Video as a Media of Sexual Education for Adolescence

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Abstract

Problems that often arise in adolescents are sexuality, such as premarital sexual behavior. One of the causes of premarital sex is the lack of knowledge of adolescents about sex education. This knowledge is one of the factors that determine the attitude of adolescents in responding to the information received. This study aims to create video media to provide sexual health education to adolescents. This type of research is Research and Development (R&D) using the ADDIE model. The subjects in this study were five junior high school adolescents aged 11-14 years and one media expert, two material experts, and one language expert. Data were collected through interview guideline instruments and questionnaire sheets—data analysis of the validation questionnaire sheet and student response assessment with quantitative and qualitative analysis. The results of the research developing sexual education videos for adolescents are very good or feasible to be tested because based on the results of the validity test by media experts getting a score of 4.7, tarbiyah jinissiyah material experts with a score of 4.77, reproductive health material experts with a score of 4.58, linguists with a score of 4.3, and student response assessment with a score of 4.65. Thus, the sexual education video media for adolescents is in the very good category or declared feasible to be tested. The implications of this research are expected to reduce violence and sexual crimes in children because children can apply sex education, especially to protect themselves.

1. Introduction

Adolescence is a transition period from children to adults who face several changes towards maturity. Adjustment to physiological and psychological changes due to reproductive hormones that begin to function is one of the problems adolescents face (Kadarwati et al., 2019; Muarifah et al., 2019). Teenagers are the largest population in Indonesia. 69,824,459 of Indonesia’s population are teenagers (Alfiyah et al., 2018; Widiyasasti & Nurcahyani, 2020). Adolescents at puberty risk committing sexual deviations (Alfiyah et al., 2018; Lestari et al., 2019; Pasaribu, 2018). Because adolescents are prone to experiencing behavioral
problems caused by neurobiologically immature behavior control mechanisms and the influence of behavioral deviations from peers, this places adolescents at risk of social difficulties and deviant behavior later in life (Racz et al., 2017). The influence of peers and the negative social environment can lead adolescents to negative behavioral deviations because the experience of negative behavior obtained from peers and the social environment can cause children to interpret this as something that is allowed to be done (Fadhillah & Mukhlis, 2021; Ni Made & Ni Ketut, 2020; Nurlizawati, 2019).

The problem that often arises in adolescents is sexuality. The problem with sexuality that often occurs is premartial sex behavior (Pidah et al., 2021). One of the causes of premartial sex is the lack of knowledge of adolescents about sex education (Sholikah et al., 2018; Wulandari & Suteja, 2019). This knowledge is one of the determinants of the attitude of adolescents in responding to the information received (Rezeki, 2021). Unhealthy sexual behavior, namely premartial sex in adolescents, is increasing (Fithri, 2021; Ninawati & Handayani, 2018). The increase in premartial sexual activity among adolescents is happening in Indonesia and globally (Sulistyorini & Irawan, 2018). Premartial sex is currently a problem and a social phenomenon increasingly being found in society (Susmiarsih et al., 2019). Based on an IDHS survey conducted by the BKKBN, 7.6% or 12,612 male adolescents and 1.5% or 9,971 female adolescents had sexual intercourse before marriage. Data based on the Indonesian Child Protection Committee (KPAI) found that 32% of teenagers in big cities in Indonesia, namely Jakarta, Surabaya, Yogyakarta, and Bandung, in the age range of 14-18 years, admitted to having had sex before marriage (Sari et al., 2018; Sulistyorini & Irawan, 2018).

