

Parent-Adolescent Communication for Reproductive Health in Shaping the Malaysian-Indonesian Families Well-Being

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HOW TO CITE:

Nor 'Adha Ab Hamid, Norziah Othman, Rahmahtunnisah Sailin, Munawir Pasaribu, Yan Hendra, Widya Masitah (2026). Parent-Adolescent Communication for Reproductive Health in Shaping the Malaysian-Indonesian Families Well-Being. International Journal of Special Education, 41(11s), 831-838

ABSTRACT:

Adolescent reproductive health remains a significant public health and social concern, particularly in societies where discussions on sexuality are often constrained by cultural and religious sensitivities. Parents are widely recognised as primary agents of socialisation and play a crucial role in providing adolescents with accurate reproductive health information, values, and guidance. However, evidence from both Malaysia and Indonesia suggests that communication between parents and adolescents regarding reproductive health remains limited despite the existence of various national policies and educational initiatives. This paper aims to examine the role of family well-being in shaping parent–adolescent reproductive health communication and to explore the cultural, religious, and structural factors that influence communication practices in Malaysia and Indonesia. Using a narrative review and comparative analysis approach, the study synthesises findings from previous literature on family well-being, reproductive health education, communication barriers, and policy implementation in both countries. The analysis reveals that family well-being, particularly positive family relationships, emotional support, and parental involvement, serves as a critical foundation for effective reproductive health communication. Nevertheless, cultural taboos, parental discomfort, inadequate communication skills, and a persistent policy–practice gap continue to hinder open discussions within families. The review further highlights that post-pandemic family dynamics have created both challenges and opportunities for strengthening communication and adolescent well-being. Based on the synthesis of existing evidence, an integrated conceptual framework is proposed linking family well-being, parent–adolescent communication, and reproductive health education. The study concludes that family-centred and culturally responsive

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interventions are essential for enhancing communication practices and promoting positive reproductive health outcomes among adolescents. The findings provide useful insights for policymakers, educators, health practitioners, and families in strengthening adolescent reproductive health education within diverse cultural contexts..

Keywords: Adolescents; Family well-being; Malaysia and Indonesia; Parent-Adolescent Communication.

Introduction

Adolescence is a critical developmental period characterised by profound physical, psychological, emotional, and social changes. According to the World Health Organization, adolescents are individuals aged between 10 and 19 years, a stage in which young people begin to develop their identity, interpersonal relationships, and understanding of sexuality and reproductive health (World Health Organization, 2023). During this transition, adolescents are often exposed to various sources of information regarding sexuality and reproductive health, including peers, social media, schools, and family members. Access to accurate reproductive health information is essential because it influences adolescents' decision-making, health behaviours, and overall well-being. Inadequate knowledge may increase vulnerability to risky sexual behaviours, unintended pregnancy, sexually transmitted infections, and psychological distress (Elgredly, 2024).

Parents are widely recognised as the primary agents of socialization and play a significant role in shaping adolescents' attitudes, values, and behaviours related to reproductive health. Effective parent-adolescent communication has been associated with healthier sexual decision-making, delayed sexual initiation, increased contraceptive awareness, and reduced engagement in risky sexual behaviours (Rahman et al., 2024). Consequently, many international and national health initiatives, including the recommendations of the International Conference on Population and Development (ICPD) in Cairo, emphasise the importance of providing adolescents with appropriate

reproductive health education through collaborative efforts involving families, schools, and communities. Despite these recommendations, discussions related to sexuality and reproductive health remain challenging within many Asian societies, including Malaysia, where such topics are often considered sensitive and culturally inappropriate.

Although previous studies have highlighted the importance of parent-adolescent communication in promoting adolescent reproductive health, several unresolved issues remain. One notable concern is the persistent perception gap between parents and adolescents regarding communication practices. A recent study involving mother-adolescent dyads in Sarawak found that mothers reported significantly higher levels of reproductive health communication than those perceived by their adolescents (Rahman et al., 2024). This discrepancy raises questions about the actual effectiveness and quality of communication occurring within families. Furthermore, many earlier studies relied on either parental reports or adolescent reports alone, resulting in limited understanding of how communication is experienced by both parties simultaneously (Chaparro et al., 2025).

