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PREVENTION OF SEXUAL BEHAVIOR IN ADOLESCENT GIRL THROUGH SEVEN JUMPS METHOD LEARNING BASED ATTITUDE TOWARD BEHAVIOR Health Polytechnic Ministry of Health Surabaya Jl. Pucang Jajar tengah 56, Surabaya, 60282 email: wi2eq@yahoo.co.id ABSTRACT Background: The problem of reproductive health and sexual human health begin from the maturation process of human reproductive organs in adolescence. The growth of sexual motivation and wrong understanding will encourage sexual behavior in adolescents resulting in teenage pregnancy and the various impacts it results. To improve the cunderstanding and prevention of sexual behavior can be done by learning based problems through methods of seven jumps. Method: This kind of research is observational with cross sectional study, the sample was 210 adolescent girls in SMK dr. Soetomo Surabaya, selected with proportional random sampling. The endogenous variable is seven jumps learning method based attitude toward behavior, the exogenous variable is the prevention of sexual behavior. The instrument used was questionnaire sheet. Data were analyzed using descriptive analysis and model analysis using Partial Least Square (PLS) software. Result finding: The results of this research show that the seven jumps method learning can improve prevention of sexual behavior with the value of t-statistic > t-table value (1,96). Conclusion: As the effort to prevent sexual behaviors in adolescent girls can be done through the learning effort with seven jumps methods. Keyword: attitude toward behavior, seven jumps method, sexual behavior prevention. INTRODUCTION Teenagers are people in the age range 10- 19 years, according to Minister of Health Regulation No. 25, 2014. Teens are resident in the age range 10-18 years (WHO, 2014). Adolescence is the period of the rapid growth and development both physically, psychologically and intellectually. (Data Center and Information Ministry of Health Indonesia, 2015). The problem of reproductive health and sexual human health begin from the maturation process of human reproductive organs in adolescence. The growth of sexual motivation make marriage active sex and sexual behavior in adolescents at risk of unwanted teenage pregnancies. Data Indonesian Demographic and Health Survey of 2010, in Surabaya, East Java, in 2010 approximately 26% of teenagers has unwed pregnancy. This number increased by 11% from 2006. Among the pregnant teenagers, about 50 people or 57.5% terminate her pregnancy by an abortion. Premarital sexual behavior in adolescents aged 15 to 24 years is increasing every year, exposed by Agustin Kusumayati, Academics School of Public Health, University of Indonesia in the National Seminar on Quality Youth, Prosperous Indonesia in the framework of the National Family Day XXI 2014 in Surabaya, East Java. According to data IPPA East Java in 2010-2011 there were 9-10 unwanted pregnancies in young girls in high school, and in 2013-2014 has decreased incidence but that does not mean teens have understood about sexual reproductive health but otherwise they access to contraception as protection. The occurrence of unwanted pregnancies is very detrimental to women become not virgin, the risk of infected STI-HIV/AIDS, abortion, infection of the reproductive organs, anemia, infertility, death due to bleeding, psychological trauma, no chance to continue school/work, family disgrace, and load family economy (Center for Data and Information Ministry of Health Indonesia, 2015). This thing reflects a <u>lack of understanding adolescents about healthy living</u> skills, the risk of sexual intercourse and the ability to reject the relationship they do not want. Therefore, teenage girls need to be equipped with knowledge and information that clearly and early about sexual reproductive health and how to keep it (Putri Hidayangsih, 2009). Knowledge is one of the factors that influence behavior, and to access it can use the method such as Problem Based Learning (PBL) with seven jumps method. Seven jump is one of the methods that have been widely used in the world of medical education, considering on medical education enacted model of PBL. Sexual behavior in adolescents can not be separated from person's intention. Intention is assumed as a motivations catcher that influence behavior. In general, the stronger the intention