

OVERVIEW OF MOTHERS' KNOWLEDGE ABOUT REPRODUCTIVE HEALTH EDUCATION FOR EARLY CHILDHOOD AT AMONG SIWI KINDERGARTEN, GAMPING SUBDISTRICT, SLEMAN, 2025

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ABSTRACT

Purpose: Data from SIGA of the Ministry of Women's Empowerment and Child Protection (PPPA) recorded 265 cases of child sexual violence in the Special Region of Yogyakarta (DIY) in 2023, with the highest number in Sleman Regency (101 cases). Young children are particularly vulnerable due to their limited understanding of body autonomy and self-protection. Therefore, early reproductive health education is essential. Mothers, as primary educators, play a significant role, yet many still view this topic as taboo and lack adequate knowledge.

Objective: To determine the level of maternal knowledge regarding reproductive health education for early childhood at Among Siwi Kindergarten, Gamping Subdistrict, Sleman Regency, in 2025.

Methods: This descriptive study employed a cross-sectional design. A total of 110 mothers of students enrolled at Among Siwi Kindergarten were selected through purposive sampling. Data were collected using a closed-ended questionnaire based on the Guttman scale and analyzed using univariate methods.

Results: Most mothers demonstrated a good level of knowledge (50.9%), followed by a moderate level (32.7%) and a poor level (16.4%). The majority of mothers were aged 31–40 years (53.6%), had a secondary level of education (60.9%), and were unemployed (58.2%).

Conclusion: The majority of mothers possessed good knowledge regarding reproductive health education for early childhood.

Keywords: Early childhood, Mothers, Reproductive health education, Knowledge level, Kindergarten

INTRODUCTION

UNICEF reports that out of 190 countries worldwide, approximately 60% of children have experienced some form of physical, social, or psychological abuse, with an estimated 120 million children becoming victims of sexual violence. Alarmingly, only 39 countries have adequate legal frameworks in place to protect children from such abuse. In Indonesia, the Indonesian Pediatric Society (Ikatan Dokter Anak Indonesia/IDAI, 2018) notes that the majority of child sexual abuse occurs within the home environment, accounting for 48.7% of reported cases. The prevalence of child sexual abuse in Indonesia continues to rise each year. According to the Gender and Child Information System (Sistem Informasi Gender dan Anak/SIGA) under the Ministry of Women's Empowerment and Child Protection (Kemen PPPA), 8,730 cases were reported in 2021, increasing to 9,588 in 2022, and further to 10,932 in 2023—reflecting an average annual increase of 12%. This trend suggests that the issue remains insufficiently addressed. In the Yogyakarta region, reported cases fluctuated, with 237 in 2021, 325 in 2022, and 265 in 2023. Notably, Sleman Regency recorded the highest number of cases in 2023, with 101 reports—an increase from previous years (Kemen PPPA, 2023).

Perpetrators of child sexual abuse are often individuals known to the victims, including family members. One of the primary contributing factors is children's limited knowledge and lack of skills to identify and resist inappropriate sexual behavior. Simultaneously, many parents still regard discussions about sexuality as taboo and are reluctant or uncomfortable to address such topics with their children (Santi, 2022). Several factors influence parental hesitancy, such as the belief that sexuality is an inappropriate subject for children, concerns about negative effects, and uncertainty about how to convey the information correctly. In many cases, parents overreact when children ask

questions about sexuality, potentially increasing confusion and misinformation (Ritonga, 2022; Gandeswari, 2020; Rakhmawati, 2023). Parental involvement—particularly that of mothers—plays a critical role in providing early childhood sex education. Mothers often have stronger emotional bonds with their children, positioning them as key figures in delivering appropriate information.

When mothers serve as the primary educators on reproductive health and sexuality, it can function as an important early preventive measure against potential sexual abuse (Renteng, 2023).

Among Siwi Kindergarten, located in Gamping Subdistrict, Sleman Regency, is an institution that emphasizes character building and local cultural values. However, the school has not yet formally implemented a Child-Friendly School (Sekolah Ramah Anak/SRA) policy. The absence of a holistic approach that incorporates principles of child protection, respect for children's voices, and a safe learning environment remains a barrier to effective prevention of sexual abuse. Preliminary interviews with several mothers of students at Among Siwi Kindergarten revealed that while most of them acknowledged the importance of early sex education, many lacked confidence and felt unprepared to provide it due to limited knowledge. Consequently, they often relied on teachers, whom they perceived as more capable.

Given the increasing prevalence of child sexual abuse and the evident lack of parental readiness in delivering sex education, further research is essential. Therefore, this study aims to explore the level of mothers' knowledge regarding reproductive health education for early childhood at Among Siwi Kindergarten, Gamping Subdistrict, Sleman, as an initial step toward assessing maternal awareness and the potential for early preventive education.

RESEARCH METHODOLOGY

Table 1. Frequency distribution of mothers based on age, education level, and employment status

<u>Characteristics</u>	<u>Frequency (n)</u>	<u>Percentage (%)</u>
Mother's Age		
21–30 years	26	23.6
31–40 years	59	53.6
>40 years	25	22.8
Total	110	100.0
Mother's Education Level		
Higher Education (Diploma, Bachelor's, Master's, Specialist, Doctoral)	27	24.5
Secondary Education (Senior High School/MA/Vocational School)	67	60.9
Basic/Lower Education (Primary School, Junior High School/MTs)	16	14.6
Total	110	100.0
Mother's Employment Status		
Employed	46	41.8
Unemployed	64	58.2
Total	110	100.0

Based on Table 1, a total of 110 mothers from Among Siwi Kindergarten participated in this study. Regarding age distribution, the majority of respondents were between 31–40 years old (53.6%). In terms of educational attainment, most mothers had secondary education (60.9%). Concerning employment status, more than half were unemployed (58.2%).

