

Factors Affecting HIV/AIDS Prevention Behavior in Adolescents at SMA Negeri 10 Depok in 2022

Fairus Zahrah, Ony Linda and Cornelis Novianus

Public Health Study Program Faculty of Health Sciences, University of Muhammadiyah Prof. Dr. HAMKA
JL. Limau, South Jakarta, Indonesia

Keywords: Knowledge, HIV/AIDS Prevention Behavior, Adolescents.

Abstract: HIV/AIDS prevention behavior is an effort that can be done by adolescents to avoid HIV/AIDS disease. This study aims factors related to HIV/AIDS prevention behavior in adolescents. Methodology used quantitative with a cross-sectional. The population in this study was 629 students, samples taken using the Stratified Sampling sampling technique 294 students with data collection using questionnaires distributed via gform to respondents in June 2022. Data analysis with univariate, bivariate and multivariate. The results show that most of the teenagers who had positive HIV/AIDS prevention behaviors were 216 people (73.5%), positive attitudes of 155 people (52.7%), 168 individuals (57.1%) played a positive peer role in their lives, the part of parents, who portrayed 221 people (75.2%), and low media exposure of 191 people (65%). In this study, attitudes ($p < 0.001$), peer roles ($p < 0.001$), parental roles ($p < 0.001$) were obtained, and media exposure ($p < 0.001$) related to HIV/AIDS prevention behavior. The knowledge ($p = 0.235$) is not related to HIV/AIDS prevention behavior. The role of parents who play a role is at 3,343 times greater risk of having hiv/aids prevention behaviors that are positive rather than respondents who have a less parental role. Advice given is to maintain attitudes.

1 INTRODUCTION

Teenagers are the next generation of the nation. The development and decline of the country cannot be separated from the role of the younger generation. Adolescents are talented people who have great potential to play a major role in the development of the country, but sometimes most teenagers have many problems that reduce their quality of life.

Adolescence is a period of change that is recognized by changes in physical, emotional, and psychological conditions. The period of adolescence is the period in which the workings of the reproductive organs in adolescents begin to function very well, which can be called the puberty period. In the period of adolescence, there are drastic changes in physical organs (organobiological) and these changes are not balanced with psychological changes (psycho-emotional). The occurrence of this big change usually confuses the teenagers who experience it. Because puberty is an important part of adolescence, the emergence of unhealthy sexual impulses can lead to irresponsible sexual behavior that requires special attention (Lisnawati & Lestari, 2015).

Behavior according to Priyoto (2015) is an activity carried out by humans, spontaneously or not. The definition of behavior in general is an action taken by all things that live in the world, and based on the American Encyclopedia, behavior is the behavior or response of a living thing in the place where it lives. The Indonesian Ministry of Health defines behavior as a person's response to something that makes him do something, consciously or unconsciously, with a certain frequency, duration, and purpose. Behavior is easily monitored through human actions.

Preventive behavior that is carried out on students is important. Prevention of HIV/AIDS cannot be separated from adolescents who should have understood the procedures to avoid HIV/AIDS, treatment with the aim of avoiding a disease is a form of behavior that reflects health. Prevention efforts are a strategic component of eradicating HIV/AIDS in adolescents (Ministry of Health, RI, 2014). STDs, such as HIV/AIDS, are more likely to exchange sexual friends and can be caused by a lack of condom use among adolescents (Umaroh et al., 2016). HIV/AIDS is the most dangerous and deadly sexually

transmitted disease known to occur most frequently during adolescence (Kemenkes RI, 2017). This makes sexual problems, HIV/AIDS and drugs the main health problems for adolescents in the field of reproductive health.

HIV/AIDS is a problem in the health sector with its spread classified as active across regional borders, causing community problems in this country as well as in all other countries. This disease affects the body's organs that regulate antibodies in a person, lowering the patient's immune system and making him very vulnerable to various diseases (Kemenkes RI, 2014).

WHO said in 2016, globally 40% of all cases of HIV/AIDS occurred in young people aged 15-24 years, with 36.7 million people having HIV (WHO, 2016). It is at this age that young people around the world are at risk for HIV/AIDS. Therefore, it is important to carry out an activity to prevent the occurrence of HIV/AIDS.

The majority of people living with HIV worldwide live in Africa (25.7 million people), followed by Southeast Asia with 3.8 million people and the Americas with 3.5 million people. The lowest level is the Western Pacific with a population of 1.9 million. The large number of infected humans in the Southeast Asian region must first be carefully informed about the spread and transmission of the virus in Indonesia (UNAIDS, 2019).

