

THE EFFECTIVENESS OF EDUCATIONAL VIDEOS IN PREVENTING PREMARITAL SEXUAL BEHAVIOR AMONG GENERATION Z IN SOUTH JAKARTA

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Abstract

Premarital sexual relations have a negative impact on adolescents, namely the risk of sexually transmitted diseases, unwanted pregnancies, illegal abortions, and psychological trauma. This study aims to examine the effectiveness of educational videos in preventing premarital sexual behavior in generation Z. Researchers make educational videos and then measure their effect on increasing knowledge and attitudes. The research method is quasi-experimental. The population is grade 12 students at Vocational High School Al-Hidayah, South Jakarta. Samples were taken randomly. The intervention group was given educational video shows. The control group was given oral counseling. The result is that the educational video intervention affects increasing respondents' knowledge. As for the attitude has no effect. Educational videos need to be developed to increase the knowledge of teenagers as Generation Z who are very familiar with visual displays through cell phones that are used almost all the time by Generation Z.

Keywords: *Educational Videos, Generation Z, Premarital Sexual, Illegal Abortions.*

A. INTRODUCTION

The World Health Organization (WHO), in 2010 said that every year there are 210 million teenagers who become pregnant worldwide. Of this figure, 46 million of them have abortions due to premarital sex. As a result, there are 70,000 adolescent deaths due to unsafe abortion while another four million suffer from illness and disability. Furthermore, the World Health Organization (WHO) also estimates that there are 20 million unsafe abortions in the world, 9.5% (19 of 20 million unsafe abortions) of which occur in developing countries. Approximately 13% of the total adolescents who have unsafe abortions end up in death (Batubara, 2017).

Published research in Ethiopia by Reproductive Health Journal obtained 30.8% of women have had sexual intercourse premarital. The main factor is watching videos porn. Research on 394 female students who are not married at Aletawon High School, Ethiopia found that 72 people (18.3%) did premarital sex, 11 people (15.3%) experiencing unwanted pregnancies and 82% abort their pregnancies. In the year of 2011, WHO estimates around 1,148,200 people in the United States are infected with HIV (Mulugeta & Berhane 2014).

Early sexual activity that does not responsible for placing youth face various health risks reproduction (Ariyanti, Sariyani & Utami 2019). Premarital sexual relations have a negative impact on adolescents, namely the risk of contracting sexually transmitted diseases (such as HIV/AIDS, gonorrhea, syphilis, and genital herpes), unwanted pregnancies by young women, and psychological trauma). Sexual behavior is all behavior that is driven by sexual desire, both with the opposite sex and the same sex, the form of behavior can vary, ranging from feelings of attraction to the behavior of dating, making out, and having sex. The sexual object can be other people, people in fantasy, or oneself (Sarwono, 2012).

In 2014 the National Family Planning Coordinating Board (BKKBN) found that 46% of adolescents aged 15-19 years had the courage to have premarital sex. The Indonesian Child Protection Commission (KPAI) found that 62.7% of junior high school youth in Indonesia are

no longer virgins. The BKKBN noted the increasing number of cases of sexual intercourse among Indonesian teenagers due to the easy access to information about sexual problems via the internet. Teenagers nowadays already consider sexual intercourse as a common thing to do when teenagers are dating (Migiana & Desiningrum 2015).

The survey results show that sexual behavior among young men is currently increasing. The results of the 2007 Indonesian Adolescent Reproductive Health Survey (SKRRI) showed that 3.7 percent of male adolescents aged 15-19 years had sexual intercourse and 10.5 percent aged 20-24 years. This figure is increasing, as indicated by the results of the 2012 Indonesian Demographic and Health Survey (IDHS) where 4.5 percent of male teenagers aged 15-19 years who have sexual intercourse and aged 20-24 years as much as 14.6 percent. This figure decreased slightly in the 2017 IDHS, where male adolescents aged 15-19 years were around 3.6 percent and aged 20-24 years were around 14.0 percent. There are various reasons for teenage boys to have sexual intercourse, the three reasons with the largest percentage being the reasons for mutual love as much as 46.1 percent, curiosity/curiosity as much as 34 percent, and it just happens as much as 15.4 percent (Wahyuni & Fahmi 2019).

In this era of globalization, the development of technology, information and Communication is growing day by day so that it makes as an important part of human life is no exception for Generation Z. Generation Z or Gen Z is claimed to be the generation that was born after generation Y. Generally those who are generation Z are claimed as well as iGeneration or internet generation or net generation. They always connected to the virtual world and can do everything with using state-of-the-art technology. Even gadgets have become hold it since childhood. Then automatically the introduction of technology and This virtual world is so influential in the development of life and their personality (Nurul Mustaqimamah & Novi Dian Sari, 2021).

