



Adolescents' Perception of Risky Sexual Behavior: An Impact in Rural Area

EMA WALIYANTI^{1*}, YASSIRLI AMRINA²

^{1,2} School of Nursing, Universitas Muhammadiyah Yogyakarta

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ABSTRACT

Adolescents' sexual desire is likely to increase that they tend to look for more sexual information. This condition can cause deviation, one of which is risky sexual behavior. Urban areas adolescents have a higher level of risky sexual behavior than in rural areas because it still have very strong customs and manners. Risky sexual behavior can cause physical, psychological, and social impacts. This research aims to explore how adolescents' perceptions on risky sexual behavior impact in rural area. This research used qualitative method with a phenomenological approach. Data were collected by in-depth interviews with 9 informants aged 12-15 years in the Kalirandu Hamlet determined by purposive sampling technique and data was analyzed used software open code 4.03. The results showed that adolescents perceived that there were three impacts of risky sexual behavior, namely physical, psychological, and social impacts. Physical impacts included pregnancy, abortion, and sexually transmitted disease (STD). Psychological impacts included guilt, regret, and mental disorders that could cause low self-esteem and depression. The social impacts included exclusion, underestimation, defamation, dropping out of school, and early marriage. These findings imply that risky sexual behavior is a problem that can cause various negative impacts on adolescents. Therefore, adolescents need to know the impacts of risky sexual behavior that they can avoid the risks.

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Kata kunci:

Remaja
Dampak
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perilaku seksual berisiko

*) corresponding author

EMA WALIYANTI

Community Nursing, Faculty of Medicine
and Health Science, Universitas
Muhammadiyah Yogyakarta
Jl Brawijaya, Tamantirto, Kasihan, Bantul,
Yogyakarta 55183

Email: emawaliyanti@umy.ac.id

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ABSTRAK

Setiap remaja akan meningkat dorongan seksualnya sehingga selalu mencari informasi lebih banyak tentang seks yang dapat menyebabkan penyimpangan, salah satunya perilaku seksual berisiko. Remaja daerah perkotaan memiliki tingkat perilaku seksual berisiko yang lebih tinggi daripada di pedesaan karena masih memiliki adat dan tata krama yang sangat kuat. Perilaku seksual berisiko dapat menyebabkan dampak baik secara fisik, psikologis maupun sosial. Penelitian ini bertujuan untuk mengeksplorasi persepsi remaja terhadap dampak perilaku seksual berisiko. Penelitian ini menggunakan metode kualitatif dengan pendekatan fenomenologi. Pengambilan data dilakukan dengan wawancara mendalam kepada 9 Informan dengan rentang usia 12-15 tahun yang ada di Pedukuhan Kalirandu yang ditentukan dengan purposive sampling dan data dianalisis dengan software open code 4.03. Hasil penelitian menunjukkan remaja berpersepsi bahwa terdapat tiga dampak terkait perilaku seksual yaitu dampak fisik, dampak psikologis, dampak sosial. Dampak fisik meliputi hamil di luar nikah, aborsi, dan PMS. Dampak psikologis meliputi rasa bersalah, menyesal, ketergangguan mental yang dapat menyebabkan harga diri rendah hingga depresi. Dampak sosial meliputi dikucilkan, dipandang buruk, merusak nama baik, derajat keluarga turun, putus sekolah dan nikah muda. Penelitian ini menunjukkan bahwa perilaku

seksual berisiko merupakan masalah yang dapat menimbulkan berbagai dampak negatif bagi remaja. Oleh karenanya penting bagi remaja untuk mengetahui dampak-dampak yang ditimbulkan perilaku seksual berisiko sehingga remaja dapat menghindari perilaku seksual berisiko

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INTRODUCTION

Adolescents are defined as people in the age range of 10 to 24 years. Based on characteristics of their development, adolescents are divided into three groups, namely early adolescents with an age range of 10-15 years, middle adolescents with an age range of 16-18 years, and late adolescents with an age range of 19-24 years (WHO, 2018). During these periods, an adolescent will increase his sexual drive and always seek more information about sex, leading to an increase in risky sexual behavior (RSB) (Mariani dan Arsy, 2017). According to Risnawati (2016), sexual behavior will be considered risky if it has unexpected consequences such as abortion, unwed pregnancy, sexually transmitted diseases (STDs), and HIV/AIDS. Dating, kissing lips, masturbating and having free sex are examples of risky sexual behavior, which can be dangerous for adolescents.