to engage in the behavior, the more likely the behavior is performed (Ajzen, 1991). Additionally attitude toward behavior (individual attitudes toward the behavior in question) and background factors (background factors: personal factors, social factors, information factors) someone in the intention to act will affect the formation of behavior (Ajzen, 2002 in Nursalam 2016). The purpose of this research was to determine the effect of seven jumps methods based attitude toward behavior towards behavior prevention. RESEARCH METHOD This research is observational study, cross-sectional design. Subjects studied are mostly teenage girls SMK dr. Soetomo Surabaya, samples selected by proportional random sampling, with samples number are 210 respondents. The variable exogens are the attitude toward behavior and seven jumps, the endogen variable is the prevention of sexual behavior. The instruments used are questionnaires and observation sheets, the analysis performed by descriptive analysis and inferential analysis using models testing with software Partial Least Square (PLS). RESULT The results of this research present the description of the research variables and inferential analysis results. The complete results of the research can be seen in the following table: a. Background Factors Distribution Table 1. Distribution Frequency Background Social Factors Respondents. No. Indicator Category Frequenc y Σ % 1. Age 17 years ≥ 18 years 16 7.6 194 93.4 2. Religion Non-Islamic Islam 2 1.0 208 99.0 3. Tribes Non-Java Java 11 5.3 199 94.7 4. Responden Basic 107 50.9 No. Indicator Category Frequenc y Σ % t's Father Middle Education High 100 47.7 3 1.4 6. Responden Basic t's Mother Middle Education High 7. Responden Private t's Father Government Work employees 8 Responden Private t's Mother Government Work employees Housewife 150 71.4 60 28.6 - - 114 54.3 96 45.7 50 23.8 4 1.9 156 74.3 According to table 1 shows that social factors almost entirely194 (92.4%) respondents aged 18 years, almost entirely 208 (99%) of respondents islamic religion, more than half 107 (50.9%) educational background of the patient's respondents are basic education, the majority of 150 (71.4%) educational background of the mother's respondents are basic education, more than half of 114 (54.3%) of respondents father's work is private, while the majority of 156 (74.3%) of respondents are not working mother (housewife), and almost entirely 199 (94.7%) of javanese ethnicity. Table 2. Distribution Frequency Background Personal Factors Respondents. No. Variable Category Frequenc y  $\Sigma$  % 1. General attitude Negative Positive 62 29.5 148 70.5 2. Personali ty trait There's Challenge No Challenge 74 35.2 136 64.8 3. Values Negative Positive 11 5.3 199 94.7 4. Emotion Negative Positive 48 22.9 162 77.1 6. Intelligenc Less Good e Good 70 33.3 140 66.7 According to table 2 showed that majority 148 (70.5%) of respondents teen girls have positive general attitude, most of the 136 (64.85) have a personality trait there are no challenges, the majority of 137 (65.2%) have positive values, the majority of 162 (77.1%) have a positive emotion and most of the 140 (66.7%) have good intelligence. Table 3. Distribution Frequency Background Information Factor Respondents No Indikator Kategori Frekuensi  $\Sigma$  % 1. Experience Not Good Good 155 73.8 55 26.2 2. Experience Not Good Good 60 150 23.8 76.2 3. Media expo Radio Hand phone Televisio n 54 95 61 25.7 45.3 29.0 Table 3 shows that the majority of 155 (73.8%) of respondents have not good experience, the majority of 150 (76.2%) have both experience and the highest 95 (45.3%) of respondents use handphone media to access information. b. Variable Deskription Table 4. Distribution Frequency Attitude Toward Behavior No Indikator Kategori Frekuensi  $\Sigma$  % 1. Behavior belief Negative Positive 67 143 31.9 68.1 2. Outcome evaluation Negative Positive 49 161 23.3 76.7 Table 4 shows that the majority of 143 (68.1%) of respondents teen girl have positive behavior belief and most of the 161 (76.7%) of respondents teen girl have positive evaluation outcomes. Table 5. Distribution Frequency Seven Jumps Based Attitude Toward Behavior No Langkah Kategori Frekuensi  $\Sigma$  % 1. Clarify Unfamiliar Negative Terms Positive 50 160 23.8 76.2 . Define the Problems Negative 40 19.1 Positive 170 80.9 3. Brainstorm Negative Possible