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The Role Of Religion- And Ethics-Based Education In Female Islamic Boarding School Students' Understanding Of Personal And Reproductive Health

Kurniati
Department of Medicine, Faculty of Medicine and Health Sciences, Mataram University, West Nusa Tenggara, Indonesia

*Corresponding Author
E-mail: kurniati28bintii@gmail.com

Abstract

Adolescence is an important developmental period characterized by biological, psychological, and social changes, including reproductive development. Adequate understanding of personal and reproductive health is essential for adolescents to maintain personal hygiene, understand biological changes, and make responsible health-related decisions. In Islamic boarding schools, religious and ethical education constitutes an integral part of daily life and may contribute to the development of female students' understanding and health-related behaviors. This literature review aimed to examine the role of religion- and ethics-based education in shaping female students' understanding of personal and reproductive health. A narrative literature review was conducted using relevant literature addressing religious education, ethical education, adolescent reproductive health, and reproductive health education in Islamic boarding schools. The reviewed literature included research articles, community service publications, and relevant academic sources. The review indicates that religion- and ethics-based education may contribute to reproductive health understanding through fiqh education, Islamic ethics and morality, tarbiyah, female-oriented education, clean and healthy living practices, as well as guidance and role modeling by teachers and caregivers. Integrating religious values with scientifically accurate reproductive health information may help female students understand personal hygiene, menstruation, puberty, and responsibility for their bodies as part of moral and religious values. However, limited access to reliable information, cultural taboos, reluctance to discuss reproductive health, and limited availability of trained educators remain challenges. Integrating evidence-based reproductive health education with religious and ethical values is therefore necessary to develop comprehensive and contextually appropriate understanding among female students in Islamic boarding schools.

Keywords: Religious Education; Ethical Education; Reproductive Health; Female Students; Islamic Boarding School; Adolescents.

INTRODUCTION

Adolescence is a transition period characterized by biological, psychological, and social changes. In this phase, there is the development of reproductive organs and changes in secondary sexual characteristics that require adjustment from adolescents, both physically and psychologically. These changes make adolescence an important period to obtain appropriate health information and education, especially regarding personal and reproductive health (Izzani et al., 2024).

Reproductive health in adolescents is not only related to the condition of the reproductive organs, but also includes adolescents' ability to understand body changes, maintain personal hygiene, understand menstruation, recognize abnormal conditions, and make decisions that are responsible for their health. Good understanding from adolescence can be the basis for the formation of positive health behaviors in the future (Fatmawati et al., 2024).

One of the important aspects of adolescent girls' reproductive health is menstrual hygiene. Menstruation is a physiological process experienced by women, but it is still often accompanied by various myths, shame, and limited information. Lack of knowledge can cause adolescents to carry out improper menstrual hygiene practices. Amanda and Ariyanti (2020) in a study on students at Islamic boarding schools showed that menstrual hygiene behavior is still a problem that needs attention. This condition shows the importance of health education that can increase knowledge while forming appropriate menstrual hygiene behaviors (Amanda & Ariyanti, 2020).

Reproductive health problems in adolescents are also related to limited access to reliable information. Adolescents can obtain information from family, peers, schools, health workers, and

digital media. Although digital media provides broad access to information, not all available information has a scientific basis that can be accounted for. Therefore, adolescents need to have the ability to understand, select, and evaluate the health information obtained (Kartika & Samaria, 2021).

This condition becomes even more interesting when placed in the environment of an Islamic boarding school. Pesantren is an educational institution that not only provides academic education, but also religious, moral, ethical, and character formation education. The life of students that takes place in a structured environment allows the educational process to occur not only through formal learning, but also through habituation, example, social interaction, and the rules of daily life (Herlina, 2022).

Religious education in Islamic boarding schools can be one of the relevant approaches to provide an understanding of reproductive health. Fiqh materials, for example, have discussions related to menstruation, taharah, uncleanness, mandatory bathing, and personal hygiene. Thus, some aspects of reproductive health actually have a space in religious education provided to students (Fitri et al., 2025).

The integration between religious education and reproductive health is important because reproductive health information can be conveyed through an approach that is in accordance with the values and culture of the pesantren environment. Fitri et al. (2025) show that women's fiqh learning can be associated with the maintenance of adolescent reproductive health, especially in the understanding of menstruation and reproductive hygiene. This approach can help students understand reproductive health not only from a biological aspect, but also from the perspective of religious values (Fitri et al., 2025).

