

Original Article

Peer educator's role in sharing sexuality and reproductive health information among adolescents

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ABSTRACT

Introduction: Adolescents, driven by their curiosity, are often inclined to explore new experiences, including premarital sexual behavior. The prevalence of such behavior among teenagers increases the risk of unwanted pregnancies. A lack of comprehensive information on sexuality and reproductive health contributes to the likelihood of engaging in risky sexual activities. Peer educators are considered effective in delivering crucial information on these topics. This study aims to evaluate the role of peer educators in providing sexuality and reproductive health education to adolescents.

Methods: This study employed a one-group pretest-posttest design, conducted at Taruna Nala High School Malang with a sample of 60 students. Due to the non-normal distribution of the data, the Wilcoxon statistical test was used for analysis.

Results: The statistical analysis yielded a *P*-value of 0.329, indicating no significant difference between the pre-test and post-test results before and after the intervention. The lack of significance may be attributed to the peer educators' proficiency in delivering the information.

Conclusion: There is a need to strengthen reproductive health education for high school students by integrating it into the academic curriculum. This approach can serve as an early intervention to prevent premarital sexual behavior among adolescents.

Keywords: adolescent; peer educator; reproductive health; sexuality

INTRODUCTION

The adolescent population makes up a quarter of the world's total population, while the teenage population in Indonesia reaches 24% of the total population (Rizaty, 2022; WHO, 2023). This phenomenon raises several problems related to reproductive health in adolescents, one of which is the problem of premarital sexual behavior. Higher incidence of Sexually Transmitted Infections (STIs) and Human Immunodeficiency Virus (HIV)/ Acquired Immunodeficiency Syndrome (AIDS) in adolescents is an indicator that can be used as a reference for the increase number of premarital sexual behavior obtained by adolescents (Ardiansyah, 2022; Wijaya et al., 2018). A factor that influences adolescents to engage in premarital sexual behavior is the inadequate information adolescents received regarding sexuality and reproductive health. The inadequacy of information is caused by a lack of information obtained as well as incorrect sources of information (Adhikari et al., 2018; Murdiningsih et al., 2020; Sejati & Mufida, 2021).

Adolescent tend to be embarrassed when asking their parents about sexuality and reproductive health issues (Kamangu et al., 2017; Othman et al., 2020). Teens prefer to ask their closest peers because they feel comfortable to express their curiosity regarding sexuality and reproductive health. However, information about sexuality and reproductive health obtained by peers is often inadequate because it come from non-credible sources (Ngwenya, 2016; Wong et al., 2019). There is a need to provide adequate information related to adolescent's sexuality and reproductive health through the provision of health education with teens as the educator. This is important because teenagers could become educators who are able to provide information about sexuality and reproductive health in a way that is unique to teens (Isni, 2021; Mbarushimana et al., 2022). Several previous studies have proven the effectiveness of peer educators in providing adequate information regarding sexuality and reproductive health material, and which is acceptable to youth (Layzer et al., 2017; Sun et al., 2018). This present study aims to identify the role of peer educators in providing information about sexuality and reproductive health to adolescents. This study is important to do considering that the respondents of this research are senior high school students who live in dormitories and the education system implemented in this school is semi-military in nature. This boarding school situation makes it is possible for peer educators to be needed considering that in their daily life students e interact more with their peers than meeting their parents. Thus, more information about sexuality and reproductive health will be obtained through chat with peers in the dormitory.

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Table 1. Respondents' characteristics July – October 2022 (n=60)

Respondents' Characteristics	n	%
Gender		
Male	33	55
Female	27	45
Previous health information received		
Yes	53	88.3
No	7	11.7
Information sources		
None	7	11.7
Electronic/Paper-based Media	25	41.7
Healthcare staff	14	23.3
School Lesson	14	23.3

METHODS

Design

This study used the pre-posttest one group design to identify the role of peer educators in providing information about sexuality and reproductive health to adolescents.

Sample and Setting

This research was conducted at Taruna Nala High School Malang from July to October 2022 (n=60 students) by using total sampling. This school was selected because it is the only public senior high school in Malang City that implements a boarding system with a semi-military education system.

Instruments

This study used a research instrument in the form of a questionnaire consisting of knowledge and attitudes related to reproductive health and a sexual behavior questionnaire (Adjie *et al.*, 2022). Knowledge questionnaire contains eight statements, attitudes have 10 statements and three statements represent behavioral variables. The reliability test was carried out using Cronbach's alpha values and the results were 0.607, 0.619, and 0.856, respectively.

Data Collection

After obtaining permission from the Education Office and the Principal of Taruna Nala High School, the researchers contacted the Counseling Guidance teacher to determine the research sample and the time for collecting research data. Students selected as peer educators were students who occupy academic rankings in their class and have previously received information about reproductive health (five peer educators). Selected peer educators were given a briefing in advance regarding the educational material that would be given to the participants as well as received an information booklet. On the mutually agreed day, participants were explained about the research procedures to be carried out as well as distributed informed consent sheets. A week later, the distribution of pre-test questionnaires was carried out. During the focus group discussion, participants were divided into five small groups consisting of 12 students each. One small group discussion was led by one selected peer educator with a discussion duration of 30 minutes. The peer educator's job is to provide education about reproductive health as well as to provide

answers when focus group discussion (FGD) members ask questions. If the peer educator is unable to answer the questions, the researcher and team will assist. After FGD, participants received educational material leaflets. Post-test was carried out a week after the FGDs.