There are several factors influencing premarital sexual behavior one of them is the level of knowledge (Dewi and Wirakusuma 2017). Video shows influence on behavior (Isriyah, 2017). Educational video is a medium that is very easy to access by Generation Z. This is because Generation Z is used to getting various information in a very short time. With just the click of a button, the desired information can be directly accessed.

The digital era makes it easy to transfer reproductive health information to Generation Z. One of the media to increase knowledge and attitudes of Generation Z about reproductive health, especially the negative impact of premarital sex, is through educational video media developed in this study. Educational videos on the negative impact of premarital sex are easy to access anytime and anywhere. Especially by Generation Z. Thus, this animated video media is expected to influence the behavior of Generation Z in avoiding premarital sex.

B. METHOD

This study uses a quasi-experimental approach, which is a research design by providing intervention to one group but not randomizing the research subjects. The intervention group and control group were in the same school but in different classes. The intervention group received an intervention in the form of an educational video screened by the researcher. While the control group received oral counseling. Before conducting the research, the researcher made an educational video. Educational videos were made involving a professional crew. The players are members of the Jakarta I Poltekkes academic community. The total duration of the educational video is 10 minutes 16 seconds. The video material contains the impact of abortion due to premarital sex.

The criteria for respondents are active students of Vocational High School Al-Hidayah 1 Cilandak, South Jakarta, aged 16-18 years. The population in this study was grade 12 students of Vocational High School Al-Hidayah 1 Cilandak, South Jakarta, with a total of 261 students. Sampling was done by random technique. There were 2 classes with a total of 62 students.

Consisting of class 12 Accounting and Financial Institutions (31 people) as the experimental class and class 12 Office Automation and Governance (31 people) as the control class.

The experimental group was given an intervention in the form of playing an educational video on the dangers of premarital sex. As for the control group, oral counseling was carried out. Before being given treatment, both groups were given a pretest. The experimental group and the control group were given a pretest before being given treatment. Furthermore, the experimental group was given educational video viewing guided by the researcher. After watching the educational video, the participants filled out the post-test assessment sheet. The research instrument used a questionnaire. Questions are structured to measure the level of knowledge and attitudes of respondents. Bivariate data analysis using paired sample t-test.

C. RESULT AND DISCUSSION

The distribution of the characteristics of the respondents in this study consisting of age and gender is presented in the following table:

Table 1. Distribution Characteristics of Respondents

Variable	Intervention Group		Control Group		Total	
	N	%	N	%	N	%
Age						
16 Years	0	0	2	6.5	2	3.2
17 Years	25	80.6	21	67.7	46	74.2
18 Years	6	19.4	8	25.8	14	22.6
Gender						
Male	6	19.4	9	29.0	15	24.2
Female	25	80.6	22	71.0	47	75.8

Based on table 1, the characteristics of the respondents in the intervention group in terms of age, the majority of respondents aged 17 years were 25 students (80.6%). In the control group, the majority were 17 years old as many as 21 students (67.7%). The total number of respondents aged 17 years was 46 students (74.2%).

Characteristics of respondents seen from gender in the intervention group the majority of women were 25 people (80.6%) and in the control group the majority of women were also 22 people (71.0%). The total number of female respondents was 47 students (75.8%).

Table 2. Differences in Knowledge and Attitudes Before and After the Intervention of Providing Educational Videos in the Control and Intervention Groups

Variable	Group	Mean	SD	Min-Max	Mean Rank	P value*
Knowledge	Intervention Group					0.000
	Pretest	9.29	1.10	7-11	12.86	
	Post test	10.68	0.79	8-11		
	Difference	1.39				
	Control Group					
	Pretest	8.87	0.67	7-10	12.48	
Post test	9.94	0.89	9-11			
Difference	1.07					
Attitude	Intervention Group					0.042
	Pretest	45.65	3.14	38-51	13.42	
	Post test	46.71	4.08	38-52		
	Difference	1.06				

Control Group					
Pretest	44.87	4.02	36-50	12.42	0.472
Post test	45.61	3.57	39-50		
Difference	0.74				

Based on table 2, knowledge in the educational video intervention group shows that the average pretest is 9.29 with a standard deviation of 1.10. The average knowledge on the post test is 10.68 with a standard deviation of 0.79. The difference between before and after the intervention is 1.39. P Value < 0.000 indicates that the knowledge score between the pre-test and post-test scores has a significant increase.

Knowledge in the control group in the form of oral counseling shows that the average knowledge on the pretest is 8.87 with a standard deviation of 0.67. The average knowledge on the post test is 9.94 with a standard deviation of 0.89. The difference between before and after oral counseling is 1.07. P Value < 0.000 indicates that the knowledge score between the pre-test and post-test scores has a significant increase.

