

KNOWLEDGE EMPOWERMENT THROUGH VIRTUAL LEARNING: ADDRESSING PREMARITAL SEX AWARENESS AMONG ADOLESCENTS

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Abstract

The escalating prevalence of premarital sexual behavior among adolescents raises serious concerns necessitating effective interventions. This study examines the impact of virtual education on adolescent students' awareness of the risks associated with premarital sex and evaluates the efficacy of such education in enhancing comprehension of reproductive health issues. Adolescents, being both potential sexual actors and victims of insufficient knowledge, require comprehensive guidance to avert dire consequences. The rise in premarital sexual activity is attributed to factors like peer associations, parental relationships, religious influences, and societal norms. The study aims to bridge the knowledge gap by delivering targeted virtual education, addressing the dearth of information on the psychological and physiological implications of sexual behavior. This research endeavors to mitigate the prevalence of premarital sexual behavior, minimizing undesirable outcomes such as sexually transmitted infections, unsafe abortions, and unwanted pregnancies. By assessing the effectiveness of virtual education in bolstering adolescents' understanding, this investigation contributes to designing tailored educational initiatives that can be incorporated into school curricula. Ultimately, this approach endeavors to instill healthier sexual behaviors and foster better reproductive health outcomes. As virtual education emerges as a pivotal tool, its potential to reshape adolescents' attitudes towards premarital sex and reproductive health underscores its significance in shaping a more informed and responsible youth population.

INTRODUCTION.

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Adolescents are a significant population group, considered as productive human resources, and are vulnerable to risky behavior, according to the United Nations (UN) (Andriyani and Andriyani, 2018). One of the most concerning behaviors among adolescents is premarital sexual activity, which has been on the rise in recent years. Sexual behavior arises from hormonal reactions and sexual organ maturation or the desire for sexual pleasure, starting from fantasizing to sexual intercourse (Widiyanto, 2016).

Data from various studies shows that the prevalence of premarital sexual activity among adolescents is increasing globally. According to the Center for Disease Control, 40% of adolescents in the United States have had premarital sex, and 10% have had more than four sexual partners (CDC, 2017). The Global School Health Survey in 2015 indicated that 0.7% of girls and 4.5% of boys in Indonesia had premarital sexual intercourse (Kemenkes RI, 2019). The Indonesian Demographic and Health Survey in 2017 reported that 2% of female adolescents and 8% of male adolescents aged 15-24 years had sexual intercourse before marriage, with 11% experiencing unwanted pregnancies (Azizah, 2018). Moreover, based on data from the North Sumatra Provincial Health Office, there were 2,903 HIV cases and 4,306 AIDS cases in the 20 to 29-year age group, indicating early infection during adolescence (Leandha, 2016).

The impact of premarital sexual activity on adolescents is grave and includes unwanted pregnancies, unsafe abortion practices, and sexually transmitted infections. Each year, approximately 15 million adolescents aged 15-19 give birth, 4 million have abortions, and almost 100 million contract sexually transmitted infections globally (Purwoastuti and Walyani, 2015). In Indonesia, where sex is still considered taboo, abortions remain high, with an estimated 2.3 to 2.6 million people undergoing the procedure annually, and 30% of them are teenagers (Purwoastuti and Walyani, 2015).

Therefore, the dissemination of information about the dangers of premarital sexual behavior for adolescent reproductive health is crucial. Many factors contribute to premarital sexual activity among adolescents, including the relationship between parents and adolescents, association with peers, religion, exposure to pornographic media, and values and norms in society (Soetjningsih, 2012). Sex education is a crucial approach to providing knowledge about biological, psychological, and psychosocial changes resulting from human growth and development, as well as instilling morals, ethics, and commitment to prevent abuse of reproductive organs. Reproductive health education can be seen as an attempt to provide knowledge about the function of sex, and hence, can also be called family life education (Surtiretna, 2006).

Providing adolescents with information about sexual problems is critical, considering their active sexual potential, hormone-influenced sex drives, and insufficient knowledge about sexual activity (Handbook of Adolescent Psychology, 1980). Lack of proper knowledge and information on the impact of sexual behavior on mental and physical health can have severe consequences for adolescents, making it essential to educate them on the dangers of premarital sexual behavior (Mu'tadin, 2013).

