

HEALTH EDUCATION USING VIDEO MEDIA ON FEMALE ADOLESCENTS' KNOWLEDGE AND ATTITUDE ABOUT PREMARITAL SEXUAL BEHAVIOR

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ABSTRAK : PENGARUH PENDIDIKAN KESEHATAN MENGGUNAKAN MEDIA VIDEO TERHADAP PENGETAHUAN DAN SIKAP REMAJA WANITA TENTANG PERILAKU SEKSUAL PREMANITAL

Latar Belakang: Remaja yang tidak memiliki pengetahuan yang memadai mempunyai peluang untuk melakukan hubungan seks pranikah. Terdapat 25% remaja usia 15 tahun pernah melakukan hubungan seksual yang mengakibatkan penyakit menular seksual dan kehamilan yang tidak diinginkan. Hasil pra survei menunjukkan 6 siswi mengalami kehamilan yang tidak diinginkan dan 2 siswi berhenti sekolah karena menikah. Upaya yang dapat dilakukan untuk meningkatkan pengetahuan dan sikap remaja adalah dengan memberikan pendidikan kesehatan melalui media video.

Tujuan: Untuk mengetahui pengaruh pendidikan kesehatan menggunakan media video terhadap pengetahuan dan sikap remaja putri tentang perilaku seksual pranikah di MTS Negeri 2 Lampung Timur Tahun 2022.

Metode: Penelitian ini merupakan penelitian kuantitatif dengan desain pre-eksperimental dan one-group pretest-posttest design. Populasi dalam penelitian ini adalah siswi kelas VII MTS Negeri 2 Lampung Timur yang berjumlah 95 orang. Teknik pengambilan sampel yang digunakan dalam penelitian ini adalah total sampling. Analisis data menggunakan ANOVA satu arah.

Hasil: Rerata skor pengetahuan siswi pada pretest adalah 8,41, 3 jam setelah mendapat pendidikan kesehatan adalah 12,6, dan 3 hari setelah mendapat pendidikan kesehatan adalah 10,94. Sedangkan nilai rata-rata sikap siswi pada pretest sebesar 31,51, 3 jam setelah mendapat pendidikan kesehatan sebesar 44,48, dan 3 hari setelah mendapat pendidikan kesehatan sebesar 40,66. Hasil uji one way ANOVA diperoleh p-value $0,000 < 0,05$.

Kesimpulan: Terdapat pengaruh pendidikan kesehatan menggunakan media video terhadap pengetahuan dan sikap remaja putri tentang perilaku seksual pranikah di MTS Negeri 2 Lampung Timur Tahun 2022.

Kata Kunci : Pendidikan kesehatan, video, pengetahuan, sikap, seks bebas

ABSTRACT

Background: Adolescents who do not have adequate knowledge have the probability to have premarital sex. There are 25% of adolescents aged 15 years who have had sexual intercourse which resulted in sexually transmitted diseases and unwanted pregnancies. The results of the pre-survey showed that 6 female students experienced unwanted pregnancies and 2 students quit school due to marriage. Efforts that can be made to increase adolescents' knowledge and attitude are to provide health education using video media.

Purpose: To determine the effect of health education using video media on female adolescents' knowledge and attitude about premarital sexual behavior at MTS Negeri 2 Lampung Timur in 2022.

Methods: This study is a quantitative study with pre-experimental designs and one-group pretest-posttest designs. The population in this study were 95 female students in seventh grade at MTS Negeri 2 Lampung Timur. The sampling technique used in this study was total sampling. The data analysis used one-way ANOVA.

Results: Mean score of female students' knowledge at the pretest was 8.41, 3 hours after getting health education was 12.6, and 3 days after getting health education was 10.94. Whilst, the mean score of female students' attitude at the pretest was 31.51, 3 hours after getting health education was 44.48, and 3 days after getting health education was 40.66. The results of the one-way ANOVA test obtained the p-value of $0.000 < 0.05$.

