

# Effect of Reproductive Health Education on Teenagers Through Video Media on Knowledge and Attitudes Regarding Sexual Pre-Marriage in SMPN 1 Dente Teladas

Amelia Heni Susanti <sup>1</sup>, Putri Azzahroh <sup>2\*</sup>, Vivi Silawati <sup>3</sup>

<sup>1,2,3</sup> Midwifery Study Program, Faculty of Health, National University of Jakarta

\* Putri Azzahroh: [putriazzahroh@civitas.unas.ac.id](mailto:putriazzahroh@civitas.unas.ac.id).

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## Abstract

Premarital sex is contact between partners of the opposite or same sex, for example holding hands, kissing lips, kissing cheeks, petting, and having intimate relations, which is carried out without the legal ties of marriage according to religion and marriage law. The aim of this research is to determine the effect of reproductive health education on adolescent knowledge and attitudes about premarital sex in junior high school students. The type of research used is experimental research using a pretest-posttest design. The sample in this study was 98 students consisting of 49 experimental groups and 49 control groups. Data collection uses a questionnaire. Data analysis used the Wilcoxon test. From the research results, it was found that the average knowledge of teenagers before being given education in the intervention group was 5.9 after being given education was 10.7, in the control group it was 6.1 before and after 7.3. The average attitude of adolescents before being given education in the intervention group was 23.8 and after being given education was 37.5. in the control group it was 23.9 and after administration in the control group it was 26.8. There was an influence in the intervention group and the control group after being given and not being given educational video media on adolescent reproductive health on knowledge and attitudes about premarital sex at SMP N 1 Dente Teladas Tulang Bawang Lampung (p-value = 0.000). There was a difference in knowledge between the intervention and control groups of 44.82, while the difference in attitudes between the intervention and control groups was 49.0 (p-value = 0.000). It is hoped that education will be provided on an ongoing basis in schools.

**Keywords:** reproductive health, knowledge, attitudes, premarital sex.

## Introduction

Adolescence is a transition period from children to adults who are faced with several changes in themselves towards adulthood. Adjustment to physiological and psychological changes due to reproductive hormones starting to function is one of the problems faced by teenagers (Kadarwati, Wuryaningsih, & Alaydrus, 2019).

Adolescents experience physical and hormonal changes that cause the onset of sexual urges. The emergence of sexual urges can trigger teenagers to engage in sexual activity, including premarital sex. Premarital sex can be prevented through health education to increase adolescent knowledge and attitudes. Health education through video can be used as a medium to disseminate health information to teenagers. The large sexual urge and sexual attraction that cannot be controlled makes teenagers an age group that is vulnerable to carrying out certain sexual acts, one of which is premarital sex. Premarital sex is sexual relations carried out without legal marriage (National Population and Family Planning Agency, 2017).

In Indonesia, there are around 4.5% of teenage boys and 0.7% of teenage girls aged 15-19 years who admit to having had premarital sex. For teenagers aged 15-19 years, the largest proportion had their first relationship at the age of 15-17 years. Around 33.3% of teenage girls and 34.5% of teenage boys aged 15-19 years started dating when they were not yet 15 years old. At this age, it is feared that they do not have adequate life skills, so they are at risk of having unhealthy dating behavior, including having premarital sexual relations (Ministry of Health of the Republic of Indonesia, 2018).

BPS Susenas data (2022) states that the number of teenagers according to the age of first marriage, namely 16-19 years old, is still found to be 39.15%. Meanwhile, BKKBN data for 2023 states that currently in Indonesia there are 20% of teenagers aged 14-15 years, followed by 60% teenagers aged 16-17 years and then 20% of teenagers aged 19-20 years who have had premarital sexual intercourse (BKKBN, 2023). According to the Lampung Provincial Health Service in 2017, teenagers who behave sexually are at risk (20.9%) and teenagers who behave sexually are not at risk (79.1%). Among adolescents with risky sexual behavior admitted to having had sexual relations (5.1%). Most sexual relations were with his girlfriend (87.5%) and the place of sexual intercourse was mostly in hotels/guesthouses (50%).

