program, an activity that empowers families to improve the health of their members. Family strengthening is a method that optimizes parental resilience, social connections, parenting knowledge, concrete support, and social and emotional competence (Maurida & Basri, 2025). The purpose of the community service carried out is to determine the improvement of family skills in communicating with adolescents, personal genital hygiene and fulfilling balanced nutrition for adolescents through family strengthening programs.

B. METHODS

Community service activities were carried out by involving families with teenagers as many as 20 families consisting of fathers, mothers and teenage children. Community service activities were carried out in January 2025 during 3 meetings every day. The first day is accompanied by a pre-test and the third day is accompanied by a post-test. Activities are evaluated using observation sheets. This community service activity was

based on the results of research on the analysis of factors that influence reproductive health in adolescents based on family nursing which concluded that family skills in the context of carrying out family tasks in caring for adolescents is one of the factors that influence reproductive health in adolescents (Maurida et al., 2024).

The community service implementation process begins with obtaining permits from the regional government. The next step involves coordinating with the community service area and identifying participants. A schedule and location are then agreed upon. The community service implementers conduct the family strengthening program through three meetings:

Meeting 1:

The first meeting strengthened parental resilience indicators through counseling on reproductive health for adolescents. Parental resilience is a family's ability to withstand internal and external stressors. Parental resilience encompasses the ability to manage emotions. In parental resilience, families are provided with counseling on adolescent reproductive health, discussing emerging issues related to adolescent health, so that families can be guided to develop adaptive coping strategies to address reproductive health issues in adolescents.

Meeting 2 :

The second meeting strengthened the indicators of social connection, parenting knowledge, and concrete support through outreach on reproductive health for adolescents, changes that occur in adolescents, and access to health services for adolescents using PowerPoint media. Social connection is the family's ability to provide positive support for the family's reproductive health. The family support referred to is emotional support, informational support, instrumental support, and appreciation support (Ahmad et al., 2021). To improve social control, families are provided with knowledge about adolescent reproductive health, including definitions, indicators, and prevention of reproductive health problems. Parenting knowledge is the family's ability to recognize changes that occur in adolescents. To improve parenting knowledge, families are provided with knowledge about the changes that occur in adolescents, including physical, social, psychological, and intellectual changes. Concrete to support is a family's ability to access health services. To increase concrete to support, families are taught about accessible health services to improve reproductive health.

Meeting 3 :

The third meeting strengthened social and emotional competence through demonstrations and role-plays on communication with adolescents, personal genital hygiene, and a demonstration of balanced nutrition for adolescents using booklets and audiovisual media. Social and emotional competence refers to a family's ability to build positive relationships with adolescents.

The output of strengthening families in community service today is that families are able to communicate with adolescents, especially regarding improving reproductive health in adolescents, families are able to demonstrate personal genital hygiene in adolescents and families are able to simulate the fulfillment of balanced nutritional intake in adolescents (Ahmad et al., 2021)

Prior to the family strengthening program, adolescents' communication skills, personal genital hygiene, and balanced nutritional intake will be assessed. Following the health education program, open communication skills, personal genital hygiene, and balanced nutritional intake will be assessed again. Measurements will be conducted using observation sheets for adolescent communication skills, personal genital hygiene, and balanced nutritional intake.

C. RESULTS

Photo 1. Reproductive health counseling for adolescents

Tabel 1. Participants Characteristic

Education	Father	Mother	Total
Elementary School	0	0	0
Junior High School	8	0	8
Senior High School	10	17	27
Bachelor/Magister	2	3	5
Total	20	20	40
Working	Father	Mother	Total
Civil cervants	2	3	5
Self employment	5	5	10
private sector employee	13	0	13
No work	0	12	12
Total	20	20	40
Usia	Father	Mother	Total
<30 years old	0	0	0
30-60 years old	20	20	40
>60 years old	0	0	0
Total	20	20	40

The majority of parents have a senior high school educational background, have private sector employment and are aged 30-60 years.

Table 2. Family Communication Skills with Adolescents Before and After the Family Strengthening Program

Category	Good	Poor	Total
Before	18%	82%	100%
After	64%	36%	100%

Before the family strengthening program, the majority of families' ability to communicate with adolescents about improving reproductive health was in the poor category, at 82%. After the family strengthening program, the ability to communicate increased to 64%, which is in the good category. Communication between parents and adolescents influences risky sexual behavior in adolescent.