Data on cases of HIV/AIDS in Indonesia continues to grow from year to year. In 2019, cases of HIV/AIDS that occurred in the 15-24 year age group in Indonesia were 18.3%. In the last 11 years, the total number of infected people in this country reached 50,282 in 2019. According to WHO data in 2019, it was recorded that 78% of the Asia Pacific had new HIV infections. The highest AIDS incidence rate for the past 11 years is 12,214 cases in 2013. The five regions with the highest total number of infections are Papua, East Java, Central Java, DKI Jakarta, West Java, with the majority in 2017 occurring in these five areas. The trend of this disease was highest from 2017 to 2019 and remained the same, especially in the Java region (Directorate General of P2P, 2019).

The trend of this disease in the Depok area fluctuated during 2017-2020, it can be seen in Figure 1.1 In 2017-2020, cases of HIV/AIDS that occurred in Depok City in the 15-24 year age group in Indonesia were 372 cases in 2017.

2018, 247 cases in 2019, and 220 cases in 2020. (P3M Section of Depok City Health Office, 2020).

Based on research conducted by Nugrahawati (2018), it shows that as many as 31 (52.5%) respondents have positive preventive behavior and 28

(47.5%) respondents have negative preventive behavior. SMAN 10 Depok is a place to gain knowledge located in Curug Village, Bojongsari District. SMA Negeri 10 Depok was established in 2014. SMA Negeri 10 Depok has 629 students. Based on a preliminary study conducted on 30 students at SMA Negeri 10 Depok, it was found that 3 students tried to wear tattoos according to him not to cause this disease, as many as 17 students avoided someone who had this disease and had bad speculations to sufferers, as many as 1 student has ever had sexual intercourse, as many as 14 students avoid and do not make friends with sufferers, and as many as 15 students avoid contact with sufferers worried about being at risk. From the data obtained, the authors were motivated to conduct research related to "Factors Influencing HIV/AIDS Prevention Behavior in Adolescents at SMA Negeri 10 Depok in 2022".

2 METHOD

The method is based on an analytic observational design with a cross sectional study where data collection for the independent variable and the dependent variable occurs simultaneously. This study aims to determine HIV/AIDS prevention behavior so that awareness is realized in preventing risky behavior in adolescents. Quantitative research aims to test the theory and show the relationship between variables and provide statistical descriptions. In addition, the advantages of cross sectional according to Yani (2019) can explain the relationship between studied health phenomena and accompanying factors (especially persistent traits).

The research was conducted at SMA Negeri 10 Depok. The research was conducted from October 2021 to August 2022. The population in this study were all students of SMA Negeri 10 Depok who were registered at the SMA, totaling 629 people, consisting of 315 class X and 314 class XI. Class XII is not made into the population because with the consideration that class XII will carry out the final school exam. According to Garaika and Darmanah (2019) population is a large area consisting of objects with differences determined by the researcher for research purposes. The total population is 629 students.

The sample of this research is some teenagers in SMA Negeri 10 Depok. The sample is part of the entire population (Garaika & Darmanah, 2019). Samples were obtained as many as 294 students. The list of sample names was obtained by asking the attendance list for each class to the administration of SMA Negeri 10 Depok. The sampling technique used

in this study is simple random sampling, which is a simple random selection by doing a lottery(Notoatmodjo, 2016).

3 RESULT

Table 1: Distribution of Frequency Based on Variables.

Variable	Category	Frequency	
		n	%
HIV/AIDS Prevention Behavior	Negative	78	26.5
	Positive	216	73.5
Knowledge	Not good	128	43.5
	Well	166	56.5
Attitude	Negative	139	47.3
	Positive	155	52.7
Peer Role	Not good	126	42.9
	Well	168	57.1
The role of parents	No role	73	24.8
	play a role	221	75.2
Media Exposure	Low	191	65.0
	Tall	103	35.0

Table 2: Bivariate Analysis Factors Associated with Preventive Behavior.

Variable	Preventive Behavior				Odds Ratio (95% CI)
	Negative		Positive		
	N	%	N	%	
Knowledge					
Not good	29	22.7	99	77.3	0.911*** (0.795-1.044)
Well	49	29.6	117	70.5	1
Attitude					
Negative	56	40.3	83	59.7	1,437* (1,236-1,671)
Positive	22	14.6	133	85.8	1
Peer Role					
Not good	52	41.3	74	58.7	1,439* (1,226-1,689)
Well	26	15.5	142	84.5	1
The role of parents					
No role	34	46.6	39	53.4	1,499* (1,198-1,876)
play a role	44	19.9	177	80.1	1
Media Exposure					
Low	67	35.1	124	64.9	1.376* (1,216-1.557)
Tall	11	10.7	92	89.3	1

Note: *Pvalue <0.001; *** Pvalue >0.05

Table 1 shows that most of the respondents have positive preventive behavior as many as 216 people (73.5%), good knowledge as many as 166 people

(56.5%), positive attitudes as many as 155 people (52.7%), role good peers as many as 168 people (57.1%), the role of parents as many as 221 people (75.2%), and low media exposure as many as 191 people (65%). Based on table 2. It shows that there is a relationship (P-value 0.001) with HIV/AIDS prevention behavior on the attitude variable (P-value 0.000), the role of peers (P-value 0.000), the role of parents (P-value 0.000), media exposure (P-value 0.000). Meanwhile, those who showed no relationship (P-value 0.05) with HIV/AIDS prevention behavior on the knowledge variable (P-value 0.235). Based on table 3. It shows that the variable of the role of parents who play a risky role is 3.343 times greater for having a positive HIV/AIDS prevention behavior than respondents who have a role of parents who have less role.