In conclusion, the increasing prevalence of premarital sexual behavior among adolescents is a significant concern that needs to be addressed through effective education and dissemination of information. This study aims to analyze the impact of virtual education on adolescent students' knowledge levels regarding the dangers of premarital sex and to assess the effectiveness of virtual education in improving adolescent students' understanding of reproductive health issues. The findings of this study can provide insights for the development of targeted educational programs that can be included in school curricula to promote healthy sexual behavior and prevent the risks associated with premarital sex, such as unwanted pregnancies, unsafe abortions, and sexually transmitted infections. By addressing the knowledge gap among adolescents through effective virtual education, this study can contribute to reducing the prevalence of premarital sexual behavior among adolescents and promote better reproductive health outcomes.

LITERATURE REVIEW.

2.1. Definition of Premarital Sex

Free sex is sexual intercourse carried out by a man and a woman without a marriage bond. The phenomenon of promiscuity, especially related to the term pre-marital intercourse (premarital sex) is usually something that is very common, occurring in the midst of the construction of Indonesian society. Free sex behavior tends to be liked by young people, especially teenagers who are bio-psychologically growing towards the maturation process (Desmita, 2012).

2.2. Dangers of Premarital Sex

The impact or danger of free sex, especially in adolescents, can be divided into physical hazards that can occur, namely being exposed to venereal diseases (sexually transmitted diseases/STDs) and HIV/AIDS as well as the dangers of unwanted early pregnancy (Depkes RI, 2012).

According to Wahyuningsih (2008), every action must have a reward, as well as every behavior there must be consequences and consequences arising from premarital sexual behavior, namely:

1. Forcing the student out of school/campus, while mentally they are not ready to be burdened with this problem.
2. The possibility of irresponsible and dangerous abortions, because they feel panicked, confused in facing the risks of pregnancy and finally take the path of abortion.
3. Experiences of sexuality too early often have consequences in adulthood. Someone who often has premarital sex will often feel that sex is not something sacred anymore so that he will no longer be able to enjoy sexual intercourse as a sacred relationship but will feel that sex is only a tool to satisfy his lust.
4. Having sex before marriage and changing partners often results in terrible consequences for the perpetrator, such as contracting various venereal diseases from mild to severe. Similarly, Sarwono (2009) suggests that premarital sexual behavior can cause various negative impacts on adolescents, including:

1) Psychological impact

Psychological impacts of premarital sexual behavior on adolescents include feelings of anger, fear, anxiety, depression, low self-esteem, guilt and sin.

2) Physiological Impact

The physiological impacts of premarital sexual behavior include unwanted pregnancies and abortions.

3) Social impact

Social impacts arising from sexual behavior carried out prematurely include being ostracized, dropping out of school for pregnant adolescent girls and changing the role of motherhood. Not to mention the pressure from the community who criticizes and rejects the situation

4) Physical impact

Another physical impact is the development of sexually transmitted diseases among adolescents, with the highest frequency of sexually transmitted diseases (STDs) between the ages of 15-24 years. Sexually transmitted infections can cause infertility and chronic pain and increase the risk of STDs and HIV/AIDS.

Free sex is often associated with sexual behavior with a high risk of sexually transmitted infections (STIs). STIs are transmitted from one person to another through sexual activity, whether vaginal, oral, or anal.

2.3 Aspects of Sexual Behavior

Jerslid (2005) (in Jempormasse, 2015) suggests that aspects of sexual behavior are:

1. Biological aspects

This aspect includes physiological responses to sexual stimuli, reproduction, puberty, physical changes, and growth and development in general.

2. Psychological aspects.

Sex is a learning process that occurs in individuals to express sexual urges through feelings, attitudes, and thoughts about sexuality.

3. Social aspect

This aspect includes dating culture, interpersonal relationships, and all things about sex related to individuals' habits in their environment.

4. Moral aspects.

Included in this aspect is answering right or wrong, should or should not, and whether or not a person's behavior is allowed.

2.4 Forms and Stages of Premarital Sexual Behavior

According to Sarwono (2011), the forms of premarital sexual behavior are:

1. Hugging and holding hands

Hugging and holding hands is hugging each other or grabbing someone into the arms of two wrapped around them. The behavior of holding hands is only limited to when going out together, holding hands, before reaching a level that is more than holding hands such as kissing and so on: liking or love.

2. Kissing

Kissing is an act of sticking lips to cheeks, neck, or lips to lips to sticking the tongue so that they can cause mutual sexual stimulation.

3. Fingering breasts

Touching the breast is holding with the palm on the breast because you want to feel something.

4. Fingering the genitals

Touching the genitals connects with the palms of the hands on the genital area because they want to feel something.

5. Having sex

Having sex is sexual contact or having sexual intercourse, which means that there is already an activity of inserting the male genitalia into the female genitalia.