Sexual behavior in rural and urban areas tends to have differences. Generally, adolescents' social interaction in urban areas is less rigid than in rural areas. Adolescents in rural areas still have very strong customs and manners. Therefore, those living in urban areas have a higher level of risky sexual behavior than those living in rural areas (Oktaviana & Sumaryani, 2017). Lanes et al (2019) stated that people who live in urban areas could easily adapt to social changes while accessing information with more easily available facilities such as the internet and telecommunications. Epidemiological data showed differences in social, cultural, and economic factors in the incidence and prevalence of STIs between different groups in a population. Urban adolescents can more easily access information and technology than in rural areas, such as the internet network availability. It shows a difference between people's lives in urban and rural areas.

In collaboration with the Ministry of Health, the National Committee for Child Protection surveyed major cities in Indonesia. The survey showed that 62.7% of Indonesian adolescents had free sex, indicating that Indonesia had entered an emergency period in the case of free sex (KPAI, 2018). Based on the results of a preliminary study carried out at the Bantul Health Office, 2020 KTD cases in Bantul Regency 2020 reached 273 cases, and Kasihan District contributed 20 cases. It occurred as most adolescents and the community still consider sexual education a taboo subject, which causes a lack of understanding about risky sexual behavior among adolescents. Other factors influencing adolescent sexual behavior are age, gender, parental supervision, and attitudes towards various sexual behaviors (Mahmudah et al, 2016).

This problem is caused by the fact that most adolescents and society still consider sexual education a taboo subject, which causes a lack of understanding about risky sexual behavior among adolescents. The lack of knowledge related to sexual problems is generally due to adolescents' lack of information about sex. It allows adolescents to learn more from various types of media. Adolescents may receive

incorrect and incomplete information. If the information obtained is unclear or half-assed, it can encourage adolescents to commit and lead to misperceptions of sexual behavior (Mahmudah et al, 2016).

The government's effort to overcome risky sexual behavior is the Generation Planning (GenRe) program which is implemented in two ways, namely through the development of PIK R (Adolescent Information and Counseling Center) and PIK M (Student Information and Counseling Center) to educate the younger generation and through development to apply a family-oriented approach through BKR (Adolescent Resilience Development) (Kemenkes RI, 2017). In Islam, marriage is the only form of fulfillment of sexual instincts that can be carried out (halal). The satisfaction of sexual instincts in pre-marriage, commonly called premarital sex, is considered adultery (Dewi, 2019).

If adolescence is passed well, with a balance between knowledge and correct perception of sexual behavior, the population's quality will be better (Rahmah et al, 2017). This perception needs to be understood by adolescents to pay more attention to their sexual behavior to avoid risky sexual behavior (Ratnasari et al, 2020). This research aims to explore adolescents' perceptions of risky sexual behavior impact.

METHOD

Participant characteristics and research design

This research used a qualitative method with a phenomenological approach. This study's participants were 9 adolescents in the Kalirandu Hamlet, Bangunjiwo Village, Kasihan District, Bantul Regency. This study used the purposive sampling technique. The inclusion criteria included adolescents who lived in Kalirandu Hamlet, aged 12-15 years, with good verbal communication and are willing to become informants and adolescents whose parents are willing to have their children become informants. In addition, researcher collected basic demographic information, such as age, gender, Indonesian region, level of education, and experience of getting information about risky sexual behavior.

Data collection tool

Data were collected using in-depth interviews for 40-60 minutes in informant's house by applying health protocols. The instrument used in this research was an in-depth interview guide that contained open-ended questions about adolescents' perceptions of risky sexual behavior impact had been adapted to language that could be understood by the informants. The researchers used a recorder and field notes during the interview.

Data collection

From January to Februari 2020, data were collected using in-depth interviews for 40-60 minutes in informant's house by applying health protocols. Informants were asked to tell how adolescent's perception of risky sexual behavior. In conducting interviews, the researcher asked additional questions (probing) to dig deeper into the informants' perceptions.

Data Analysis

Data analysis was carried out by analyzing and classifying the meaning of the data from the statement of

research results by concluding the form of major themes. Software open code 4.03 was used during the data analysis. The validity test of the data used member checks, thick descriptions, and peer debriefing.