Table 3: Multivariate Analysis Factors associated with Preventive Behavior.

Variable	Odds Ratio	(95% CI)
Attitude	2.945**	(1.602 – 5.414)
The Role of Peers	2.201**	(1.184 – 4.095)
The Role of Parents	3.343*	(1,778-6,288)
Media Exposure	3.103**	(1.422 – 6.769)

Note: *Pvalue <0.001; ** Pvalue <0.05

4 DISCUSSION

Research conducted on adolescents at SMA Negeri 10 Depok showed that there were as many as 78 respondents (26.5%) adolescents at SMA Negeri 10 Depok had negative HIV/AIDS prevention behavior, while adolescents who had positive preventive behavior were 216 respondents (73.5%). Adolescents who always apply a clean and healthy lifestyle (PHBS) have the most positive HIV/AIDS prevention behaviors as many as 291 people (99.0%).

Adolescents who have positive preventive behavior are more than those who have negative preventive behavior. This happens because most of the teenagers already have good knowledge about the symptoms of HIV/AIDS, the attitude is not to ignore positive HIV/AIDS problems, the role of peers by reminding each other not to have sexual relations before marriage is good, and the role of other people. Parents who always remember teenagers not to use injecting drugs and not to get married under the age of 20 cause these teenagers to have positive HIV/AIDS prevention behavior.

This study is in line with the research conducted by Tampi et al. (2013) showed that as many as 84 respondents (70%) had good preventive behavior in SMA Manado International School. According to research by Kotajin et al. (2020), SMA Negeri 1 Halmahera Utara North Maluku had 173 students (65.3%) who exhibited good preventative behavior. Research conducted by Nugrahawati (2018) shows that 31 people (52.5%) at SMA Negeri 2 Sleman have positive preventive behavior. This study is not in line with the research conducted by Lestari et al. (2021) which shows that respondents who are in RW 15, Kecapi Sub-District, Harjamukti Sub-district, Cirebon City mostly have negative preventive behavior towards HIV/AIDS prevention,

Teenagers in high school are very at risk of getting HIV/AIDS, if they have negative preventive behavior. Such as having promiscuity, having sex outside of marriage, using injection drugs, etc. Knowledge variable is suspected as one of the factors related to HIV/AIDS prevention behavior in adolescents at SMA Negeri 10 Depok. The results of the univariate analysis showed that 128 respondents (43.5%) had poor knowledge while 166 respondents (56.5%) had good knowledge. The results of bivariate analysis with Chi-Square test showed that there was no significant relationship between knowledge and HIV/AIDS prevention behavior (0.235). The results of the multivariate analysis showed that knowledge was included in the candidate model (P value 0.184). Adolescents who have good knowledge already know AIDS is a collection of symptoms caused by decreased immunity due to HIV infection, as many as 271 people (92.2%) have positive HIV/AIDS preventive behaviors.

This study is consistent by Angela et al (2019) shows the results of statistical tests using the Chi-Square test obtained a P value of 1,000 so that there is no significant relationship between knowledge and student prevention behavior in HIV/AIDS prevention. Research conducted by Ershad (2014) shows that there is no relationship between knowledge and HIV/AIDS prevention behavior as evidenced by the P value = 0.174. Research conducted by Plantika (2019) shows that there is no significant relationship between adolescent knowledge about HIV/AIDS and HIV/AIDS prevention in adolescents at SMK X Ungaran with a P value of 0.196 > 0.05. This research is not in line with research conducted by Aisyah and Fitria, (2019) shows the results of statistical tests using the Chi-Square test obtained $p = 0.000 < \alpha = 0.05$ and H_0 is rejected, which means that there is a relationship between knowledge and efforts to prevent HIV/AIDS in adolescents at SMA Negeri 1 Montasik, Aceh Besar District.

This study explains that respondents who have poor knowledge are not necessarily at risk of having negative HIV/AIDS prevention behavior. So the researchers argue that in this case it is not a significant risk factor, there may be other factors that have a more significant relationship.