Conclusion: There was an effect of health education using video media on female adolescents' knowledge and attitude about premarital sexual behavior at MTS Negeri 2 Lampung Timur in 2022.

Keywords : Health education, video, knowledge, attitude, free sex

INTRODUCTION

Physiological changes in adolescents are marked by puberty. Teenagers who do not have adequate knowledge have the opportunity to have premarital sex. There are 25% of adolescents aged 15 years who have had sexual intercourse which resulted in sexually transmitted diseases (STDs) and unwanted pregnancies. Premarital sexual behavior in adolescents is influenced by many factors such as biological factors, genetic factors, individual perceptions, attitudes, intentions, subjective norms, personal characteristics, values and socio-cultural norms (Murdiningsih, 2020).

The results of the 2017 Indonesian Demographic and Health Survey (IDHS) show that most of the female adolescents (59%) and male adolescents (74%) have had sexual intercourse at the age of 15-19 years. The reasons for having sexual intercourse for the first time from (54%) women and (46%) men are because they love each other, curiosity, it just happens, and can also be caused by being influenced by friends (IDHS, 2017).

The Lampung High Religious Court (PTA) noted that the number of early marriages from January to May 2021 at the Religious Courts in Lampung Province reached 240 cases. The dispensation for early marriage during 2020 actually submitted a total of 724 cases. However, that year, 697 cases were decided to carry out the marriage (High Religious Court, 2021).

The phenomenon of free sex in Indonesia is concerning, where data from a survey conducted by Indonesian Child Protection (KPAI) states that as many as (32%) adolescents aged 14-18 years in big cities in Indonesia have had sex. The results of another survey from Sari et al., (2018) also stated that one in four teenagers in Indonesia had premarital sexual relations and proved (62.7%) teenagers lost their virginity while still in junior high school, and some of them even had an abortion.

The impact of premarital sexual behavior for adolescents is that it can cause unwanted pregnancies, whereas if the teenager is still in school it will cause dropouts. In addition, premarital sexual behavior can also cause abortion, stress, and can cause infectious diseases such as HIV/AIDS, herpes, syphilis, and other infectious diseases (Wahyuni, 2020).

Knowledge about sexuality behavior that is given professionally is very important for adolescents, especially in terms of being able to prevent adolescents' desire to have sex before their time. This is because adolescent knowledge will affect adolescents' attitudes towards premarital sex behavior (Wahani et al., 2021). Adolescent attitudes

about premarital sexual behavior are very important. This is because there are some losses that arise as a result of sexual behavior, especially if adolescents are not able to respond to it and control themselves (IDHS, 2017).

Sex education through an outreach activity is one way to reduce or prevent premarital sexual behavior. Especially to prevent unwanted side effects such as unwanted pregnancy, sexually transmitted diseases, depression and guilt (Sarwono, 2011). In addition, sex education is also an effort to teach, raise awareness, and provide information about sexual problems. This is done to prevent children from becoming victims of sexual abuse, to prevent children from trying things they should not be allowed to do and to prevent sexual deviations from occurring in children (Ratnasari & Alias, 2016).

There are several media that can be used to support health education activities, one of which is video. Video media is an alternative that can be used in providing counseling. The benefits of video media are to create interest and motivation, raise awareness, increase participation, and encourage reflection and discussion. Video media can affect attitude stability and open up opportunities for desired attitude changes (Susanti et al, 2015). In this study, the video media used was the researcher's own work which included premarital sex behavior and the impact of premarital sex.

The results of the research by Mughny et al (2020) stated that there was a significant influence on the level of adolescent knowledge about premarital sex before and after being given health education with video media at Al-Mas'udiyah High School, Bandungan District, Semarang Regency. So it can be concluded that health education using video media is effective in increasing adolescent knowledge.

Based on the results of the pre-survey, it was found that in 2021 there were 6 students who experienced unwanted pregnancies and 2 students quit school due to marriage. After conducting interviews with 10 students, 6 students said they did not know the impact of premarital sex and 4 students said the dangers of premarital sex. This study used class VII students. This is because Class VII is the period of the early adolescent phase, so it is hoped that by conducting education in class VII, it can prevent the occurrence of promiscuity such as free sex.

