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ABSTRACT

Free sex behavior among adolescents continues to increase, so that it needs special attention from all circles. Cases of unwanted pregnancy, abortion, and premarital sexually transmitted diseases are increasingly occurring. Knowledge and behavior about adolescent sexuality are the main factors for free sex behavior in adolescents. The purpose of this study was to determine the relationship between aspects of reproductive health knowledge and free sex behavior in adolescents. The research method is analytic observational with a cross-sectional design. The study was conducted on adolescents with vulnerable ages 10-24 years, amounting to 81 people in Hulu Sungai Regency with proportional simple random sampling. Univariate analysis using frequency distribution tables and bivariate using the chi square test with Cl 95% and alpha 0.05 to determine the relationship between knowledge of reproductive health and adolescent sexual behavior. The results showed p-value = 0.30> 0.05 which indicated that there was no relationship between knowledge of reproductive health and free sex behavior among adolescents in North Hulu Sungai Regency.

KEYWORDS: Reproductive Health, Adolescents, Free Sex.

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I. INTRODUCTION

A sexual act performed by men and women without the formal binding of marriage is referred to as free sex. Teenagers that engage in this conduct suffer psychologically, socially, and intellectually. Adolescent attitudes about free sex conduct are impacted by teenagers' knowledge and views regarding free sex conduct. Petting, oral-genital sex, sexual intercourse, and gay encounters are examples of free sex behavior. Petting is an attempt to elicit sexual desires between sexes without engaging in intercourse. Oral-genital sex is the act of experiencing sexual organs through the mouth. This form of oralgenital sexual interaction is viewed as a safe alternative to sexual activity by today's adolescents. Sexual intercourse is the act of having intercourse. Homosexual encounters are personal encounters with people of the same sex [1].

In 2017, the Indonesian Demographic and Health Survey (IDHS) found that 80% of women and 85% of males claimed to have been in a relationship. Teenagers aged 15-17 are the age group that started dating for the first time, with 45% of women and 44% of males. When it comes to dating, most women and men admit to engaging in a variety of activities. Holding hands was done by 64% of women and 75% of men, embracing was done by 17% of women and 33% of men, kissing was done by 30% of women and 50% of men, and touching was done by 5% of women and 22% of men. Furthermore, it was stated that 8% of males and 2% of women engaged in sexual activity. Among women and men who had premarital sex, 59% of women and 74% of males said they had their first sexual encounter between the ages of 15 and 19. At the age of 17, the greatest proportion was as high as 19%.

12% of women experienced an unexpected pregnancy, and 7% of males induced an unplanned pregnancy among teenagers who had sexual intercourse. This may have a role in the transmission of sexually transmitted infections (STIs). Sexually transmitted infections (STIs), often known as venereal diseases, are illnesses that are spread through sexual contact. STIs (Sexually Transmitted Infections) have a strong link to HIV. In Indonesia, HIV/AIDS cases have expanded to 407 districts/cities (80%) out of 507 districts/cities across all provinces. There were 280,623 HIV infections in Indonesia between 2005 and 2017, according to statistics from the Directorate General of P2P HIV cases in Indonesia. Between 2005 and 2017, there were 1,869 HIV cases in South Kalimantan. From 1998 to 2017, there were 15,429 AIDS-related deaths in Indonesia (2.5%). Of all the possible variables for the transmission of HIV, unrestricted sex is the most intriguing and sensitive aspect of Indonesian youth's growth today [2],[3].

Many variables impact the rise of HIV/AIDS cases, one of which is community awareness of HIV/AIDS preventive activities. Adolescents who have a thorough understanding of HIV/AIDS prevention are also expected to behave in a way that prevents transmission [4],[5].