Based on data from the Tulang Bawang Central Statistics Agency (BPS) regarding Community Welfare indicators, it was found that the percentage of teenagers according to the age of first marriage in 20 21 was 15.80%, % of women married early (less than 16 years) (BPS Tulang Bawang, 2021). The marriage of underage girls still needs attention from the government. There are many negative impacts of child marriage. Apart from the psychological impact of someone who is not yet mature and ready to get married, it can cause high divorce rates and domestic violence. In addition, maternal and child mortality rates can increase due to the occurrence of pregnancies at a young age and lack of knowledge and awareness regarding reproductive health (BPS Tulang Bawang, 2021).

According to Lubis (2017) free sexual behavior carried out by teenagers is influenced by biological factors, parental factors, peer influence factors, and sexual experiences experienced by teenagers as well as teenagers' knowledge about sexual behavior, exposure to pornography and peer influence which are proven to be factors. dominant in influencing sexual behavior in adolescents. Knowledge and attitudes regarding preventing premarital sex are important assets for teenagers to prevent premarital sex. Adolescents' knowledge and attitudes about sexuality have an influence on premarital sexual behavior (Ulfah, 2018).

Adolescents who lack knowledge about premarital sex tend to have wrong attitudes and tend to have premarital sexual relations (Dilla et al, 2020). Health education is one effort to increase knowledge and attitudes of teenagers to prevent premarital sex. Health Education is a combination of learning designed to help individuals and communities grow motivation and increase knowledge.

The impact of premarital sexual behavior is that it can cause the transmission of HIV or the risk of infection with sexually transmitted diseases, it can lead to increased school dropout rates, poverty, risks to women's reproductive health, abortion, sexual violence, increased maternal and infant mortality rates, babies experiencing weight gain. Low birth weight (LBW) (Supriandi et al., 2022).

Health education regarding efforts to prevent premarital sexual behavior needs to be given to junior high school students, because the teenage age group who are in junior high school already experience attraction to the opposite sex and often experience confusion about certain things. Methods for providing health education need to be

considered and selected according to the participant's criteria. Adolescents' knowledge tends to increase after being given health education (Ayaz RN and Açıl RN, 2015).

Adolescents experience physical and hormonal changes that cause the onset of sexual urges. The emergence of sexual urges can trigger teenagers to engage in sexual activity, including premarital sex. Premarital sex can be prevented through health education to increase adolescent knowledge and attitudes. Health education through video can be used as a medium to disseminate health information to teenagers.

Based on the initial survey at SMP N 1 Dente Teladas Tulang Bawang, data was obtained from the 8th grade students of SMP N 1 Dente Teladas Tulang Bawang, there were 180 students with 98 female students and 82 male students divided into 6 classes. The results of short interviews conducted by researchers regarding premarital sex with 10 students, namely 5 female students and 5 male students, found that the 10 students admitted that they already had boyfriends and 2 of them had kissed. According to information, 6 students out of 10 students who were able to meet said that they did not know in depth about the impact of premarital sexual behavior. Based on the background description above, the problem formulation of this research is "Is there an influence of education about adolescent reproductive health through video media on knowledge and attitudes about premarital sex at SMP N 1 Dente Teladas Tulang Bawang Lampung

## **Method**

In this research, the design used was *quasi-experimental* with *pre and post designs*. This research involved an experimental group and a control group. The population in this study were all class VIII students of SMP N 1 Dente Teladas Tulang Bawang with a total of 180 people. The number of samples in this study was 98 respondents. In sampling using the *cluster Random Sampling technique*. Researchers divided the sample size into two groups, namely 49 experimental groups and 49 control groups. Data collection uses a questionnaire that has been tested for validity and reliability. Data analysis used the Wilcoxon test.

## **Results**

### **Research result**

#### **Univariate Analysis**

**Table 1**

The average knowledge of teenagers before and after being given education intervention group about premarital sex through video media at SMP N 1 Dente Teladas Tulang Bawang Lampung

Knowledge	Mean	elementary school	Min	Max	n
Before	5.9	1.7	3	9	49
After	10.7	1.0	9	12	49

Based on table 1 above, it is known that the average knowledge of adolescents before being given education in the intervention group was 5.9 , after being given education in the intervention group was 10.7 .