In addition to religious education, ethics education has a role in shaping the behavior of students. Ethical education is related to the formation of attitudes, responsibilities, discipline, and the ability of individuals to apply knowledge in daily life. Education that is only oriented towards knowledge transfer does not necessarily produce appropriate behavior if it is not accompanied by the formation of values and habits (Daryanto & Ernawati, 2024).

The concept of Islamic education developed by Syed Muhammad Naquib Al-Attas emphasizes the importance of ta'dib or the cultivation of adab in education. According to Putri et al. (2023), Al-Attas' thinking places adab, science, ta'lim, and tarbiyah as important parts in forming knowledgeable and civilized human beings. In the context of reproductive health, the concept can be associated with the formation of a responsible attitude towards the body, personal hygiene, and the ability to apply health knowledge in accordance with moral and religious values (Putri et al., 2023).

The pesantren environment also provides opportunities to form behavior through habituation. The life of students carried out together allows for rules regarding environmental cleanliness, personal hygiene, discipline, and social interaction. The habituation process can be part of health education indirectly. Pesantren-based character education is known to take place not only through classroom learning, but also through culture and daily life in the pesantren environment (Firdaus & Fauzian, 2020).

The role of caregivers and ustadzah is also important in providing information and being an example for students. Caregivers can be the party who provides explanations when students experience problems related to menstruation or reproductive health. Support from the pesantren environment can also help create an atmosphere that allows students to obtain information without feeling embarrassed or afraid to ask questions (Ardhiyanti & Rosita, 2021). However, discussions about reproductive health can still be considered sensitive. Shame and the assumption that talking about reproduction is taboo can cause adolescents to not open up when they need information. This condition can cause adolescents to seek information from peers or the media that is not necessarily in accordance with the correct health knowledge (Kartika & Samaria, 2021).

Therefore, reproductive health education for students needs to be developed through a comprehensive approach. This approach not only provides biological information, but also integrates religious values, ethics, character building, daily experiences, and environmental support. Reproductive health education that is integrated with religious values can be a more contextual

approach for students because it is in accordance with the educational system and culture of the pesantren (Andayani & Fauzi, 2022).

Based on this description, this literature review aims to analyze the role of religion-based education and ethics in shaping the understanding of personal and reproductive health in students and identify factors that support and hinder its application in the Islamic boarding school environment.

RESEARCH METHODS

This study uses the narrative literature review method to identify, review, and describe research results related to religion-based and ethical education in shaping the understanding of personal and reproductive health in adolescents, especially students in the pesantren environment. This approach is used to obtain an overview of the relationship between religious education, ethical education, adolescent reproductive health, and the pesantren education environment.

Literature searches were conducted through several sources of scientific databases and search engines, namely Google Scholar, PubMed, and Google. The search was conducted using a combination of keywords in Indonesian and English, including "religious education", "ethical education", "adolescent reproductive health", "santriwati", "pesantren", "Islamic education", "reproductive health", and "adolescent reproductive health". These keywords were combined to obtain literature that was in accordance with the focus of the study.

The literature used in this study was selected based on several inclusion criteria, namely research articles or scientific articles that discuss religious education, ethics education, adolescent reproductive health, reproductive health education, or student life in the pesantren environment; articles available in Indonesian or English; and articles published in the 2020–2025 period. Literature that is not related to the focus of the study, articles with incomplete information, and sources that are not relevant to adolescent reproductive education or health were excluded from the study.

The literature selection process is carried out through several stages, namely identification of articles based on keywords, filtering by title and abstract, then assessment of the suitability of the content of the article with the purpose of the research. Articles that meet the criteria are then read and studied thoroughly. The information obtained from the literature is then grouped based on themes related to religious education, ethics education, adolescent reproductive health, the role of caregivers and the pesantren environment, reproductive health information resources, and obstacles in the implementation of reproductive health education.

The analysis was carried out descriptively by comparing and integrating findings from various literature. The results of the study were then arranged in a narrative manner to describe how religion-based and ethics-based education can play a role in improving understanding and shaping personal and reproductive health behaviors in students. In addition, the study was also used to identify supporting factors, obstacles, and opportunities for the development of reproductive health education in accordance with the religious and cultural values of the Islamic boarding school.

