

## The Effect of Peer Group Education on Knowledge Levels About the Dangers of Free Sex in Adolescents

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### ABSTRACT

According to the World Health Organization (WHO), in 2018 stated that 33% of Indonesian teenagers engage in promiscuous sex. The consequences of unrestricted sex include the development of venereal illnesses, STDs, and HIV/AIDS, as well as unintended pregnancy. Peer Group Education is one method for delivering accurate knowledge regarding free sex. It is considered twice as effective as other methods because the facilitator creates a more open atmosphere with a friendly approach, not patronising or judging. The goal of this study is to see how peer group education affects teenagers' understanding of the consequences of unrestricted sex. This study is pre-experimental, with a one-group pretest-posttest design and complete sampling. A questionnaire was used to collect data. The sample size was 42 people which was conducted at SMKN 1 Rancah in March 2022. The results showed that most participants had poor knowledge before the peer group discussion intervention. However, after the intervention, most participants were categorised as having good knowledge, with a mean  $\pm$  standard deviation (SD) change before and after the intervention of  $34.90 \pm 3.37$  to  $47.24 \pm 1.39$ . There is an effect of peer group education on the level of knowledge about the dangers of free sex in adolescents. A structured and comprehensive education programme on the various aspects of the dangers of casual sex, including physical and mental health risks, and social impacts, as well as solutions and strategies to avoid it, is needed.

*World Health Organization (WHO) pada tahun 2018 menyatakan bahwa 33 % remaja Indonesia melakukan hubungan seks bebas. Dampak dari seks bebas adalah terjadinya penyakit kelamin, PMS dan HIV/AIDS serta bahaya kehamilan dini. Diperlukan penyampaian informasi yang tepat mengenai seks bebas, salah satunya dengan Peer Group Education yang dinilai 2 kali lebih efektif dibandingkan metode lain disebabkan fasilitator dapat menciptakan suasana yang lebih terbuka dengan pendekatan bersahabat, tidak menggurui atau menghakimi. Tujuan penelitian untuk mengetahui pengaruh pendidikan kelompok sebaya terhadap tingkat pengetahuan tentang bahaya seks bebas pada remaja. Desain penelitian ini adalah pra-eksperimental dengan rancangan one group pretest-posttest design dengan menggunakan total sampling. Data dikumpulkan dengan kuesioner. Jumlah sampel sebanyak 42 responden yang dilakukan di SMKN 1 Rancah pada bulan Maret 2022. Hasil penelitian menunjukkan bahwa sebagian besar partisipan dikategorikan memiliki pengetahuan yang kurang baik sebelum intervensi diskusi kelompok sebaya. Namun, setelah intervensi, sebagian besar partisipan dikategorikan memiliki pengetahuan yang baik, dengan perubahan mean  $\pm$  standard deviasi (SD) sebelum dan sesudah intervensi sebesar  $34,90 \pm 3,37$  menjadi  $47,24 \pm 1,39$ . Terdapat pengaruh pendidikan kelompok sebaya terhadap tingkat pengetahuan tentang bahaya seks bebas pada remaja. Diperlukan program edukasi yang terstruktur dan menyeluruh terkait berbagai aspek bahaya seks bebas, termasuk risiko kesehatan fisik dan mental, dampak sosial, serta solusi dan strategi untuk menghindarinya.*

## **Introduction**

Adolescence is a transition period marked by physical, emotional and psychological changes. Adolescents have changes in their physical, mental, and emotional organs (Harini & Juwitasari, 2023). Psychological (mental) changes include emotional changes in the form of sensitive conditions, tend to want to know new things so that trial and error behavior appears that causes the desire to have sexual relations (Topan & Yuandari, 2021; Zayanti et al., 2017). The World Health Organization (WHO) states that 33 per cent of Indonesian teenagers have free sex. The Ministry of Health of the Republic of Indonesia said that 58% of adolescents penetrated at the age of 18 to 21 years, and 30% had abortions. Sexual behavior carried out was 88% holding hands, 32% kissing lips, 11% touching or stimulating, and 2% of young women and 5% of young men had sexual relations (Kamalah & Tina, 2021; Sari & Pertiwi, 2018).