RESEARCH METHODS

In this research, the writer uses quantitative research. The research design used pre-experimental designs (pre-experimental) with a one-group pretest posttest design. The population in this study was taken from the total number of teenage girls in grade VII at MTS Negeri 2 East Lampung with a total of 95 people and the sample in this study was 95 people using total sampling technique. Analysis of univariate and bivariate data using one way ANOVA.

RESEARCH RESULTS

Univariate Analysis

Based on the table above, it is known that the average knowledge of young women about

premarital sexual behavior before being given health education using video media is 8.41 with a standard deviation of 2.699, a minimum score of 2 and a maximum of 15. After 3 hours of health education, the average score is 12.60, standard deviation 2.826, minimum score 5 and maximum 18. Meanwhile, the average knowledge of young women about premarital sex behavior after 3 days of being given health education using video media is 10.94 with a standard deviation of 2.767, a minimum score of 6 and a maximum of 19.

Table 1

Average knowledge of adolescent girls about premarital sex behavior before and after being given health education using video media at MTS Negeri 2 East Lampung in 2022

Knowledge	N	mean	Standard Deviation	Min-Max
Pretest	95	8.41	2,699	2-15
Posttest 3 Hours	95	12.60	2,826	5-18
Posttest 3 Days	95	10.94	2,767	6-19

Table 2

Average attitudes of young women about premarital sex behavior before and after being given health education using video media at MTS Negeri 2 East Lampung in 2022

Attitude	N	mean	Standard Deviation	Min-Max
Pretest	95	31.51	3,617	24-41
Posttest 3 Hours	95	44.48	3,608	37-54
Posttest 3 Days	95	40.66	4,732	29-53

Based on the table above, it is known that the average attitude of young women about premarital sexual behavior before being given health education using video media is 31.51 with a standard deviation of 3,617, a minimum score of 24 and a maximum of 41. After 3 hours of health education, the average score is 44.48, standard deviation 3,608, minimum score 37 and maximum 54. While the average attitude of young women about premarital sex behavior 3 days after being given health education using video media is 40.66 with a standard deviation of 4.732, a minimum score of 29 and a maximum of 53.

Bivariate Analysis

Based on the table above, it is known that the average difference in knowledge scores before being given health education and after 3 hours being given health education is 4,189. The average difference in knowledge scores before being given health education and after 3 days being given health education was 2.526. While the difference in the average knowledge score 3 hours after being given health education and 3 days after being given health education was 1,663. One way ANOVA test results obtained p value 0.000 < 0.05, meaning that there is an effect of health education using video media on young girls' knowledge about premarital sex behavior in MTS Negeri 2 East Lampung in 2022

Table 3

The effect of health education using video media on young women's knowledge about premarital sex behavior at MTS Negeri 2 East Lampung in 2022

Time (I)	Time (J)	Average difference	P value
Pretest	Posttest 3 Hours	4,189	0.000
Pretest	Posttest 3 Days	2,526	0.000
Posttest 3 Hours	Posttest 3 Days	1,663	0.000

Table 4

The effect of health education using video media on young women's attitudes about premarital sex behavior at MTS Negeri 2 East Lampung in 2022

Time (I)	Time (J)	Average difference	P value
Pretest	Posttest 3 Hours	12,979	0.000
Pretest	Posttest 3 Days	9,158	0.000
Posttest 3 Hours	Posttest 3 Days	3,821	0.000

Based on the table above, it is known that the average difference in attitude scores before being given health education and after 3 hours being given health education is 12,979. The average difference in attitude scores before being given health education and after 3 days being given health education was 9,158. While the average difference in attitude scores 3 hours after being given health education and 3 days after being given health education was 3,821. One way ANOVA test results obtained p value $0.000 < 0.05$, meaning that there is an effect of health education using video media on adolescent girls' attitudes about premarital sex behavior at MTS Negeri 2 East Lampung in 2022.

