

Morality, Law and Health: A Critique of the Legality of Device Service Provision Contraception for Teens



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ABSTRACT: This study analyzes the legality of providing contraceptives for adolescents based on Government Regulation No. 28 of 2024 on the Implementation of Law No. 17 of 2023 on Health. A normative juridical approach is used to evaluate this policy in the context of adolescent reproductive health, which involves legal, moral, and normative aspects of Indonesian society. The results show that the provision of contraceptives for school-age and teenagers is not the main solution to address the high rate of teenage pregnancy. Instead, the root of the problem lies in the lack of education and understanding related to reproductive health. This policy also has the potential to normalize early marriage, which has a negative impact on the physical, psychological, and social health of adolescents. This study recommends massive reproductive health education that must be carried out comprehensively and integratively as the main solution to reduce teenage pregnancy rates and promote the welfare of the younger generation.

KEYWORDS: reproductive health; contraceptives; adolescents.

I. INTRODUCTION

Adolescents are the nation's assets, future leaders, and the next generation of the nation in the future. According to WHO (*World Health Organization*), the age range of adolescents is 10-19 years, some also mention that the age range of adolescents starts at the age of 12 years and ends at 22 years. In the period of human development, adolescence is a transitional period from childhood to adulthood. Adolescence is characterized by rapid changes, both in physical growth, psycholog/psychosocial, cognitive, and hormonal. In terms of the main physical growth process, it is related to the reproductive organs, while in psychosocial/psychological growth it is related to changes in cognitive, emotional, social, and moral aspects (Indonesian Ministry of Health, 2020). Based on data from the Central Statistics Agency (BPS) in 2019, adolescents are the highest population in Indonesian society. There were 64.19 million people (24.01%), including 50.78% adolescent boys and 49.22% adolescent girls.¹

Adolescence is synonymous with the phase of searching for self-identity or identity, so adolescents will learn a lot and take influence through their social circle. These influences have both positive and negative *impacts on* individuals. A great sense of curiosity and the beginning of exploration of things related to sexuality and romanticism, love challenges, and are more willing to take risks that are sometimes without prior consideration. Maturity is a characteristic of adolescence. If adolescents fail to interpret, search, and find their identity, there will be deviant behavior by committing criminal acts or isolating themselves from society. Many adolescents engage in behavior that deviates from the values and norms prevailing in society, such as risky sexual behavior.

Sexual behavior is said to be risky if the sexual behavior is detrimental or results in unexpected things, such as abortion, unwanted pregnancy (KTD), sexually transmitted diseases (STDs), and *free sex*. Based on the 2019 Program Accountability Performance Survey (SKAP 2019), in Indonesia every year an estimated 17.5% of the number of female pregnancies experience pregnancies.² Unintended pregnancies in women outside marriage in Indonesia often occur between the ages of 12-18 years. These pregnancies result in complications during pregnancy and childbirth and are the leading cause of death for adolescent girls aged 15-19 years.³ Other adverse effects of unintended pregnancy include delayed antenatal care, poor birth outcomes, psychosocial stress, and mental health. *Unintended pregnancy has a double burden because of pregnancy's physiological changes*

¹ and Putri Azzahroh Kiki Rizky Anggraini, Rosmawati Lubis, "The Effect of Educational Videos on the Knowledge and Attitudes of Early Adolescents About Reproductive Health," *Menara Medika* 5.1 (2022) p. 109–120.

² <https://kampungkb.bkkbn.go.id/kampung/51483/intervensi/727014/kegiatan-penyuluhan-cegah-pregnancy-unwanted-to-pus>

³ and Aning Subiyatin Putri Salmah Fauziah, Hamidah Hamidah, "Unwanted Pregnancy in Adolescence," *Muhammadiyah Journal of Midwifery* 3.2 (2022) p. 53.

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and the absence of a conception plan.⁴ Unintended pregnancy among adolescents at 11% of global births is a problem in low- to middle-income countries⁵ and as many as 10 million adolescent girls according to WHO (*World Health Organization*) experience unintended pregnancies in developing countries every year.