**Table 2 Average knowledge of teenagers before and after in the control group about premarital sex at SMP N 1 Dente Teladas Tulang Bawang Lampung**

Knowledge	Mean	elementary school	Min	Max	n
Before	6.1	1.4	3	9	49
After	7.3	1.3	3	10	49

Based on table 2 above, it is known that the average knowledge of teenagers before the control group was 6.1 , after the control group was 7.3 .

**Table 3**

**The average attitude of teenagers before and after being given education in the intervention group about premarital sex via video media at SMP N 1 Dente Teladas Lampung Onion Bones**

Attitude	Mean	elementary school	Min	Max	n
Before	23.8	1.6	21	27	49
After	37.5	1.5	35	40	49

Based on table 3 above, it is known that the average attitude of teenagers before being given education in the intervention group was 23.8, after being given education in the intervention group was 37.5.

**Table 4**

**Average attitudes of teenagers before and after in the control group regarding premarital sex at SMP N 1 Dente Teladas Tulang Bawang Lampung**

Attitude	Mean	elementary school	Min	Max	n
Before	23.9	1.8	21	27	49
After	26.8	1.8	23	32	49

Based on table 4 above, it is known that the average attitude of teenagers before being given to the control group was 23.9 , after being given to the control group was 26.8.

Testing the analysis on a research sample of class VIII students at SMP N 1 Dente Teladas Tulang Bawang . It is known that the level of accuracy in sampling with a sample of <50, the normality test analysis requirements were carried out using the *Shapiro-Wilk value* , a significant value of <0.05 was obtained, which means the data is not normal, when the data is not normally distributed then the bivariate test is continued using *Wilxocon* and *Mann Whitney* .

**Table 5**  
**The influence of the intervention group and the control group after being given and those who were not given educational video media on adolescent reproductive health on knowledge about premarital sex at SMP N 1 Dente Teladas Lampung Onion Bones**

Group	Knowledge	Median	Min-Max	Negative ranks	Positive ranks	Ties	P-Value
Intervention	Before	6	3-9	0	49	0	0,000
	After	11	9-12				
Control	Before	6	3-9	0	37	12	0,000
	After	8	3-10				

Based on table 5 above, the results of the Wilcoxon test,  $p\text{-value} = 0.000$  ( $p\text{-value} < \alpha = 0.05$ ) which means that there was an influence on the intervention group and control group after being given and not being given educational video media on adolescent reproductive health on knowledge about premarital sex at SMP N 1 Dente Teladas Tulang Bawang Lampung .

**Table 6**  
**The effect on the intervention group and control group after being given and not given adolescent reproductive health educational video media on attitudes about premarital sex at SMP N 1 Dente Teladas Tulang Bawang Lampung**

Group	Attitude	Median	Min-Max	Negative ranks	Positive ranks	Ties	P-Value
Intervention	Before	24	21-27	0	49	0	0,000
	After	37	35-40				
Control	Before	24	21-27	0	47	2	0,000
	After	27	23 -32				

Based on table 6 above, above, the results of the Wilcoxon test,  $p\text{-value} = 0.000$  ( $p\text{-value} < \alpha = 0.05$ ) which means there is an effect on the intervention group and the control group after being given and not given adolescent reproductive health educational video media on attitudes about premarital sex at SMP N 1 Dente Teladas Tulang Bawang Lampung .

**Table 7**  
**Differences in Knowledge and Attitudes in the intervention group and the control group**

Group	Variable	Different Means	P-Value
Knowledge	Intervention	71.91	0,000
	Control	27.09	
	Difference	44.82	
Attitude	Intervention	74.0	0,000
	Control	25.0	
	Difference	49.0	

Based on table 7 above, the difference in knowledge between the intervention and control groups is 44.82, while the difference in attitudes is 49.0 . From the results it can be seen that the knowledge and attitudes in the intervention group have increased more when compared to the control group, and it is known that the p-value A value of 0.00 or

$<0.05$  means that there are differences in knowledge and attitudes between groups.

## **Discussion**

### **Average knowledge of teenagers before and after being given education in the intervention group about premarital sex via video media**

Based on the results, it is known that the average knowledge of adolescents before being given education in the intervention group was 5.9, with a standard deviation of 1.7, a minimum score of 3 and a maximum score of 9, while the knowledge of adolescents after being given education in the intervention group was 10.7 with a standard deviation of 1.0, a minimum score of 9 and maximum value 12.