RESULTS AND DISCUSSION

Sample characteristics

There were 9 informants in this study consisting of 5 males and 4 females with the characteristics of the informants in table 1:

Table 1. Informant Characteristics

Informant Code	Gender	Age	Education Level	RSB's Information Source
Informant 1	Male	15th	Junior High School	School and Parent
Informant 2	Male	13th	Junior High School	Internet
Informant 3	Male	12th	Junior High School	Internet and Friend
Informant 4	Female	14th	Junior High School	School and Internet
Informant 5	Female	14th	Junior High School	Parent
Informant 6	Male	14th	Junior High School	School dan Internet
Informant 7	Female	15th	Junior High School	School, parent, and Internet
Informant 8	Male	12th	Elementary School	Internet
Informant 9	Female	15th	Vocational High School	Internet and Friend

The results showed that adolescents perceived three impacts of risky sexual behavior: physical, psychological, and social. Physical impacts included premarital pregnancy, abortion, and STDs. Psychological impacts included guilt, regret, mental disorders, low self-esteem, and depression.

to depression. The social impacts included being ostracized, underestimation, defamation, a decrease in family status, dropping out of school, and early marriage. The result of this research can be seen in the Figure 1.

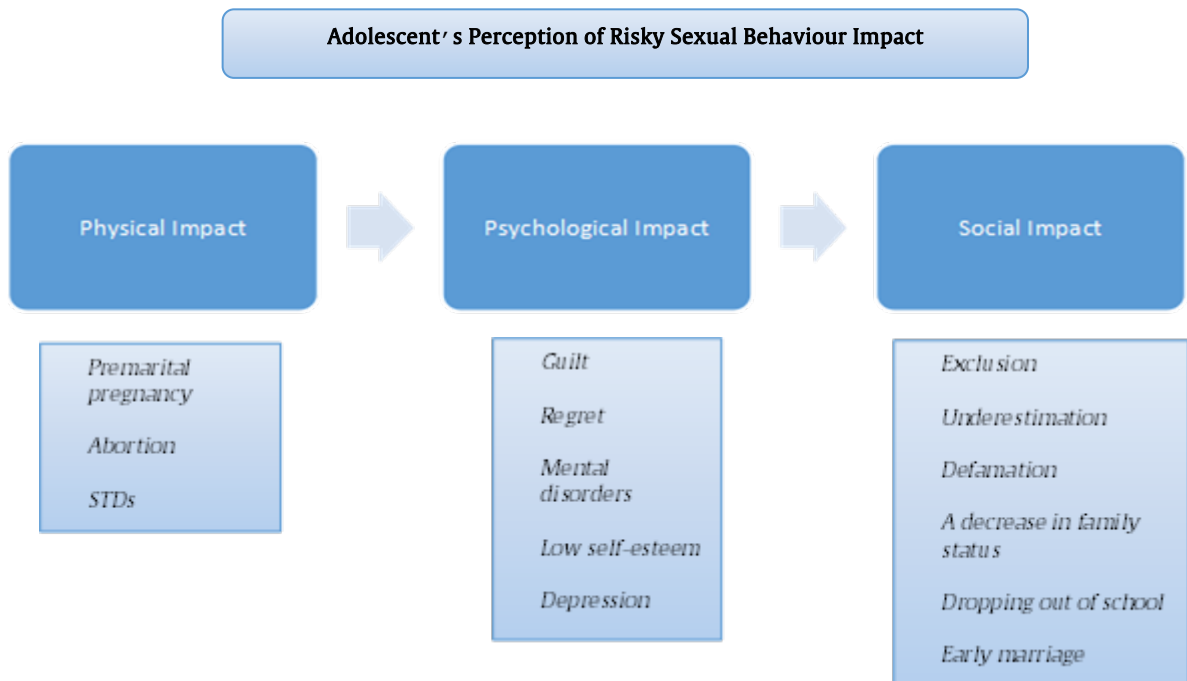


Figure 1. Adolescent's Perceptions of Risky Sexual Behavior Impact

Adolescent Perceptions of Risky Sexual Behavior Impact

Physical Impact

The first adolescents' perception of the impact of risky sexual behavior is a physical impact. According to adolescents, the physical impacts caused by risky sexual behavior included premarital pregnancy, abortion, and sexually transmitted diseases. Premarital pregnancy is one of the physical impacts of risky sexual behavior experienced by female adolescents. One of the informants stated that:

"Yes, that is the main possibility of premarital pregnancy." (Female, 15 years old)

Adolescents' perceptions of the impact of premarital pregnancy included health aspects as vital organs are not yet strong. One of the informants stated that:

"Hmm... if you think about yourself, it's not good for your health, right? If you're pregnant and you give birth, it's not good for your body." (Female, 14 years old)

Adolescents viewed premarital pregnancy as bad behavior, violating religion, and violating the law. One of the informants stated that:

"Yes, it's a sin.. adultery.. not forgiven by Allah SWT." (Male, 12 years)

The second physical impact was abortion. Adolescents perceived that abortion could cause cancer and damage vital organs. Several informants stated that:

"Maybe the impact could be cancer." (Female, 14 years)

"Yes, so it can damage the vital organs." (Male, 12 years)

Adolescents viewed abortion as a major sin because it kills a being. According to adolescents, abortion was a severe behavior because killing the fetus violated religious law. Several informants stated that:

"Because it is the biggest sin, killing is like that..." (Female, 15 years old)

"Yes, if it's already done and he is not a Muslim, his religion is still not allowed it, and also there are laws, now he has to take care of it" (Male, 12 years old)

Regarding the reasons for practicing an abortion, adolescents perceived that someone had an abortion, so they did not find out they were pregnant and did not want to have children. One of the informants stated:

"Because I do not want to be caught pregnant with other people" (Female, 14 years old)

The third physical impact was sexually transmitted diseases. This impact could occur in male and female adolescents. Adolescents viewed the physical impact of risky sexual behavior, namely sexually transmitted diseases including HIV, gonorrhea, and syphilis. Several informants stated:

"Well, it is like urinating, then, the genitals.. what is it like.. it is like rotting" (Male, 15 years old)

"The illness includes HIV" (Female, 14 years old)

"Gonorrhoea, gonorrhoea, what is that moldy thing... like syphilis" (Female, 14 years old)

Adolescents' perception of sexually transmitted diseases is that they view them as a damaging illness. STDs were horrible and caused death. Several informants stated that:

"It's scary just to hear it.. especially the one with gonorrhoea... it's scary to be disgusted..." (Male, 13 years old)

"If you get a sexually transmitted disease, you can die" (Female, 15 years old)

The results showed that adolescents perceived risky sexual behavior could cause physical impacts on the one who did it. According to adolescents, the physical impacts on female adolescents included premarital pregnancy, abortion, and sexually transmitted diseases. Adolescents viewed

premarital pregnancy as bad behavior. They also considered abortion a grave sin because it kills the fetus. Meanwhile, in male adolescents, the physical effects included sexually transmitted diseases. Adolescents viewed sexually transmitted diseases were scary and could cause death. Furthermore, the physical impact of risky sexual behavior would impact the perpetrator's health.

This perception aligns with research by Chawla and Sarkar (2019), which stated that risky sexual behavior is defined as sexual activity that puts people who engage in risky sexual activities at risk of contracting STIs, including human immunodeficiency virus (HIV), premarital pregnancy, or abortion and thus affecting their health. Furthermore, according to Shrestha (2019), premarital sexual behavior, which is a form of risky sexual behavior, can cause several health problems, including Sexually Transmitted Infections (STI), Human Immunity Virus and Acquired Immune Deficiency Syndrome (HIV/AIDS), premarital pregnancy, unsafe abortion, emotional disturbances, infant abandonment, and maternal death. Pregnancy and childbirth at school age are one of the risk factors for maternal death. It occurs due to bleeding in the first and third trimesters. In addition, pregnancy at a young age also has an impact on the child. Babies born to young mothers often experience low birth weight (LBW) and perinatal death (Abajobir et al, 2018; Irani & Latifnejad, 2019)

Novitasari et al (2017) further stated that the physical impact of premarital sexual behavior on adolescents is premarital pregnancy (KTD) and abortion. STDs such as STIs, namely syphilis or gonorrhea, and the spread of HIV/AIDS can occur in male and female adolescents. All these physical effects of premarital sex are very detrimental to the life and development of male and female adolescents. Another study revealed that masturbation, a form of risky sexual behavior, affects physical, psychological, and social aspects. Psychological effects include fatigue, premature ejaculation, impotence, sex hormone disorders, genital disorders, sexually transmitted infections (STIs), and sexual dissatisfaction (Setijaningsih et al, 2019).

