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The Role of Reproductive Health Knowledge on The Sexual Behavior of Early Adolescents

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Abstract

This study aims to determine the role of reproductive health knowledge with early adolescent sexual behavior in Patian Village. The sample is youth aged 15-19 years, this study amounted to 103 people who were taken by purposive sampling technique. Methods of data collection using a sexual behavior scale and reproductive health knowledge questionnaire. Based on a simple linear regression test, a significance value of 0.033 with R = -0.207, and the value of the equation Y = 89.679 + -1.040X, which means knowledge of reproductive health has a negative role on sexual behavior so that every increase in knowledge of reproductive health by one point (eg 89.679 -> 90,679), then sexual behavior will decrease by -1,040. In addition, an R Square of 0.043 indicates that knowledge of reproductive health has a role contribution to sexual behavior by 4.3%. Thus it can be concluded that there is a negative role of reproductive health knowledge on sexual behavior, so the higher the knowledge of reproductive health knowledge on sexual behavior, so the higher the knowledge of reproductive health knowledge on sexual behavior in Patian Village.

Keywords : knowledge; reproductive health; sexual behavior; early adolescence

INTRODUCTION

Today, promiscuity that leads to premarital sexual behavior (dating, holding hands, kissing cheeks, hugging, kissing lips, holding breasts on top of clothes, holding breasts under clothes, holding genitals under pants, and having intercourse) has become something common in the lives of teenagers (González-Marugán et al., 2021). Teenagers who are dating express feelings through kissing, making out and so on (Permatasari & Suprayitno, 2021). Adolescence is a stage where the individual is experiencing an important period in his life, namely the transition from childhood to adulthood and provides opportunities to grow not only in physical dimensions but also in cognitive and social competence, economics, self-esteem and intimacy (Suprayitno et al., 2020).

In general, adolescence is a behavior that always wants to experiment, including in terms of sexuality, especially early adolescence which is the initial stage or the beginning of physical maturation (Permatasari & Suprayitno, 2020). Adolescence is a time when the reproductive organs function and the hormonal system begins to work, naturally teenagers become very curious about sex (Indriyani & Suprayitno, 2017). Teenagers' curiosity is usually channeled through conversations with peers, seeking information from pornographic sources, and then practicing with themselves, girlfriends, friends, or

other people. It is rare for teenagers to involve their parents to discuss deeper sexuality issues (Permatasari & Suprayitno, 2020). The view that sex is taboo makes teenagers reluctant to discuss their reproductive health with other people, teenagers actually feel uncomfortable when they have to discuss sexuality with their own Lack of information a Behavior sexual is all Act driven behavior by desire sexual good _ with against type nor fellow type (Salat & Suprayitno, 2019). Shapes Act in demand this could various variety, start from feeling interested until Act in demand dating, making out and intercourse (Ichwan et al., 2021).

Various behavior sexual on teenagers who haven't it's time for do connection sexual by reasonable known among other thing as masturbating or masturbation that is something habit bad in the form of manipulation to internal genitalia skeleton channel desire sexual for fulfillment frequent pleasure _ cause shock personal and emotions (Rahman et al., 2021). Several things can be a factor in teenagers having sex outside of marriage. Lack of knowledge of adolescents about reproductive health can be one of them. Low knowledge accompanied by the strong influence of peers at adolescence makes adolescents to have unhealthy sexual attitudes and behavior (Permatasari & Suprayitno, 2021).

Knowledge of reproductive health is very important to limit sexual behavior that is increasingly free in adolescence, especially in early adolescence (Adedini et al., 2018). Based on the results of a preliminary study of teenagers in Patian Village. Teenagers are seen embracing and holding hands with the opposite sex, one of the teenagers who was asked about knowledge on reproductive health said that he did not know anything about knowledge on reproductive health and even tended to avoid when asked further. This provides reinforcement that adolescents who do not know about reproductive health knowledge are likely to engage in sexual behavior.

RESEARCH METHODS

The research sample is tenagers aged 15-19 years, this study was in Patian Village. with a total of 106 people. Data collection was carried out in Patian Village. On the sexual behavior scale, it is based on the form of sexual behavior proposed by Duvall, EM and Miller, BC which consists of: Touching, Kissing, Petting and Intercourse. Meanwhile, the reproductive health knowledge questionnaire was made based on the scope of reproductive health which includes (1) the reproductive system, menstruation and wet dreams as well and pregnancy. The validity test of the measuring instrument for the sexual behavior scale in this study was using the corrected item-total correlation formula, while testing the validity of the reproductive health knowledge questionnaire in this study used content validity. Test reliability tool measuring scale behavior sexual on study this use testing reliability with technique coefficient alpha reliability using Cronbach's Alpha formula, while Test reliability on tool measuring questionnaire Knowledge Health Reproduction with method count Index Difficulty item. Next of 60 statements item behavior sex that has been spread obtained 37 valid items Knowledge Health Reproduction there are 30 valid items. Data analysis used analysis correlation

simple linear regression.