The impact of free sex is the occurrence of physical impacts, namely venereal disease, sexually transmitted diseases and HIV/AIDS as well as the dangers of unwanted early pregnancy (L. Jennings et al., 2019; Makaria et al., 2021). Sexually transmitted diseases are diseases that can be transmitted from one person to another through sexual intercourse (Racionero-Plaza et al., 2021). As for the psychological impact, there are feelings of guilt, anger, sadness, regret, shame, loneliness, confusion, stress, self-hatred and the people involved, unable to forgive oneself, and nightmares (Zakiah *et al.*, 2022).

Factors that play a role in the emergence of sexual problems in adolescents include the limited service of sex education because it is still considered taboo. Knowledge can shape attitudes so that teenagers are motivated to behave healthily, especially by avoiding free sex (Vongxay et al., 2019). Knowledge can be increased by a group learning process with peers or peer groups (Kamalah & Tina, 2021). Factors that influence free sex behavior in adolescents include lack of parental indifference, low level of family education, peer pressure, understanding of the level of religion (religiosity), lack of knowledge about the dangers of free sex and exposure to pornographic media. Among these factors, peer groups are a very dominant factor in influencing sexual behavior among adolescents (Sasqia E. Putri, 2021).

Peer group education is a combination of educational boundaries and peer groups, which is interpreted as a process to train and motivate a group of children through informal and formal educational activities carried out in a peer group (Fasil et al., 2022). The benefit is to increase knowledge, attitudes, beliefs, and skills, so that they can be responsible (J. M. Jennings et al., 2014). The reasons for using peer group education are economic, practical, effective, and open (Khusniyati et al., 2018).

Researchers conducted a preliminary survey in January 2022 on adolescents at State Vocational High School 1 Rancah and found that 70% of adolescents did not understand the right information related to free sex. In addition, the results of interviews conducted with several adolescents show that adolescents have close friends where the risk of free sex is even greater. Adolescents at State Vocational High School 1 Rancah School have never received health education specifically on the issue of free sex using the Peer Group Education method. This is the background for researchers to conduct research

aimed at knowing the effect of peer group education on the level of knowledge about the dangers of free sex in adolescents.

## **Method**

This study used a Pre-experiment design with a pretest-posttest two-group design approach. We conducted the study in March 2022 at State Vocational High School 1 Rancah Indonesia, involving 42 students selected by total sampling and fulfilling the sample inclusion requirements, such as adolescent students and willing to become respondents by signing a consent letter. Inclusion criteria were XII grade students at State Vocational High School 1 Rancah who were willing to be respondents. Exclusion criteria were students who did not complete the questionnaire. Respondents who did not follow the procedure until the end were excluded from this study.

The variables of this study were adolescent students. In this study, researchers have selected eight students who are used as providers of information related to the dangers of free sex, where the selected students have more knowledge than the respondents. Previously, the eight selected students had received information related to the impact of free sex which contained an explanation of the definition, forms of free sex, causal factors, dangers, and ways to prevent free sex. Before the intervention, researchers measured the level of knowledge of adolescents related to the dangers of free sex (pre-test). Then after the intervention with the peer group discussion method, the researcher again measured the level of knowledge of adolescents related to the dangers of free sex (posttest). In this study, the intervention model was provided in the form of peer group discussions regarding the definition, forms of free sex, causal factors, dangers, and ways to prevent free sex. Each respondent received material using a predetermined intervention tool.

The knowledge questionnaire has 15 questions with right and wrong response choices. If the responder replied correctly, a score of 1 was assigned; if the response was incorrect, a score of 0 was assigned. The scores achieved ranged from 0 to 30. Good categories were assigned when the response score was 25-30 (76-100%), Fair when the answer score was 20-24 (56-75%), and Poor when the answer score was  $\leq 19$  (0-55%).

The Guttman scale is used in the questionnaire. The fundamental aspect of the Guttman scale is that it is a cumulative scale that only measures one dimension of a multidimensional variable; hence, this scale is dimensionless. The data obtained is either interval data or a dichotomous ratio (two options). The researcher holds a master's degree and has worked as a professor and researcher for 10-15 years. Because the researcher has performed several health sector studies and accumulated numerous questionnaires, he created one for this study. The questionnaire was evaluated on ten respondents prior to the research, and the results got a validity test score  $< 0.514$ .