Attitude is a variable to show the respondent's statement about the subjective behavior that he/she does either openly or privately in the prevention of HIV/AIDS. Attitude variable is considered as one of the factors related to HIV/AIDS prevention behavior in adolescents at SMA Negeri 10 Depok. Univariate results showed that 155 people (52.7%) had a positive attitude and 139 people (47.3%) had a negative attitude. The results of bivariate analysis with Chi-Square test showed that there was a significant relationship between attitudes and HIV/AIDS prevention behavior with P value (0.000). The results of the calculation of the Prevalence Ratio (PR) show that respondents who have a negative attitude are 1.437 times more likely to have negative preventive behavior than respondents who have a positive attitude (95% CI 1.236-1.671).

Adolescents who have a disapproving attitude will be closed (ignorant) to the discussion of HIV/AIDS issues, namely the most have positive HIV/AIDS prevention behavior up to 185 individuals (62.9%). This study supports research done by Angela et al. (2019), which demonstrates that there is a relationship between attitudes towards HIV/AIDS and HIV/AIDS prevention efforts with a p-value of 0.000. Research conducted by Aisyah & Fitria (2019) showed attitude was significantly related to HIV/AIDS prevention behavior with P value = 0,000. Research conducted by Tulung et al. (2014) shows that there is a significant relationship between attitudes and prevention of HIV/AIDS with P value = 0.014. This research is not in line with the research conducted by Ershad (2014) shows that there is no relationship between respondents' attitudes and HIV/AIDS prevention behavior in adolescents in Kudus Regency can be concluded with (p value = 1.476). This means that attitudes do not have a significant relationship with HIV/AIDS prevention measures.

This study explains that respondents who have a negative attitude are at risk of having negative HIV/AIDS prevention behavior. So the researcher argues that in this case it is also a significant risk factor, because if someone has a negative attitude, he will carry out negative preventive behavior.

The role of peers is a variable to indicate whether the respondent has a good peer role relationship at school, the role of peers is considered as one of the factors associated with HIV/AIDS prevention behavior in adolescents at SMA Negeri 10 Depok. The results of univariate analysis showed that 168

people (57.1%) had good peer roles, while 126 people (42.9%) had poor peer roles. The results of bivariate analysis with Chi-Square test showed a significant relationship between the role of peers and HIV/AIDS prevention behavior with Pvalue (0.000). The results of the calculation of the Prevalence Ratio (PR) show that respondents who have poor peer roles have a high chance of 1, 439 times more likely to have negative preventive behavior than respondents who had good peer roles (95% CI 1.226-1.689). The results of the multivariate analysis showed that the role of peers was included in the candidate model (P value 0.000).

The role of peers by prohibiting sexual intercourse before marriage because of the risk of contracting HIV/AIDS. The highest number of people who have HIV/AIDS prevention behavior is positive as many as 275 people (93.5%). This research is in line with that conducted byMunthe (2016)showing the role of peers on behavior in the prevention of HIV/AIDS obtained a P value of 0.029. Therefore, based on the results of this study there is the influence of peers on behavior. The same thing in another study conducted by Manafe et al. (2014) shows a p value of 0.000, therefore p value < 0.05, then H5 is accepted or there is a relationship between the role of peers and the prevention of HIV/AIDS infection. Research conducted bySari (2021)shows that there is a relationship between peers and HIV/AIDS prevention behavior in adolescents at SMAN X Pariaman in 2021 with a P value of 0.010.

This study explains that respondents who have a less favorable peer role are at risk of having negative HIV/AIDS prevention behavior. So the researcher argues that in this case it is also a significant risk factor, because if someone has a bad peer role, he or she will carry out negative preventive behavior.

The role of parents is a variable to show the respondent's statement about the role of parents towards him, the variable of the role of parents is considered to have a relationship with HIV/AIDS prevention behavior in adolescents at SMA Negeri 10 Depok. The results of the univariate analysis showed that there were 221 people (75.2%) who had a parental role, while 73 people (24.8%) had a non-parental role. The results of bivariate analysis with Chi-Square test showed a significant relationship between the role of parents and HIV/AIDS prevention behavior with Pvalue (0.000). The results of the calculation of the Prevalence Ratio (PR) show that respondents who have the role of parents who do not play a role have a high chance of 1, 499 times greater to have negative preventive behavior than respondents who have a parental role that plays a role (95% CI 1.198-1.876). The results of the multivariate analysis showed that the role of parents was included in the candidate model (P value 0.000).

Parents play a role by always directing to get married over the age of 20 years, which is the most positive HIV/AIDS prevention behavior as many as 280 people (95.2%). This study is in line with that conducted bySari (2021)shows the results of P-value 0.030 where the role of parents has an influence on behavior in the prevention of HIV/AIDS. Research conducted bySintia (2017)shows that there is a significant relationship between the role of parents with HIV/AIDS prevention behavior with P value = 0.013. This study is not in line with the research conducted by Endah Yulianingsih (2015) which showed that the results of the statistical test obtained p value of 0.092 > 0.05, so it can be concluded that there is no relationship between the role of parents and the risk of contracting HIV/AIDS.