Pregnancy in adolescents has a great risk and higher medical risk because of the immaturity of the reproductive organs to conceive, thus endangering the health and safety of the mother and fetus.⁶ Pregnancy in adolescents can be Intrapartum complications, premature birth, low birth weight (LBW), and birth defects are causes of neonatal mortality and are a risk for babies born to mothers under the age of 20. Childbirth in adolescence also carries risks for the mother, with complications higher than those of mothers of ideal age. Complications that often occur include gestational diabetes, gestational hypertension, anemia, under-term labor, and others.

Adolescent reproductive health includes risky sexual behavior, including premarital sex that results in unwanted pregnancy (KTD), sexual behavior of changing partners, illegal abortion, and behavior at risk of contracting sexually transmitted infections (STIs).⁷ The issue of adolescent reproductive health is a crucial problem that must be resolved comprehensively and integratively. One of the factors in the emergence of adolescent problems in Indonesia today is the low level of knowledge of adolescents about health production. For example, the rise of *free behavior sex* or premarital sex in adolescents is a serious problem because of low contraceptive use.⁸ The main reason for not using contraceptives is the lack of knowledge about pregnancy risks⁹ and side effects of contraceptive use.¹⁰

In order to address the issue of adolescent reproductive health as a preventive measure, the Government issued PP No. 28 of 2024 on July 26, 2024 as an implementing regulation for Law No. 27 of 2023 on Health. In addition, the main objective of the establishment of Government Regulation No. 28 of 2024 on the Implementation Regulation of Law No. 17 of 20203 on Health is to strengthen promotive services. These promotive services include reproductive health for adolescents as stipulated in Part Four on Reproductive Health Articles 96-130. The issuance of this regulation aims to to provide comprehensive information on reproductive health, including the provision of contraceptives.

The provision of contraceptives for school-age children and adolescents has sparked pros and cons among the community. Although the use of contraceptives is one of the main strategies to reduce the number of unwanted pregnancies (KTD) and birth rates, the provision of contraceptives needs to be studied further if it is intended for school age and adolescents. The legality of the provision of contraceptives for school age and adolescents through PP No. 28 of 2024 raises concerns for the author about the misuse of contraceptives by Indonesian teenagers, given the lack of education and knowledge related to the risks of pregnancy the side effects of using contraceptives. In order to avoid misperceptions between regulations and public understanding, it is necessary to intensify education related to reproductive health first.

Based on the above background, the author is interested in further examining the legality of providing contraceptives for school children and adolescents in the health aspect without ignoring the morals, values, and norms in Indonesian society. This paper aims to analyze and criticize Government Regulation No. 28 of 2024 in the context of providing contraceptives for school-age children and adolescents (Article 103 paragraph (4) letter e).

II. RESEARCH METHODS

This research uses the normative juridical method, which is a research method that focuses on analyzing the applicable written law, namely Government Regulation No. 28 of 2024 concerning Implementing Regulations for Law No. 17 of 2023 concerning Health. This approach was chosen because the topic discussed relates to criticism of the provision of contraceptives for adolescents, which is closely related to legal regulations, moral values, and norms that develop in society.

⁴ and Dongre Amol R Madhivanan Arulmohi, Venugopal Vinayagamoorthy, “*Physical Violence Against Doctors: A Content Analysis from Online Indian Newspapers*,” *Indian Journal of Community Medicine* 42.1 (2017).

⁵ J. Sychareun, V., Vongxay, V., Houaboun, S., Thammavongsa, V., Phummavongsa, P., Chaleunvong, K., Durham, “*Determinants of Adolescent Pregnancy and Access to Reproductive and Sex Health Services for Married and Unmarried Adolescents in Rural Lao PDR: A Qualitative Study*. *BMC Pregnancy and Childbirth*” (n.d.).

⁶ E. Cindrya, “*Knowledge about Teenage Pregnancy among Parents of Early Childhood in Muara Burnai Ii Village Oki Regency, South Sumatera*. *Raudhatul Athfal*,” *Journal of Early Childhood Islamic Education* 3.1 (2019) p. 66–82.