Another unresolved issue concerns the contradiction between parental knowledge and communication practices. While quantitative studies frequently report that parents possess adequate knowledge regarding sexual and reproductive health, qualitative evidence suggests that many parents continue to experience discomfort, embarrassment, fear, and uncertainty when discussing such matters with their children

(Zeglin & Lazebnik, 2023). This inconsistency indicates that knowledge alone may not be sufficient to facilitate meaningful communication. Cultural norms and social expectations further complicate the situation. In many Malaysian households, sexuality-related discussions are still perceived as taboo, causing both parents and adolescents to avoid open conversations despite expressing a willingness to communicate (Abd Wahab et al., 2026; Rahman et al., 2024). As a result, adolescents often seek information from peers, social media, or other informal sources, which may not always provide accurate guidance.

The COVID-19 pandemic has introduced an additional layer of complexity to family communication dynamics. The pandemic significantly disrupted education, social interaction, family routines, and adolescent mental health. Studies conducted among Malaysian low-income families reported that increased parent–child conflict during the post-pandemic period was associated with greater psychological distress among adolescents, particularly among female adolescents (Rizal et al., 2022). Although these findings highlight the importance of positive family relationships for adolescent well-being, little is known about how pandemic-related family stress has influenced the quality, continuity, and effectiveness of parent–adolescent reproductive health communication. Moreover, empirical evidence regarding the availability of parental support systems, communication resources, and practical guidance for discussing reproductive health remains limited within the Malaysian context.

Existing studies have not adequately examined how parent–adolescent reproductive health communication is influenced by the combined effects of cultural taboos, parental communication challenges, and post-pandemic family well-being concerns (Jalil et al., 2025). Furthermore, limited evidence is available regarding the experiences and perspectives of both parents and adolescents in navigating reproductive health discussions within Malaysian families. Addressing this gap is essential to support the development of effective family-

based reproductive health education strategies that are culturally appropriate and responsive to contemporary challenges.

Therefore, the present study aims to explore parent–adolescent communication regarding reproductive health in Malaysia and to identify the factors that facilitate or hinder such communication within the family context. Specifically, this study seeks to: (1) examine the role of family well-being in shaping parent–adolescent reproductive health communication; (2) explore the influence of cultural and religious values on communication practices; (3) analyse the policy–practice gap in reproductive health education at the family level; and (4) examine the implications of post-pandemic family dynamics on adolescent reproductive health communication and well-being. The findings are expected to contribute to the development of more effective interventions and support mechanisms that strengthen family communication and promote adolescent reproductive health and well-being.

Methodology

This study employed a qualitative library research design using a narrative literature review approach to examine the role of parent–adolescent communication in reproductive health and its contribution to family well-being. A narrative review is particularly suitable for synthesising knowledge from diverse sources, identifying research gaps, and developing conceptual understanding of complex social phenomena (Snyder, 2019). Relevant literature was retrieved from several academic databases, including Scopus, Web of Science, Google Scholar, and ERIC, as well as government reports, policy documents, and publications from international organisations. The search process utilised keywords such as “parent–adolescent communication”, “reproductive health education”, “sexual and reproductive health”, “family well-being”, “adolescent health”, “Malaysia”, and “Indonesia” to identify relevant studies.