Hypothesis Positive or Explanation 50 160 23.8 76.2 4. Arrange Negative 50 Explanations Into Tentative Solutions Positive 160 23.8 76.2 5. Defining Learning Objectives Negative 30 Positifve 180 14.3 85.7 6. Information Negative 50 Gathering: Private Positive Study 160 23.8 76.2 7. Synthesize and Test Negative 50 Acquired Positive Informations 160 (Reporting Phase) 23.8 76.2 According to the table 5 is known that the implementation of seven jumps learning method based attitude toward behavior shows that majority > 75% the steps performed positively. Table 6. Distribution Frequency Sexual Behavior Prevention Category Frequency ( $\Sigma$ ) Presentasion (%) Do not do it 24 11.4 Do it 186 88.6 According to table 6 shows that majority 186 (88.6) of respondents do preventive sexual behavior, and a small portion of 24 (11.4%) do not do preventive sexual behavior. c. Inferential Analysis Based on the results of data processing, further analysis of the results of SEM-PLS with the help of software Smart PLS. With two stages of testing that is our models and inner models. Analysis of Measurement Model (Outer Model) by construct validity testing with convergent validity test, discriminant test. Complete result obtained the following: Table 7. Construct Validity Test Result N Validity o Latent Convergen Test Variabl Indicator Loadin es g Value Note faktor 1 Attitud e Towar d Behavi or Behavior Belief Outcome Evaluatiton 0,772 Valid 0,813 Valid According to table 7 above are known that validity convergent testing results, showing that in accordance with the criteria of a valid indicator explaining latent variable in a measurement model (outer model), when the loading value of indicator > 0.5. Thus concluded the indicators above are valid measure latent variables. After the measurement model (outer model) testing is done and obtained a valid indicator explaining latent variable and have reliable latent variables. The next step is to test structural models (inner model). Table 8. T-Test Results from Latent Exogenous Variables to Endogenous and Parameter Coefficient Value on Initial Structural Model (Inner Model). No Lane Lane T- Not Paramet Stati er stic e Coeffici ent 1 (X1) attitude toward behavior ? (Y1) Sexual Behavior Prevention 0.195 3.49 0 Sig. 2 (X2) seven jumps? (Y1) Sexual Behavior Prevention 0,660 20.5 75 Sig. According to table 5 is known that each of the exogenous variables significantly influence to the endogenous variable, to seven jumps and prevention of sexual behavior. Furthermore, a significant relationship mentioned above can be described as a model as follows: X1 3,49 Y1 X2 20,575 Picture 1. Picture T-statistic Value on final model (inner model) The next step to know whether the final model above has a good ability in predictive, then tested Q square towards the final model above. d. Q Square Predictive Relevance Test (Q2) Results of the square Q values obtained with the following formula Q2 = 1 - (1-0172) (1-0436)(1- 0202) (1-0283) (1-0043) = 0745. <u>Based on the results of the calculation of Q-square can be</u> seen that the O-square value are 0. 97143 for a value > 0, it can be concluded that the model is relatively good, because about 74.5% prevention of sexual behavior through seven jumps methods based attitude toward behavior can be explained in figure 1. DISCUSSION Effect of attitude toward behavior to the seven jumps method Attitude toward behavior which is high reflects that the teenage girls behave positively and were able to adjust the understanding toward the seven jumps method. Learning based by problems with seven jumps methods about reproductive health, sexual health, sexual behavior and its prevention is a requirement that must be fulfilled by teenage girls. In the theory of planned behavior of one's own attitude toward a behavior guided by one's beliefs toward consequency (outcomes) that would resulted if the behavior did and strong against that beliefs (Ajzen, 2005 in Nursalam, 2016). 