⁷ Neneng Rika J K et al., "Abstract: This research aims to find out the role of teachers in building students' critical thinking patterns using group discussions. The background of this research is the existence of a teacher's role, one of which is as a Yan Motivator" (n.d.): 1-7.

⁸ S. H. Martino, S. C., Elliott, M. N., Collins, R. L., Kanouse, D. E., & Berry, “*Virginity Pledges Among the Willing: Delays in First Intercourse and Consistency of Condom Use*” *Journal of Adolescent Health* 44.2 (2019) p. 128–136.

⁹ Drake AL Dev R, Kohler P, Feder M, Unger JA, Woods NF, “*A Systematic Review and Meta-Analysis of Postpartum Contraceptive Use among Women in Low- and Middle-Income Countries*” *Reprod Health* 16.154 (2019).

¹⁰ Matahari R Laksono AD, Wulandari RD, “*The Association between Recent Sexual Activity and the Use of Modern Contraceptive Methods among Married/Cohabiting Women in Indonesia*,” *J Public Health Res* 9 (2020) p. 1885.

III. DISCUSSION

A. The Urgency of Providing Contraceptiva Services for Adolescent

Indonesia has the 4th largest population in the world after China, India, and America. Based on data from the Central Bureau of Statistics (BPS), in 2023 the population of Indonesia was recorded at 278,696.2 and increased to 281,603.8 in 2024.¹¹ Population growth can be determined from birth and death rates. The high birth rate is the main factor. The need for and even the promotion of family planning (KB) programs through the use of contraceptives.

The Indonesian government officially ratified Government Regulation No. 28 of 2024 on the Implementing Regulations of Law No. 17 of 2023 on Health at the end of July 2024. Regulations related to reproductive health efforts for school age and adolescents are regulated in Article 103, as written in paragraph (1). Reproductive health efforts for school age and adolescents are at least in the form of providing communication, information, education, and reproductive health services. The provision of communication, information, and education at least contains (Article 103 paragraph (2)):

1. reproductive systems, functions and processes;
2. maintaining reproductive health;
3. risky sexual behavior and its consequences;
4. family planning;
5. protect themselves and be able to refuse sexual intercourse; and
6. selection of age-appropriate entertainment media for children.

While in terms of reproductive health services for school age and adolescents include (Article 103 paragraph (4)):

1. early detection of disease or screening;
2. Treatment;
3. rehabilitation;
4. counseling; and
5. provision of contraceptives

Based on Government Regulation No. 28 Year 2024, the provision of contraceptives is one of the reproductive health efforts for school age and adolescents. Contraception is a fertility regulation used to prevent pregnancy or sexually transmitted diseases. Acting Head of the Ministry of Health's Bureau of Communication and Public Services Siti Nadia Tarmizi said that the provision of contraceptives is not to prevent pregnancy for unmarried teenagers, but contraceptives for couples of childbearing age (PUS). Spokesperson for the Ministry of Health (Kemenkes RI),¹² Mohammad Syahril emphasized that the provision of contraceptives is not intended for all teenagers, but only for married teenagers. The provision and use of contraceptives is also considered one of the main strategies to reduce the number of unwanted pregnancies and births.

Pregnancy that occurs between the ages of 11-22 years is called teenage pregnancy or early pregnancy. The Basic Health Research (Riskasdas, 2018) recorded that 58.8% of Indonesian adolescent girls aged 10-19 years had been pregnant and 25.2% were pregnant, with the largest proportion occurring in rural areas (Kemenkes RI, 2018). The facts found in the study said that the causes of teenage pregnancy are low knowledge about reproductive health, access to social media about pornography, parenting, and behavior. sexual peers,¹³ as well as the lifestyle and behavior of *free premarital sex* that leads to unwanted pregnancy.¹⁴ Unwanted pregnancy in adolescents can lead to abortion and early marriage. Adolescent girls who experience unwanted pregnancies will rack their brains looking for ways to deal with their pregnancies and often the way taken by adolescents with unwanted pregnancies is to get married or abort the pregnancy.