Attitudes in the intervention group showed that the average attitude in the pretest was 45.65 with a standard deviation of 3.14. The average attitude in the post test is 46.71 with a standard deviation of 4.08. The difference between before and after the intervention was 1.06, the P Value was 0.042. This indicate that the attitude score between the pretest and post test scores has a significant increase.

Attitudes in the oral counseling group showed that the average attitude on the pre-test was 44.87 with a standard deviation of 4.02. The average attitude on the post test is 45.61 with a standard deviation of 3.57. The difference between before and after oral counseling was 0.74. Value P Value 0.472. This indicate that there is no significant increase in the attitude score between the pretest and posttest scores.

Table 3. Differences in Knowledge and Attitudes after Intervention between the Intervention and Control Group

Variable	Group	N	Mean	Mean Rank	P value*
Knowledge	Intervention	31	10.68	38.55	0.000
	Control	31	9.94	24.45	
Attitude	Intervention	31	46.71	34.08	0.258
	Control	31	45.61	28.92	

Based on table 3, there are differences in respondents' knowledge after the intervention between the intervention group in the form of educational videos and the control group in the form of oral counseling. The average value of knowledge in the intervention group is 10.68 while the average value in the control group is 9.91. The mean in the intervention group was 0.74 greater than in the control group. The results of the analysis show the P Value is 0.000. It was concluded that the intervention effected on increasing respondents' knowledge.

As for the attitude variable, there was no difference after the intervention between the intervention group in the form of educational videos and the control intervention in the form of oral counseling. The P Value is 0.258. It was concluded that the intervention did not increase the respondent's attitude score.

This study is to see the effectiveness of educational videos on the knowledge and attitudes of Generation Z toward premarital sex. Measurements were made by looking at the results of the pretest and posttest results. This measurement looks at how much influence the treatment has. In this case, it is in the form of playing educational videos and oral counseling to increase the knowledge and attitudes of respondents.

The results of the analysis using the paired t test showed that the group of respondents who were given the intervention of playing educational videos and oral counseling both experienced an increase in knowledge scores. Thus, it can be concluded that both methods are effectively used to increase knowledge about premarital sex to generation Z. This is in

accordance with the statement of Maulana, 2009 which states that the five senses that transmit knowledge to the brain are the eyes (approximately 75% to 87%), while the ears (approximately 75% to 87%). 13% to 25%, human knowledge is obtained and channeled through the other five senses (Maulana, 2009). Also, the results of the research concluded that health education using the multimedia method can increase knowledge and attitudes higher than the face-to-face method (Pepi Hapitria, 2017).

The use of video media is effective in increasing knowledge according to the results of research which state that media in the form of videos and demonstration methods are proven to increase adolescent knowledge about breast self-examination (BSE) (Aeni & Yuhandini 2018) and video media influences students' knowledge and attitudes about exposure to pornography. before and after, because the video contains audio and visual elements to provide clear information on the message conveyed (Tindoan, 2018). The formation of knowledge can be influenced by the mass media (Nugraheni & Romdiyah, 2021). This is in accordance with research (Ayu et al. 2019) and (Kadarwati, Wuryaningsih & Alaydrus 2019).

In this study, the educational video intervention was not effective in changing the attitude of the respondents. Attitude change requires a process that is not instant because attitudes are related to human personal values and beliefs. The Theory of Reasoned Action places attitudes in a central position about human action. Attitude as a function of belief in human actions is determined by personal beliefs and group beliefs. Attitude consists of three components: cognitive, affective, and conative. Cognitive components in the form of perceptions and beliefs. The affective component concerns the emotional aspect, while the conative component is an aspect of the tendency to act. The affective component is usually the deepest rooted, most resistant to various influences. The cognitive component is not always accurate.

As with other affective characteristics, attitudes have a target, direction, and intensity. Attitudes are related to individual needs (physiological, safety, social, self-esteem, and self-actualization). Some individuals have low-level needs (physiological), and some prioritize high needs (self-actualization). Social attitudes are formed by social interaction. The factors that influence the formation of attitudes are personal experience, culture, other people who are considered important, mass media, educational institutions and religious institutions, and emotional factors within the individual. These various factors, in teaching attitudes, must be manipulated individually or together to form a persuasive positive attitude so that it is understood and accepted by the recipient of the information. Approaches to measuring attitudes include self-reports, reports by others, sociometric, and notes. Where possible, self-report procedures should be used. Reporting procedures by others are good for obtaining reports on behavior. Sociometry is used to obtain information about the social structure of a group. Finally, records are used to systematically report daily events (Azwar S, 2011).

D. CONCLUSION

Efforts to prevent premarital sex behavior through educational videos on the dangers of premarital sex are effective in increasing the knowledge of generation Z but have not been effective in improving the attitudes of generation Z. Generation Z is a group of people who are very familiar with the world of information technology. Generation Z activities are very much using mobile phones. Health Education Media in the form of videos needs to be used optimally.

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