In line with research from Mutmainah (2023), the average increase in knowledge from the pre-test was 9.15 ( $\pm 2.054$ ) to 10.46 ( $\pm 1.187$ ) in the post-test after being given health education through Leaflets. The results of this research are also in line with research (TJ Sitepu, 2021) on the influence of education about free sex on the knowledge of students in grades X, Based on previous research conducted by (Ameliana, 2018) regarding the influence of adolescent reproductive health education on knowledge about adolescent sexual behavior at SMA X Bandar Lampung. Based on the research results, the level of knowledge before being given reproductive health education was in the low category and after being given reproductive health education was in the high category.

Knowledge according to (Notoatmodjo, 2018) is the result of knowing that occurs after someone senses a certain object. Low knowledge accompanied by the strong influence of peers in adolescence causes teenagers to have unhealthy sexual attitudes and behavior (Ariska, 2020). A person's knowledge about reproductive health is very important, because if someone does not have sufficient knowledge about reproductive health, they will ignore their reproductive health and endanger themselves (Widiastuti, 2013). Many problems will arise as a result of ignoring reproductive health. Problems that arise due to a lack of knowledge regarding reproductive health include untimely pregnancy, abortion, early marriage and marriage, STIs or STDs and HIV/AIDS.

In the researcher's opinion, knowledge about casual sex is important to be given to teenagers both through formal and informal education. This effort needs to be made to prevent undesirable things. Considering that up to now many teenagers have acquired their sexual "knowledge" from their peers, reading pornographic books, watching

pornographic films are forms of discussing sex that are seen as unnatural . Dissemination of information through counseling is very effective in increasing teenagers' knowledge about the impacts of free sex. Sexuality education is a way of spreading messages about reproductive health, in this case sex education, which contains messages about the importance of the dangers of sex. Information and outreach efforts need to be increased to overcome adolescent reproductive health problems.

#### **Average knowledge of teenagers before and after in the control group about premarital sex**

Based on the results, it is known that the average knowledge of teenagers before the control group was 6.1, with a standard deviation of 1.4, a minimum value of 3 and a maximum value of 9, while the knowledge of teenagers after the control group was 7.3, with a standard deviation of 1.3, a minimum value of 3 and a maximum value of 10. The results of this research are also in line with research conducted by (Sastria, 2019) at Lamario Watansoppeng Vocational School. Regarding the influence of premarital sex education on adolescent knowledge and attitudes, this research shows that there is an influence of counseling after being given counseling to respondents

Knowledge consists of positive and negative aspects, increasingly it has many positive aspects the better his behavior will be. Knowledge is related to the risks and attitudes towards early marriage. This can be interpreted that the higher the knowledge possessed, the lower the respondent's attitude towards early marriage and vice versa. This means that the higher the subject's reproductive health knowledge, the lower the premarital sexual behavior, conversely, the lower the subject's reproductive health knowledge, the higher the premarital sexual behavior (Notoatmodjo, 2018). In the opinion of researchers, teenagers with good knowledge are less likely to have premarital sex than teenagers with low knowledge. Apart from that, the bad influence of peers can lead to deviant sexual behavior. Changes in the way teenagers socialize in this era also influence sexual behavior in the way teenagers date. Good sexual knowledge can lead someone towards rational and responsible sexual behavior, apart from that it can help personal decisions related to sexuality, but if someone has wrong sexual knowledge it can result in misperceptions about sexuality and give rise to sexual behavior with all kinds of consequences.