RESULT

The research data collection was carried out on January 20, 2022 by providing a sexual behavior scale and reproductive health knowledge questionnaire to adolescents in Patian Village. Data retrieval in this study was carried out by directly distributing sexual behavior scales and reproductive health knowledge questionnaires to adolescents in Patian Village, researchers were assisted by a research friend and several indigenous people of Patian village. Following variable data categorization behavior sexual with knowledge health reproduction:

Variable	Range	Category	NSI frequency	Percentage
Sexual Behavior	x < 61,667	Low	29	27.35%
	61,667 x 123.333	Currently	77	72.65%
	123.333 x	Tall	0	0
	Total		106	100%
knowledge a health reproduction	x < 10	Low	1	0.94%
	$10 \le x \le 20$	Currently	93	87.74%
	20 x	Tall	12	11.32%
	Total		106	100%be

Table 1. Categorization of Research Variable Data

Based on the categories in the table above, it can be seen that the scores of sexual behavior in 29 subjects (27.35%) were in the low category, 77 subjects (72.65%) were in the medium category and no subject was in the high category of sexual behavior. Furthermore, it can be seen that the reproductive health knowledge score shows the magnitude categorization, namely 1 subject (0.94%) in the low category, 93 subjects (87.74%) in the medium category and 12 subjects (11.32%) in the low category. tall. Before conducting the analysis, the assumptions were tested first. Normality test was performed using the Kolmogrov-Sminov Test technique. The results of the normality test can be seen that the significance value of the sexual behavior scale is 0.625 and the reproductive health knowledge questionnaire is 0.089. Thus, the scale of sexual behavior and reproductive health knowledge questionnaires can be said to be normally distributed

Based on the results of the linearity test, it can be seen that the significance value of linearity is 0.030 (less than 0.05), so it can be concluded that there is a linear relationship between the variables of sexual behavior and knowledge of reproductive health. Based on the results of the regression analysis, the result of R is -0.207 with a significance level of 0.033 <0.05, which means that there is a significant role between reproductive health knowledge and sexual behavior of Patian village adolescents, so the hypothesis is accepted. This is also in accordance with the research which obtained a chi square value of 7.693 with a significance level of 0.05 which indicates that there is a relationship between the level of adolescent knowledge about reproductive health and sexual behavior in Patian village adolescents. This means that the better the level of knowledge of adolescents about reproductive health and will not commit sexual behavior deviations (Kyilleh et al., 2018).

DISCUSSION

Research by Suidhan, Seweng and Noor (2013) shows that heavy sexual behavior in adolescents is mostly carried out by adolescents who have low knowledge about reproductive health (Supit et al., 2019). Based on data analysis, it shows that knowledge of adolescents in Patian village about reproductive health has a negative relationship with adolescent sexual behavior, which means that the higher the knowledge of adolescents about reproductive health will be followed by a decrease in adolescent sexual behavior and vice versa if knowledge about adolescent reproductive health is low, it will be followed by increased sexual behavior (Pandey et al., 2019). This is in line with the opinion of Wahyudi which says that adolescents who have a correct and proportional understanding of reproductive health tend to understand sexual behavior in a healthy and responsible manner (Evrianasari & Wahyudi, 2019). The contribution of reproductive health knowledge to adolescent sexual behavior is 4.3%, which means that sexual behavior is influenced by the subject's knowledge of matters relating to male and female reproductive organs, wet dreams and menstruation and pregnancy. the knowledge of village youth about reproductive health had a role of 7.6% (Mustari & Indriyana, 2018).

The subject's sexual behavior is influenced by the subject's understanding of information related to reproductive health (Afritia et al., 2020). One of the information obtained by the subject is the risk of pregnancy outside of marriage which is the impact of free sexual behavior. The small role of adolescent knowledge about reproductive health information on sexual behavior is because knowledge of reproductive health does not directly affect sexual behavior (Ariska & Yuliana, 2020). Knowledge of reproductive health is only limited to cognitive abilities, not affective abilities which can directly have a dominant influence on sexual behavior. This can be seen from 95.6% of other factors that influence behavior sexual (Romulo et al., 2016). The factors that influence premarital sexual behavior in adolescents are the highest relationship between parents and adolescents, followed by peer pressure, religiosity, and pornographic media exposure (Soetjiningsih, 2010). Other factors that influence sexual behavior in adolescents are hormonal changes, delays in marriage age, dissemination of information through mass media, taboo sex, norms in society, and increasingly free association between men and women (Sarwono, 2011).

This is in line with the research conducted by Suryoputro et al. (2006) regarding the factors that influence adolescent sexual behavior in Central Java, namely, (1) internal factors (knowledge, aspects of reproductive health, attitudes towards sexual and reproductive health services, behavior). , perceived vulnerability to risk, reproductive health, lifestyle, self-control, social activities, self-confidence, age, religion, and marital status), (2) external factors (contact with sources of information, family, socio-cultural , values and norms as social support for certain behaviors). In line with that research by Banun and Setyorogo (2013). Based on the observations of researchers, many students date

each other outside the school environment and show sexual behavior, one example is hugging the opposite sex when riding a motorbike. This sexual behavior may be influenced by other factors that the researchers did not examine. The limitations of this study are that it does not include intellectual level as a knowledge control variable and researchers only focus on reproductive health knowledge variables so that other factors other than reproductive health variables are not studied by researchers. thorough.

CONCLUSION

Based on the results of research on the role of reproductive health knowledge on early adolescent sexual behavior in Patian village, it shows that it has a negative relationship with adolescent sexual behavior, which means that the higher adolescent knowledge about reproductive health will be followed by a decrease in adolescent sexual behavior and vice versa if knowledge about reproductive health Adolescents are low, it will be followed by an increase in sexual behavior. The contribution of reproductive health knowledge to sexual behavior is 4.3% while 95.7% is another factor outside of reproductive health knowledge. Other factors that influence adolescent sexual behavior such as the relationship between parents and adolescents, peer pressure, religiosity, media, hormonal changes, delays in marriage age, taboo sex, norms in society, and increasingly free association between male and female. This concludes that knowledge of reproductive health is not the only factor that influences the sexual behavior of early adolescents in Patian village. Patian Village is expected to be able to further increase understanding of reproductive health knowledge, its functions and impacts on students through natural science subjects so that adolescents understand more about the reproductive system.

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