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The Influence of Health Education Using Audio-Visual on Teenagers' Knowledge Regarding Teenagers' Sexual Behavior at SMA I Darus Salam Tapos West Java

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Abstract

Background: During adolescence, individuals cannot take full responsibility for the activities they do. Problems related to reproductive health that can occur during adolescence include pregnancy out of wedlock, rape, prostitution among teenagers, abortion, sexually transmitted diseases, sexual harassment, and other sexual deviations such as promiscuity.

Objective: To determine the influence of health education using audiovisuals on adolescent knowledge regarding adolescent sexual behavior at SMAI Darus Salam Tapos, West Java.

Methodology: The type of research used in this research is analytical descriptive with a one group pretest posttest approach. The population in this study was all 62 level X teenagers registered at SMAI Darus Salam. The sample uses total sampling. The instrument used in this research was a questionnaire containing adolescent knowledge regarding adolescent sexual behavior to be measured before providing the intervention and after providing the intervention. And test the hypothesis using the t test.

Research result:It can be seen that the difference in adolescent knowledge regarding adolescent sexual behavior before and after being given the Health Education intervention using audio visuals with results tending to increase can be seen from the mean, median and mode values. The results obtained showed a significance level of <0.001, which means it is lower than 0.05, so the hypothesis is accepted.

Conclusion: There is an influence of health education using audio visuals on adolescent knowledge regarding adolescent sexual behavior at SMAI Darus Salam.

Suggestion:It is hoped that the results of this research can be used as a reference for further research supported by other sources, or can be used as a comparison to research on the influence of reproductive health education counseling using audiovisual media on subsequent adolescent sexual behavior.

Keywords: Health Education, Audio Visual, Teenagers.

International Journal of Health Sciences

Vol. 2, Issue 1 (2024) September



Introduction

The era of globalization demands all aspects of life and all of society, including the younger generation, to change to become more developed and advanced. For population groups belonging to the teenage years, for example, the positive impact of globalization is marked by the development of advances in information technology. Globalization has brought fundamental changes to society where family life and norms, marriage and sexuality are increasingly free from the grip of existing traditions. Teenagers need to be as well prepared as possible so that they can take great advantage of the digital era and at the same time avoid its negative impacts (Fatoni et al, 2020).

Adolescence is a transition period, between children and adults, from school age to working age, and entering reproductive age. This transitional phase needs serious attention because in this phase teenagers are very at risk of social and reproductive health problems. The digital era provides easy access to information for teenagers, including regarding their curiosity about sexual behavior (Fatoni et al, 2020).

During adolescence, individuals cannot take full responsibility for the activities they do. Problems related to reproductive health that can occur during adolescence include pregnancy out of wedlock, rape, prostitution among teenagers, abortion, sexually transmitted diseases, sexual harassment and other sexual deviations such as promiscuity. (Chanif et al., 2021).

Factors of free sexual behavior among teenagers can be caused by the relationship between parents and teenagers, peer pressure, religiosity, exposure to pornographic media, faster puberty, hormonal changes which can increase feelings of high sexual desire, giving rise to the urge to have free sex and Lack of knowledge about casual sex is also one of the main factors causing problems that occur among teenagers (Dahlia et al., 2021).

Knowledge is the sense that humans have or the results that a person knows about an object through their senses. Most of a person's knowledge is obtained through the sense of hearing, the sense of sight, the sense of smell, the sense of taste and the sense of touch. Good knowledge can influence teenagers' sexual attitudes and behavior and vice versa. Knowledge can be influenced by formal education factors and knowledge is closely related to education, therefore the lack of knowledge in adolescents must be improved by providing health education (Setyawan, 2018).

International Journal of Health Sciences

Vol. 2, Issue 1 (2024) September

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From the Indonesian Demographic and Health Survey (SDKI) on the reproductive health of teenagers in Indonesia, a picture of dating behavior of teenage boys was obtained for 21,983 male and female teenagers (75% holding hands, 50% kissing on the lips, and 21% touching or touching), Meanwhile, teenage girls (64% holding hands, 30% kissing on the lips and 5% touching or groping) have a higher percentage of teenage boys' behavior compared to teenage girls when dating. More male teenagers stated that they had had premarital sex than women, the reasons for having premarital sexual intercourse were mostly because of curiosity (57.5% of men), it just happened (38% of women) and was forced by their partner (12.6% of women) (BKKBN, 2017).