#### **Average attitudes of teenagers before and after being given education in the**

### **intervention group about premarital sex via video media**

Based on the results, it is known that the average attitude of teenagers before being given education in the intervention group was 23.8, with a standard deviation of 1.6, a minimum value of 21 and a maximum value of 27, while the attitude of teenagers after being given education in the intervention group was 37.5, with a standard deviation 1.5, minimum score 35 and maximum score 40. In line with Mutmainah's (2023) research, the average attitude also increased from pre-test 38.52 ( $\pm 4.988$ ) to 39.98 ( $\pm 4.721$ ) in the post-test. Sholichah's (2021) research shows that there is an average difference between attitudes before counseling activities and after counseling activities. The average attitude after counseling was greater, namely 82.61. The Wilcoxon statistical test carried out by researchers obtained a value of  $p = 0.043 < \alpha = 0.05$ , meaning that  $H_0$  was rejected and it was concluded that there was a significant influence of counseling on teenagers' attitudes about premarital sex. Satria's research (2019) results of statistical tests show a  $p$  value = 0.000 or in other words a  $p$  value  $< 0.05$ . Therefore, after carrying out statistical tests,  $H_0$  was rejected and  $H_a$  was accepted, so it can be said that there is a significant influence of providing premarital sex education on adolescent attitudes. In line with research conducted by Setyorani (2017), based on the results of the Wilcoxon test analysis, it was found that significance for attitudes was  $p = 0.000$

Attitudes are a person's more or less permanent feelings, thoughts and tendencies regarding certain aspects of their environment. Traits are evaluative tendencies towards a stimulus or object that have an impact on how a person deals with that object. This means an attitude of showing agreement or disagreement, whether someone likes or dislikes something (Mubarak & Wahit, 2014). According to researchers, one of the factors that influence attitudes in adolescents is providing knowledge or providing information. Information obtained from both formal and non-formal education can have a short-term impact (immediate impact) resulting in changes or improvements in teenagers' attitudes and behavior. Factors that influence attitudes include personal experience, namely something that we have experienced and are currently experiencing, which will also shape and influence our appreciation of social stimuli. The culture in which we live and grow up has a big influence on the formation of our attitudes. Other people who are considered important are one of the social components that influence our attitudes.

### **Average attitudes of teenagers before and after in the control group regarding premarital sex**

Based on the research results, it is known that the average attitude of teenagers before being given to the control group was 23.9, with a standard deviation of 1.8, a minimum value of 21 and a maximum value of 27, while the attitude of teenagers after being given to the control group was 26.8, with a standard deviation of 1.8, a minimum value of 23 and the maximum score is 32. Indriani's research (2021) The results of the research show that the average attitude of teenagers before being given information about the dangers of free sex is 66.00 with an standard deviation of 14.828. The average attitude of teenagers after being given information about the dangers of free sex was 82.20 with a standard deviation of 11.499. Attitude is a form of evaluation or feeling reaction . A person's attitude towards an object is a feeling of support or partiality ( *favorable* ) or a feeling of not supporting or not taking sides ( *unfavorable* ) towards that object (Azwar, 2021) .

In the opinion of researchers, health education is an inseparable part of health programs, both individual health efforts and public health efforts with the aim of increasing people's knowledge, awareness, willingness and ability to live healthily and take an active role in health efforts. Several other factors that can also influence attitude changes are personal experiences, the influence of other people who are considered important, cultural influences, mass media, educational institutions, emotional influences. Of these factors, the researcher did not control personal experience, mass media, and emotional influences so that changes in respondents' attitudes could occur because respondents got information from other sources (internet, magazines, parents, etc.), the respondents' emotional condition was in good condition, and respondents have personal experiences related to reproductive health.

### **The effect on the intervention group and control group after being given and not given adolescent reproductive health educational video media on knowledge about premarital sex**

Based on the results of the Wilcoxon test,  $p\text{-value} = 0.000$  ( $p\text{-value} < \alpha = 0.05$ ) which means there is an influence on the intervention group and the control group after being given and not given adolescent reproductive health educational video media on knowledge about premarital sex in SMP N 1 Dente Teladas Tulang Bawang Lampung.

From the research results in the intervention group, 49 respondents experienced an increase in knowledge about premarital sex, while in the control group, 37 respondents experienced an increase in knowledge about premarital sex and 12 respondents did not experience an increase in knowledge about premarital sex.

In line with research from (Mutmainah, 2023) the results of statistical tests show that there are differences in knowledge ( $p < 0.001$ ). Research (Rahayu et al., 2021) obtained a significance value of  $P \text{ Value } 0.000 < \alpha = 0.05$  with a calculated  $t$  of 14.110, which means that  $H_0$  is rejected and  $H_1$  is accepted, which means there is a significant difference in the level of adolescent reproductive health knowledge regarding premarital sexual relations among students. YPC Cisarua Bogor Middle School before and after being given audio-visual media education

Health education media that can be used include videos because the information conveyed is easier to understand and uses simple language. Video is an intermediary medium in which material is absorbed through sight and hearing, thus creating conditions that enable students to acquire knowledge and skills. The material in the video is packaged in the form of moving image effects with an interesting storyline and sound, thus providing a more real picture (Salsabila et al., 2020) .