Found that the majority of respondents oppose premarital sex, with 46 respondents (52%) rejecting it and 42 respondents (48%) supporting it. The surroundings, as well as exposure to mass media, both print (newspapers, magazines, pornographic books) and electronic (TV, VCD, internet), have a direct and indirect impact on teenagers' premarital sexual activity. Found that 56.9% of respondents had kissed, whereas 30.7% had necked, 13.8% had petted, 7.2% had oral sex, 5.5% had anal sex, and 14.7% had intercourse. This indicates that the amount of teenagers engaging in free sex activity (intercourse) is greater than the 6.9% reported by the Ministry of Health in 2009. According to Allen (2011), sexuality education in numerous nations has been criticized for failing to give complete knowledge. Youth needs are dimensions not being met, and of discrimination and larger social injustice are being overlooked. Only focusing on the dangers and risks of sexual intercourse, as proposed by Bay-Cheng (2003), is unrealistic given the state of adolescent health. It will fail to provide accurate information about sexual behavior and will not empower adolescents to take charge of their sexual and reproductive health. As a result of the issues discovered, research is needed to investigate the association between reproductive health awareness and free sex behavior among teenagers in the Hulu Sungai Regency [6], [7].

II. MATERIALS AND METHODS

The research was placed in the North Hulu Sungai Regency between December 2020 and January 2021. This research employed a cross-sectional design with an analytical observational design. The purpose of this cross-sectional study was to look at the correlation between reproductive health awareness and sexual activity in teenagers. Analytic observational studies are those in which the researcher just observes the circumstances (including counting/measuring) of the sample members without intervening. Teenagers from North Hulu Sungai were the subjects of this investigation. The participants in this study were 81 teenagers between the ages of 10 and 24 [8].

In this study, a questionnaire was employed as the tool. The questionnaire includes 15 closed-ended questions with a choice of "True" or "False" to assess respondents' knowledge, and 8 closed-ended questions with a choice of "Yes" or "No" to assess respondents' sexual behavior.

The understanding of reproductive health was the independent variable in this study. Sexual behavior in teenagers is the dependent variable. To investigate the correlation between reproductive health awareness and teenage sexual behavior, data were analyzed univariately using frequency distribution tables and bivariate using a chi-square test with 95% Cl and 0.05 alpha.

III. STATISTICAL ANALYSIS AND GRAPHICAL PRESENTATION

Adolescent knowledge and sex behavior were presented as distribution and frequency table. The statistical analysis used to determine the correlation between knowledge with sex behavior was done by the *chi-square test*. Data was analyzed using SPSS (ver.21.0). All tests were performed at level of significance of 95% (α =0,05).

Hypothesis:

H0: d=0 (there is correlation between knowledge with sex behavior)

H1: d≠0 (there is no correlation between knowledge with sex behavior)

IV. RESULTS

Table 1. Adolescent Knowledge and Behavior Frequency Distribution

Variable	Frequency (n)	Percentage (%)						
Knowledge								
Enough	22	27,2						
Good	59	72,8						
Sexuality in teenagers								
Negative	26	32,1						
Positive	55	67,9						

Table 1 demonstrates that most of the adolescents in this study had good knowledge of reproductive health, amounting to 59 people (72.8%), and adolescents who had enough knowledge amounted to 22 people (27.2%). Meanwhile, based on the category of sexual behavior in adolescents, it was found that the most teenagers who had positive behavior were 55 people (67.9%), and teenagers who had negative behavior were 26 people (32.1%).

Table 2. Correlation Between Knowledge with Sex Behavior

		Behavior			Total		
No.	Knowledge	Negative		Positive		Total	p-value
	Kilowicuge	n	%	n	%		
1.	Enough	9	40,9	13	50,1	22 (100%)	0.20
2.	Good	17	28,8	42	71,2	59 (100%)	0,30

Table 2 demonstrates that 59 adolescents who have good knowledge there are adolescents who behave positively (tendency to avoid sexual behavior) who visit 42 people (71.2%) and adolescents who behave negatively (tendency to approach sexual behavior) find 17 people (28.8%). Meanwhile, out of 22 teenagers who have sufficient knowledge, some teenagers behave (tendency to avoid sexual behavior) who visit 13 people (1%) and teenagers who are 50 negatives (tendency to approach sexual behavior) who open 9 people (40.9%). The chi-square test showed that there was no relationship between knowledge of reproductive health and adolescent sexual behavior in North Hulu Sungai District (p = 0.30).

