

## **Implementation of Health Education Using Booklet Media on the Impact of Free Association Toward Adolescents' Knowledge Level**

**Saptiah Hasnawati<sup>1</sup>, Sherly Dwi Oktisa<sup>2</sup>**

<sup>1,2</sup>Politeknik Hang Tuah Jakarta

Correspondence: [saptiahhasnawati21@gmail.com](mailto:saptiahhasnawati21@gmail.com)

### **ABSTRACT**

**Purpose:** The purpose of this study was to determine the application of health education with booklet media about the impact of promiscuity on the level of knowledge of adolescents. **Methods:** This research method uses a descriptive with a case study approach. This study was conducted with 30 respondents on adolescents at SMP Fikri, Koja, North Jakarta. **Result:** The results showed that 30 respondents experienced an increase in knowledge, with the results of the value before health education was carried out, namely with a level of knowledge less than 1 respondent (3%), with a sufficient level of knowledge as many as 16 respondents (54%), and with a good level of knowledge as many as 13 respondents (43%). Then after health education was carried out about the impact of promiscuity with booklet media, namely with the category of good knowledge level as many as 28 respondents (93%) and with sufficient knowledge level as many as 2 respondents (7%). **Conclusion:** From the results of the research obtained, it can be concluded that the application of health education with booklet media about the impact of promiscuity has a significant influence on the level of knowledge of adolescents.

**Keywords:** Booklet, Health Education, Promiscuity, Youth, Knowledge level

## Introduction

Adolescence is a transition period from childhood to adulthood. Adolescence is a period of rapid growth and development both physically, psychologically and intellectually. According to the World Health Organization (WHO), demographic data shows that adolescents constitute a large population of the world's population, about one-fifth of the world's population of adolescents aged 10-19 years and about 900 million are in developing countries. The total adolescent population (10-19 years old) is 46 million people (UNICEF, 2021). According to census data from the DKI Jakarta Provincial Statistics Agency in 2021, the population of DKI Jakarta province aged 10-14 years was 813,264 people and adolescents aged 15-19 years as many as 834,848 people.

During this adolescent age, there are doubts about the role of self that will be carried out. This can occur because adolescents are unstable individuals whose emotions are vulnerable to not being controlled by proper self-control. This causes various health and social problems that occur in adolescents (Septiani, 2019). Teenagers have positive and negative associations in reflecting the personality of an individual. Positive associations can be in the form of cooperation between individuals or groups to do and build positive things. While the problems of adolescents in negative forms of association that often occur, one of which is the problem of promiscuity.

The number of teenagers as a result of promiscuity based on data from Kominfo 2021 explains that drug use is among young people aged 15-35 years with a percentage of 82.4% as users, while 47.1% act as dealers, and 31.4% as couriers. Problems that arise with reproductive health as a result of promiscuity are unwanted pregnancy, abortion, early marriage, STDs or commonly known as HIV/AIDS. Based on existing records, currently on a national average, the level of unwanted pregnancies is still at 17% and the number of abortion cases in Indonesia is around 20% carried out by teenagers.(Beritasatu, 2023).

Promiscuity can be interpreted as deviating one's association from the right association, promiscuity is identified as a form of out-of-bounds association or it can also be called wild association. This can occur due to several factors including family problems, low levels of family education, outbursts of disappointment, minimal knowledge and information, and invitations from friends who are promiscuous. In addition, it is supported by the globalised modernisation that has resulted in the influx of foreign cultures without strict selection.

Promiscuity has a negative impact on adolescents and also greatly affects the continuation of their future, because promiscuity can cause various health problems, such as sexually transmitted diseases, HIV / AIDS, syphilis (king lion), early pregnancy, abortion, gonorrhoea, and warts or fungi in the genital area. Therefore, researchers are preventing the impact of the dangers of promiscuity by conducting health education for adolescents.

Health education is a long-term behavioural investment as a process of changing one's own behaviour. In a short time health education can produce changes or increases in knowledge. In this study, researchers conducted health education with booklet media. Based on research conducted (Fitriani et al., 2020), the results show that the category of knowledge level about the impact of promiscuity in the low category is more than the high knowledge category. Then health education was carried out, there was a significant effect on changes in the level of knowledge of adolescent students of SMPN 11 Meurebo. This is because the lecture method is a suitable method for delivering teaching materials in the form of information. This method will be more effective if supported by extension tools and media in the form of booklets.