In the researcher's opinion , the research results show an increase in knowledge after reproductive health education activities are in accordance with the theory that a person's knowledge is influenced by the information available from formal and non-formal education. Extension activities in the form of counseling and coaching cadres themselves are one of the activities in providing health information and education for teenagers who need it and are useful in increasing their knowledge about their health. Health education is an activity that can influence changes in respondent behavior, including changes in knowledge and attitudes. With outreach activities, teenagers will know and understand about reproductive health and its problems. Reproductive health education can increase teenagers' knowledge about the importance of reproductive health, so that teenagers do not engage in sexual activity prematurely .

**The effect on the intervention group and control group after being given and not given adolescent reproductive health educational video media on attitudes about premarital sex**

Based on the results of the Wilcoxon test,  $p\text{-value} = 0.000$  ( $p\text{-value} < \alpha = 0.05$ )

which means there is an influence on the intervention group and the control group after being given educational video media on adolescent reproductive health on attitudes about premarital sex in junior high school. N 1 Dente Teladas Tulang Bawang Lampung. From the research results, in the intervention group, 49 respondents experienced an increase in attitudes about premarital sex, while in the control group, 47 respondents experienced an increase in attitudes about premarital sex and 2 respondents did not experience an increase in attitudes about premarital sex.

In line with Rahayu's (2021) research, a significance value of  $P \text{ Value of } 0.000 < \alpha = 0.05$  was obtained with a calculated  $t$  of 11.119, which means that  $H_0$  was rejected and  $H_1$  was accepted, which means that there is a significant difference in the attitudes of YPC Cisarua Bogor Middle School students regarding adolescent reproductive health towards premarital sexual intercourse before and after being given audio-visual media education. Mutmainah's research (2023) Statistical test results show that there are differences in attitudes ( $p < 0.001$ ) before and after the intervention.

Animated video media is a media that uses the senses of sight and hearing, therefore animated video media has benefits that can influence changes in a person's not only knowledge but also the attitude of the teenager. This media approach has a big influence on students where they are able to change their attitudes as a result of the learning process that has been carried out (Vidayanti et al., 2020).

Researchers assume from the results of this research that counseling is a health education method that is useful in increasing knowledge so that it influences a person's attitudes and behavior for the better. After the counseling was carried out, there was a change in teenagers' attitudes towards being better in responding to premarital sexual activity.

### **Conclusions and recommendations**

It is known that the average knowledge of adolescents before being given education in the intervention group is 5.9, while the knowledge of adolescents after being given education in the intervention group is 10.7. It is known that the average knowledge of adolescents before being given education in the control group is 6.1, while the knowledge of adolescents after being given education in the control group is 7.3. It is known that the average attitude of teenagers before being given education in the intervention group was 23.8, while the attitude of teenagers after being given education

in the intervention group was 37.5. It is known that the average attitude of teenagers before being given to the control group was 23.9, while the attitude of teenagers after being given to the control group was 26.8. There was an influence in the intervention group and the control group after being given and not given the educational video media on adolescent reproductive health on knowledge and attitudes about premarital sex at SMP N 1 Dente Teladas Tulang Bawang Lampung (p-value = 0.000). There was a difference in knowledge between the intervention and control groups of 44.82, while the difference in attitudes between the intervention and control groups was 49.0 (p-value = 0.000).

### **Suggestion**

For teenagers, they can anticipate or prevent the dangers of free sexual behavior and understand the importance of health education through video media as a medium to increase knowledge to avoid the effects of free sex.

Health workers should always try to provide health education to teenagers, using media that is inspiring and easy for teenagers to understand, such as education using video media.

For other researchers who will carry out research related to the influence of adolescent reproductive health education through video media on knowledge and attitudes about premarital sex, they should use other research concepts and increase other populations and samples to further optimize the results of subsequent research.

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