This study explains that respondents who have a parental role who do not play a role are at risk of having negative HIV/AIDS prevention behavior. So the researcher argues that in this case it is also a significant risk factor, because if someone has a parental role that does not play a role, he will carry out negative preventive behavior.

Media exposure is a variable to show respondents' statements about how often they are exposed to media, media exposure variables are considered to have a relationship with HIV/AIDS prevention behavior in adolescents at SMA Negeri 10 Depok. The results of the univariate analysis showed that there were 191 people (65%) with low media exposure, while as many as 103 people (35%) with high media exposure. The results of bivariate analysis with Chi-Square test showed a significant relationship between media exposure and HIV/AIDS prevention behavior with Pvalue (0.000). The results of the Prevalence Ratio (PR) calculation show that respondents who have low media exposure have a 1.376 times greater chance of having negative preventive behavior than respondents who have high media exposure (95% CI 1.216-1.557).

Adolescents have low media exposure due to not keeping leaflets/sheets of paper related to HIV/AIDS, which is the most negative HIV/AIDS prevention behavior as many as 258 people (87.8%). This research is in line with that conducted byManafe et al. (2014)there is a relationship between information media and HIV/AIDS prevention in students at SMA Negeri 4 Manado with a Pvalue of 0.006. Another study conducted by Endah Yulianingsih (2015) showed that the results of the statistical test obtained p value of 0.009 < α 0.05, it can be concluded that there is a significant relationship between exposure to information media and the risk of contracting HIV/AIDS. This research is not in line with the research conducted bySari (2021)shows that there is no relationship between media exposure and

HIV/AIDS prevention behavior in adolescents at SMA NX Pariaman in 2021 with a P value = 0.609.

This study explains that respondents who have low media exposure are at risk of having negative HIV/AIDS prevention behavior. So the researcher argues that in this case it is also a significant risk factor, because if someone has low media exposure, he or she will carry out negative preventive behavior. This study uses multiple logistic regression to see the most dominant variable with HIV/AIDS prevention behavior. The dominant variable is obtained from the largest Odds Ratio (OR) value. The results obtained for the dominant variable, The role of parents who play a role is at 3,343 times greater risk of having hiv/aids prevention behaviors that are positive rather than respondents who have a less parental role..There is a significant relationship between the role of parents and adolescent behavior towards HIV/AIDS prevention at SMAN X Pariaman in 2021, with a p-value of 0.030 and an OR of 2.753.(Sari, 2021).

5 CONCLUSION

1. Most of the respondents are more have positive preventive behaviour, good knowledge, positive, good peer roles 168 people (57.1%), 221 people (75.2%), and 191 people (65%) believe that parents play a significant influence in their children's lives. Based on the results of the bivariate test on 294 adolescents studied, which showed a relationship (P-value 0.05) with HIV/AIDS prevention behavior on the variables: attitude (P-value 0.000), the role of peers (P-value 0.000), the role of parents (P-value 0.000) , media exposure (Pvalue 0.000).
2. Based on the results of the bivariate test on 294 adolescents studied, which showed no relationship (P-value 0.05) with HIV/AIDS prevention behavior on the knowledge variable (P-value 0.235).
3. Based on the results of the multivariate test on 294 adolescents studied, which showed the dominant variable, The role of parents who play a role is at 3,343 times greater risk of having hiv/aids prevention behaviors that are positive rather than respondents who have a less parental role.

