



THE APPLICATION OF THE PEER GROUP MODEL IN THE TEENAGE GROUP IN RELIEF OF FREE SEX

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Abstract, Background: Adolescents need information about the changes that occur in themselves, but adolescents often feel uncomfortable or taboo discussing sexuality and reproductive health issues with their parents or teachers. One of the steps that can be taken is to provide guidance and counseling that focuses on negative attitudes towards unhealthy sexual behavior by collaborating with peers or peer groups. Peers or peer groups have an influence on the lives of adolescents, including adolescent sexuality. Students do not benefit from the existence of counseling guidance units and youth health programs. So the solution offered is to implement a peer group in both junior high school 15 and junior high school 43 schools in Bandung, which begins with the preparation of IbM activities for conducting training for peer group leaders and student mentoring. The goal is the formation of peer group leaders at junior high school 15 and junior high school 43 so as to increase student participation in promoting adolescent reproductive health and increase students' knowledge, attitudes and skills regarding adolescent reproductive health.

Method: IbM activities have been carried out During the process of community service activities, IbM was attended by 8 students in each partner, pre and post tests were carried out for each material and involved 8 students. The next activity is the delivery of material and mentoring to students who are trained to be trained to become peer group leaders.

Results: There is an increase in the knowledge of Partners 1 and 2 about reproductive health Availability of the "Adolescent Reproduction" booklet containing reproductive health as a guide in providing counseling in community service activities

Keywords: junior high school students; adolescent reproductive health, peer group

Background

Indonesian youth are currently experiencing a rapid social change from a traditional society to a modern society, which is also changing their norms, values and lifestyle. Adolescents who used to be strongly guarded by the family system, cultural customs and traditional values, have experienced erosion caused by rapid urbanization and industrialization. This has also been followed by a media revolution that is open to a variety of lifestyles and career choices. These things lead to an

increase in the vulnerability of adolescents to various diseases, especially those related to sexual and reproductive health, including the increased threat to HIV/AIDS.¹

The lives of teenagers with all their problems are increasingly complex in various aspects. Juvenile delinquency is no longer limited to skipping school or violating school rules. However, it has penetrated into criminal behavior, violence, the use of Narcotics, Psychotropics and Additives (Drugs), and even promiscuity. Several studies in various cities (both big and small

cities) show that data on changes in adolescent sexuality behavior is very concerning

Synovate Research in 2004 conducted a survey on adolescent sexual behavior in 4 cities, namely Jakarta, Bandung, Surabaya and Medan with a total of 450 respondents, with an age range of 15-24 years. The results showed that 44% of the experience of having sex started at the age of 16-18 years, while 16% had sex at the age of 13-15 years. In addition, home is the most favorite place (40%) to have sex. The rest, they choose to have sex in boarding houses (26%) and hotels (26%) .

This is in accordance with the 2002 study of adolescents 15-13 years old 6.9% of adolescents in West Java had had sex. Based on 2015 research, it was found that 91% of junior high school students had ever done kissing, petting or oral sex.⁶

The results of the Alfatih Studio Survey said that 54% of teenagers in the city of Bandung claimed to have had sexual relations and promiscuity was often accompanied by violent behavior.

Adolescent interest in sexual behavior according to Hurlock in Imaddudin (2015) is driven by the increasing curiosity of adolescents about sex.^[2] Teenagers seek various kinds of information related to sex through reading, peers or experimenting with masturbating, making out or having sex. The results of the 2004 Synovate Research study on adolescent sexual behavior with 450 respondents aged 15-24 years, showed that about 65% of their information about sex was obtained from friends and the remaining 35% from pornographic films. Ironically, only 5% of adolescent respondents get information about sex from their parent.²

Peers or peer groups turned out to have an influence on the lives of teenagers, not least in terms of adolescent sexuality. The influence given by peer groups varies from information, advice, examples and encouragement to teenagers to have sexual relations.³

The results of Hartnett's research (2007) in Muslikah (2013) state that peer groups have a stronger influence than parents in terms of forming attitudes and values. One of the potential factors for student success is the selection of peers.⁴ The results of trials conducted by Muslikah stated that there is an effective peer guidance model to develop negative attitudes towards unhealthy sexual behavior

in adolescents. The peer guidance model is rational, understanding, goals, assumptions, intervention targets, stages and training materials, counseling guidance teacher competencies and roles, system support, as well as evaluations and indicators of success.

Selection of partners (junior high school 15 and junior high school 43) in IbM The application of peer groups on adolescent reproductive health at junior high school N 15 and junior high school 43 is counseling guidance teachers for 310 students of class VII only 2 people, so counseling guidance and introduction activities regarding reproductive health are only once a week for 45 minutes with the classical concept 1. In addition, the location of the school is located in the area of shops, offices, and campuses as well as in the tourist area so that access is very fast for students, not to mention the temptation and desire for a higher negative direction.