DISCUSSION

Univariate Analysis

Average knowledge of adolescent girls about premarital sexual behavior before and after being given health education using video media at MTS Negeri 2 East Lampung in 2022

The results of this study indicate that the average knowledge of young women about premarital sexual behavior before being given health education using video media was 8.41 with a standard deviation of 2.699, a minimum score of 2 and a maximum of 15. After 3 hours of health education, the average was 12.60, standard deviation 2.826, a minimum score of 5 and a maximum of 18. Meanwhile, the average knowledge of young women about premarital sexual behavior after 3 days of being given health education using video media is 10.94 with a standard deviation of 2.767, a minimum score of 6 and a maximum of 19.

Knowledge is a result (knowing) after someone senses a certain object. Sensing of an object can occur through the five senses including

the senses of sight, hearing, smell, taste and touch. In the sensing process can be influenced by the perception of the object. Most of human knowledge is obtained through the senses of sight and hearing (Wawan and Dewi, 2019).

Premarital sexual behavior is behavior that is carried out by a pair of individuals because of a sexual urge in the form of penetration of the penis into the vagina, there is also penetration into the mouth (oral) or into the anus (anal) which is carried out before marriage (Tarwoto, 2012).

Health education is an effort to create public behavior that is conducive to health, such as providing information to young women about premarital sex behavior. An increase in the knowledge of young women about premarital sex is also influenced by the use of methods when providing health education, namely demonstrations and questions and answers that are carried out when providing health education, where there is reciprocal communication between researchers and respondents, namely being able to ask directly what is not clear, because communication includes the delivery of information and the exchange of thoughts and feelings and is a means used to influence the behavior of others. Therefore, communication is very important to achieve the success of nursing interventions because the nursing process is shown to improve behavior change for the better. Supported by the provision of video media which is one of the educational media, after the provision of health education so that young women can better remember and understand the information provided. In providing health education, one should use one of the health media (Notoatmodjo, 2012).

This study is in line with the research conducted by Wardani (2017) which showed the

average value of 20 at the time of the pretest was 12.6. The minimum score achieved by students is 6 and the maximum score that can be achieved by students is 17 with a median of 14. The average score of 20 students at the time of the posttest was 14.2. The minimum score achieved by students is 9 and the maximum score that can be achieved by students is 18 with a median of 15.

Based on the results of this study, it was found that after health education it was known that the knowledge of young women about premarital sex increased, where when a 3-hour posttest was carried out an average increase of 4,189 but 3 days after being given health education there was only an increase of 2,526. This is in accordance with the theory of Susilowati (2016) which says that someone who has been given health education through visual and verbal then is measured again 3 hours after health education, the respondent's memory is 85%, while 3 days after being given health education the respondent's memory is only reached 65%.

Average attitudes of young women about premarital sexual behavior before and after being given health education using video media at MTS Negeri 2 East Lampung in 2022

The results of this study indicate that the average attitude of young women about premarital sex behavior before being given health education using video media is 31.51 with a standard deviation of 3.617, a minimum score of 24 and a maximum of 41. After 3 hours of health education, the average score is 44, 48, standard deviation 3,608, minimum score 37 and maximum 54. While the average attitude of young women about premarital sex behavior 3 days after being given health education using video media is 40.66 with a standard deviation of 4.732, a minimum score of 29 and a maximum of 53.

Attitude is characterized as a level of tendency that is positive or negative related to the psychological object, a positive attitude if he likes it, otherwise the person who is said to have a negative attitude towards the psychological object if he does not like it. Thurston defines attitude as the degree of positive affect or negative affect on a psychological object (Edwards in Azwar, 2013).

Teenagers' premarital sexual attitudes are influenced by many things, apart from knowledge factors are also influenced by cultural factors, other people, mass media, personal experiences, educational institutions, religious institutions, and emotions from within the individual. Teenagers begin to prepare themselves for adult life, including in the sexual aspect. It takes a wise attitude from parents,

educators, the community, and the youth themselves so that they can go through the transition period with the right direction so that they don't do things that lead to negative actions (Jannah, 2017).