One of the efforts that health workers can make to reduce the incidence of premarital sex and pregnancy to prevent early pregnancy and reduce the impact of bad reproductive health is by cultivating knowledge about reproductive health through counseling to individuals or groups as well as premarital teenagers. Counseling can be carried out using print media (brochures, leaflets), electronic media (TV, radio, audio visual), outdoor media in the form of billboards or banners (Rosyida, 2021).

The outreach media in this research is the audio-visual method. Audio visuals in the form of videos can be used as an alternative in counseling which is expected to provide interest to young people, so that the impact will be felt after conducting outreach using this method. The advantage of audio-visual media is that it is not boring and the results are easy to understand and comprehend (Ramli, 2012).

From a preliminary study of 10 teenagers at SMAI DARUS SALAM, it was found that 5 teenagers did not know the importance of reproductive health education and had never received counseling about reproductive health.

Based on this background, the researcher wants to research further regarding "The Influence of Health Education Using Audio Visual on Adolescents' Knowledge Regarding Adolescent Sexual Behavior at SMAI Darus Salam".

Method

The type of research used in this research is analytical descriptive with a one group pretest posttest approach. The population in this study was all 62 level X teenagers registered at SMAI Darus Salam. The number of samples in this study was 62 people. When taking samples using total sampling technique..

International Journal of Health Sciences Vol. 2, Issue 1 (2024) September



Results

Research result

Univariate Analysis

Table 1

Average knowledge of adolescents regarding adolescent sexual behavior before being given health education using audio-visual at SMAI Darus Salam Tapos, West Java

Teenage knowledge	Mean	eleme ntary school	Min	Max	N
Before	5.4	0.5	5	6	62

Based on the table, it is known that the average knowledge of teenagers regarding teenage sexual behavior before being given health education using audio-visual is 5.4 with standard deviation values 0.5, minimum value 5 and maximum value 6.

Table 2

AverageAdolescents' knowledge regarding adolescent sexual behavior after being given health education using audio-visual at SMAI

Darus Salam Tapos West Java

Teenage knowledge	Mean	eleme ntary school	Min	Max	N
After	3.0	0.6	2	4	62

Based on the table, it is known that the average knowledge of teenagers regarding teenage sexual behavior after being given health education using audio-visual is 3.0 with standard deviation values 0.6, minimum value 2 and maximum value 4.

Table 3

Data Normality Test

Variable	Health education	Shapiro Wilk	Information
Teenage	Before	0,000	Abnormal
knowledge	After	0,000	Abnormal

Based on the data normality test table using the Shapiro Wilk for variables before and after, a significant value <0.05 was obtained, which means the data is not normal, followed by using the Wilcoxon test.

International Journal of Health Sciences Vol. 2, Issue 1 (2024) September

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Bivariate Test

Table 4

The Influence of Health Education Using Audio Visuals on Adolescents' Knowledge Regarding Adolescent Sexual Behavior at SMAI Darus Salam Tapos West Java

Teenage knowledge	Median	Min-Max	Negative ranks	Positive ranks	Ties	p- value
Before intervention	5.0	4-6	25	0 2	2	0,000
After intervention	4.0	3-5		U	3	

Based on the table, using the Wilcoxon test, it is known that the statistical test results are p-value = 0.000 (p-value < α = 0.05), which means that there is an influence of health education using audio-visual on teenagers' knowledge regarding teenage sexual behavior at SMAI Darus Salam Tapos, West Java. From the results of research in the intervention group, 25 respondents experienced an increase in knowledge after being given health education using audio-visual, as many as 3 respondents did not experience an increase in knowledge after being given health education using audio-visual and no respondents experienced a decrease in knowledge after being given health education using audio. visual.

Discussion

Average knowledge of adolescents regarding adolescent sexual behavior before being given health education using audio-visual

Based on the research results, it is known that the average knowledge of adolescents regarding adolescent sexual behavior before being given health education using audio-visual is 5.4 with standard deviation values 0.5, minimum value 5 and maximum value 6.

In line with research from Indriani (2023), the results showed that before being given counseling via audio-visual media, the majority of respondents, namely 50 respondents (68.5%) had a poor level of knowledge. From Fitriani's research (2022), it can be seen that before being given health education, the majority of respondents had poor knowledge, namely 57 respondents (67.9%) and the other 27 respondents (32.1%) had good knowledge. Alvionita's research (2022) found that students' knowledge scores before health education were carried out had a mean value of 10.05.