V. DISCUSSION

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According to the study's findings, the majority of teenagers have a good understanding of reproductive health. They are already familiar with reproductive health, free sex, unexpected pregnancy as a result of free sex, and the psychosocial consequences of early marriage. Adolescents need to know about reproductive health because they are in the midst of very dynamic development, both biologically and psychologically, and several factors influence their knowledge, including information received, parents, friends, closest people, mass media, and frequent discussions [9].

Adolescents might avoid sexual deviant conduct by starting early on with themselves about the patterns they carry out in everyday life. Sex education for teens is also crucial in the fight against free sex behavior since it empowers teens to refuse free sex invitations and prepares them to become adults who are accountable for their own sexual decisions [10],[11].

Meanwhile, it is caused by many teenagers who do not understand the ideal age for men and women to marry, do not know that HIV cannot be transmitted through kissing, and do not understand the meaning of bisexuality as attraction to the same sex, according to the category of sufficient knowledge in adolescents. Adolescents' lack of knowledge is related to a lack of information they have acquired. Electronic media, such as television, mobile phones, and others, provide

more information to teenagers. The majority of information on television is restricted to STDs, whereas sexual and reproductive health information is still rare. There is a common misconception that discussing sexual health is embarrassing and taboo in families and society, encouraging information-hungry teens to search for knowledge on their own [9].

Teenagers obtain a lot of reproductive health information from the media, according to one study, and the information they acquire is frequently incorrect and half-hearted. Teens who have only a rudimentary understanding of sexuality are more likely to experiment, and it can also lead to misunderstandings. Reproductive health behavior education for teenagers must be delivered precisely and effectively, and it can begin in the home, with parents providing professional knowledge, or in the school setting with school-based sexual education [9], [10]

Sexuality in Teenagers

The results showed that most teenagers have positive behavior (tendency to avoid sex). Most of the teens do actions that avoid going out at night to make friends, do not kiss with a partner, and do not engage in actions that lead to sexual intercourse with a partner. Planting a religious foundation for teenagers is a serious effort that parents can do to fortify the hearts, minds, and behavior of teenagers from deviant sexual behavior. The role of parents, community, and teachers as mentors are needed in this case so that adolescents avoid deviant negative behaviors [10].

Meanwhile, adolescents who have negative behavior (tendency to approach sexual behavior) are 26 people (32.1%). Most of these teenagers still have the behavior to view/watch pornographic content, send/submit photos that lead to pornography, and still send/sent sex messages. The lack of ability of adolescents to identify their sexual roles will cause adolescents to experience problems in their sexual behavior. The negative behavior of teenagers in North Hulu Sungai is mostly related to pornography [9].

Pornography is one of the problems that are in the spotlight of the government in Indonesia, especially the Ministry of Communication and Information. Blocking methods or filters to block websites that contain pornographic content is still not fully able to solve the problem of pornography. The gap in dealing with the problem of pornography has a negative impact and will affect the attitudes and behavior of teenagers in heterosexual relationships or dating with sexual behavior, either in the form of holding hands, hugging, neck to have been in a sexual relationship [12].

The Ministry of Communications and Information Technology states that from data from one child

protection organization, it is known that 97% of 4,500 teenagers and junior high schools access porn sites through internet cafes and also pornographic videos in the form of VCDs that are sold freely in the market. Law Number 44 of 2008 concerning pornography has long been published but in fact, pornographic content is still growing rapidly. Pornography is easily found in the form of images, sketches, illustrations, photos, text (messages), sounds, moving images, animations, conversation cartoons, gestures through various communication media, and impressions in public places containing sexual exploitation. Pornography in Indonesia is considered a social problem. Pornography is alleged to be the cause of moral degradation, rape, and a decrease in human self-esteem. For example, juvenile delinquency, free sex behavior among teenagers, and pregnancy outside of marriage [12],[13].