The health education method used is counseling using video media, there is a good response from respondents when listening to counseling, and respondents also ask questions that they do not know. There is a reciprocity between the counseling provided and the response from the respondents, so that the process of providing health education can take place properly which is carried out directly using video media (Notoatmodjo, 2012).

This study is in line with research conducted by Susanti (2015) which shows that the average attitude before being given health education using video media is 48.4 and after being given health education an average of 53.76 is obtained. This shows that there is an increase in attitude scores before and after health education using video media.

According to the researcher, the success of health education in the attitude category was assessed by increasing the attitude score. From the research data above, it was found that there was a significant increase in attitude scores. The attitude referred to in this study is an attitude that supports health education about premarital sex behavior. After being given health education, it was found that the attitude of adolescents was getting better than before being given health education.

The increase was not too significant because the assessment was formative to seek feedback at that time not in the form of a summative test. In this study, the test was carried out in a formative manner because it was only carried out to measure the intervention process once, not an assessment of the test in the learning program so that the test should be carried out for the process of providing education and not in stages.

Bivariate Analysis

The effect of health education using video media on young women's knowledge about premarital sex behavior at MTS Negeri 2 East Lampung in 2022

The results of this study indicate that the average difference in knowledge scores before being given health education and after 3 hours being given health education is 4,189. The average difference in knowledge scores before being given health education and after 3 days being given health education was 2.526. While the difference in the average knowledge score 3 hours after being given health education and 3 days after being given health education was 1,663.

One way ANOVA test results obtained p value $0.000 < 0.05$, meaning that there is an effect of health education using video media on young girls' knowledge about premarital sex behavior in MTS Negeri 2 East Lampung in 2022.

The level of knowledge or cognitive is a very important domain for the formation of one's actions (Notoatmodjo, 2012). Knowledge can also be obtained from experience, as well as from information that comes from someone. One of the roles of health workers is to increase public understanding both in health and illness to improve health and knowledge, one of which is through health education (Notoatmodjo, 2012).

Health education methods also have an effect on increasing mother's knowledge such as demonstrations. This is in accordance with the opinion expressed by Notoatmodjo (2012) which states that the ability to capture information is strongly influenced by the effectiveness of the sensory function to capture the given stimulus so that it is properly digested into information, the more the number of senses involved in a process of receiving information, the more the senses will be. the weight of the catching power of the stimulation.

Media is very necessary in learning, but until now there are still teachers who have not used the media, so a change in the attitude of the teacher is needed. The selection of extension media needs to be adjusted to the needs, situations and conditions of each, so that the best media is the available media. To determine the right extension media, teachers can develop both content, message explanation, and characteristics. The existence of learning media can cause oral and written traditions in the learning process to be developed with various learning media, can determine teaching methods that can be used in different situations and create a healthy emotional atmosphere among participants to be concrete and easy to understand by students.

The video method is one of the simple methods or tools used to increase mother's knowledge, namely the health education (education) method. Health education is inseparable from the activities of delivering health messages or health promotion to the community, groups and even individuals so that they can gain knowledge about better health. The need for efforts to use and improve methods in health education as an effort to improve the quality of health services and increase knowledge in order to encourage targets to become independent individuals in maintaining health, especially in avoiding premarital sexual behavior properly and correctly (Susilowati, 2016).

The results of this study are in line with research conducted by Mughny (2020) which shows that there is an influence between the provision of health education with video media on adolescent knowledge about premarital sex. In addition, according to Susanti's research (2015) which shows that adolescents who are given video media have a better level of knowledge than adolescents who are given the lecture method ($p < 0.05$).

Based on the results of this study, the increase in adolescent knowledge about premarital sex is because health education interventions have been given so that adolescent knowledge is getting better. So it was found that before being given health education, respondents did not know the impact of premarital sex behavior. However, after health education was carried out, most of the adolescents already knew the impact of premarital sex properly and correctly, which was indicated by an increase in knowledge scores before and after health education.