2. Effect of Seven Jumps toward The Sexual Behavior Prevention Seven jumps method learning which is high show teenage girls in understanding the reproductive health and its sexual along make effort to prevent the sexual behavior. Seven jumps method based on positive attitude toward behavior that would affect to the teenage girls in the prevention of sexual behavior. Seven jumps method is very proper used for learning to analyze and solve problems, where the individual teenage girls will be involved emotionally, so that learning objectives can be achieved. In line with the results of the study (Anwar DwiCahyono, et al., 2004) to the students of Nursing Science Program Faculty of Medicine, University of Gajah Mada stated that students will be more easily understood if they had to face the problem solving situations. The research results of Sabar Nurohman, seven jump can be used to improve science process skills student (Mukminan, et al, 2012). From this research, respondents have never been exposed to seven jumps learning methods, so it requires further approach about application of this method to school to school in order to attempt the prevention of sexual behavior. CONCLUSION AND RECOMMENDATION Conclusion From the

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results of this research it can be concluded that the seven jumps methods based attitude toward behavior can increase teenage girl awareness in the prevention of sexual behavior. Recommendation: to enhance efforts of sexual behaviors prevention in teenage girls, require a learning method that is easy to understand such as problem based learning (PBL) through the seven jumps method. REFERENCES Ali, Mohammad, and Mohammad Asrori. 2010. Psikologi Perkembangan Remaja. Jakarta: PT BumiAksara. Anwar Dwi Cahyono, Efrayim Suryadi, Akhmadi. 2004. Evaluasi pelaksanaan seven jumps dalam diskusi tutorial mahasiswa Program Studi Ilmu Keperawatan <u>Fakultas Kedokteran Universitas</u> Gajah <u>Mada, Fakultas Kedokteran</u> Gajah Mada. Arikunto, Suhartini, 2006. Metodologi Penelitian, Yogyakarta, Bina Aksara. Arikunto, S., 2006. Prosedur Penelitian Suatu Pendekatan Praktek. Jakarta: Rineka Cipta. Arikunto, S., 2010. Prosedur Penelitian Suatu Pendekatan Praktik, Yogyakarta: Rineka Cipta. Darmasih, Ririn. 2009. "Faktor yang Mempengaruhi Perilaku Seks Pranikah pada Remaja di Surakarta" Skripsi, Universitas Muhammadiyah Surakarta. Departemen Pendidikan dan Kebudayaan, Pedoman Pelatihan dan Modul Pendidikan Sebaya dalam Rangka Pendidikan Pencegahan HIV/AIDS di Lingkungan PerguruanTinggi, 1997. Faturochman. 1992. "Sikap dan Perilaku Remaja di Bali". Jurnal Psikologi No.1, pp 12- 17. Gijselaers (1995). The tutorial process in <u>problem-based learning</u>. <u>Diakses pada tanggal 4 Februari 2009 dari</u> http://www2.glos.ac.uk/offload/ceal/ reso urces /tutorial.pdf. Frances Marcus Lewis, Barbara K Rimer 1996. Health Behavior and Halth Education. Global Supply Chain Management Blog. (2006). Seven Jump Method. Diakses pada tanggal 5 Februari 2009 dari http://apiaryinnovations.com/Logistics/C ourse/coursebloq1.htm Gunarsa, Singgih D. Dkk. 2008. Psikologi Perkembangan Anak dan Remaja. Jakarta: Gunung Mulia. Hamzah B. Uno, 2008. Orientasi Baru dalam Psikologi Pembelajaran. Jakarta: Bumi Aksara. Irianti, Indah dkk. 2011. buku Ajar Psikologi untuk Mahasiswa Kebidanan. Jakarta: EGC. Kusmiran, Eny. 2011. Kesehatan Reproduksi Remajadan Wanita. Jakarta: Salemba Medika. Lawson, A. E. (1995). Science Teaching and The Development of Thinking. Wadswort: California Longfield, j. (2002). Science Process Skills. Diaksespadatanggal 1 Februari 2009 dari http://www.indiana.edu/~deanfac/portfoli o/examples/jlongfield/doc/ sci\_process\_skills.doc. Nash, Barbara, dkk. 2006. Panduan Kesehatan Seksual. Jakarta: Prestasi Pusta karya Notoatmodjo, Soekidjo. 2005. Ilmu Perilaku. Kesehatan. Jakarta: Rineka Cipta. Nursalam, 2016, Metodologi Penelitian Ilmu Keperawatan Pendekatan Praktis. Jakarta: Salemba Medika. Rita Damayanti, Hendri Hartati, Andri Yoga Utami, dkk. 2012. Modul Pelatihan Kesehatan Seksual dan Reproduksi Ramah Remaja Edisi 1, Penerbit: Rutgers WPF, Jakarta. Santrock, John W. 2007. Remaja. Jakarta: Erlangga. Sarwono, Sarlito W. 2011. Psikologi Remaja. Jakarta: Raja Grafindo Persada. Soetjiningsih. 2011, Tumbuh Kembang Remaja dan Permasalahannya. Jakarta: CV Sagung Seto. Sugiyono, 2003, Metode Penelitian Bisnis. Bandung Pusat Bahasa. Depdiknas. Sugiono, 2012. Statistik untuk Penelitian. Bandung: Alfa Beta. Suryoputro, Ananto, Nicholas J. Ford dan Zahroh Shaluhiyah. 2006. "Faktor-faktor yang Mempengaruhi Perilaku Seksual Remaja di Jawa Tengah: Implikasinya Terhadap Kebijakan dan Layanan Kesehatan Seksual dan Reproduksi". Makara, Kesehatan, Vol. 10 No.1, pp 29-40. 220 221 222 223 224 225