Lack of knowledge related to comprehensive reproductive health is adversely affected by their sexual behavior. Knowledge is the foundation of a person's response and action to risky sexual behavior. The existence of knowledge related to risky sexual behavior can prevent adolescents from engaging in the behavior as they already understand its impacts. This perception aligns with research by Rasyidillah (2017) revealing that adolescents with greater knowledge of sexuality will have more control over what they will do and be more careful in their behavior. They can make better decisions about their sexuality. On the other hand, adolescents who do not understand sexual aspects will tend to have premarital sex without thinking.

Furthermore, in the research of Fuada et al, urban adolescents have more low knowledge than rural adolescents. There are still many rural adolescents who have low knowledge about reproductive health, sexually transmitted diseases (STDs) and HIV/AIDS (Fuada & Lubis, 2021). Geographical location also has a role in the mechanism for delivering information. Urban areas will be easier to get information. In addition, the development of technology and telecommunication facilities can also trigger an increase in the value of knowledge information. This is different from rural areas and has a village plan that is far from the information center so that getting information is still limited, so there is a difference between knowledge about the impact of behavior risky sex (Habibah, 2017).

Psychological Impact

The second impact of adolescents' perception of risky sexual behavior is the psychological impact. Psychological impacts caused by risky sexual behavior included guilt, regret, and an uneasy feeling. Several informants stated that:

"Guilty after doing it. If you are not doing that, why are you feeling guilty?" (Female, 15 years old)

"That made him feel sorry for doing that" (Male, 12 years old)

"His heart.. like.., does not feel calm" (Male, 15 years)

Adolescents perceived that adolescents who engage in risky sexual behavior would experience disturbances and mental decline, which could lead to low self-esteem, and damaged minds. Several informants stated that:

"His mentality will be damaged because he is often ridiculed" (Male, 12 years old)

"Then he feels that he has no self-respect anymore" (Female, 15 years old)

These effects could occur in female and male adolescents. Adolescents also perceived that risky sexual behavior could lead to depression to suicide, and they could kill their partners because they did not want to be responsible. Several informants stated that:

"You can be depressed because you are mentally disturbed too, and if you want to talk about it, you are a woman, like "it is your fault, the relationship is like that" because they feel like they are being blamed all the time" (Female, 15 years old)

"If you are already seriously depressed, you can even kill yourself" (Female, 14 years old)

"Yes, for example, the woman does not want to abort, and the man does not want to be responsible, so the woman kills him instead" (Male, 12 years old)

Adolescents in this study perceived a psychological impact appears when they engage in risky sexual behavior. The psychological impacts included guilt, regret, depression, and suicide. Adolescents who engage in risky sexual behavior are not only affected physically but also have to bear the psychological impact of their risky sexual behavior. Adolescents can even develop depression if they have low resilience to handle the psychological burden. This perception is in line with research conducted by Setijaningsih et al (2019), revealing that the psychological effect of free sex, a form of risky sexual behavior, is related to the negative effects of psychological factors that influence adolescents. In young women, experiencing premarital pregnancy can be a burden.

This perception is also in line with research by Bowling et al (2022), stating that the health impacts, especially the psychological impacts of premarital sexual behavior among adolescents, are in the form of regret, loss of self-esteem, depression, loss of family support, substance abuse and even death (suicide). The confusion, anxiety, shame, and guilt that female adolescents experience are mixed with depression, pessimism about the future, and sometimes resentment and anger toward themselves and their partners. It can disrupt the health status, especially the psychological aspects of adolescents (Mori et al, 2020).

Furthermore, men can experience depression and kill their partners as they do not want to be responsible for them. This perception aligns with Prisca's (2017) research revealing that there are many cases of suicide and also murder in adolescents who are affected by free sex. It occurs because they do not want to be responsible for their actions. Adolescents who have practiced free sex have to pay for the negative effects that attack their souls and are associated

with their bodies. There is also research in the community of Makrampai Village, Tebas District, underage marriages due to premarital pregnancy, most of them experience depression, anxiety, fear and stress because they do not understand how to carry out married life, because marriages are based on consensual promiscuity (Asman, 2019).