These unwanted pregnancies (KTD) also have a negative impact on the mother and the fetus as well as the future of adolescents. In terms of physical health for the baby, such as premature birth due to the immaturity of the reproductive organs and the unpreparedness of *the uterus* of the mother's pregnancy process, and the baby will experience low birth weight (BBLR) due to malnutrition during pregnancy and the mother's age which is far from ideal numbers. Meanwhile, the impact on adolescents in terms of psychological health is that adolescents will experience *pressure*, regret, and shame because of their pregnancy if they do not receive support from their social environment.¹⁵ In this condition, adolescents will also be disadvantaged by dropping out of school. Adolescent girls will drop out of school/formal education during pregnancy due to shame or physical weakness and adolescent boys who do not have a proper job to support their families. This leads to a lack of socio-economic capacity which will have a negative impact or threat to the adolescent's welfare and future.

¹¹ <https://www.bps.go.id>

¹² <https://www.menpan.go.id/site/berita-terkini/berita-daerah/pp-28-2024-fokus-pada-kesehatan-reproduction-teenagers-who-are-married>

¹³ Dartiwen Dartiwen and Mira Aryanti, "Analysis of Factors Causing Unintended Pregnancy in Adolescents," *Journal of Nursing and Midwifery* 15.1 (2024) p. 21–29.

¹⁴ and Is Susiloningtyas Azahra Nur Fadilah, Endang Surani, "The Relationship between Adolescent Knowledge and Pregnancy" 5.9 (2024) p. 6368–6378.

¹⁵ S. S. T. M. K Dartiwen, *Textbook of Midwifery Care in Adolescents and Perimenopause*, 2022.

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Based on the description of the research results above, the author concludes that the provision of contraceptives for school age and adolescents is not the answer to the problem of teenage pregnancy. Teenage pregnancy occurs due to several factors and the data states that the biggest factor is the factor of knowledge and education that affects the occurrence of teenage pregnancy, which is 66.7%.¹⁶ Teenage pregnancy or early pregnancy can be prevented, the main thing is if adolescents have the right knowledge. Low knowledge and understanding of teenage pregnancy or contraceptive use can have a negative impact on adolescents. Low levels of knowledge and understanding related to reproductive health and sexuality result in misperceptions, risky sexual behavior, and unwanted pregnancy (KTD). If adolescents have good and correct knowledge and understanding of reproduction and sexuality, it can help reduce the risk of unwanted pregnancy.¹⁷

If the government thinks that the provision of contraceptives for school-age and teenagers is intended only for married teenagers, then the government is indirectly normalizing early marriage. While early marriage has risks for adolescents, such as dropping out of school, disrupting reproductive health, divorce at a young age, domestic violence. Early marriage will also have a negative impact on physical psychology. Lack of knowledge and understanding makes a person decide to marry early without knowing the consequences of early marriage.¹⁸

B. A Critique of the Legality of Providing Contraception to Teenagers

Indonesia as a transcendental law state,¹⁹ which means that the law reproduced through the supra and infra-structure institutions of the state should be imbued with Divine values. We can simplify that neither the constitution nor legislation should contradict the value of divinity. Concerns about contraceptive misuse in school-age and adolescents are fundamental. Given the low level of knowledge related to reproductive health in adolescents. Low knowledge will lead to misperceptions that will adversely affect adolescents. This means that the government has failed to provide the right solution to the problem of pregnancy. teenagers. Supported by facts and data, the cause of teenage pregnancy is due to lack of sex education and the influence of friends.²⁰

In a journal written by Putri Nerendra, a conservative society often views contraceptive use negatively. This is a factor in adolescents feeling pressured to adjust to this view. This assumption is not sufficiently justified if it is used as a basis to support the legality of providing contraceptives for school age and adolescents. In a country of law that adheres to the value of divinity, both the value of divinity written in the Holy Scriptures, as well as the value of divinity inherent in nature, it is a logical consequence that the position of man-made law (positive law) must not conflict with the value of divinity. Materials for building laws can be in the form of customary law values, religious law values that have divine values in them, and international law values.