RESULTS AND DISCUSSION

Religious Education in Shaping Personal Health Understanding

Religious education is one of the main components in the pesantren education system. Religious materials are not only provided to improve religious understanding, but are also directed to shape the morals and behavior of students. Religious education that is applied in a sustainable manner can be the basis for forming habits and attitudes in daily life (Ananda, 2024).

In the context of personal health, religious education has a relationship with various concepts regarding cleanliness and purity. Fiqh learning discusses taharah, ablution, obligatory bathing, uncleanness, and menstruation. The material has a wedge with the aspect of personal health because it teaches the importance of body hygiene and self-management.

Education about menstruation through fiqh can also be a means to reduce the uncertainty and embarrassment experienced by adolescents when experiencing menarche. Students can gain an understanding that menstruation is a physiological process that has certain religious provisions and requires good health management (Qudsiana & Husain, 2020).

The integration between religious education and reproductive health can strengthen understanding because the information received does not stand alone. Fitri et al. (2025) show that women's fiqh learning can be one of the approaches in providing an understanding of reproductive health to students. By connecting the concept of religion with health knowledge, students can understand that maintaining reproductive hygiene is part of their responsibility to themselves.

Ethics Education in Supporting the Application of Health Understanding

Ethical education is not only related to the understanding of right and wrong, but also the process of forming habits and responsibilities. In the life of the Islamic boarding school, ethical education can be realized through discipline, obedience to rules, maintaining cleanliness, respecting others, and taking responsibility for oneself.

Firdaus and Fauzian (2020) explain the importance of pesantren culture in the formation of student morals. The pesantren environment can be an educational space that allows moral values to be applied through daily life. Thus, health education can also be integrated into the culture (Firdaus & Fauzian, 2020).

In reproductive health, the behavior of maintaining menstrual hygiene is a form of responsibility to the body. Good knowledge about menstrual hygiene needs to be accompanied by application in daily life. Menstrual hygiene behavior in students still needs attention so health education needs to be directed not only to knowledge, but also to behavior change (Amanda & Ariyanti, 2020).

Ethics education can strengthen this process by placing hygiene as part of personal responsibility. In the context of education, an understanding of sanitary napkin replacement and reproductive organ hygiene can be associated with the formation of discipline and responsibility towards oneself.

The Concept of Ta'dib in Health Education

Syed Muhammad Naquib Al-Attas' concept of education provides the perspective that education is not only aimed at transferring knowledge, but also shaping human beings who have manners. Putri et al. (2023) explained that the concept of Al-Attas emphasizes the relationship between adab, science, ta'lim, and tarbiyah in the process of forming civilized humans.

This concept is relevant to explain reproductive health education in the pesantren environment. The health knowledge gained by students needs to be applied in the form of responsible behavior. For example, knowledge about menstruation needs to be realized in good hygiene practices, while understanding the body needs to be accompanied by the ability to take care of oneself and respect the body.

Thus, value-based reproductive health education does not stop at improving knowledge, but is directed at the formation of attitudes and behaviors. This approach can be one of the advantages of reproductive health education in the pesantren environment because religious education and character education have become part of the daily education system.

Integration of Women's Fiqh with Reproductive Health

Women's jurisprudence has great potential as a medium for reproductive health education because some of the material in it is directly related to women's biological conditions. Materials on menstruation, puerperium, istihadhah, taharah, and mandatory bathing can be developed with health information that is in accordance with scientific evidence.

Fitri et al. (2025) show the importance of integrating women's fiqh learning in maintaining adolescent reproductive health. This integration allows students to gain an understanding of menstruation from a religious and health perspective.

An integrative approach can also reduce the gap between religious knowledge and health knowledge. With this approach, religious materials can be an entrance to convey evidence-based

reproductive health information without ignoring the context of values and culture that prevail in the pesantren environment.

Reproductive health education can also be provided through counseling activities. Andayani and Fauzi (2022) reported the implementation of reproductive health education for adolescent students as a form of providing health information in the pesantren environment. This approach can complement religious materials that have been obtained through formal learning.