With the current condition, the existence of counseling guidance and existing activities/programs is still not optimal, because it has not reached/facilitated the needs of each individual. So that various risk factors that may occur in students may not be detected because of the lack of a forum to raise problems and find solutions, especially in reproductive health.

To overcome this problem, a solution is offered in collaboration with 2 partners, namely junior high school 15 as partner-1 and Junior high school 43 as partner-2

Activities by training peer group leaders Conduct special training for leaders from junior high school 15 and junior high school 43, each consisting of 8 students of class VII. Provide a booklet for the leader's hand which becomes a reference for the leader in carrying out his roles in the peer group in reproductive health and its problems. Assist the leader in carrying out socialization using media in schools during the application of science and technology.

Accompanying 7th grade leaders who are trained to be independent and after becoming 8th graders carry out regeneration with assistance for 7th graders. Give examples of cases related to the material given. Apply interactive training methods so that they are not boring. The application of Peer Groups to younger siblings is carried out during extra-curricular activities so that it does not interfere with learning activities

other than that it is carried out through social media (Line or WhatsApp).

Result

Activity of partner 1 (8 students of junior high school 15) and partner 2 (8 students of junior high school 43), have been already done 14 meetings, divided into 7 meetings of each partner

Table 1. Respondent Characteristics

No	Age	Group			
		Partner 1 (n=8)		Partner 2 (n=8)	
		F	%	F	%
1.	13 years			1	12,5
2.	14 years	7	87,5	6	75
3.	15 years	1	12,5	1	12,5
Total		8	100	8	100

No	Sex	Group			
		Partner 1 (n=8)		Partner 2 (n=8)	
		F	%	F	%
1.	Male	-	-	1	12,5
2.	Female	8	100	7	87,5
Total		8	100	10	100

From the table, it can be seen that for the characteristics of the participants from junior high school 15, the age ranges from 14-15 years, most of them are 14 years old (87,5%) and female (100%). While the characteristics of the participants from Junior High School 43 are teenagers aged between 13-15 years, most of them are 14 (75%) and female (87,5%).

Increasing of Knowledge on Parnet 1 and Partner 2 About Reproductive Health

Tabel 2. Increasing of knowledge's mean score on pretest ana posttest at partner 1 and partner 2

Knowledge	Group	
	Partner 1 (n=8)	Partner 2 (n=8)
Mean score on before	60,5	58,0
Mean score on after	83	80,5
Increasing of knowledge's mean	22,5	22,5

Based on the table above, it can be seen that there is an increase in the average knowledge score of 22,5 points for Partner 1 and an increase of 22,5 points for Partner 2

after community service activities are carried out.

The Availability of Media

The output of this activity is the availability of a booklet on reproductive health entitled "Teenager Reproduction"

Discussion

Activities that have been carried out at meetings in each partner regarding STDs/HIV/AIDS, reproductive tract disorders, psychosexual disorders and peer group socialization methods. The materials were carried out using a question and answer lecture method and interactive discussion accompanied by video and games screenings related to the material presented. After giving the four materials, then proceed with mentoring students (leaders) who have been trained. This mentoring aims to provide opportunities for leaders to convey their knowledge and skills that have been acquired during the training and to build their confidence. The assistance that has been carried out is by accompanying the leaders when providing peer group services to their underclassmen. After 2 full mentoring meetings were conducted, then partial mentoring was carried out. Peer group activities at junior high school 15 Bandung have been carried out by the leaders for 4 meetings with the "Ambassadors of Kespro" group of 16 seventh grade students (underclassmen). Likewise, at junior high school 43 Bandung, the group "Reproductive Health Group" or abbreviated as KKR has conducted a "peer group by leaders to class VII KKR as many as 15 people.

Both partners delivered the same material, namely discussing adolescent reproductive health, reproductive organs, STDs and establishing relationships. The implementation of this peer group went well and was greatly facilitated by the school, so that the ambassador for health and KKR was used as one of the extra-curricular activities. During mentoring, the health care services that have been delivered by the leaders are in accordance with the material they have received so that it is hoped that this peer group can run well. After this IbM activity ended, the school promised to continue

similar activities, namely by including it as an extracurricular activity

Monitoring and evaluation activities are carried out in each school as much as 1 meeting according to the planned schedule. The results of the lbM team's monitoring showed that this activity was in accordance with the planned schedule and objectives. All of the training participants were able to attend the training well, although some participants were unable to fully participate in the activities due to various reasons. The results of the evaluation of the leaders are determined by the results of the post-test at each meeting, in addition to that, during student mentoring, each leader can be seen returning the material that has been given properly and in accordance with the objectives of each material.

The discussion contains the meaning of the results and comparisons with theories and/or similar research results. The discussion contains the meaning of the results and comparisons with theories and/or similar research results.

Conclusion

Community service activities have been carried out 7 times for Partners 1 and 2 according to the plan. There is an increase in the knowledge of Partners 1 and 2 about reproductive health Availability of the "Adolescent Reproduction" booklet containing reproductive health as a guide in providing counseling in community service activities

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