The Effectiveness of the Peer Teaching Approach in Improving the **Prevention of Risky Sexual Behavior**

Elka Halifah¹, Nevi Hasrati Nizami², Darmawati¹, Mariatul Kiftia¹, Dara Ardhia¹, Sri Agustina², Aida Fitri^{1*}

ABSTRACT

OBJECTIVE: To identify the Effectiveness of the Peer Teaching Approach in improving the prevention of risky sexual behavior in Aceh Besar.

METHODOLOGY: This quantitative quasi-experimental research with a pre-post test and a control group design. This study's population consisted of all ninth-grade female students at Madrasah Tsanawiyah in Aceh Besar. Sampling was conducted using the stratified random sampling technique. Based on Cohen's table, which had a 90% confidence level, the sample size was 100 respondents. The research instrument used was a questionnaire, and the data were analyzed using the Mann-Whitney and Independent T-test statistical tests.

RESULTS: The results of the statistical test using the Mann-Whitney Test showed a significant difference in knowledge (p=0.001), attitude (p=0.000), and behavior (p=0.000) between the pre-test and post-test in the intervention group.

CONCLUSION: It can be concluded that the intervention using the Peer Teaching Approach effectively improved adolescents' knowledge, attitudes, and behaviors in preventing risky sexual behavior at Madrasah Tsanawiyah Negeri in Aceh Besar. It is recommended that the peer teaching approach be conducted regularly, utilizing effective and engaging methods.

KEYWORDS: Peer Teaching, Risky Sexual Behavior, Adolescents, Health Knowledge, Attitude, Practice

INTRODUCTION

Adolescence is a transitional period from childhood to adulthood, making this stage vulnerable and tumultuous¹. Adolescents are no longer children; on the other hand, they are not yet adults. As a result, their psychological development is often unbalanced; this can lead to internal conflicts in adolescents, frequently resulting in strange and awkward behavior, which, if not controlled, can lead to delinquency, including risky sexual behavior that may threaten their ^{2,8}. According to previous reproductive health research, around 70% of adolescents are reported to be psychologically and emotionally immature to face the negative health consequences of sexual behavior².

Based on data from the World Health Organization (WHO), which conducted studies in several developing countries, shows that 40% of male adolescents aged 18 and 40% of female adolescents aged 18 have engaged in sexual intercourse, even without marriage^{2,9}. The 2018 Basic Health Research (Riskesdas) on reproductive health and risky behaviors among adolescents found that 0.7% of female adolescents and 4.5% of male adolescents reported having engaged in premarital sexual relations3.

¹Department of Maternity Nursing, Faculty Nursing, University Syiah Kuala, Banda Aceh, Indonesia ²Department of Pediatric Nursing, Faculty Nursing., University Syiah Kuala. Banda Aceh, Indonesia Correspondence: aidafiri@usk.ac.id doi: 10.22442/jlumhs.2025.01337

Forms of risky sexual behavior in adolescents include holding hands, dry kissing, wet kissing, hugging, fantasizing or imagining, touching, masturbation, petting, and oral sex, up to the occurrence of coitus. Having dating experience increases the risk of engaging in risky sexual behaviors and having sex at a young age. Adolescents typically start dating between the ages of 13 and 21. Experiences during this age can influence behavior and increase the risk of engaging in risky dating practices⁴.

According to the study results, factors related to risky sexual behavior in adolescents include exposure to social media. The consequences of risky sexual behavior among adolescents can lead to human immunodeficiency virus (HIV) infections, sexually transmitted infections (STIs), unwanted pregnancies requiring abortions, as well as legal and social conflicts⁵. Data from the Aceh Health Office 2023 indicates that as of June 2023, there were 2,094 recorded cases of HIV/AIDS, and by May 2024, 441 individuals had already been reported as infected with HIV/AIDS^{6,7}. Another impact experienced as a result of risky sexual behavior is anxiety about pregnancy or contracting infectious diseases, which leads to reduced concentration in studying and, consequently, affects adolescents' academic performance8. Knowledge about reproductive and sexual health greatly influences adolescent sexual behavior, as a lack of knowledge about sex can lead to curiosity and a tendency to experiment. Low levels of knowledge affect adolescents' attitudes toward premarital sex, combined with the strong influence of peers during adolescence, which can result in



unhealthy sexual behaviors among teenagers⁹. The research results show that although adolescents' knowledge and attitudes about risky sexual behavior are high, the practice of risky sexual prevention remains low among them. Better educational interventions are needed to increase the use of preventive methods¹⁰. Adolescent's knowledge level is 73.8%, yet 27.07% have engaged in sexual intercourse within the last three months, 58.06% have had sex with multiple partners, and 6.11% & 15.72% engage in homosexual practices and masturbation, respectively⁹.