Data Analysis

The statistical analysis used Wilcoxon test because the results of the Kolmogorov-Smirnov normality test obtained *P*-value for pre-test and post-test each of 0.049 and 0.036, both of which are less than α 0.05, so it can be concluded that the data are not normally distributed.

Ethical Clearance

This research has received a letter of ethics issued by The Ethics Commission of Faculty of Health Sciences Universitas Brawijaya No. 3722/UN10.F17.10/TU/2022.

RESULTS

The data in Table 1 show that the majority of the students were male (55%), and 88% of respondents had received information about sexuality and reproductive health through electronic or paper-based media (41.7%). The Kolmogorov-Smirnov normality test indicated that the data were not normally distributed, with *P*-values 0.049 for the pre-test and *P*-value 0.036 for the post-test. As a result, the Wilcoxon test was used for analysis. Of the participants, 30 showed higher post-test scores compared to their pre-test scores, while six participants had post-test scores identical to their pre-test scores (Table 2). However, the statistical test yielded a *P*-value 0.329, indicating no significant difference between the pre-test and post-test results after receiving health education from peer educators (Table 3).

DISCUSSION

The role of peer educators in sharing health educational materials, especially about sexuality and reproductive health, is indeed very important. Education about sensitive material such as sexuality and reproductive health for youth would be better conveyed when this education is carried out by peers. This is because teenagers would be more open to talk about taboo and sensitive issues with their peers (Diao *et al.*, 2020; Evcili & Golbasi, 2019; Kimera *et al.*, 2019; Mahat & Scoloveno, 2018).

Table 2. Ranks

		N	Mean Rank	Sum of Rank
Post test - Pre test	Negative Ranks	24a	26.23	629.50
	Positive Ranks	30b	28.52	855.50
	Ties	6c		
	Total	60		

Note: a. Post-Test < Pre-Test, b. Post-Test > Pre-Test, c. Post-Test = Pre-Test

Table 3. Test Statistics

	Post-Test – Pre-Test
Z	-0.976b
P-value	0.329

Note: a. Wilcoxon Signed Ranks Test, b. Based on negative ranks.

Moreover, qualitative research conducted by Benton et al (2020) on several stakeholders who used peer educators as a method of conveying information about sexuality and reproductive health found that peer educator programs provided many benefits to the peer educators themselves and the community. Peer educators develop public speaking and advocacy skills for their future life (Benton et al., 2020).

Parents' knowledge about adolescent sexuality and reproductive health is also still low. This makes parent feel insecure when assigning information about sexuality and reproductive health to their teenager (Dagnachew et al., 2020; Usonwu et al., 2021). In addition, parents realize that issues related to sexuality and reproductive health are taboo to be discussed at home with their teenagers (Ismail & Hamid, 2016; Mullis et al., 2021; Rouhparvar et al., 2022).

This study found that there were 24 participants whose post-test scores decreased. There are several influencing factors including the time lag between the implementation of the post-test and the time of providing education through focus group discussion which is only one week. This causes the retention ability of the participant to remember the information provided during the FGD to be less than optimal. Wolf et al.'s (2017) research on adolescents in Uganda found that it took three weeks for adolescents to retain information obtained through reproductive health education provided during the study.

This study found no significant difference between the results of pre-test and post-test after health education delivered by peer educators. This insignificant result was due to this study only used one group without a control group, thus this is our study's limitation. There are several factors that can influence the results of this study, one of which is peer expertise in conveying information. Programmed briefings and training conducted to form a youth to become a peer educator greatly determine the success of a peer educator in imparting education (D'Costa et al., 2022).

Another factor that influences the results of this present study is the academic ability of the participants. This is because the entrance test for cadet students in this research location goes through several very strict academic tests and the requirements for academic scores are very high so that the students of this school have a level of academic ability above the average student of other public high schools in Malang City.

In addition, respondents in this present study were previously informed about sexuality and reproductive health through paper-based and electronic media. Information about sexuality and reproductive health that is spread in the

media, both paper-based and electronic, could cause positive and negative impacts. Some media contain information that is not necessarily true. Teenagers sometimes even fall for pornographic content which triggers them to engage in risky sexual behavior (BakiBillah et al., 2022; Kesten et al., 2019; Olumide & Ojengbede, 2016).

CONCLUSION

To prevent premarital sexual behavior among adolescents, it is crucial to enhance sexuality and reproductive health education for high school students by integrating these topics into the academic curriculum. Additionally, peer educator training should be implemented as a structured program within schools to ensure that peer educators are well-prepared to provide accurate and effective information on sexuality and reproductive health.

Declaration of Interest

The authors declare that there is no conflict of interest.

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Data Availability

The datasets generated during and/or analyzed during the current study are available from the corresponding author on reasonable request.

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