REFERENCE

- AIDS, U. N. P. on H. and. (2019). *No Title*.
- Aisyah, S., & Fitria, A. (2019). Hubungan Pengetahuan dan Sikap Remaja tentang HIV/AIDS dengan Pencegahan HIV/AIDS di SMA Negeri 1 Montasik Kabupaten Aceh Besar. *Jurnal Bidan Komunitas*, 11(1), 1–10. https://www.researchgate.net/publication/335626912_Hubungan_Pengetahuan_dan_Sikap_Remaja_tentang_HIVAIDS_dengan_Pencegahan_HIVAIDS_di_SMA_Negeri_1_Montasik_Kabupaten_Aceh_Besar
- Akbar, H., Langingi, A. R. C., & Darmin. (2020). Hubungan Pengetahuan dengan Perilaku Pencegahan HIV/AIDS pada Remaja di Desa Poyowa Besar 1 Kecamatan Kotamobagu Selatan. *Jurnal Ilmiah Kesehatan Iqra*, 8(2), 100–105. <https://stikesmu-sidrap.e-journal.id/JIKI/article/view/195/163>
- Amran, Y. (2012). *Pengolahan Data dan Analisis Data Statistik di Bidang Kesehatan*. UIN.
- Angela, M., Sinaturi, S. R., & Supardi, S. (2019). Hubungan antara Pengetahuan, Sikap dan Perilaku Pencegahan HIV/AIDS pada Siswa SMPN 251 Jakarta. *Jurnal Penelitian Dan Pengembangan Pelayanan Kesehatan*, 3(2), 70. <https://ejournal2.litbang.kemkes.go.id/index.php/jpppk/article/view/1943/1581>
- Bahiyatun. (2013). *Psikologi Ibu dan Anak*. EGC.
- Birwin, A. (2014). Hubungan Karakteristik dalam Keluarga dengan Pengetahuan dan Sikap Siswi SMA Uswatun Hasanah Tentang Infeksi Menular Seksual (IMS) di Jakarta Timur. *Jurnal Kesehatan Komunitas*, 2(5), 240. <https://jurnal.htp.ac.id/index.php/keskom/article/view/83/67>
- BKKBN. (2013). *Seks remaja dan aborsi*. www.bkkbn.go.id
- Daradjat, Z. (2012). *Ilmu Pendidikan Islam (Cetakan X)*. Bumi Aksara.
- Depok, S. N. 10. (2017). *Profil dan Sejarah SMA Negeri 10 Depok*. <https://www.sman10depok.sch.id/home/readmore/13/profil>
- Depok, S. P. D. K. K. (2020). *No Title*.
- DIY, K. (2016). *Buku Referensi (Materi HIV, AIDS, dan IMS bagi Tenaga Pengajar Penjasorkes SMA dan SMK)*. KPA DIY.
- Garaika, & Darmanah. (2019). *Metodologi Penelitian*. CV. Hira Tech. <https://stietrisnanegara.ac.id/wp-content/uploads/2020/09/Metodologi-Penelitian.pdf>
- Hastono, S. P. (2016). *Analisis Data pada Bidang Kesehatan*. PT Raja Grafindo Persada.
- Heriana, C. (2015). *Manajemen Pengolahan Data Kesehatan*. Refika Aditama.
- Heryana, A. (2020a). *Bahan Ajar Mata Kuliah: Metodologi Penelitian Kuantitatif*. Universitas Esa Unggul. https://www.researchgate.net/publication/342476833_Analisis_Data_Penelitian_Kuantitatif
- Heryana, A. (2020b). *Uji Chi-Square*. Universitas Esa Unggul.
- Holilah, I. (2016). Dampak Media Terhadap Perilaku Masyarakat. *Jurnal Studi Gender Dan Anak*, 3(31), 103–114. <http://jurnal.uinbanten.ac.id/index.php/jsga/article/view/179/181>
- Irsyad, C. (2014). Hubungan Antara Pengetahuan dan Sikap dengan Perilaku Pencegahan HIV/AIDS pada Remaja Komunitas Anak Jalanan di Kabupaten Kudus. http://eprints.ums.ac.id/30523/1/ARTIKEL_PUBLIK_ASI.pdf