The trigger factor for premartial sex is hormonal changes during adolescence which can increase sexual desire. In addition, there is a shift in moral and ethical values, parenting styles such as family disharmony, religious education, and excessive provision of facilities such as uncontrolled use of cell phones for social media, peer influence, poverty, and insufficient knowledge about sexuality (Pandensolang et al., 2019). Freedom of dating behavior can encourage teenagers to have premartial sex (Citrariana & Suryadini, 2021). This irresponsible sexual activity places adolescents at risk for various reproductive health problems (Hayati et al., 2021; Kumi-Takyiwa, 2022). The impact of premartial sex, adolescents will experience feelings of anxiety, depression, low self-esteem, unwanted pregnancies, ostracized by society, feeling pressured by their families, and can cause sexually transmitted diseases (Andriani et al., 2022; Lehmler et al., 2021). Sex education provides understanding, teaching, and information about sexual relations to children and adolescents. If children and adolescents have been given this provision when they are adults or reach puberty, they can distinguish between lawful and unlawful. Teenagers will become accustomed to acting. According to Islamic morality. So that it will be kind, not easy to indulge in lust, and also have a firm attitude in all things (Zulaiha, 2019). Sexual education for adolescents is not to generate curiosity or a desire to try forbidden sexual relations but to provide correct knowledge about sexuality so that adolescents can avoid the desire to have forbidden sexual relations because they know the risks they will face if they do not comply with religious rules laws, customs, and mental and material readiness (Munarni, 2021). The provision of sex education to children and adolescents must be adjusted to their age level. Sexual education materials that must be given to adolescents are knowledge related to wet dreams, menstruation, how to get along with the opposite sex and introduce mahrams (Yuliana & Mulati, 2021).

Efforts that can be made to prevent the occurrence of premartial sex in adolescents are to provide premartial sex health education using audiovisual media (Amalia, 2017). Efforts to provide communication, information, and education to adolescents can provide appropriate information and knowledge so they do not fall prey to premartial sex or promiscuity (Maudi et al., 2022). Adolescents who get proper sex education will have the ability to handle stress appropriately rather than running their problems into sexual behavior, are better able to protect themselves from sexual deviance, and can seek help when they become victims of deviance (Leung & Lin, 2019). Giving sexual education to adolescents is very useful for controlling inappropriate behavior, such as premartial sex (Chinago et al., 2021). Teenagers currently fall into the Z generation category, where these teenagers are teenagers with years of birth between 1997-2012. This generation can use various existing technologies and easily absorb information through digital media such as audiovisual. Generation Z is used to looking for information through YouTube, Google, and so on (Stillman, David & Stillman, 2017, Jenkins, 2017). One media that can be utilized in providing health education is video media. This media can be a teaching tool in conveying visual messages with audio support so that the messages conveyed become clearer and easier to understand. Therefore the video method can provide sex education counseling to adolescents (Faijurahman, 2022).

Previous research findings state that the delivery of education through video media is more effective than other media, this is because it involves many human senses, such as the sense of sight and the sense of hearing (Dewi & Handayani, 2021; Izzaturahma et al., 2021). The more senses are used, the better and easier to understand (Faijurahman, 2022). There is an increase in adolescent knowledge by providing education with audiovisual media (Ramadhani, Aditya, 2020). Based on the results of the study, it was found
that there was a significant relationship between the provision of communication, information, and education on increasing knowledge in preventing risky sexual behavior (Novianti, 2018). It is initial research in developing reproductive health education media for adolescents with analysis, design, and development (ADD) stages. This research aims to create video media to provide sexual health education to adolescents. The existence of video media is expected from the results of this video-based sexual education media product to help adolescents to obtain correct and valid information about sexuality, and the presence of this media can prevent adolescents from falling for premarital sex, as well as reduce the prevalence of premarital sex in adolescents.

2. METHOD

This study uses a Research and Development (R&D) research design. This educational media development model uses ADDIE (Analysis, Design, Development, Implementation, Evaluation). However, this research only reached the Analysis, Design, and Development (ADD) stage. The development procedure used in this study to develop educational video media was adapted from Instructional Media Design (Lee & Owens), namely the ADDIE model.

The subjects in this study were five junior high school youths aged 11-14 who were interviewed to find out issues regarding sexuality, one media expert, two material experts, and one language expert. Data were collected through interview guide instruments, validation questionnaire sheets for expert validation, and student response assessment questionnaire sheets obtained from adopting questionnaires in previous studies—analysis of validation questionnaire sheet data and assessment of student responses with quantitative and qualitative analysis. The determination of the validity level is presented in Table 1.