This study also stated that the psychological effects caused by masturbation are the forms of risky sexual behavior, namely memory loss and forgetfulness, negligence, and irritability. People who often masturbate will fantasize about sexual relations. If the desire is not fulfilled, it can bring depression and emotional and psychological problems to adolescents (Elisa et al, 2018).

Social Impact

Adolescents perceived risky sexual behavior as having an impact on the social life of the perpetrators. The social impacts caused by risky sexual behavior included being ostracized, underestimation, defamation, a decrease in family status, dropping out of school, and early marriage. Several informants stated that:

"If that person is like that, he will be miscommunicated, right?" (Female, 15 years old)

"Because the status of the family was dropped, and his parents were ashamed" (Male, 14 years old)

"Maybe if that is the case, it will ruin your future because you drop out of school" (Female, 14 years old)

"Yes, the impact is getting married at a young age, like it or not, he has to live a new life" (Female, 15 years old)

Early marriage was the impact of getting premarital pregnancy, which in the view of adolescents, would cause unpreparedness to become parents. Their children were less educated, they found it difficult to find a job, and the economic condition was low. These impacts could occur in female and male adolescents. Several informants stated that:

"Yeah, right, the boy does not have money. Because you are not ready to be a parent yet" (Male, 15 years old)

"That is why she is not smart due to dropping out of school and getting married at a young age will have an impact on her child; her child will be uneducated" (Female, 15 years old)

"They do not have money to feed the family; some people steal because of it" (Female, 15 years old)

The results showed that adolescents perceived that there is a social impact if they engage in risky sexual behavior. It included exclusion from the community, defamation, dropping out of school, and early marriage. Early marriages can cause unpreparedness to become parents as the subjects are still underage. Adolescents who are known to engage in risky sexual behavior will be shunned by society and will be labeled as bad people. Adolescents will also be criticized and pressured by society that rejects this situation.

This perception is in line with research stating that the social impact of risky sexual behavior on adolescents included exclusion and criticism from society. It occurs in the context of a form of social control imposed by the community as a social system so that the adolescent can return to carrying out his functions and no longer commit actions that violate social values and norms, as well as religious teachings, especially Islamic teachings (Novitasari et al, 2017).

Furthermore, in the research of Nigussie et al (2020), the nature of pregnancy and childbirth puts female adolescents in a dilemma. From some people's point of view, premarital pregnancy in female adolescents is a disgrace to the family and violate social and religious norms. Pregnancy in

adolescents can affect not only psychological problems but also social problems, namely socialization barriers and withdrawal from the environment. Furthermore, adolescents' social demands are still high, so housework and childcare are considered burdens. It causes adolescents to experience unpreparedness in parental activities (Manandhar & Joshi, 2019). In addition, early marriage has an impact on the welfare of the family and society as a whole. Women who have low education and are not ready to carry out their role as mothers also experience a decrease in their ability to educate their children, which can result in stunting and damage the future of their children (Paul, 2019; Qamar et al, 2020).

Early marriage forces adolescents to make a living with limited education and experience, making it difficult to find work. It is not uncommon for married adolescents to easily commit criminal acts such as stealing to meet the needs of their families, which will ultimately impact the community. It causes the emergence of a new circle of poverty in the family (Elnakib et al, 2022). This is in line with Asman's research that stated that condition of rural communities in general has a low economic level, this can determine the survival of the household in fulfilling daily life. The fact is that in the Makrampai village community whose children are involved in early marriages are from low and middle economic groups, after the incident the parents thought it was better to marry off their children than to bear the shame in the community due to their own children's actions and so underage marriages were carried out (Asman, 2019)

LIMITATION OF THE STUDY

This research has only been conducted on adolescents who lived in rural areas, so the perceptions obtained might differ from those of adolescents who lived in urban areas due to differences in the characteristics.

CONCLUSIONS AND SUGGESTIONS

Based on the result of this study, it can be concluded that risky sexual behavior was a problem that could cause various negative impacts on adolescents. Therefore, adolescents need to understand the impacts of risky sexual behavior to avoid it. Furthermore, the results also showed that adolescents perceived that there were three impacts related to sexual behavior, namely physical impacts, psychological impacts, and social impacts. Physical impacts included premarital pregnancy, abortion, and STDs. Psychological impacts included guilt, regret, and mental disorders that could cause low self-esteem to depression. Meanwhile, the social impacts included exclusion, underestimation, defamation, a decrease in family status, dropping out of school, and early marriage.