International Journal of Health Sciences

Vol. 2, Issue 1 (2024) September

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Factors of free sexual behavior among teenagers can be caused by the relationship between parents and teenagers, peer pressure, religiosity, exposure to pornographic media, faster puberty, hormonal changes which can increase feelings of high sexual desire, giving rise to the urge to have free sex and Lack of knowledge about casual sex is also one of the main factors causing problems that occur among teenagers (Dahlia et al., 2021).

Average knowledge of adolescents regarding adolescent sexual behavior after being given health education using audio-visual

Based on the research results, it is known that the average knowledge of teenagers regarding teenage sexual behavior after being given health education using audio-visual is 3.0 with standard deviation values 0.6, minimum value 2 and maximum value 4

In line with Fitriani's research (2022), it was found that after providing health education, the majority of respondents had good knowledge, namely 83 respondents (98.8%) and only 1 respondent (1.2%) had poor knowledge. Indriani's research (2023) shows that the level of knowledge can be interpreted as the level of knowledge of respondents after being given education through audio-visual media, almost all of them, namely 70 respondents (95.9%) have a good level of knowledge. Alvionita's research (2022) found that students' knowledge scores after health education had a mean value of 12.49.

Knowledge is the sense that humans have or the results that a person knows about an object through their senses. Most of a person's knowledge is obtained through the sense of hearing, the sense of sight, the sense of smell, the sense of taste and the sense of touch. Good knowledge can influence teenagers' sexual attitudes and behavior and vice versa. Knowledge can be influenced by formal education factors and knowledge is closely related to education, therefore the lack of knowledge in adolescents must be improved by providing health education (Setyawan, 2018).

Bivariate Analysis

The influence of health education using audio visuals on adolescent knowledge regarding adolescent sexual behavior at SMAI Darus Salam Tapos, West Java

Based on the Wilcoxon test results, it is known that the statistical test results are p-value = 0.000 (p-value < $\alpha = 0.05$), which means that there is an influence of health

education using audio-visual on teenagers' knowledge regarding teenage sexual behavior at SMAI Darus Salam Tapos, West Java.

In line with Indriani's (2023) research, this study used the Wilcoxon statistical test with a confidence level of 95% (α =0.05), obtaining a p-value= 0.000. Alvionita's research (2022) shows the influence of health education using video media on knowledge about the dangers of free sex at SMA X Palembang in 2022 with a p value of 0.000<0.05. Fitriani's research (2022) shows that there is an influence of health education on students' knowledge and (i) about free sex with a p value of 0.000.

One of the efforts that health workers can make to reduce the incidence of premarital sex and pregnancy to prevent early pregnancy and reduce the impact of bad reproductive health is by cultivating knowledge about reproductive health through counseling to individuals or groups as well as premarital teenagers. Counseling can be carried out using print media (brochures, leaflets), electronic media (TV, radio, audio visual), outdoor media in the form of billboards or banners (Rosyida, 2021).

The outreach media in this research is the audio-visual method. Audio visuals in the form of videos can be used as an alternative in counseling which is expected to provide interest to young people, so that the impact will be felt after conducting outreach using this method. The advantage of audio-visual media is that it is not boring and the results are easy to understand and comprehend (Ramli, 2012).

Conclusions and recommendations

It is known that the average knowledge of adolescents regarding adolescent sexual behavior before being given health education using audio-visual is 5.4 with a standard deviation value of 0.5, a minimum value of 5 and a maximum value of 6. It is known that the average knowledge of adolescents regarding adolescent sexual behavior after being given health education using audio-visual is 3.0 with a standard deviation value of 0.6, a minimum value of 2 and a maximum value of 4. There is an influence of health education using audio visuals on adolescent knowledge regarding adolescent sexual behavior at SMAI Darus Salam Tapos West Java (p-value = 0.000).

Suggestion



For SMAI Darus Salam Tapos, the results of this research can be used as the first step to increase and maintain health promotion activities, adolescent knowledge regarding efforts to prevent sexually transmitted diseases through audiovisual media.

For educational institutions, it is hoped that educational institutions, especially faculties of health sciences, can be used as learning materials and references in libraries regarding counseling using audio-visuals about adolescent sexual behavior.

For Further Researcherscan be used as a reference for conducting similar research, or developing similar research by adding new variables.

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International Journal of Health Sciences

Vol. 2, Issue 1 (2024) September



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