Table 1. The Interval Determining the Validity Level

<table>
<thead>
<tr>
<th>X Score Category</th>
<th>X Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Good (SB)</td>
<td>&gt; 4.21</td>
</tr>
<tr>
<td>Good (B)</td>
<td>3.40 &lt; x ≤ 4.21</td>
</tr>
<tr>
<td>Pretty Good (CB)</td>
<td>2.60 &lt; x ≤ 3.40</td>
</tr>
<tr>
<td>Not Good (KB)</td>
<td>1.79 &lt; x ≤ 2.60</td>
</tr>
<tr>
<td>Very Poor (SKB)</td>
<td>X ≤ 1.79</td>
</tr>
</tbody>
</table>

(Nadhif, 2019)

3. RESULT AND DISCUSSION

Result

This study uses a Research and Development (R&D) research design. This educational media development model uses ADDIE (Analysis, Design, Development, Implementation, Evaluation). The analysis phase results (analysis), namely the problem experienced is that teenagers have started dating since elementary or junior high school. In addition, the youth stated that they had received sexual education about puberty and mandatory bathing from their parents and teachers, but the information they obtained was only glimpsed. Thus, some adolescents at Sultan Agung Islamic Middle School 4 Semarang do not know about puberty, puberty, mandatory bathing, covering their genitals, viewing ethics, the prohibition against approaching adultery, and premarital sex. So far, teenagers have gotten information about sex education or reproductive health from Google and YouTube. Teenagers say it is easier to understand information about sexuality or reproductive health in the video because of pictures and sound, so they do not get bored.

The second stage is design (planning). Planning for the development of media for sex education for adolescents is carried out by developing audiovisual media with content that adapts to the needs of adolescents, namely puberty, puberty, mandatory bathing, covering genitals, ethics of seeing, the prohibition against approaching adultery, and premarital sex. In the early stages of planning, a sketch was prepared that described the contents of the video in the form of a storyboard and flowchart. The purpose of compiling this media is that teenagers can understand material about puberty, teenagers can understand material about baligh, teenagers can understand material about obligatory bathing, teenagers can understand material about covering their private parts, teenagers can understand material about ethics of seeing, teenagers can understand material about prohibitions approaching adultery, teenagers can understand material about premarital sex. The flowchart can be translated into a storyboard that contains the 62 scenes presented in Figures 1, Figure 2, Figure 3, Figure 4, Figure 5, and Figure 6.
The three stages of development, flowcharts, and storyboards were developed into sexual education videos using Filmora X software containing 30 frames consisting of the start page/main menu frame, profile frame, material frame, evaluation frame, and closing frame, with 12.34 minutes. The validation results from experts are presented in Table 2.

<table>
<thead>
<tr>
<th>No.</th>
<th>Rated aspect</th>
<th>Average</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Ahli Media</td>
<td>4.7</td>
<td>Very good</td>
</tr>
<tr>
<td>2.</td>
<td>Ahli Materi</td>
<td>4.77</td>
<td>Very good</td>
</tr>
<tr>
<td>3.</td>
<td>Ahli Bahasa</td>
<td>4.3</td>
<td>Very good</td>
</tr>
</tbody>
</table>

Based on the results of Table 2, the evaluation of sexual education video media by media experts shows that sexual education video media in terms of appearance, presentation, and programming aspects fall into the very good category, with a score of 4.7. It means the developed sexual education video media is suitable for use or field trials. The results of the assessment of sexual education video media by material experts on jinisiyah tarbiyah and reproductive health showed that the material used in sexual education video media was included in the very good category, with a score of a material expert on tarbiyah jinisiyah 4.77 and material expert on reproductive health 4.58. This means that the sexual education video media developed is suitable for use or field trials. The language assessment of the sexual education video media by linguists shows that the language used in the sexual education video media is included in the very good category, with a score of 4.3, indicating that the developed sexual education video media is suitable for use or field trials. Assessment of student responses was carried out by five eighth-grade students of Sultan Agung Islamic Middle School Semarang. The results of the student response assessment are presented in Table 3.