It is important for adolescents to read the results of this research in order to know the description of adolescents' perceptions of risky sexual behavior impact so that adolescents can avoid risky sexual behavior. Also parents need to know the results of this study in order to find out adolescents' perceptions of risky sexual behavior impact so that parents can provide sexual attention and education to adolescents as early as possible which can make adolescents avoid risky sexual behavior. For nursing, the results of this research can be used as the basis for developing a program plan to address the causes and effects of risky sexual behavior, and ultimately prevent the impact of risky sexual

behavior, and for future researchers are expected to examine the perceptions of adolescents living in urban areas regarding risky sexual behavior, in case this study was conducted only on adolescents who live in rural areas.

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ETHICAL CONSIDERATIONS

This study has been approved by the ethics committee Universitas Muhammadiyah Yogyakarta with ethical approval number 330/EC-KEPK FKIK UMY/XII/2021.

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Conflict of Interest Statement

The authors declared that there was no conflict of interest.

REFERENCES

- Abajobir, A. A., Kisely, S., Williams, G., Strathearn, L., & Najman, J. M. (2018). Risky sexual behaviors and pregnancy outcomes in young adulthood following substantiated childhood maltreatment: findings from a prospective birth cohort study. *The Journal of Sex Research, 55*(1), 106-119.
- Asman, A. (2019). Underage Marriage Due to Pregnancy Out of Wedlock and Psychological Impact on Children in Makrampai Village, West Kalimantan. *Al-Istinbath: Journal of Islamic Law, 4*(1), 79-100.
- Bowling, J., Montanaro, E., Gattuso, J., Gioia, D., & Guerrero Ordonez, S. (2022). "Everything feels risky now": Perceived "risky" sexual behavior during COVID-19 pandemic. *Journal of health psychology, 27*(6), 1498-1506.
- Chawla, N., & Sarkar, S. (2019). Defining "high-risk sexual behavior" in the context of substance use. *Journal of Psychosexual Health, 1*(1), 26-31
- Dewi, R. (2019). Konsep Kesehatan Reproduksi Perempuan dalam al-Qur'an. *Mawa'izh: Jurnal Dakwah Dan Pengembangan Sosial Kemanusiaan, 10*(2), 248-272.
- Kemenkes RI. (2017). Situasi Kesehatan Reproduksi Remaja. (Issue Remaja, p. 1).
- Elisa, E., Hastuti, L., & Abrori, A. (2018). Paparan Cyberporn Terhadap Perilaku Knpi (Kissing, Necking, Petting Dan Intercourse) Dan Masturbasi Pada Remaja Sekolah Menengah Pertama Di Kecamatan Pontianak Barat. *JUMANTIK: Jurnal Mahasiswa dan Peneliti Kesehatan, 4*(2).
- Elnakib, S., El Khoury, G., Salameh, P., Sacre, H., Abirafeh, L., Robinson, W. C., & Metzler, J. (2022). Investigating incidence, correlates, and consequences of child marriage among Syrian refugees residing in the south of Lebanon: a cross-sectional study. *Journal of Adolescent Health, 70*(3), S64-S71.