- Irwan. (2017). *Kearifan Lokal dalam Pencegahan HIV/AIDS pada Remaja*. Ideas Publishing.
- Isnaeni, N. (2016). *Peran Teman Sebaya dalam Pembentukan Kepribadian Mahasiswa Bimbingan dan Konseling Angkatan 2013 Fakultas Dakwah dan Komunikasi UIN Sunan Kalijaga 2016*. UIN Sunan Kalijaga.
- Katiandagho, D. (2017). *Epidemiologi HIV-AIDS*. IN MEDIA.
- Kharisma, N., & Latifah, L. (2015). Pengaruh Motivasi, Prestasi Belajar, Status Sosial Ekonomi Orang Tua dan Lingkungan Teman Sebaya terhadap Minat Melanjutkan Pendidikan ke Perguruan Tinggi pada Siswa Kelas XII Kompetensi Keahlian Akuntansi di SMK Negeri Se-Kota Semarang Tahun Ajaran 2014/. *Economic Education Analysis Journal*, 4(3), 833–846. <https://journal.unnes.ac.id/sju/index.php/eeaj/article/view/8524/5672>
- Kotajin, N. F., Tucunan, A. A. T., & Ratag, B. T. (2020). Perilaku Pencegahan HIV/AIDS pada Peserta Didik SMA Negeri 1 Halmahera Utara Kabupaten Maluku Utara. *Jurnal KESMAS*, 9(6), 81–87.
- Kusmiran, E. (2011). *Kesehatan Reproduksi Remaja dan Wanita*. Salemba Medika.
- Lisnawati, & Lestari, N. S. (2015). Faktor-Faktor yang Berhubungan dengan Perilaku Seksual Remaja di Cirebon. *Jurnal CARE*, 3(1), 1–8.
- Lou, C., Cheng, Y., Gao, E., Zuo, X., Emerson, M. R., & Zabin, L. S. (2014). Media's Contribution to Sexual Knowledge, Attitudes and Behaviors for Adolescents and Young Adults in Three Asian Cities. *J Adolesc Health*, 50(30), S26–S36.
- Maharti, V. I. (2015). Faktor-Faktor yang Berhubungan dengan Perilaku Penyalahgunaan Narkoba pada Remaja Usia 15-19 Tahun di Kecamatan Semarang Utara Kota Semarang. *Jurnal Kesehatan Masyarakat*, 3(3), 945–953. <https://ejournal3.undip.ac.id/index.php/jkm/article/view/12777/12388>
- Manafe, L. A., Kandou, G. D., & Posangi, J. (2014). Hubungan antara Pengetahuan, Sikap, Peran Guru, Media Informasi (Internet), dan Peran Teman Sebaya dengan Tindakan Pencegahan HIV/AIDS pada Siswa di SMA Negeri 4 Manado. *JIKMU*, 4(4), 645–655. <https://ejournal.unsrat.ac.id/index.php/jikmu/article/view/7685/7251>
- Munthe, D. P. (2016). *Hubungan Keterpaparan Media Massa dan Peran Teman Sebaya terhadap Pengetahuan dan Sikap Remaja dalam Pencegahan Penularan HIV/AIDS di SMA Swasta Raksana Medan tahun 2016*.
- Najmah. (2016). *Epidemiologi Penyakit Menular* (T. Ismail (ed.); Cetakan Pe). Trans Info Media.
- Notoatmodjo, S. (2012a). *Metodologi Penelitian Kesehatan*. Rineka Cipta.
- Notoatmodjo, S. (2012b). *Promosi Kesehatan dan Perilaku Kesehatan*. Rineka Cipta.
- Notoatmodjo, S. (2016). *Promosi Kesehatan dan Ilmu Perilaku*. Rineka Cipta.
- Nugrahawati, R. E. P. C. (2018). *Faktor-Faktor yang Mempengaruhi Perilaku Remaja terhadap Pencegahan HIV/AIDS di SMA Negeri 2 Sleman tahun 2018*. Politeknik Kesehatan Kementerian Kesehatan Yogyakarta.
- P2P, D. (2019). *Sistem Informasi HIV/AIDS dan IMS (SIHA)*.
- Pahlawan H. R, R., & Wijayanti, A. C. (2018). Hubungan antara Pengetahuan dan Paparan Media Massa dengan Perilaku Pacaran Remaja. *Kes Mas: Jurnal Fakultas Kesehatan Masyarakat*, 12(1), 60–67. http://journal.uad.ac.id/index.php/KesMas/article/view/6908/pdf_113
- Pavlianingtyas. (2015). *Hubungan Pengetahuan HIV/AIDS dan Pola Asuh Orang Tua dengan Sikap terhadap Pencegahan Penularan HIV/AIDS*. Karya Ilm S1 Ilmu Keperawatan.
- Plantika, W. (2019). *Hubungan Pengetahuan Remaja tentang HIV/AIDS dengan Sikap terhadap Pencegahan HIV/AIDS pada Remaja di SMK X Kecamatan Ungaran*. <http://repository2.unw.ac.id/241/1/ARTIKEL.pdf>
- Priyoto. (2014). *Teori Sikap dan Perilaku dalam Kesehatan*. Nuha Medika.
- Priyoto. (2015). *Perubahan dalam Perilaku Kesehatan*. Graha Ilmu.
- Rahmatin S., R., Laksono, B., & Rustiana, E. R. (2018). Adolescent Sexual Behaviour At Risk of Unintended Pregnancy And HIV/AIDS. *Public Health Perspective Journal*, 3(2), 108–115.
- RI, K. (2014a). *InfoDATIN: Situasi dan Analisis HIV-AIDS*. Pusat Data dan Informasi Kementerian Kesehatan RI.
- RI, K. (2014b). *Pusat Data dan Informasi*.
- RI, K. (2016). *Perilaku Berisiko Kesehatan Pada Pelajar SMP dan SMA di Indonesia*. Pusat Penelitian dan Pengembangan Upaya Kesehatan Masyarakat.
- RI, K. (2017). *Laporan Perkembangan HIV-AIDS & Penyakit Infeksi Menular Seksual (PIMS) Triwulan I Tahun 2017*. Direktorat Jendral Pencegahan dan Pengendalian Penyakit.
- RI, K. (2020). *Infodatin: Pusat Data dan Informasi Kementerian Kesehatan RI*. Kementerian Kesehatan RI.
- Rini, A. S., & Noviyani, E. P. (2019). Konfirmasi Lima Faktor yang Berpengaruh terhadap Perilaku Remaja dalam Pencegahan HIV/AIDS. *Jurnal Ilmiah Kebidanan Indonesia*, 9(4), 138–153. <https://journals.stikim.ac.id/index.php/jiki/article/view/407/339>
- Rohmatika, U. N. (2017). Peran Orangtua Dalam Pendidikan Kesehatan Reproduksi Remaja Kelas VII Di SMP Muhammadiyah 1 Mlati Sleman Yogyakarta. In *KTI. D3 Kebidanan STIKES Jendral Achmad Yani Yogyakarta*.
- Rusmiati, D., & Hastono, S. P. (2015). Sikap Remaja terhadap Keperawanan dan Perilaku Seksual dalam Berpacaran. *Jurnal Kesehatan Masyarakat Nasional*, 10(1), 29–36. <https://journal.fkm.ui.ac.id/kesmas/article/view/815/481>
- Sabri, L., & Hastono, S. P. (2014). *Statistik Kesehatan* (1st ed.). Rajawali Pers.
- Sari, I. R. (2021). *Faktor-Faktor yang Berhubungan dengan Perilaku Remaja terhadap Pencegahan HIV/AIDS di SMAN X Pariaman tahun 2021*.
- Sarwono, S. W. (2012). *Psikologi Remaja* (Edisi Revi). Rajawali Pers.