Aceh is a Province that strictly adheres to Islamic law, with nearly all elements of society and government actively promoting behaviors in line with Islamic values for future generations. The threat of sexual behavior among adolescents, especially in the Aceh Besar area, is becoming increasingly severe due to the loosening of social controls they receive. The number of adolescents experiencing issues related to premarital sexual behavior continues to rise due to a pattern of promiscuous living. According to research, the sexual behavior of adolescents in Banda Aceh is generally categorized as high, with a percentage of 15.26%. The moderate category is 68.42%, while the low category is 16.32%. In terms of specific sexual behaviors, dating accounts for 72.3%, while petting is for 15.2%. Sexual intercourse is reported at a percentage of 13.4% ¹¹. Given that sexual behavior among adolescents, today poses risks and negative impacts in the future, preventive interventions are urgently needed. One approach is establishing reproductive health counselors in schools, making them a source of information for adolescents through peer support. Peers strongly influence both the positive and negative behaviors of their friends. Therefore, schools should emphasize peer education and peer discussions to protect promotion adolescents and young people from risky sexual behaviors¹⁰. Literature review studies also indicate that peer education is a preventive and promotive effort to improve knowledge and attitudes about sexual behavior among adolescents. The role of peers is a key component in this health education model. which can be integrated and adapted into adolescent reproductive health services in healthcare facilities¹².

METHODOLOGY

Study Design Population and Sample

This type of research is quantitative with a *quasi-experimental pre-post test and a control group design*. The population in this study included all female students at Madrasah Tsanawiyah in Aceh Besar. After random sampling, two Madrasah Tsanawiyah (Islamic junior high schools), 02 and 07 in Aceh Besar, were selected. Respondents were chosen using stratified random sampling. The sample size was determined based on Cohen's table, with a 90% confidence level, totaling 100 individuals. The 100 respondents were divided into control and intervention

groups, each of 50 respondents.

Instrument

Data collection was conducted after informed consent was obtained from the parents of respondents, using a questionnaire instrument on risky sexual behavior. This questionnaire consisted of fifteen items addressing knowledge of sexual behavior, attitudes toward sexual behavior, and risky sexual activities or behaviors. The validity test compares the calculated r-value from the Pearson product-moment statistical test with the r-table. The r-table value, based on a sample size of 30 respondents, was 0.361 (α = 0.05). The reliability test results showed that Cronbach's alpha values for all three questionnaires were above 0.7.

Data Analysis

Data collection was conducted in August-September 2024. The univariate analysis in this study involved presenting data on menstrual status, age at menarche, parental education, and parental occupation. The normality test results indicated that some data were normally distributed (p-value < 0.05), so the T-test assessed differences between groups. The Mann-Whitney test was used for data that were not normally distributed (p-value > 0.05). The Wilcoxon Test was applied to determine the differences between the two paired groups.

Ethical Statement

This study has been approved by the Ethics Committee of the Faculty of Nursing at Universitas Syiah Kuala (Ethics Form Reference Number 113009280624). The study obtained consent from respondents through informed consent forms signed by their parents. Only the researchers retain the respondents' data, which is used solely for data analysis and will never be shared to ensure the confidentiality of respondents' identifying information. Additionally, published data does not include the names or addresses of the respondents.

RESULTS

Based on the data above, it was found that the majority of respondents in the control group were female adolescents or 98%. The majority had an age of menarche at 12 years, accounting for 44%. Most fathers had a high school education at 54%, while 46% of mothers also had a high school education. Most fathers were employed in other occupations at 80.5%, and most mothers were engaged in different occupations at 98%. **Table I**

In **Table II,** the results of the statistical test using the Mann-Whitney Test indicate that there are significant differences in knowledge (p = 0.001), attitude (p = 0.000), and behavior (p = 0.000) between the pre-test and post-test in the intervention group. This suggests that the Peer Teaching Approach intervention effectively enhances adolescents' knowledge, attitudes, and behaviors in preventing risky sexual behavior at Madrasah Tsanawiyah Negeri in Aceh Besar.