Therefore, nurses have a very important role in various aspects of health care. In the promotive aspect, nurses can provide education to adolescents with health counselling on the impact of promiscuity. This counselling aims to increase adolescents' knowledge of the impact of the dangers of promiscuity and prevent one of the occurrences of infectious diseases due to promiscuity.

## Methods

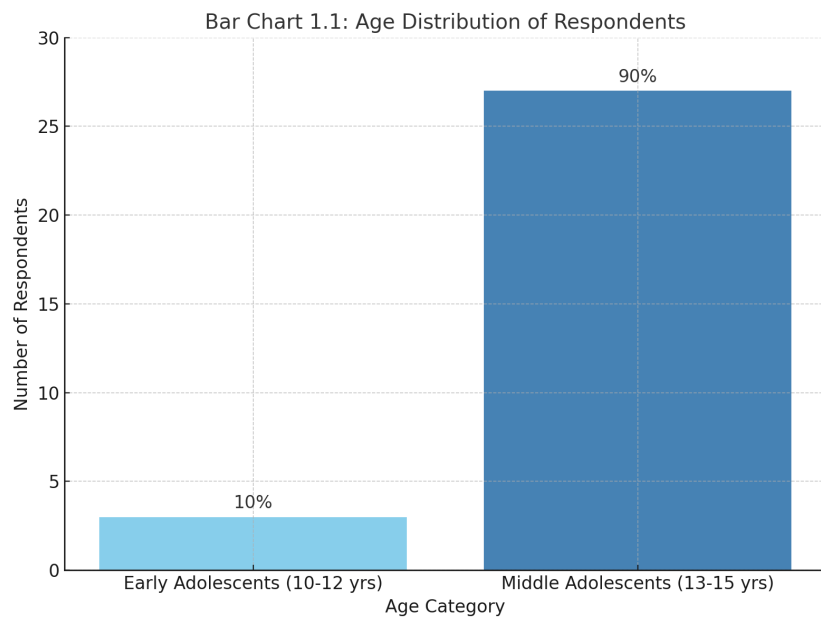
This type of research design is a descriptive case study using booklet media. The sample subjects of this study were adolescents aged 10-19 years, totalling 30 people. The research instrument used is using a pre and post questionnaire sheet consisting of 10 questions containing true and false statements to analyse the results of the observation of the respondent's knowledge level. To measure the level of knowledge of respondents by giving a value of 1 (True) and 0 (False). By assessing the level of knowledge of the good category if it is able to answer correctly about 7-10 questions, the category is sufficient if it is able to answer correctly about 4 - 6 questions and the category is lacking if it answers correctly less than 4 questions. Data collection ethics used are using informed consent, veracity (honesty), confidentiality, participel of beneficence (benefits), and justice (justice).

## Results

**Table 1.1 Distribution of knowledge levels before and after the application of health education**

Knowledge Level	Pre-Test (%)	Post-Test (%)
Poor	3	0
Fair	54	7
Good	43	93
<b>Total</b>	<b>100</b>	<b>100</b>

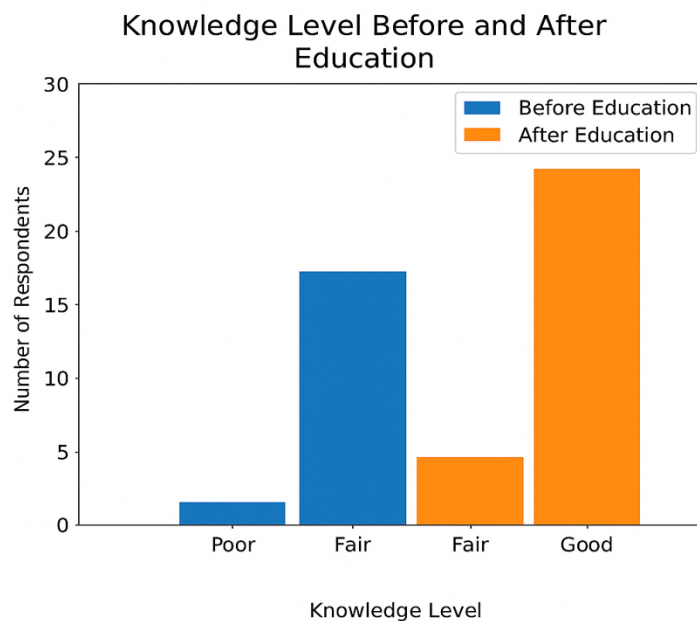
The results showed a significant improvement in students' knowledge levels after the intervention. In the pre-test, 3% of respondents had poor knowledge, 54% had fair knowledge, and 43% had good knowledge. Following the intervention, the post-test results revealed that none of the respondents had poor knowledge, 7% had fair knowledge, and a notable 93% achieved a good level of knowledge. This indicates a positive shift in knowledge after the educational program.