- Setiawan, A., & Saryono. (2012). *Metodologi Penelitian Kebidanan D III, D IV, S1, S2*. Nuha Medika.
- Sinay, E. (2017). Hubungan antara Konformitas Teman Sebaya dengan Kecurangan Akademik pada Mahasiswa Maluku di Universitas Kristen. *Jurnal Psikologi*, 1, 9.
- Sintia, S. D. (2017). *Hubungan Peran Orang Tua dan Sikap tentang Penularan HIV dengan Perilaku Pencegahan Penularan HIV pada Siswa SMP N 35 Padang Tahun 2017*. https://pustaka.poltekkes-pdg.ac.id/index.php?p=show_detail&id=4445&keywords=
- Siregar, S. (2016). *Statistik Deskriptif untuk Penelitian: Dilengkapi Perhitungan Manual dan Aplikasi SPSS Versi 17* (1st ed.).
- Solihati, & Faridah, I. (2020). Pengetahuan dan Sikap tentang HIV/AIDS dan Upaya Pencegahan HIV/AIDS. *Jurnal Kesehatan*, 9(1), 1–15. <https://jurnal.stikesyatsi.ac.id/index.php/kesehatan/article/view/129/89>
- Sugiyono. (2012). *Memahami Penelitian Kualitatif*. ALFABETA.
- Tampi, D., Kandou, G. D., & Ratag, G. E. A. (2013). Hubungan Pengetahuan, Sikap dengan Tindakan Pencegahan HIV/AIDS pada Siswa SMA Manado International Schoo. *Jurnal Kedokteran Komunitas Dan Tropik*, 1(4), 140–145. <https://ejournal.unsrat.ac.id/index.php/JKKT/article/view/4574/4102>
- Tengah, P. P. J. (2015). *Remaja Butuh Akses Layanan Kesehatan Reproduksi yang Ramah*. Divisi Layanan PILAR.
- Tulung, O., Sondakh, R. C., & Tilaar, C. R. (2014). *Hubungan antara Pengetahuan dan Sikap dengan Tindakan Pencegahan HIV/AIDS pada Siswa SMK Negeri 1 Tomohon*. <https://fkm.unsrat.ac.id/wp-content/uploads/2014/10/VANE-JURNAL.pdf>
- Umaroh, A. K., Kusumawati, Y., & Kasjono, H. S. (2016). Hubungan Antara Faktor Internal dan Faktor Eksternal dengan Perilaku Seksual Pranikah Remaja di Indonesia. *Jurnal Kesehatan Masyarakat Andalas*, 10(1), 65–75. <http://jurnal.fkm.unand.ac.id/index.php/jkma/article/view/165/160>
- Uyun, Z. (2013). *Peran Orangtua dalam Pendidikan Kesehatan Reproduksi*. 356–372. <https://publikasiilmiah.ums.ac.id/bitstream/handle/11617/3963/B3.pdf;sequence=1>
- Yani, R. W. E. (2019). *Riset Epidemiologi Bidang Kesehatan*. UPT Percetakan dan Penerbitan Universitas Jember. https://penerbitan.unej.ac.id/wp-content/uploads/2021/07/dummy-Ristya-Widi_edit.pdf
- Yufdel. (2013). *Pengaruh Teman Sebaya Dan Sumber Informasi Terhadap Perilaku Seksual Pranikah Pada Siswa SMA Negeri 2 Medan*. Fakultas Ilmu Kesehatan Masyarakat Universitas Sumatera Utara. <https://repositori.usu.ac.id/bitstream/handle/123456789/33271/107032186.pdf?sequence=1&isAllowed=y>
- Yulianingsih, E. (2015). Faktor-Faktor yang Berhubungan dengan Tindakan Berisiko Tertular HIV/AIDS pada Siswa SMA Negeri di Kota Gorontalo. *JIKMU*, 5(2a), 311–321. <https://ejournal.unsrat.ac.id/index.php/jikmu/article/view/7453/6998>