The Role of Caregivers and Ustadzah

Caregivers and ustadzah have a strategic position in shaping the understanding of students because they are part of the social environment that most often interacts with students. In addition to providing learning materials, caregivers can also be a place to ask questions when students experience personal problems.

Ardhiyanti and Rosita (2021) show the importance of the role of guardians and caregivers in the reproductive health knowledge of female students. Environmental support can help students gain access to reproductive health information that is more targeted and in accordance with their needs.

In addition to being a source of information, ustadzah can function as a role model. Exemplary in maintaining cleanliness, discipline, and how to communicate about reproductive issues can affect the comfort of students in discussing health issues.

The Role of Peers and Media

Peers are one of the sources of information that are close to the lives of teenagers. Teenagers often feel more comfortable sharing experiences with friends because they are relatively the same age and experience. However, the information obtained from peers is not always correct.

Kartika and Samaria (2021) show that mass media and peers can relate to adolescents' knowledge about reproductive health. This shows that information sources outside of formal education also play a role in shaping adolescents' understanding.

Digital media provides a great opportunity to expand access to reproductive health information. However, information that is wrong or does not have a scientific basis can also be easily spread. Therefore, health literacy is an important part of supporting students' understanding, so that information obtained from peers and digital media can be assessed based on the source and validity of the information.

Barriers to Reproductive Health Education

Although reproductive health education has benefits, there are various obstacles to its implementation. The first obstacle is stigma and shame. Discussions about menstruation, reproductive organs, and sexuality can still be considered sensitive topics so that students may be reluctant to ask questions or convey the problems they experience. This condition can make it difficult for adolescents to obtain information that suits their needs (Leekuan et al., 2022).

The second obstacle is the limited number of personnel who have special competencies in providing reproductive health education. Reproductive education requires accurate information and communication skills that are appropriate for adolescents. Appropriate reproductive health education can help adolescents gain knowledge and increase awareness in maintaining their reproductive health (Nurianti & Simargolang, 2024).

The third obstacle is the limitation of the media and access to reliable sources of information. The variety of information about reproductive health available through the media can make adolescents obtain information that is not always in accordance with their actual health conditions. Therefore, education is needed that is able to help adolescents obtain correct and easy-to-understand reproductive health information (Mawardika et al., 2025).

In the pesantren environment, reproductive health education can also be developed through the integration of health knowledge and religious learning. The integration of sexual education into fiqh learning can be an approach that is in accordance with the pesantren environment because it allows the discussion of reproductive health to still pay attention to religious values and norms (Udzkhiyatin Nisa & Athifah, 2023).

Therefore, collaboration between pesantren and health workers is needed in providing comprehensive reproductive health education. Health workers can help provide biological and preventive information based on scientific knowledge, while ustadzah and caregivers can help associate this information with religious and cultural values of the pesantren. The existence of pesantren health posts can also support the provision of information and health services for students (Inayati et al., 2025).

Based on these various literatures, religious education and ethics in the pesantren environment have complementary relationships in shaping the understanding of personal health and reproduction. Religious education provides a framework of values and knowledge through fiqh materials, while ethics education helps direct this knowledge to attitudes of responsibility and application in daily life.

CONCLUSION

Religion-based and ethics-based education has an important role in shaping the understanding of personal and reproductive health in students. Religious education, especially through women's fiqh learning, can help students understand menstruation, taharah, personal hygiene, and responsibility in maintaining the body. Meanwhile, ethical education can strengthen the application of knowledge through the formation of discipline, responsibility, and habits of maintaining cleanliness in daily life.

The integration of religious education with reproductive health education can provide an approach that is more in line with the values and culture of the pesantren. The support of caregivers and ustadzah also plays a role in providing information, mentoring, and example to students. However, shame, stigma against the discussion of reproductive health, limited information sources, and limited health educators are still obstacles that need to be considered.

Therefore, collaboration is needed between Islamic boarding schools, health workers, families, and educational institutions to develop reproductive health education based on scientific evidence and remain in harmony with religious and ethical values. An integrated approach is expected to increase the understanding of students while encouraging the formation of healthy, responsible, and in accordance with the values applied in the pesantren environment.

Education provided in a sustainable manner is also expected to equip students with the ability to maintain their own health and reproduction independently. With a good understanding since adolescence, students are expected to be able to implement appropriate health behaviors and have readiness to face various changes and reproductive health problems in the future.

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