Mothers aged 31–40 are generally in a stage of cognitive maturity, characterized by more stable thought patterns and emotional stability, which positively influences their ability to absorb and comprehend information—including reproductive health education (Learning, 2024). Higher levels of education have been shown to enhance individuals' capacity to understand and access health-related information. This finding is consistent with Efendi (2020), who emphasizes that education plays a vital role in shaping knowledge and critical thinking skills. Unemployed mothers tend to exhibit lower levels of knowledge. Although they may have more time at home, limited access to information and a narrower social environment may hinder their exposure to issues related to sex education (Zolekhah & Barokah, 2021; Prabandani, 2018).

Table 2. Frequency distribution of mothers' knowledge regarding reproductive health education in early childhood

Category	Frequency (n)	Percentage (%)
Good	56	50.9
Fair	36	32.7
Poor	18	16.4
Total	110	100.0

Based on Table 2, half of the mothers (50.9%) demonstrated a good level of knowledge regarding reproductive health education for early childhood. This indicates growing literacy and awareness of the importance of a mother's role in providing such education. Mothers with adequate knowledge tend to be more confident and responsive when their children ask questions related to reproductive topics (Rakhmawati et al., 2023).

However, analysis of specific questionnaire items revealed that a number of mothers still hold misconceptions about reproductive health education. For example, 66% of mothers answered incorrectly regarding the statement that reproductive health education is better delivered by mothers—despite the fact that mothers are the primary educators due to their emotional closeness with their children (Nurmansyah et al., 2024). In addition, 78% of respondents believed that reproductive health education for children aged 0–6 years can only be taught through stories or games, while in reality, direct conversations, daily routines, and visual media can also serve as effective educational tools (Wibisono, 2018). Another widespread misconception was identified among 79% of mothers, who stated that young children do not need to understand the difference between male and female restroom functions. In fact, this knowledge is a critical component of early privacy education and self-protection (Wibisono, 2018).

Table 3. Frequency distribution of knowledge level regarding reproductive health education based on mothers' characteristics

Characteristic	Knowledge Level							
	Good		Fair		Poor		Total	
	f	%	f	%	f	%	f	%
Mother's Age								
21-30 years	9	34,6	9	34,6	8	30,8	26	100
31-40 years	33	55,9	20	33,9	6	10,2	59	100
>40 years	14	56,0	7	28,0	4	16,0	25	100
Education Level								
Higher Education	19	70,4	7	25,9	1	3,7	27	100
Secondary Education	32	47,8	22	32,8	13	19,4	67	100
Basic/Lower Education	5	31,3	7	43,7	4	25,0	16	100
Employment Status								
Employed	23	50,0	17	37,0	6	13,0	46	100
Unemployed	33	51,6	19	29,7	12	18,7	64	100

Table 3 also shows that the highest proportion of poor knowledge was found among mothers aged 21–30 years (30.8%). In contrast, the highest proportion of good knowledge was observed in mothers with higher education levels (70.4%). Additionally, the proportion of poor knowledge was greater among unemployed mothers (18.7%) compared to those who were employed.

These findings suggest that younger mothers, particularly those aged 21–30, tend to have lower levels of knowledge about reproductive health education. This may be because they are still adapting to their roles as parents and have not yet prioritized reproductive health issues in child-rearing. Conversely, mothers aged over 30 are generally more psychosocially mature and have broader life experiences, which contributes to better understanding and knowledge acquisition (Learning, 2024; Paudia, 2021).

Educational background also showed a significant influence on mothers' knowledge levels. Mothers with higher education were more likely to possess good knowledge due to wider access to information, higher literacy skills, and more open-minded attitudes toward child reproductive health topics. They are also more accustomed to attending educational sessions and seeking information from multiple sources (Sarasati & Cahyati, 2021; Khotimah & Zulkarnaen, 2021).

Furthermore, unemployed mothers tended to have lower knowledge levels. Limited social interaction and restricted access to information may contribute to their lack of awareness of reproductive health issues. On the other hand, employed mothers are more likely to be exposed to health-related information through their work and social environments, making them better prepared and more confident in delivering reproductive health education to their children (Zolekhah & Barokah, 2021; Prabandani, 2018).

RESULTS AND DISCUSSION

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CONCLUSION AND RECOMMENDATIONS

This study found that the majority of mothers at Among Siwi Kindergarten were aged 31–40 years, had secondary education, and were unemployed. In general, mothers' knowledge of reproductive health education for early childhood was categorized as good. However, poor knowledge was more commonly found among mothers aged 21–30 years and among those who were not working, while higher educational attainment was associated with better knowledge.

Based on these findings, it is recommended that schools provide educational materials such as leaflets or short videos, and involve teachers in parental counseling sessions. Mothers are also encouraged to participate in community-based activities such as *posyandu* (integrated health service posts) to enhance their understanding. Future research should explore other influencing factors, such as access to information, media exposure, and the social environment, that may affect mothers' knowledge regarding reproductive health education.

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