This study created a picture of teenage understanding before and after peer education about the hazards of unrestricted sex. Sampling was done using total sampling and obtained a sample size of 50 adolescent respondents, namely eight respondents for peer group education and 42 respondents. There are no disadvantages arising from participation in this study. Respondents voluntarily participated in

this study and were free to stop the study at any time without consequences. Inform consent was obtained before the study started. The research data was stored by the research group with confidentiality and closed access without our permission. This study received permission from SMKN 1 Rancah with number 317/TU.01.02/SMKN1/CADISDIK.WIL XIII and STIKes Muhammadiyah Ciamis with number 136/III.3.AU/F/2022.

## Results

**Table 1.** Characteristics of Respondents

		Frequency	Per cent	Valid Percent	Cumulative Percent
<b>Gender</b>	Male	22	52.4	52.4	52.4
	Female	20	47.6	47.6	47.6
	Total	42	100.0	100.0	100
<b>Age</b>	17	12	28.6	28.6	28.6
	18	28	66.7	66.7	95.2
	19	2	4.8	4.8	100.0
	Total	42	100.0	100.0	

Table 1 reveals that the majority of the 42 % of respondents were under the age of 18. Meanwhile, in the gender category, the highest frequency was male, with as many as 22 % of respondents (52.4%).

**Table 2.** Providing Audio Visuals

Before Peer Group Education				After Peer Group Education			
		Frequency	Per cent			Frequency	Per cent
<b>Valid</b>	Good	4	9.5	<b>Valid</b>	Good	33	78.6
	Enough	18	42.9		Enough	9	21.4
	Less	20	47.6				
	Total	42	100.0		Total	42	100.0

Table 2 shows that respondents' knowledge about the dangers of free sex before being given peer group education was highest in the less category of 47.6% of respondents. After being given peer group education, the highest was in the good category, with as many as 78.6% of respondents.

**Table 3.** Level of Knowledge about the Dangers of Free Sex Before and After Being Peer Group Education

			Statistic	Std. Error
<b>Pre_Test</b>	Mean		34.90	.520
	95% Confidence Interval for Mean	Lower Bound	33.85	
		Upper Bound	35.95	
	5% Trimmed Mean		34.89	
	Median		34.00	
	Variance		11.357	
	Std. Deviation		3.370	
	Minimum		28	
	Maximum		42	
	Range		14	
	Interquartile Range		6	
	Skewness		.038	.365
	Kurtosis		-.699	.717
	<b>Post_Test</b>	Mean		47.24
95% Confidence Interval for Mean		Lower Bound	46.80	
		Upper Bound	47.67	
5% Trimmed Mean			47.15	
Median			47.00	
Variance			1.942	
Std. Deviation			1.394	
Minimum			46	
Maximum			50	
Range			4	

Table 3 revealed that most participants (47.6%) had a low understanding prior to the peer group discussion intervention. However, after the intervention, most participants (78.6%) were categorised as having good knowledge, with a mean±standard deviation (SD) change before and after the intervention of 34.90±3.37 to 47.24±1.39.

**Table 4.** Results of Wilcoxon Test Analysis Level of Knowledge About the Dangers of Free Sex Before and After Peer Group Education

	<b>Average</b>	<b>Percentage</b>	<b>P-Value</b>
Decrease	0	0	0.000
Increase	38	90.4%	
Permanent	4	9.5%	
<b>Amount</b>	<b>42</b>	<b>100.0</b>	

Table 4 shows changes before and after peer group education, as evidenced by a p-value of 0.000. This suggests that peer group education has a substantial impact on understanding the hazards of unrestricted sex. Thirty-eight persons (90.4%) reported a gain in knowledge after participating in peer-group education, with an average increase of 12.34%.