The selection process focused primarily on peer-reviewed journal articles, scholarly books, and

official reports published between 2020 and 2025 to ensure the inclusion of recent evidence, while seminal studies were retained where necessary to provide theoretical foundations. Publications were included if they addressed parent–adolescent communication, reproductive health education, family well-being, cultural and religious influences, or adolescent health outcomes. The selected literature was analysed using thematic analysis, whereby studies were reviewed, compared, and categorised according to recurring concepts and findings. Through an iterative process of synthesis and interpretation, four major themes were identified: family well-being as a foundation for reproductive health communication, cultural and religious values as facilitators and barriers to communication, the policy–practice gap in reproductive health education, and post-pandemic family dynamics and adolescent vulnerability. These themes subsequently informed the development of an integrated conceptual framework linking family well-being, parent–adolescent communication, reproductive health education, and adolescent outcomes (Baumeister & Leary, 1997; Snyder, 2019).

Discussion And Analysis

This section discusses the role of family well-being in shaping parent–adolescent communication on reproductive health within the contexts of Malaysia and Indonesia. Drawing upon previous empirical studies, the discussion examines four interrelated themes. A comparative analysis of Malaysia and Indonesia is subsequently presented to highlight common challenges and policy implications. Finally, an integrated conceptual framework is proposed to explain the relationships among family well-being, parent–adolescent communication, and reproductive health education in promoting positive adolescent outcomes.

Family Well-being as a Foundation for Parent–Adolescent Reproductive Health Communication

The findings of previous studies consistently suggest that effective parent–adolescent communication regarding reproductive health is

closely associated with family well-being. Although family well-being has often been measured through broad indicators such as family relationships, emotional support, economic stability, and social functioning, its relevance to reproductive health communication lies in the quality of interactions that occur within the family environment. Families characterised by trust, emotional closeness, and open communication are more likely to create safe spaces for adolescents to discuss sensitive topics, including sexuality and reproductive health. Conversely, strained family relationships may discourage adolescents from seeking guidance from their parents and increase their reliance on peers, social media, or online platforms as alternative sources of information (Gutu et al., 2025; Wong et al., 2026).

This relationship can be explained through Bronfenbrenner's Bioecological Theory, which highlights the family as the adolescent's primary microsystem influencing behaviour, attitudes, and development. Within this microsystem, parents serve as the first educators and role models in transmitting values, norms, and health-related knowledge. Studies conducted across different cultural settings indicate that supportive family environments contribute positively to adolescent psychological well-being, resilience, and healthy decision-making (Veiga et al., 2023; Murray et al., 2020). Therefore, reproductive health communication should not be viewed as an isolated educational activity but rather as an outcome of broader family functioning and well-being.

The improvement in family well-being indicators reported in both Malaysia and Indonesia suggests that families may possess increasing capacity to support adolescent development. However, enhanced well-being does not automatically translate into effective reproductive health communication. Despite improvements in family relationships and social support, many parents continue to experience discomfort when discussing sexuality-related issues. This observation suggests that family well-being alone is insufficient unless accompanied by communication skills, parental confidence, and

adequate reproductive health knowledge (Rahman et al., 2024; Zeglin & Lazebnik, 2023).

Cultural and Religious Values: Facilitators and Barriers to Communication

A recurring theme across studies conducted in Malaysia and Indonesia is the dual role of culture and religion in shaping reproductive health communication. On one hand, Islamic teachings emphasise parental responsibility in educating children about moral conduct, personal hygiene, family values, and responsible behaviour. Religious values therefore provide a strong foundation for parents to guide adolescents through puberty and reproductive health transitions. On the other hand, cultural interpretations of modesty and sensitivity often discourage open discussion about sexuality, creating a paradox in which parents acknowledge their responsibility but hesitate to initiate conversations (Jalil et al., 2025).

This cultural paradox is evident in both countries despite differences in policy implementation. Malaysian adolescents have reported feeling reluctant to discuss reproductive health matters with parents due to embarrassment and fear of negative reactions, while studies conducted in Indonesia similarly indicate that sexuality-related topics remain highly sensitive within many households (Rahman et al., 2024). The persistence of these barriers across different cultural settings suggests that the challenge is not merely a lack of awareness but the existence of deeply embedded social norms that associate sexuality discussions with shame and impropriety.

