Sex Education with the Theme "Healthy, Smart and Cheerful"

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ABSTRACT

Sex education is very important to give to teenagers, even from childhood. Children and adolescents are vulnerable to misinformation about sex. People's views in general are still taboo when talking about sex and sexuality issues. If sex education is not taught as early as possible to children, it is likely that there will be violations of moral values such as free sex, rape, etc. Some efforts that can be made to overcome reproductive health problems in adolescents include sexual education. Sexual education is an effort to increase knowledge and change individual attitudes and behaviors to better understand their reproductive health needs. The purpose of this community service is to increase students' knowledge related to sex education. At the beginning of this activity, it began with an approach with partners, namely to see how many students and female students participated, for effectiveness in counseling. The participants who participated in this counseling were fourth grade students at Ricci Elementary School, Jalan Kemenangan III N0 47 Glodok, Taman Sari, West Jakarta, consisting of 48 male students and 33 female students. The total number of participants who participated in this counseling was 81. This counseling activity was declared successful because there was an increase in knowledge in students and schoolgirls after being given counseling.

Keywords:
Sex Education
Teenagers

INTRODUCTION

Adolescence is an age where a person needs to get serious attention because adolescents are the buds of the nation, the next generation of the nation, and the foundation of the nation's hopes that will be able to continue the ideals of the nation towards a dignified Indonesia. Adolescence is a time when they will enter reproductive age and enter the workforce (Friskarini & Manalu, 2016). The importance of adolescents as the nation's successors for nation-building requires special attention in dealing with the changes that occur, as well as special attention to the risk of various problems in reproductive health. Based on the results of the International Conference on Population Development (ICPD), it is expected that at least 90% of adolescents have obtained information related to reproductive health and sexuality (Irawan, 2016).

The main problems with adolescent reproductive health (KRR) in Indonesia are the lack of information about reproductive health, the problem of shifting adolescent sexual behavior, poor health services, and unsupportive legislation. These problems have an impact on the lack of knowledge about adolescent reproductive health itself (Irawan, 2016). Adolescents are often associated with the stigma of "deviant and
negative behavior groups,” so when juvenile delinquency occurs, the object of blame is adolescents. Naturally, the anatomical and physiological development of the adolescent stage makes adolescents think impulsively and riskily. This is due to the not yet fully developed frontal lobe, which functions as the center of judgment, reasoning, and decision-making. As a result, this situation will cause adolescents to get into problems related to reproduction and sexuality. On the other hand, this condition is exacerbated by the fact that there are still parents who consider discussing sexual and reproductive issues with their children taboo (Suhaid et al., 2021).

In the results of the 2017 Indonesian Health Demographic Survey (IDHS) conducted on women and men in the age range of 15–19 years related to adolescent reproductive health, it was found that 76% of adolescents know the most about physical changes in voice, and 87.7% of adolescents answered that the most physical changes that occur in adolescents are menstruation. According to other data, only 21% knew about the ideal age of marriage for female adolescents and 19.9% for male adolescents. According to information on the use of cigarettes and drugs, there were 2.4% of female adolescents who had not graduated from elementary school who had already smoked, and 70% of male adolescents who had not graduated from elementary school smoked actively. There were 26.6% of female adolescents who started smoking at the age of <14 years and 15.5% of male adolescents. For knowledge about HIV/AIDS, 89.9% of female adolescents had heard information about HIV/AIDS, and 83.9% of male adolescents had heard about the topic. Based on the age of first sexual intercourse, most of them did it at the age of 17 years. For the age of first dating, there were 80% for female adolescents and 84% for male adolescents. In terms of dating behavior, 75% of male adolescents and 64% of female adolescents admitted to holding hands, 17% of female adolescents and 33% of male adolescents admitted to hugging, 30% of female adolescents and 50% of male adolescents admitted to kissing lips, and 5% of female adolescents and 22% of male adolescents admitted to fingering and groping (Indonesia, 2017).

Some efforts that can be made to overcome reproductive health problems in adolescents include sexual education. Sexual education is an effort to increase knowledge and change individual attitudes and behaviors to better understand their reproductive health needs. Indonesian culture, which is generally thick with eastern culture, still considers sexual topics a taboo issue that must be discussed with children and adolescents. This encourages children and adolescents not to get valid and reliable information, so the tendency is to find out for themselves through social media or other sources of information. Through sexual education that is provided comprehensively, it is hoped that adolescents can have knowledge and awareness about their reproductive health so as to avoid risky sexual behavior (Wardani & Pratiwi, 2022; Suhaid et al., 2021).

Functional structural theory sees that sexual education provided in schools can be a system that is intertwined with other systems so as to support the formation of behavior in society (A.Z. & I, 2018). Several studies have shown that counseling given to adolescents can increase their knowledge. Of course, counseling on reproductive health can also increase adolescents’ knowledge about reproductive health. Permatasari and Priyatno said that health counseling on reproductive health for adolescents in Nambakor Village, Sumenep, can increase their knowledge about reproductive health. (Permatasari & Suprayitno, 2021).