Furthermore, Sarwono (2011) states that the forms of sexual behavior vary from feelings of interest, courtship, kissing then to intercourse. This stage of sexual behavior includes:

1. Kissing

A kiss is done to cause sexual stimulation, such as on the lips accompanied by palpation on sensitive parts that can cause sexual stimulation. Kissing with closed lips is a shared kiss. Kissing with the mouth and lips open and using the tongue is called a french kiss. Sometimes this kiss is also called a deep kiss/soul kiss.

2. Necking

Necking is a term used to describe a kiss around the neck and a deeper hug.

3. Petting

The behavior of rubbing sensitive body parts, such as the breasts and genital organs. It's a step deeper than necking. This includes feeling and caressing the partner's body, including the arms, chest, breasts, legs, and sometimes the pubic area, either inside or outside clothing.

4. Intercross

The union of two people sexually carried out by a male and female partner is characterized by erecting a male penis entering the vagina for sexual satisfaction.

2.5 Factors Affecting Premarital Sexual Behavior

According to Santrock (2011), premarital sexual behavior carried out by adolescents is influenced by the phase of its development, which begins with the maturation of the physical (sexual) organs and the tendency to explore their sexuality. According to Sugiyanto (2013), several factors that influence free sex behavior are:

1. The pornography industry.

The wide circulation of pornographic material has a significant influence on the formation of student sexual behavior patterns.

2. Individual knowledge about reproductive health.

A lot of information about reproductive health is inaccurate to impact unhealthy and harmful sexual behavior patterns.

3. Childhood experiences.

The study results indicate that individuals who experienced terrible experiences during childhood will be trapped into sexual activity at a very young age and tend to have multiple sexual partners.

4. Religious formation.

Students who have a wonderful religious life are more able to say 'no' to the temptation of free sex than those who ignore spiritual life.

Meanwhile, Pratiwi (2004) says that several factors, namely cause premarital sexual behavior:

1. Biological, namely, biological changes that occur during puberty and hormonal activation that can lead to sexual behavior.

2. Parental influence

Lack of open communication between parents and adolescents on sexual issues can strengthen sexual behavior deviations.

3. Peer influence

The influence of peers makes adolescents tend to use peer norms compared to existing social models.

4. Academic

Adolescents with low achievement and aspirations tend to exhibit sexual behavior more often than adolescents with good performance in school.

5. Understanding

Understanding social life will make teenagers able to make decisions that will provide a sense of sexual behavior. Adolescents can make the right decisions. Based on the values they hold will display healthy sexual behavior.

6. Sexual experience

The more teenagers hear, see and experience sexual intercourse, the stronger the stimulus that drives the sexual behavior.

7. Experience and appreciation of religious values

Adolescents who have a strong appreciation of religious values and good integrity also tend to display sexuality by the values they believe in, seeking satisfaction from productive behavior.

8. Personality factor

Personality factors such as self-esteem, self-control, and responsibility will make adolescents able to take and make decisions.

9. Knowledge of reproductive health

Adolescents who have a correct and proportional understanding of reproductive health tend to understand sexual behavior and alternative ways that can be used to channel sexual urges healthily and responsibly.

The same thing was also stated by Sarwono (2011) that the factors that influence premarital sexual behavior are:

1. Increased sexual libido

Hormonal changes increase the sexual desire (libido sexuality) of adolescents. This increase in sexual desire requires channeling certain forms of sexual behavior.

2. Delaying the age of marriage

The distribution could not be carried out immediately because of the delay in the age of marriage, both legally because of the law on marriage, which stipulates the age limit for marriage (at least 16 years for women and 19 years for men) or because social norms are increasingly demanding more and more requirements. Higher for the wedding (education, work, mental preparation, etc.).

3. Taboo prohibition

While the age of marriage is postponed, religious norms remain in effect whereby a person is prohibited from having sex before marriage. The prohibition extends further to other behaviors such as kissing and masturbation. For teenagers who cannot restrain themselves, there will be a tendency to violate these prohibitions.

4. Lack of information about sex

The tendency of violations is increasing due to the dissemination of information and sexual stimulation through mass media. The existence of advanced technology (videocassette, photocopy, satellite, VCD, mobile phone, internet, and others) becomes unstoppable.

Teenagers who are in a period of curiosity and want to try will imitate what they see or hear from the mass media, mainly because they generally have never fully learned about sexual problems from their parents.

METHOD RESEARCH.

The method used in this study is the Pre-experimental method. Sugiono (2010) suggests that the results of pre-experimental research are the dependent variable, not solely influenced by the independent variable. This can happen because there is no control variable, and the sample is not chosen at random. Research design is a design of how research is carried out. The research design used in this study was a one group pretest posttest design. In this design, before the education treatment is given a pretest (initial test) and at the end of the education a posttest is given (final test). This design is used in accordance with the objectives to be achieved, namely wanting to know the level of student knowledge after education on the dangers of premarital sex is applied. The following is a research design table for one group pretest posttest design.