Samuel Huntinton said that religion is the main determinant of the rise and fall of a human civilization, including in the nation and state. A legal state with a high civilization upholds religious teachings, not a secular legal state. Indonesia is a moral country, including religious morals that become *rules* in running the life of the nation and state. Islam as the majority religion in Indonesia is of the view that the use of contraceptives is permissible as long as the purpose is not to limit, prevent, and eliminate births. The use of contraceptives is only allowed if it is aimed at regulating the birth rate or spacing pregnancies and giving birth too quickly. However, if the use of contraceptives is aimed at eliminating birth (permanent) then it is clearly haram/sinful because it is considered to surpass fate and these conditions will more easily lead to adultery.²¹ While in the moral judgment of the Catholic church, the development of Christian understanding of sexual ethics is based on the Holy Scriptures in the Old Testament, the main basis related to contraception is the story of Onan (Genesis 38: 8-9). Onan refused to provide offspring for his brother by practicing *coitus interruptus*, which was considered evil in the eyes of God. This act is seen as "contraception" which the storyteller rejects. In the New Testament there is no It discusses contraception specifically, but teaches that marriage is a good thing. Jesus affirmed teachings 1 and 2 on marriage as a divine design (Mk 10:7-8; Mt 19:4-6; Jn 2:1- 12). Luke records Jesus' stance against a second marriage after divorce (Lk 16:18). Paul's letters and other texts provide guidance for husbands and wives (Eph 5:25-33) and touch on the themes of virginity, marriage, sexual relations, and sin (1Cor 7-10; Rom 1:24-27). These teachings form the basis of Catholic doctrine on contraception, which considers any act that hinders procreation to be contrary to the divine will.²² Different nations have different legal systems.²³ These nations have different traditions and values. Traditions and customs

¹⁶ and Afnani Toyibah Desy Ningrum, Gumarti, "Factors of Teenage Pregnancy," Makassar Health Polytechnic Health Media 16.2 (2021) p. 362–368.

¹⁷ I.D. etc al. Ayulni, "The Relationship between Adolescent Girls' Knowledge of the Dangers of Pregnancy In" (2022) p. 47–52.

¹⁸ A.N Aminatulssyadiah, A., Wardani, S.F.P. and Rohmah, "Meldia Information and Education Level Associated with Adolescent Pregnancy in Indonesia," Journal of Midwifery 9.2 (2020) p. 173.

¹⁹ Suteki, *Law and Society* (Yogyakarta: Thafa Media, 2021).

²⁰ and Argya Kalyca Maryam Nina Yusnia, Amanda Putri Adisti, "Factors Influencing Pregnancy in Adolescents in Independent Midwife Practice at Midwife Ganik, STr. Keb Bogor City" 13.1 (2023) p. 127–133.

²¹ and Dyna Prasetya Septianingrum Zamzam Mustofa, Nafiah Nafiah, "The Law of Using Contraceptives in the Islamic Perspective," MA'ALIM: Journal of Islamic Education 1.2 (2020) p. 85–103.

²² Yohanes Sudaryanto, "Regulating Birth in a Catholic Moral Perspective," Journal of Theology 4 (2015) p. 41–56.

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born from a certain community of life are constructed more naturally than laws.²⁴ These traditions are not easy change through the use of modern law with the spirit of individualism and autonomy. It is not uncommon for modern law to create problems when dealing with local law. The emergence of problems in the country or nation is a consequence of the use of modern law that developed within and from a particular community that is different from its own.

A nation's cosmology affects its legal products. The cosmology of the European nation is certainly different from the cosmology of the Indonesian nation. The cosmology of Europe, which is thick with traditions, values, and individual and liberal culture, gave birth to laws that have the same character. People in individualistic lives and thoughts are detached and released from things that are contextual (the context of the community). This character and cosmology is completely different from the Indonesian nation which has a strong tendency to live collectively and communally and does not separate a person from the social context in which he or she is located. However, the reality is that modern law in Indonesia is a law imported from outside and imposed from outside. The hegemonic spirit of modern law, which is liberal in character, will not allow for other forms of legal order except those legitimized by the state. Modern law considers that only the state has the autonomy to give birth to law, with its nature of forcing people to comply with the law. submit to what has been written by the state through its authorized bodies.