**METHOD**

This community service activity was carried out in several stages, namely coordination with partners in preparation for counseling, after which it was agreed that counseling would be carried out to all fourth grade elementary school students who would be divided into two groups, namely male groups and female groups. This counseling activity will be facilitated by two lecturers as resource persons and assisted by two Sint Carolus STIK students. The counseling participants were grade IV students at Ricci I Glodok Elementary School, Taman Sari, West Jakarta, totaling 81 people.

This activity is divided into 3 stages, namely session 1, which consists of; introductions, registration, filling out Google Forms that contain participant identity data, ice-breaking by students, and filling out pre-test questions. For session 2, namely entering the main activity in the form of counseling provided by speakers who are divided into 2 groups, namely the women's group and the men's group, in the women's class and Mrs. Nyoman in the men's class, with student moderators (in the women's class and Alifia in the men's class), and continued with questions and answers about the material guided by students. In session 3, the post-test questionnaire was filled out to find out the effectiveness of counseling through a Google Form, ice-breaking by students by teaching how to wash hands using songs, and ending with a closing photo together.
RESULTS

Community service activities were carried out on Friday, March 10, 2023, from 8:00 a.m. to 10:30 a.m. WIB. The counseling participants were grade IV students at Ricci I Glodok Elementary School, Taman Sari, West Jakarta, totaling 81 people. This counseling was carried out offline and was divided into two classes, namely the women's group and the men's group.

The counseling with the theme "Sex Education with the theme "Healthy, Smart, and Cheerful" was opened by representatives of the teachers of Ricci I Elementary School, who then handed over the next activity to the speakers, namely lecturers and students from the STIK Sint Carolus midwifery study program who were involved in this activity. Group 1 consisted of male participants totaling 48 students who were guided by Virginia (an undergraduate midwifery student) and presenter Mrs. Ni Nyoman (a lecturer at STIK Sint Carolus). Group 2 female participants totaled 33 students who were guided by Sylia (an S1 midwifery student) and presenter Mrs. Agustina (a Sint Carolus STIK lecturer).

After the introduction, students distributed pre-test questionnaires to determine their knowledge of reproductive health and sex education as well as their characteristics as counseling participants. Of the 81 participants present, 40 children were taken to complete the pre-test and post-test. Each of the boys' classes was represented by 20 children, and the girls' class by 20 children. The questionnaires were distributed randomly. The time given to do the pre-test questions is 10 minutes. Then ice-breaking activities were carried out by students to make the children enthusiastic about participating in this counseling activity. The ice-breaking activities were led by Sylia and Virginia.
After that, the activity continued by providing material, which was carried out in two different classes. The male class was given material by Mrs. Ni Nyoman and assisted by a student named Virginia. And in the second group of female classes, the material was given by Mrs. Agustina Ida and assisted by student Sylia. The material presented was about reproductive health, recognizing reproductive organs, and physical and psychological child development. Counseling participants were very enthusiastic and paid attention to the material provided.

During the activities, participants were very interested, excited, and enthusiastic about following all the counseling materials. All activities could be completed on time. After delivering the material, a video related to the topic was played, and a question-and-answer session was held. The question-and-answer activity took place well and actively. Many questions were asked by the children, so the counseling atmosphere was very conducive. The children were very disciplined and focused on listening. Finally, before closing, students were asked to fill out a post-test. The number of pre- and post-test questions is 10. In less than 10 minutes, the participants were able to complete the posttest.

### Table 1. The results of the pre-test and post-test assessment evaluations

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<thead>
<tr>
<th></th>
<th>Pre-test</th>
<th>Post-test</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Highest Score</td>
<td>Lowest score</td>
</tr>
<tr>
<td>Boys</td>
<td>9.0</td>
<td>3.0</td>
</tr>
<tr>
<td>Girl</td>
<td>9.0</td>
<td>4.0</td>
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</table>

From the evaluation results of 40 participants who filled out the posttest, the results showed that there was an increase in knowledge from participants after being given information related to sex education in children and adolescents, thus this counseling could increase participants' knowledge about pregnancy.

### CONCLUSION
Community service in collaboration with Ricci I Glodok Elementary School, Taman Sari, West Jakarta, went well. The counseling participants were elementary school students of SD Ricci I Glodok, Taman Sari, West Jakarta. There were as many as 81 participants. The counseling material provided comprehensively includes female and male reproductive organs, how to protect yourself, touch that is allowed and not, and preparation for puberty. The counseling process went very well, and as evidenced by the results of the evaluation of participants, there was an increase in knowledge after counseling.
REFERENCES