The findings therefore challenge the common assumption that increasing knowledge alone will improve communication practices. While parents may possess basic reproductive health knowledge, they often lack confidence, communication strategies, and practical guidance for initiating age-appropriate discussions. Similar findings have been reported in recent studies showing that communication barriers are more strongly associated with discomfort, cultural taboos, and inadequate communication skills than with knowledge deficits alone (Melese et al.,

2024; Sejati et al., 2024). Future interventions should therefore focus not only on knowledge enhancement but also on empowering parents with communication skills that enable sensitive topics to be discussed in culturally appropriate ways.

The Policy-Practice Gap in Reproductive Health Education

Both Malaysia and Indonesia have implemented various policies and programmes aimed at promoting adolescent reproductive health education. In Malaysia, initiatives such as the Dasar Kesihatan Reproduksi dan Sosial Remaja (DKRSR) and PEERS provide structured reproductive health education through schools and health institutions. Similarly, Indonesia has introduced programmes such as Program Kesehatan Reproduksi Remaja (PKBR) and Pusat Informasi dan Konseling Remaja (PIK-R), which seek to equip adolescents with reproductive health knowledge and life skills (Firmansyah et al., 2024).

Despite these policy efforts, evidence from both countries suggests that communication between parents and adolescents remains limited. This reveals a significant policy–practice gap. While governments have successfully established educational frameworks and awareness programmes, less attention has been directed towards strengthening communication within the family environment. Consequently, adolescents may receive reproductive health information through schools or community programmes but fail to engage in meaningful follow-up discussions at home (Rahman et al., 2024; Melese et al., 2024).

The findings imply that future policy development should move beyond adolescent-focused interventions towards family-centred approaches. Parents should be recognised as strategic partners in reproductive health education and provided with structured training, communication toolkits, and culturally sensitive educational resources. Strengthening parental capacity may help bridge the gap between formal reproductive health education and everyday family communication practices. Recent studies

have similarly argued that sustainable reproductive health outcomes require stronger integration between school-based programmes, community support systems, and family-level interventions (Melese et al., 2024).

Post-Pandemic Family Dynamics and Adolescent Vulnerability

The COVID-19 pandemic introduced new challenges that have significant implications for parent–adolescent communication. Prolonged school closures, economic uncertainty, movement restrictions, and increased family interaction altered family dynamics throughout Malaysia and Indonesia. While some families experienced stronger emotional bonds due to increased time spent together, others encountered heightened stress, financial strain, and interpersonal conflict (Wong et al., 2026; Ruggeri et al., 2020).

Research conducted after the pandemic has shown that family conflict is associated with poorer adolescent mental health outcomes, including anxiety, stress, and emotional distress. Such conditions may reduce opportunities for

productive communication regarding sensitive issues such as reproductive health. Adolescents experiencing psychological distress may become less willing to seek parental guidance, while parents facing economic or emotional pressures may prioritise immediate family concerns over educational discussions. These findings support the argument that family well-being and reproductive health communication are interconnected dimensions of adolescent development (Wong et al., 2026; Gutu et al., 2025).

At the same time, the post-pandemic environment presents opportunities for strengthening family-based reproductive health education. The increased recognition of mental health, family resilience, and parental involvement provides a favourable context for developing integrated interventions that address both family well-being and adolescent reproductive health. Future research should therefore examine how post-pandemic family experiences influence communication quality and explore strategies that simultaneously promote family resilience and reproductive health literacy.