Table I: Characteristic of Respondents
Demographic Data of the Control Group and
Intervention Group at MTsN Aceh Besar

Variable	Category	f	%
Control Group Menstruation	No Yes	1 49	2.0 98.0
Intervention Group Menstruation	No Yes	1 49	2.0 98.0
Control Group Age of Menarche (years old)	9 10 11 12 13 14 16 0	1 9 22 14 1 2	2.0 2.0 18.0 44.0 28.0 2.0 2.0 2,0
Intervention Group Age of Menarche (years old)	10 11 12 13 14 0	1 17 20 10 1	2.0 34.0 40.0 20.0 2,0 2,0
Control Group Father's Education	Bachelor's degree Senior High School Junior High School Elementary School Not attending school	4 27 11 2 6	8.0 54.0 22.0 4.0 12.0
Intervention Group Father's Education	Bachelor's degree Senior High School Junior High School Elementary School PhD	5 26 10 8 1	10.0 52.0 20.0 16.0 2.0
Control Group Mother's Education	Bachelor's degree Diploma's degree Senior High School Junior High School Elementary School Not attending school	7 1 23 13 1 5	14.0 2.0 46.0 26.0 2.0 10.0
Intervention Group Mother's Education	Bachelor's degree Diploma's degree Senior High School Junior High School Elementary School Not attending school	11 1 23 8 6 1	22.0 2.0 46.0 16.0 12.0 2.0
Control Group Father's Occupation	Private employee Civil employee Military employee Other	4 5 1 40	8.0 10.0 2.0 80.0
Intervention Group Father's Occupation	Private employee Civil employee Military employee Others	10 4 2 34	20.0 8.0 4.0 68.0
Control Group Mother's Occupation	Civil employee Other	1 49	2.0 98.0
Intervention Group Mother's Occupation	Housewife Swasta Civil Employee Others	34 2 2 12	68.0 4.0 4.0 24.0

Table II: Average Knowledge, Attitudes, and Risky Sexual Behavior Actions Among Adolescents Before and After Receiving Peer Teaching at Intervention Group (n=50)

Variables	Group	Mean Rank	Sum of Rank	Z score	p- value
Knowledge	Control Pre-test	41,76	2088	-3,047	0,002
	Postest Intervention	40,77	2038,5		
	Pre-test	59,24	2962		
	Postest	60,23	3011,5	-3,405	0,001
Attitude	Control Pre-test	32,38	1619	-6,266	0,000
	Postest Intervention	33,20	1660		
	Pre-test	68,62	3431		
	Post-test	67,80	3390	-5,977	0,000
Action	Control Pre-test	32,77	1638,5	-6,276	0,000
	Postest Intervention	25,50	1275		
	Pre-test	68,23	3411,5		
	Post-test	75,50	3775	-8,705	0,000

DISCUSSION

Based on the results of this study, it can be concluded that there is an improvement in knowledge, attitudes, and actions before and after the intervention. At the same time, in the control group, there was no increase in knowledge and actions between the pre-test and post-test. It can be concluded that the peer teaching approach is effective in preventing risky sexual behaviors among adolescents.

Behavior is the result or outcome of the interaction between stimuli (external factors) and the individual exhibiting that behavior¹³. In other words, a person's behavior is influenced or determined by factors within and outside the individual¹⁴. Sexual behavior exhibited by adolescents or unmarried partners is referred to as premarital sexual behavior. Premarital sex involves sexual activities performed by individuals who are not married, which can include having multiple partners or being faithful to one partner¹⁵. Risky sexual behaviors can lead to negative impacts on adolescents' lives. Dating, kissing, and engaging in sexual intercourse are examples of risky sexual behaviors that can have negative consequences for those involved¹⁶. As a result of engaging in risky sexual behavior, many adolescent boys contract sexually transmitted infections, while girls often experience feelings of trauma, depression, and risks to their reproductive health 17. Therefore, the importance of reproductive health education regarding sexual behavior among adolescents is crucial to anticipate behaviors that could have adverse effects on themselves¹⁵

Another potential impact that can occur if adolescents are not aware of and do not understand adolescent reproductive health is the occurrence of infections, disabilities, or even death¹⁴. Everyone should realize Adolescent Reproductive Health during adolescence. Knowledge, attitudes, and sexual behaviors among adolescents will determine their health and quality of life after reproductive age¹⁵.

Other research has also identified factors related to sexual behavior among adolescents in West Java. One issue among adolescents is sexual behavior, which generally begins with the dating process and behaviors associated with dating. In a study involving 429 adolescents, one factor related to dating behavior was age; it was found that behaviors such as holding hands (p=0.037), hugging (p=0.002), and kissing (p=0.041) were associated with age while touching/stimulation and sexual intercourse were not related to age (p=0.929). There is a relationship between age and dating behavior among adolescents¹⁸.