Communication taught to adolescents is open. Parents are good listeners and are more likely to provide solutions to problems faced by adolescents rather than punish them. Communication is also supported by nonverbal communication such as eye contact, touch, and openness. Parent-adolescent communication plays a crucial role during puberty (Baharuddin, 2019). Communication is of course based on family knowledge about reproductive health and how to maintain reproductive health in adolescents.

Table 3. Personal Genital Hygiene Skills in Adolescents Before and After the Family Strengthening Program

Category	Good	Poor	Total
Before	14%	86%	100%
After	73%	27%	100%

The results obtained after the family strengthening program showed that 73% of families demonstrated good personal hygiene practices in adolescents. This aligns with the descriptive analysis in the research article, which concluded that the majority of adolescent girls practice good personal hygiene, with family as a key influencing factor (Lestari et al., 2025). This number has increased compared to before the family strengthening program was implemented, namely that the majority of respondents were in the less category, as much as 86%.

Personal genital hygiene is the procedure for maintaining genital organ cleanliness such as wearing underwear that absorbs sweat and is not tight, changing underwear twice a day or when it feels dirty, maintaining genital organ cleanliness by cleaning with clean water after each urination and defecation in the direction from front to back then drying with tissue or a small towel, changing sanitary napkins every 3-4 hours or when the armpits feel full during menstruation in adolescent girls. The family's ability to teach personal hygiene for genitals is based on family knowledge about genital organ care for adolescents. Personal hygiene in adolescent girls has an impact on adolescent reproductive health (Dewi et al., 2024).

Table 4. Skills for Fullfillment Balanced Nutritional Needs for Adolescents Before and After the Family Strengthening Program

Category	Good	Poor	Total
Before	28%	72%	100%
After	67%	33%	100%

A simulation of meeting balanced nutritional needs before the family strengthening program revealed that 72% of respondents were in the poor category. After the family strengthening program, 67% of respondents were in the good category.

Adolescence is a period of rapid physical change. A balanced diet is essential for optimal growth. Carbohydrates, protein, fat, vitamins, and minerals are essential nutrients for adolescents, available in a variety of foods such as rice, wheat, potatoes, eggs, tofu, tempeh, meat, fish, fruit, vegetables, and milk. A family's ability to meet

balanced nutritional needs for adolescents is influenced by family knowledge. According to Aulia (2021), Family knowledge about nutritional intake influences adolescents' nutritional status. Adolescents' ability to provide balanced nutritional intake also influences their nutritional status (Hasanah, 2025).

Family strengthening is closely linked to the Ministry of Health's Pelayanan Kesehatan Peduli Remaja (PKPR) program. The family is the primary environment for shaping adolescent character and healthy behaviors. Without family support, education and counseling provided at health facilities, such as community health centers or schools, will not be effective. Of all the indicators for improving family capacity, the ability to communicate with adolescents scored the lowest. This may be due to a lack of habituation of open communication between parents and children from an early age. Parents' education and occupation can contribute to the lack of communication between parents and children.

Increasing knowledge through education and demonstrations are implementations to direct targets to adopt healthy behaviors. The results of this community service program align with previous research. Increasing parental resilience can impact communication skills between parents and children (Novrian et al., 2025). Increasing parental knowledge, social connections, and concrete support provides families with an understanding of the skills parents need to maintain genital hygiene (Zahroh et al., 2023). Increasing social and emotional competence improves families' ability to assess and meet adolescents' nutritional needs (Zahroh et al., 2023).

The advantage of this activity is the integration of research findings into community service activities. However, the disadvantage is that the participants were not homogeneous, which could have influenced the results. The following suggestions can be made based on the results of this community service families need to improve their skills in improving adolescent reproductive health as a form of implementing family functions with adolescent children. Health workers, especially those in community health centers, can involve families in every intervention to improve adolescent health, especially in the context of adolescent reproductive health.

D. CONCLUSION

Strengthening families through increased parental resilience, social connections, parenting knowledge, concrete support, and social and emotional competence can improve family skills in optimizing adolescent reproductive health through communication skills, personal genital hygiene, and balanced nutrition.

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