The law does not fall from the sky, but rather proceeds along with the pace of the dynamics of its society and even the law has manifested as patterned behavior with certain constancy along with changes in society. According to Esmi Warrasih, legal development in Indonesia is based on three basic materials, namely Islamic law, customary law, and modern law.

Reproductive health cannot be separated from the social and cultural context that influences the behavior of adolescents, so that every regulation that is born must use a comprehensive and integrative approach. Moreover, Indonesia is a God-fearing country, which in the formation and application of its laws should not ignore, let alone be separated from the aspects of values, morals, and norms that exist in society. Satjipto Rahardjo in his book *Progressive Law Enforcement* (2010) says, that the law can only run effectively if there is a harmony of legal understanding between the law maker and the community.²⁵

Based on the description above, the author can conclude that the provision of contraceptives for school age and adolescents legitimized by PP No. 28 of 2024 concerning Implementation Regulations of Law No. 17 of 2023 concerning Health is not a solution to the problem of teenage pregnancy. By legitimizing the provision of contraceptives for school age and adolescents, it will have a more negative impact on the future of adolescents themselves. Because it can be drawn a red thread that the cause of adolescent problems related to reproductive health does not lie in teenage pregnancy. Teenage pregnancy is the result of the main causative factor, namely the lack of knowledge and understanding of adolescents related to reproductive health. And in legal politics, the purpose of positive law reform is about making laws that are much better and in accordance with the central socio-political, socio-philosophical, socio-cultural values of Indonesian society.²⁶ The government's alibi that says that the provision of contraceptives is intended for married teenagers shows that the Indonesian government does not understand the fundamental problems experienced by teenagers and also does not understand the needs of teenagers. For the author, the main milestone in preventing teenage pregnancy and birth rates is to intensify education and understanding related to reproductive health. If the provision of knowledge and understanding related to Reproductive health is not yet owned by every Indonesian teenager, so do not be surprised if the use of contraceptives will actually become a new problem for the future of adolescents.

IV. CONCLUSIONS

Based on the analysis in this study, the provision of contraceptives for school-age children and adolescents legitimized through Government Regulation No. 28 of 2024 on the Implementation of Law No. 17 of 2023 on Health cannot be considered as the main solution in overcoming the problem of teenage pregnancy. The fundamental cause of the high rate of teenage pregnancy is the lack of education and understanding of reproductive health, not merely the availability of contraceptives.

Legitimizing the provision of contraceptives for adolescents, especially for those who are married, has the potential to normalize early marriage. This can lead to negative impacts, including school dropouts, reproductive health problems, early divorce, and domestic violence. The policy also risks creating misuse of contraceptives due to adolescents' low knowledge about their use. In the context of legal politics in Indonesia, laws should reflect the moral, social and cultural values of the society based on Pancasila. A more appropriate solution to address adolescent reproductive health issues is through a comprehensive and integrative educational approach. Education on reproductive health that is in accordance with the moral values and norms of Indonesian society can help prevent risky sexual behavior, unwanted pregnancy, and other negative impacts for adolescents.

²³ D. S. Gozali, *Introduction to Comparison of Legal Systems (Civil Law, Common Law, and Customary Law)*, E-Journal Komunitas Yustisia Ganesha University of Education (2020).

²⁴ Satjipto Rahardjo, *The Science of Law, Ed. Awaludin Marwan, 3rd Printing* (Semarang: PT. Citra Aditya Bakti, 2012).

²⁵ Satjipto Rahardjo, *Progressive Law Enforcement*, PT. Kompas Media Nusantara.

²⁶ Barda Nawawi Arief, *Bunga Rampai Kebijakan Hukum Pidana: The Development of the New Criminal Code Draft, 3rd Printing* (Prenadamedia Group, 2016).

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The government needs to better understand the fundamental problems experienced by adolescents and align policies with their real needs. By intensifying adequate reproductive health education, the government can create a generation of adolescents who are more informed, responsible, and able to face reproductive health challenges independently and wisely.

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