Peer groups are important because they can help enhance adolescents' knowledge¹⁹. Peers are friends who are very close to us due to the same gender, similar age, neighboring houses, attending the same school, and other factors²⁰. Among peers, there are usually very few secrets. Peers become companions who share similar experiences. Because of this closeness, peers can influence each other positively²¹. Conversely, solidarity among peers can also lead to risky behaviors that can be harmful²².

According to the study result, motivational interviewing and peer education methods can be effective in promoting puberty and mental health among adolescent girls. Both methods can have a significant impact on health behaviors related to puberty. However, the peer education method is more effective than motivational interviewing in promoting knowledge and performance regarding puberty health among adolescent girls²³. Organizing training sessions for students can be effective in promoting the puberty health of adolescent girls²⁴.

In this study, a peer teaching approach was used, where the peer group teaching received training five times on education related to the risks of sexual behavior from experts in reproductive health and maternal nursing. The counselor then conducted educational training for peer groups, each consisting of five individuals, with one peer counselor after the intervention was provided. The peer teaching approach in this study involves peers, as peers have a significant influence on risky sexual behavior. Based on research conducted by Hamzah in 2020 on students at SMA 1 Kotamobagu, it was found that out of 129 respondents, 62% were influenced negatively by peers, leading to risky sexual behavior²². The negative influence of peers includes pressures to engage in sexual relations, which they believe can demonstrate masculinity, as well as media influences, such as accessing pornographic sites on the internet, which have adverse effects and pose risks to sexual behavior²⁵.

Another study concluded that the peer teaching method of tutoring can improve speaking skills in

students of class MIA 4 at SMAN 19 Gowa. This was evidenced by the results obtained from the pre-test to the post-test. Regarding speaking fluency, the average score of the students was 51 (pre-test), and after the test, the average score increased to 70.31 (post-test)²⁴. Therefore, the peer teaching method of tutoring is highly effective as it facilitates students in expressing the issues they face while learning.

The results of this study are also in line with research on the effectiveness of peer group education on risky sexual behavior among adolescents in Kotabaru, Martapura Ulu Timur, South Sumatra. The results showed that peer group education is effective in influencing risky sexual behavior, including knowledge with a p-value of 0.000, attitude with a p-value of 0.000, and actions with a p-value of 0.031²⁴.

The results of this study are supported by other research conducted in Cibadak, West Java, which explains the impact of comprehensive sexual education on the prevention of premarital sexual behavior, leading to increased knowledge and attitudes regarding the prevention of sexual behavior²⁴.

Another study also indicated that education on risky sexual behavior affects attitudes and intentions regarding sexual behavior among adolescents, showing a reduction in intentions, attitudes, and changes in respondents' perceptions after the educational intervention²⁷.

Early education and support can build constructive skills and minimize unhealthy behavior patterns. Every adolescent needs to understand that their body and sexuality are under their control. No one has the right to force or deceive them into engaging in any sexual behavior. Likewise, they also need to learn that they do not have the right to force or deceive others. Early intervention and support when problematic sexual behaviors begin to emerge, can provide a second chance to create a positive path before these behaviors escalate into reportable offenses²⁷.

CONCLUSION

Based on the research results, it can be concluded that the intervention using the peer teaching approach to prevent risky sexual behavior is effective in increasing knowledge (p = 0.001), attitudes (p = 0.000), and actions or behaviors (p = 0.000) among adolescents in preventing risky sexual behavior at MTsN Aceh Besar. Additionally, the results from the Mann-Whitney test indicated a significant difference in scores between the treatment group and the control group. The Peer Teaching Approach is recommended as a method that can assist in providing education. It is hoped that education on preventing risky sexual behavior can be developed through social media platforms such as WhatsApp, Instagram, Facebook, and others, making it engaging and easy for adolescents to understand when providing outreach on reproductive health.

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AUTHOR CONTRIBUTION

Halifah E: Conceptualization, methodology, software, formal analysis, investigation, data curation, writing original draft preparation, writing—review and editing, visualization, supervision, administration,

Nizami NH: Validation, investigation, writing original draft preparation,

Darmawati: Investigation, Kiftia M: Data curation,

Ardhia D: Formal analysis, data curation,

Agustina S: administration,

Fitri A: Conceptualization, methodology, validation, investigation, writing original draft preparation, writing—review and editing, visualization, administration,

All authors have read and approved the published version of the manuscript.

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