Based on Table 3, the results of the assessment of sexual education video media by students show that the quality of sexual education video media in terms of content/learning materials, physical aspects of
the media, and aspects of usability is included in the very good category, with a score of 4.65. It means the developed sexual education video media is suitable for use or field trials.

Table 3. Recapitulation of Video Media Products by Students

<table>
<thead>
<tr>
<th>No.</th>
<th>Rated Aspect</th>
<th>Student Response Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Aspects of Content/Learning Materials</td>
<td>4.63</td>
</tr>
<tr>
<td>2</td>
<td>The physical aspect of the media</td>
<td>4.66</td>
</tr>
<tr>
<td>3</td>
<td>Aspects of expediency</td>
<td>4.66</td>
</tr>
<tr>
<td></td>
<td><strong>Average</strong></td>
<td><strong>4.65</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Criteria</strong></td>
<td><strong>Very Good</strong></td>
</tr>
</tbody>
</table>

Discussion

Video development as a medium for sexual education for adolescents using the ADDIE model with a video duration of 12.34 minutes produces excellent and feasible video media. So that sexual education video media for adolescents is declared feasible for trials, and adolescents can obtain correct and valid information about sexuality so that increasing adolescent knowledge with high adolescent knowledge about sexuality can prevent adolescents from falling into premarital sex. This study project is designed with the aim that children aged 12-15 years can more easily understand sex education by utilizing visual media using comic visual media (Pratama, 2022). This video was developed based on the high rate of adolescent sexual deviance caused by a lack of youth knowledge about sexuality, dating, and relationships. The results of the study stated that animated video media effectively provided sexual education to children and adolescents (Laaser & Toloza, 2017; Vidayanti et al., 2020). Video is one media that can maximize the use of the sense of sight to understand the message (Hapsari et al., 2018). Audiovisual media (video) makes it easier to convey information so that it can make it easier to receive information which will increase target knowledge (Fauzi et al., 2017; Nagge et al., 2018; Widiyastuti & Nurcahyani, 2020).

Maximum sexual education will be provided by using the media. The media used certainly adjusts to the child’s development. For teenagers who tend to be attached to their gadgets, video media is one of the right choices. Because the media has an important influence on providing sex education to children and adolescents in the modern era (Rahmawati & Atmojo, 2021; Sya’bania et al., 2020; C. Wang, 2022). Video media is a tool that can present audio and visual which contains learning messages, both in the form of procedures, principles, and concepts, which are used to help understand a lesson (Laaser & Toloza, 2017; Syaparuddin & Elihami, 2020; J. Wang et al., 2020). Using multimedia equipped with music, narration, pictures, and animation can overcome students’ learning boredom, which generally only uses lecture or PowerPoint methods (Lohr et al., 2021; Tiarasari, 2021). Based on the results of the study, it was shown that video media was more effective than leaflet media in increasing adolescent knowledge about exposure to pornography (Tindoan, 2018).

This finding is strengthened by previous studies stating that developing animated video media for fourth-grade elementary school students is feasible (Isti et al., 2022; Ponza et al., 2018). Efforts are needed to provide health education about sexuality to adolescents to prevent adolescents from having premarital sex. It is hoped that teenagers can use the video media produced from this research to add information about sexuality. Also, this video media can be used by schools to provide health education to students. In addition, after the video media product has been developed, it is hoped that the researcher can continue this research up to the implementation and evaluation analysis stage so that the resulting product can be optimal. And further research can also be carried out, such as experimental research to find out the effectiveness of using sexual education videos compared to other media. The implications of this research are expected to reduce the level of violence and sexual crimes in children because children can already apply sex education, especially to protect themselves.

4. CONCLUSION

The development of video as a medium for sexual education for adolescents using the ADDIE model with a video duration of 12.34 minutes produces video media that is suitable for testing because it is based on the results of validity tests by media experts, tarbiyah jinisihyah material experts, reproductive health material experts, and student response assessments. Students fall into the very good category. So that sexual education video media for teenagers is declared feasible for trials. The existence of this sexual education video media can help teenagers to be able to increase knowledge about sexual education so that teenagers do not fall prey to having premarital sex.
5. REFERENCES


https://doi.org/10.20961/kc.v6i3.35134.