Table 1: Comparison of Reproductive Health Communication Policies, Cultural Influences, and Family-Level Challenges in Malaysia and Indonesia

Dimension	Malaysia	Indonesia	Similar Implication
Policy Support	DKRSR, PEERS	PKBR, PIK-R	Strong government commitment
Cultural Norms	Sexuality viewed as sensitive	Sexuality viewed as sensitive	Communication barriers persist
Religious Influence	Facilitator and barrier	Facilitator and barrier	Requires culturally sensitive approach
Parent-Adolescent Communication	Generally limited	Generally limited	Policy-practice gap
Future Need	Parent empowerment	Parent empowerment	Family-centred interventions

Towards an Integrated Conceptual Framework

Based on the synthesis of previous studies, a conceptual relationship can be proposed in which family well-being functions as a foundational

factor influencing parent–adolescent communication practices. Positive family relationships, emotional support, and family resilience contribute to greater openness and trust between parents and adolescents. These

communication practices subsequently influence the effectiveness of reproductive health education, which in turn affects adolescent knowledge, attitudes, decision-making, and health behaviours (Veiga et al., 2023; Rahman et al., 2024).

However, this relationship is moderated by several contextual factors, including cultural norms, religious beliefs, parental knowledge, socioeconomic conditions, and post-pandemic family stress. These factors may either strengthen or weaken communication processes. Therefore,

improving adolescent reproductive health outcomes requires a holistic approach that integrates family well-being, parental empowerment, communication competence, and supportive policy environments rather than focusing exclusively on adolescent knowledge acquisition. Figure 1 shows that this integrated perspective which is consistent with recent evidence highlighting the importance of family-centred and culturally responsive approaches in adolescent reproductive health promotion (Melese et al., 2024; Rahman et al., 2024).

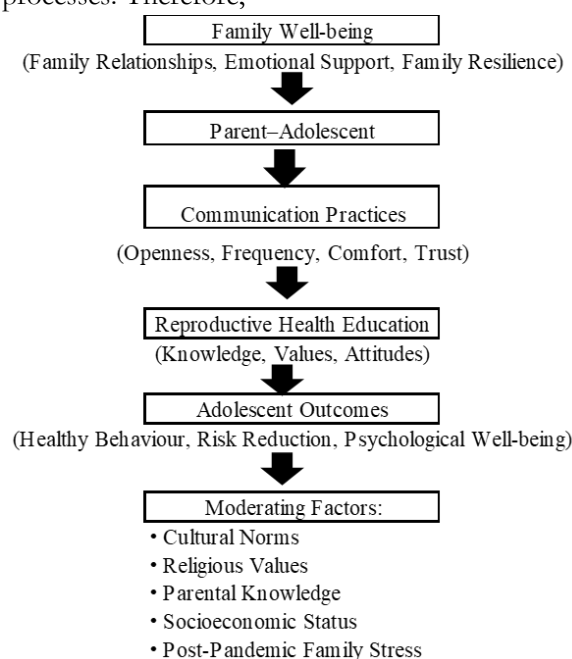


Figure 1: Conceptual Framework of Parent-Adolescent Reproductive Health Communication and Family Well-Being

Conclusion

This study highlights the critical role of family well-being in shaping effective parent-adolescent communication on reproductive health within the contexts of Malaysia and Indonesia. Despite the existence of various government policies and educational initiatives aimed at improving adolescent reproductive health literacy, communication within families remains constrained by cultural taboos, parental discomfort, limited communication skills, and varying levels of reproductive health knowledge. The review further demonstrates that family relationships, emotional support, and parental involvement are fundamental factors influencing

adolescents' access to accurate reproductive health information and guidance.

The comparative analysis reveals that both countries face similar challenges despite differences in policy implementation, suggesting the existence of a persistent policy-practice gap at the family level. Furthermore, post-pandemic family dynamics have introduced new pressures and opportunities that may influence communication practices and adolescent well-being. Based on these findings, the study proposes an integrated conceptual framework that positions family well-being as a foundation for effective parent-adolescent communication and reproductive health education. Future interventions should therefore adopt a family-

centred and culturally responsive approach that strengthens parental capacity, communication competence, and family resilience to support healthier adolescent development and well-being.

Acknowledgments

The authors would like to thank Selangor Islamic University (UIS) for financial support through GPIU 2025 (Usahasama) - Project Code: (2025/P/GPIU/GPM-0014) - which enabled the authors to conduct this research.

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