The promotion of curiosity and interest in pornographic materials in teenagers is an internal component that promotes the habit of seeing them. Peers, technical sophistication, environmental effects, and partner requirements are examples of external forces. Teenagers should do positive things and think positively so as not to be influenced to view pornographic content, more often to a religiously nuanced environment to avoid a negative environment [13].

Based on table 2, it is known that the value of p = 0.30 (p <0.05), it can be concluded that Ho is accepted and Ha is rejected, thus it can be said that there is no relationship between knowledge of reproductive health and sexual behavior in adolescents in North Hulu Sungai Regency. Based on the findings, it was found that 22 teenagers had less knowledge but had good behavior by 13 people (50.1%). This is because most of the youth, although they do not have good knowledge about the ideal age for marriage, only a few of them choose to marry young after graduating from school. In addition, although teenagers do not know well that kissing can't transmit HIV, some of them still avoid kissing with their partners.

This is in line with research conducted by Fadhlullah and Hariyana in 2019 which stated that there was no significant relationship between knowledge of reproductive health and adolescent sexual behavior. Adolescents who have good knowledge may have bad sexual behavior, as well as adolescents who have bad knowledge may have good sexual behavior [14].

Meanwhile, teenagers who have good knowledge are 59 people but have negative behavior are 17 people (28.8%). Having good knowledge alone is not enough to fortify teenagers from bad sexual behavior. Adolescents who have good knowledge without having good attitudes and affection can fall into bad sexual behavior. This can be due to the education on

reproductive health that is provided without inculcating attitudes and values, so it will not have much effect on adolescent behavior [14].

Most of the teenagers who engage in negative behavior (tendency to approach sex) in North Hulu Sungai Regency are not because of their lack of knowledge but because they date at an early age. also known to see/watch pornographic content and still frequently send/submit things that lead to pornography.

Based on research conducted by Hasanah and Setiyabudi in 2020 it was stated that 90% of children were or were dating. When teenagers are dating, several stages will be passed, including smiling and friendly looks, holding hands, hugging, kissing, touching, and intercourse. The courtship period will encourage adolescents to achieve a feeling of security with their partners which creates a sexual intimacy in them. Pleasant experiences gained in dating cause them to think that sexual behavior is a fun thing to do with their partners because they perceive sexual behavior as normal behavior carried out by adults. Meanwhile, based on research conducted by Tamrin and Retnanignsih in 2014 stated that there is a relationship between exposure to pornography and pre-marital sexual behavior. When someone is exposed to pornography repeatedly, they will show a tendency to have distorted perceptions about the need for heavier and more addictive types of pornography [15], [16]

This is also in line with research published in 2015 by Efa Trisna, which established a correlation between young sexual activity and exposure to pornography through literature, smartphones, movies, and the internet. The result of addiction is addiction. Escalation refers to a rise in demand for sex content that is heavier, more explicit, more exciting, and more deviant than before. Decentralization is the point at which formerly prohibited and immoral sexual content is accepted as normal and even becomes indifferent to sexual abuse victims. And act out occurs when there is an increasing tendency to engage in pornographic sexual behavior which has only been seen to be applied in real life [17].

The habit of watching pornographic films/VCDs is one of the impacts of exposure to pornography that might promote sexual activity in teenagers. This occurs because they were unable to discern between good and harmful information for teenage self-development during adolescence. The incoming information is absorbed and noticed due to the teenager's soul's instability, which occurs when he performs the same thing as what he observes [17].

VI. CONCLUSION

According to the findings of the study, there is no correlation between reproductive health knowledge and sexual activity among teenagers in the North Hulu Sungai Regency. Adolescents should get accurate and proper reproductive health behavior education, which can begin in the home, for example, Parents who supply professional knowledge or schools that give sexual education in the classroom. Furthermore, via the Generation Planning (Genre) program, the National Population and Family Planning Agency (BKKBN) assists children in learning to understand and practice healthy and moral conduct, as well as not engaging in premarital or free sex, to attain teenage resilience. The BKKBN's initiatives that teens may follow include genre socialization workshops, the Youth Information and Counseling Center (PIK-R), and Youth Family Development (BKR).

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