This study uses a test instrument in the form of multiple choice so that the validity test used is a biserial point correlation technique. Sudijono (2004) suggests that the point biserial correlation technique is one of the bivariate correlational analysis techniques commonly used to find the correlation between two variables: variable I is in the form of a continuum variable (for example: test scores) while variable II is in the form of a discrete variable. pure (eg right or wrong candidate answers the test items). This biserial point correlation analysis technique can also be used to test the validity of the items that have been proposed in the test, where the test scores for each item are correlated with the total test scores.

The calculated r value is compared with the r value in the product moment table with a significant level of 5%. Items are said to be valid if $r_{count} > r_{table}$.

Reliability refers to an understanding that an instrument is reliable enough to be used as a data collection tool because the instrument is already good. The value of r_{11} obtained is consulted with the value of r in the product moment table with a significant level of 5%. If $r_{count} > r_{table}$, then the test item being tested is reliable.

ANALYZED AND RESULT.

Based on the results of data processing, it is known that in the initial test (pretest) before being given education on the dangers of free premarital sex virtually, it was known that students who had high knowledge were 16 respondents (48.5%) where the most students answered correctly when given questions about the faced by

adolescents in terms of sexual behavior, forms of free sex behavior, social impacts arising from having premarital sex and what is meant by free sex, while low knowledge was obtained by 19 respondents (51.5%) where students who answered incorrectly the most when asked about the physical impact on women if they had premarital sex, which caused teenagers to have premarital sex, what is meant by sexuality and the benefits that we can get by studying sex education while in the final test (posttest) after given education on the dangers of free premarital sex virtually there was an increase in students' knowledge of the questions asked so that 28 respondents (80%) high knowledge was obtained where the most students answered correctly when asked questions about how to avoid free sex behavior, the physical impact on women if they had sex. premarital sex, the problems faced by adolescents in terms of their sexual behavior, what is meant by free sex and what causes adolescents to have premarital sex while low knowledge is obtained by 7 respondents (20%) where the most students answered incorrectly when given an explanation. Questions about what to do if you find out that there are friends who engage in free sex behavior is to provide an understanding of the physical and psychological impacts of free sex, dating by touching such as holding hands is free sex behavior and forms of behavior in free sex.

Furthermore, based on the results of statistical tests, it shows that there is a difference in the level of student knowledge before education about the dangers of premarital free sex is given with after being given education where there is an increase in students' knowledge after being given education. This proves that the education given to students about the dangers of premarital free sex provides positive influence on students. This proof can be seen from the significance value obtained showing the value of $p \leq 0.05$.

The results of this study are in accordance with the opinion of Djamba (2013) which states that premarital sexual behavior is a sexual activity carried out by individuals with other people before marriage and the opinion of Darmasih (2011) which states that the factor that influences premarital sexual behavior in adolescents is the level of knowledge. Students who have good knowledge can understand sexual behavior well, while students who have poor knowledge levels also have poor understanding of sexual behavior.

Based on this it proves that a person's behavior can be influenced by the level of knowledge where the knowledge possessed can be obtained in various ways, including through education. Therefore, the dissemination of information about the dangers of premarital sexual behavior for adolescent reproductive health is still very much needed through education. Notoatmodjo (2016) explains that education or also called education is all planned efforts to influence other people, whether individuals, groups or communities so that they do what is expected by education actors. Likewise, Mubarak and Chayatin (2009) state that education is also called education is a dynamic process of behavior change, where the change is not just a process of transferring material or theory from one person to another and is not a set of procedures.

Based on the description above, it can be concluded as stated by Sumiati (2009) that "sex education can provide knowledge about sexual mistakes and deviations so that individuals can protect themselves and fight exploitation that can interfere with physical and mental health and can shape attitudes and provide an understanding of sex in all situations." various manifestations. Sex education for students can be done in various ways, including through counseling or learning by providing education according to the information needs of students. This is supported by the opinion of Notoatmodjo (2016) which states that increasing knowledge is not absolutely obtained in formal education, but can also be obtained in nonformal education such as attending counseling to get new information and with new information about something it provides a new cognitive foundation for students. knowledge about it.

CONCLUSION

Based on the results of data processing and analysis that have been stated previously, it can be concluded that education on the dangers of premarital sex virtually affects the level of student knowledge. With education, students can understand the dangers that can arise from premarital sex.

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