- Fuada, Z., Rusly, D. K., & Lubis, S. Y. (2021). Comparison level of abortion knowledge in urban and rural women. *Journal of Medika Malahayati*, 5(1), 21-26.
- Habibah, S. (2017). The implications of the philosophy of science for the development of science and technology. *DAR EL-ILMI: Journal of Religious Studies, Education and Humanities*, 4(1), 166-180.
- Irani, M., & Latifnejad Roudsari, R. (2019). Reproductive and sexual health consequences of child marriage: a review of literature. *Journal of Midwifery and Reproductive Health*, 7(1), 1584-1590.
- Lanes, E. J., Mongan, S. P., & Wantania, J. J. (2021). Perbedaan Pengetahuan dan Sikap Remaja tentang Infeksi Menular Seksual di SMA/SMK Perkotaan dan Pedesaan. *e-Clinic*, 9(1).
- Kemkes RI. (2017). Situasi Kesehatan Reproduksi Remaja. (Issue Remaja, p. 1).
- KPAI. (2018). KPAI: *Korban Kekerasan Seksual Anak Didominasi Laki-Laki*. Retrieved
- Mahmudah, M., Yaunin, Y., & Lestari, Y. (2016). Faktor-Faktor yang Berhubungan dengan Perilaku Seksual Remaja di Kota Padang. *Jurnal Kesehatan Andalas*, 5(2), 448-455.
- Manandhar, N., & Joshi, S. K. (2020). Health co-morbidities and early marriage in women of a rural area of Nepal: A descriptive cross-sectional study. *JNMA: Journal of the Nepal Medical Association*, 58(230), 780.
- Mariani, N. N., & Arsy, D. F. (2017). Faktor-Faktor Yang Mempengaruhi Perilaku Seksual Remaja Di Smp Negeri 15 Kota Cirebon Tahun 2017. *Care: Jurnal Ilmiah Ilmu Kesehatan*, 5(3), 443.
- Mori, C., Temple, J. R., Browne, D., & Madigan, S. (2019). Association of sexting with sexual behaviors and mental health among adolescents: A systematic review and meta-analysis. *JAMA pediatrics*, 173(8), 770-779.
- Nigussie, T., Legesse, T., Abebe, L., Getachew, S., & Alemayehu, D. (2020). Magnitude of risky sexual behaviors, determinants, and consequences among high school and preparatory school students in Mizan Aman Town, Ethiopia. *Journal of Midwifery and Reproductive Health*, 8(1), 2096-2104.
- Novitasari, D. W., Nikmah, L., & Sulistyoningtyas, S. (2017). Persepsi remaja kelas XI terhadap perilaku seks bebas di SMK Muhammadiyah 1 Moyudan Kabupaten Sleman Yogyakarta.
- Oktaviana, D., & Sumaryani, S. (2017). *Gambaran Perilaku Seksual Berisiko Remaja di Urban Disusun Untuk Memenuhi Sebagian Syarat Memperoleh Derajat Sarjana Gambaran Perilaku Seksual Berisiko Remaja Di Urban Dan Rural Area* (Doctoral dissertation, Universitas Muhammadiyah Yogyakarta)
- Paul, P. (2019). Effects of education and poverty on the prevalence of girl child marriage in India: A district-level analysis. *Children and Youth Services Review*, 100, 16-21.
- Prisca, L., Yauri, I., & Bunga, A. L. (2017). Eksplorasi Persepsi Remaja Tentang Seks Pra-Nikah pada Remaja di Kecamatan Kema Kabupaten Minahasa Utara (Doctoral dissertation, Universitas Katolik De La Salle).
- Qamar, K. H., Shahzadi, N., & Khan, I. (2020). Causes and consequences of early age marriages in rural areas of Pakistan. *Art Social Sci*, 2, 44-48.
- Rahmah, R., AAAN, W., & WW, S. (2017). Attitude and Behavior Sexual among Adolescents in Yogyakarta. *Indonesian Journal of Nursing Practices*, 1(2), 64-68.
- Rasyidillah, A. (2017). *Persepsi remaja tentang perilaku seks pranikah (studi pada remaja di Kota Tangerang)* (Bachelor's thesis, FITK UIN Syarif Hidayatullah Jakarta).
- Ratnasari, D., Rifqiwati, I., Wahyuni, I., Sari, I. J., & Syaughiah, S. G. (2020). Persepsi Mahasiswi Untirta terhadap Kesehatan Reproduksi dan Permasalahannya. *Biodidaktika: Jurnal Biologi Dan Pembelajarannya*, 15(1), 1-5.
- Risnawati, I. (2016). Perilaku Seksual Pranikah Pada Remaja. *The 3rd University Research Colloquium*, 343-347. ISSN 2407-9189
- Setijaningsih, T. (2019). Persepsi antara Remaja yang Berpacaran dengan Remaja yang Tidak Berpacaran tentang Perilaku Seks Pranikah. *Journal of Borneo Holistic Health*, 2(1).
- Shrestha, R. B. (2019). Premarital sexual behaviour and its impact on health among adolescents. *Journal of Health Promotion*, 7, 43-52.
- World Health Organization. (2018). Handout for Module A Introduction. In *Department of Child and Adolescent Health and Development*.