The results of this study indicate that the lowest respondent's knowledge about how to get information about free sex is that there are only 20 respondents who answered correctly. but after being given health education using video media can increase respondents' knowledge of how to get information about free sex. This study shows that there is an average difference between pretest, posttest 3 hours, and posttest 3 days. Where the 3-hour posttest score is higher than the 3-day posttest score. This is in accordance with Susilowati's research (2016) which shows that there is a difference in a person's memory ability after 3 hours, which is 85% and after 3 days, which is 65%.

The effect of health education using video media on young women's attitudes about premarital sex behavior at MTS Negeri 2 East Lampung in 2022

The results of this study indicate that the average difference in attitude scores before being given health education and after 3 hours being given health education was 12,979. The average difference in attitude scores before being given health education and after 3 days being given health education was 9,158. While the average difference in attitude scores 3 hours after being given health education and 3 days after being given health education was 3,821.

One way ANOVA test results obtained p value $0.000 < 0.05$, meaning that there is an effect of health education using video media on adolescent girls' attitudes about premarital sex behavior at MTS Negeri 2 East Lampung in 2022.

Determining attitudes towards a stimulus, especially a sexual stimulus, is very important,

especially during adolescence. Various losses can arise due to deviant sexual behavior in this case is premarital sex behavior, especially if teenagers are not able to respond and control themselves. Losses that can occur due to premarital sexual behavior in adolescents are unwanted pregnancies and abortions, experiencing stress and shame and can even contract sexually transmitted diseases (IDHS, 2017).

Video media is one of the media that uses the senses of sight and hearing, therefore video media has benefits that can affect a person's change not only in knowledge but also in the attitude of the teenager. This approach with media has a great influence on students where they are able to change attitudes as a result of the learning process that has been carried out (Vidayantiet *al.*, 2020).

This study is in line with research conducted by Susanti (2015) which showed that adolescents who were given video media had a better attitude than adolescents who were given the lecture method ($p < 0.05$). The use of video media provides an opportunity to increase attitudes by 1.57 times compared to using the lecture method.

According to the researcher, the lowest respondent's attitude was regarding examples of free sex behavior, namely kissing the lips. However, after being given health education using video media, adolescents' attitudes increased to become more positive. Providing information in the form of video playback was able to increase students' knowledge about sex which had a positive impact on attitudes formed. Changes in attitude are influenced by the knowledge factor obtained from sensing results. Attitudes based on knowledge will be more consistent than attitudes that are not based on knowledge.

CONCLUSION

The average knowledge of young women about premarital sex behavior before being given health education using video media at MTS Negeri 2 East Lampung in 2022 was 8.41, after 3 hours of health education it was 12.60 and 3 days after health education the average was obtained. 10.94. The average attitude of young women about premarital sex behavior before being given health education using video media at MTS Negeri 2 East Lampung in 2022 was 31.51, after 3 hours of health education it was obtained 44.48 and 3 days after health education got an average 4,732. There is an effect of health education using video media on young women's knowledge about premarital sex behavior at MTS Negeri 2 East Lampung in 2022 with a p value of 0.000. There is an effect of health education

using video media on young women's attitudes about premarital sex behavior at MTS Negeri 2 East Lampung in 2022 with p value 0.000.

SUGGESTION

It is hoped that teenagers can increase their motivation to read and take advantage of technological developments positively in order to be able to access health education about free sex from various online media in order to avoid free sex behavior that can have a bad impact on the individual.

It is hoped that schools can provide information and can apply it by way of socialization through student activities by working with health workers so as to help increase knowledge and attitudes about the impact of free sex on adolescents. It is hoped that it can add reading material in the library in the health sector and provide knowledge and information about matters relating to the effect of health education using video media on the knowledge and attitudes of young women about premarital sex behavior. For further researchers, the results of this study can be used as basic data or information to carry out further research using better, more extensive data collection techniques and can examine the highest factors that can influence attitudes and behavior towards premarital sex.

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