**Bar Diagram 1.1 Distribution by age**

Based on Bar Chart 1.1 the distribution results above show that age characteristics are dominated by the classification of middle adolescents (13 - 15 years) as many as 27 respondents with a percentage of 90% and there are also early adolescents (10 - 12 years) 3 respondents with a percentage of 10%.

**Bar Chart 1.2 Distribution of Knowledge Levels Before and After the Implementation of Health Education**



Based on Table 1.1 and Diagram 1.2 of the distribution results above, it was found that

there was an increase in knowledge to 30 respondents after health education with booklet media about the impact of promiscuity. Before health education was carried out, namely with a level of knowledge less than 1 respondent (3%), with a level of knowledge sufficient as many as 16 respondents (54%), and with a level of knowledge good as many as 13 respondents (43%). Then after health education, namely with a good level of knowledge as many as 28 respondents (93%) and with a sufficient level of knowledge as many as 2 respondents (7%). That there is a difference between before and after health education. There was an increase in the good category with a difference of 50% and a reduction in the moderate category with a difference of 47% and the insufficient category with a difference of 3%.

## **Discussion**

The age characteristics in this study show that 30 respondents fall into the adolescent age group. The results indicate that the majority of respondents were in the middle adolescence classification (ages 13–15), totaling 27 respondents (90%), and early adolescence (ages 10–12), totaling 3 respondents (10%). Adolescence is a phase of growth and development when individuals transition from the initial signs of secondary sexual development to reproductive maturity. Physical changes in reproductive organs significantly influence curiosity and the desire to try new things. This aligns with the theory by Nadirah (2017), which states that adolescents tend to have a high level of curiosity and are inclined to engage in new experiences. According to Niman (2017), health education is an activity conducted by nurses to enhance the ability of respondents to achieve optimal health. Health education on the impact of risky social behavior can be effectively delivered using booklets, which are received directly through the senses of vision and hearing, utilized to capture the conveyed information. This information forms new insights, commonly referred to as knowledge. The variation in adolescents' knowledge levels prior to receiving health education may be attributed to a lack of information and exposure regarding the impacts of risky social behavior.

Based on Table 1.1 and Bar Chart 1.2, 30 respondents demonstrated a significant increase in knowledge. The pre-test results before health education indicated that 1 respondent (3%) had poor knowledge, 16 respondents (54%) had moderate knowledge, and 13 respondents (43%) had good knowledge. After health education on the impact of risky social behavior using booklets, the number of respondents with good knowledge increased to 28 (93%), and 2 respondents (7%) had moderate knowledge.

Providing health education on the impact of risky social behavior among adolescents contributes to the expansion of knowledge. This is consistent with the findings of Fitriani (2020), which showed that a lack of knowledge among adolescents about the dangers of risky social behavior resulted in low and moderate knowledge categories being more common than high knowledge levels. After health education, there was a significant improvement in students' knowledge at SMP 11 Meurebo, with most students moving into the high knowledge category. The use of booklets during health education had a significant effect on knowledge levels. Booklets make it easier for educators to present information in a digestible format for respondents. This study supports other findings, such as that by Winny Jeneska (2020), which showed that the average respondent score increased from 74.48 in the pre-test to 96.88 in the post-test. Therefore, it can be concluded that health education using reproductive health booklets significantly influenced female adolescents' knowledge about teenage pregnancy. According to research by Putu and Dewa (2017), the advantages of using booklets include comprehensive content, durability, portability, and detailed information that may not be fully conveyed verbally. Based on the above explanation, it can be concluded that all 30 respondents showed a significant increase in knowledge levels after receiving health education via booklet media, with 28 respondents reaching a good knowledge category and 2 respondents in the moderate knowledge category.

## Conclusion

The implementation of health education regarding the impact of risky social behavior through booklet media can significantly increase the level of knowledge, as it provides accessible, structured, and engaging information that enhances individuals' understanding and awareness, ultimately encouraging healthier decision-making and behavior change.

## Recommendations

Based on the results of this study, it is recommended that adolescents, as the predominant age group in the community, understand the potential impacts of risky social behavior, which is prevalent among teenagers. The use of booklet media allows information to be learned effectively. In the development of nursing science in the digital era, alternative media can also be developed as learning tools.

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