## Discussion

The results showed that respondents, before peer group education, were categorized as lacking knowledge. According to the results of research by Owa, Sekunda, & Budiana (2020) obtained by all respondents studied in the less category. Nurleny (2018) states that adolescents' knowledge about the dangers of free sex before peer group education is a poor level of knowledge, which is characterised by the number of wrong answers in the pretest, including the question on the item "the impact of free sex". One of the contributing factors is that respondents tend to understand themselves regarding information about sex and do not have relevant sources of information. Taboo and disrespectful reasons are some of the reasons why respondents get information related to free sex (Akbarini & Fitriani, 2020). From the results of interviews with school parties, it is known that adolescents have not received detailed and in-depth interventions related to the topic of free sex. Table 1 shows that 66% are above the age of 18. This indicates that teenagers have reached middle age. At this age, sexual activity begins to increase, and teenagers' interest in high sexuality is fueled by the growth of developing reproductive organs. At this stage, one's ability to capture and think is impacted by one's age. The more a person grows older, the better his or her ability to capture and think, resulting in more knowledge (Nuttall et al., 2022).

The results of increasing knowledge after being given a knowledge intervention using the peer group education method. This is in line with Khusniyati, Purwati, & Vivianni (2018), who states that one of the factors that influence knowledge is peers (peer group). Adequate knowledge of peer groups regarding reproductive health will facilitate healthy and responsible decision-making (Layzer et al., 2017). On the other hand, adolescents' knowledge about reproductive health is low, it will produce information that cannot be accounted for, including myths related to reproductive health that tend to be misleading (Waliyanti et al., 2022). Peer Group Education or peer education is the delivery of education and information delivered by a friend or community group categorized by age, class, or status. Because the information is delivered by their friends using the same language, it can be done anytime and anywhere, and someone will be more open and brave to ask for information from their peers, health

education using the Peer Group Education method is more effective in improving students' knowledge about reproductive health (Mullen et al., 2020). Through peer educators, sensitive messages can be conveyed openly so that many issues of sexuality and reproductive health are obtained. In addition, increased knowledge about the dangers of free sex occurs because of experience, namely in the form of health education with the peer group education method. (2022) states that the level of knowledge can be influenced by experience. The experience in question is in the form of exposure to information obtained by individuals through formal and informal activities, which provide a new memory (Dodd et al., 2022).

Table 4 shows that respondents experienced increased knowledge after peer group education was carried out by as many as 38 people (90.4%), with an average increase of 12.34%. This finding is in accordance with the research of Kamalah & Tina (2021) that health education with the peer group education method increases adolescent knowledge about the dangers of free sex, with a p-value of  $0.000 < 0.005$ . The peer teaching technique is becoming more popular in education since it enhances learning outcomes and produces good effects. Peer-facilitated knowledge improvement builds a bridge between cooperative learning methodologies, encouraging mutual respect and understanding among collaborative learners. Furthermore, research conducted by Nurleny (2018) revealed that there is a significant difference between adolescent knowledge about the dangers of free sex before and after peer-group education. Adolescents' sexual lives are crucial. Adolescents go through developmental stages such as sexual identity, self-esteem, and sexual responsibility. Adolescents require additional assistance in developing knowledge, skills, and behaviors that promote healthy sexual development. Sexual development is healthy. According to many polls, some teenagers in Indonesia have engaged in actions that led to free sex. As a result, teenage sexual health is crucial, where there is a requirement for healthy sexual development.

Researchers argue that peer group education is very effective in triggering the respondents' curiosity about the dangers of free sex. This is demonstrated by the respondents' eagerness to listen to and debate the consequences of unrestricted sex. Peer group education activities become a forum for discussing and exchanging information so that knowledge increases. This increase in knowledge shows the respondents' awareness of the dangers of free sex that can prevent deviant behavior or free-sex behavior. The researcher assumes that peer group education is good as a role model that can influence behavior and knowledge related to free sex. The emotional closeness between peers makes peer group education an easy and effective method.

## **Conclusions**

The results showed that most participants (47.6%) were categorised as having poor knowledge before the peer group discussion intervention. However, after the intervention, most participants (78.6%) were categorised as having good knowledge, with a mean±standard deviation (SD) change before and after the intervention of  $34.90 \pm 3.37$  to  $47.24 \pm 1.39$ . Peer group education has great potential to increase knowledge about the dangers of free sex in adolescents. Collaboration and support from

schools and parents are needed to develop more effective sexual education programmes. developing a more effective sexual education programme.

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