**ABSTRACT**

Adolescents aged 13-15 years are a group vulnerable to risky sexual behavior. Many studies have been conducted to find the factors that influence it. This paper aims to analyze scientific evidence of factors that influence adolescent sexual behavior from various research results. The study design was a systematic review on the adolescent population with PICOS Framework. Researchers conducted a literature search from empirical studies spanning the years 2017-2022 identified through the Scopus, Ebscohost, Science direct, Sage, Proquest, Springer Link and Google Scholar databases. The initial search found 8399 articles, which were narrowed down to 14 articles through inclusion criteria and exclusion criteria. The study includes research with various quantitative and qualitative designs taken from several countries. The data were analyzed using a qualitative synthesis approach. The results of the analysis show that there are many factors related to risky sexual behavior in adolescents. These factors are grouped into 4 major groups. Interpersonal factors (the role of peers), social environmental factors (economic activities, tourist interests, social norms,), individual factors (biological responses, ignorance, knowledge, lack of information, religious understanding, attitudes, self-esteem, motivation, use of social media), family factors (social economy, closeness of parents, communication between parents and children).

**Keywords**

Systematic review, sexual behavior, adolescents

**INTRODUCTION**

Risky sexual behavior, defined as behavior that increases a person's risk of contracting an sexual transmitted infection (STI) and having an unwanted pregnancy (Masa et al., 2020). The proportion of adolescents aged 15-19 years is currently in the worrying category because they have engaged in risky sexual behavior. This can significantly affect the quality of health in society and the country in general (Srahbzu & Tirfeneh, 2020). The research data showed the prevalence of sexual involvement was 3.6%, the majority aged 16-17 years (58.5%). The average age at first sexual intercourse was 16.8 ± 1.27 years, with a minimum age of 14 years (Lian et al., 2020). Factors such as lack of social support, living apart from family, experiencing parental neglect, and using alcoholic beverages are risk factors that increase the likelihood of risky sexual behavior in adolescents aged 15-19 years. Another factor that also affects adolescents is their peers. Peer influence is positively correlated with risk-taking behavior in adolescents, where those who understand the behavior and activities of their peers are more likely to participate in risky activities. They justify their own behavior by using
their perceptions of their peers' participation in risky behavior (Siraj et al., 2021).

Adolescents begin the dating phase of their relationship when they are in their early teens. They learn about the opposite sex through courtship, spending time together, and traveling together. Dating relationships become the basis for teens to start experimenting with new behaviors and identities. This behavior then encourages adolescents to have sex before marriage. The process by which risky behavior leads to sexual intercourse takes place in three stages, namely the experience and behavior of the subject at risk of dating, the opportunity to have sexual intercourse, and finally sexual activity (Ibnu et al., 2020). Conducting a systematic review related to the factors that encourage adolescents to engage in sexual behavior will provide an overview of the reasons why adolescents in various parts of the world perform these behaviors. By knowing the reasons, all sectors can find ways to prevent adolescents from engaging in unhealthy sexual behavior.

METHOD

This study is a systematic review to determine factors related to adolescent sexual behavior. The framework used in searching for articles uses the PICOS framework. 1) Population/problem, The population to be reviewed is adolescents and the problem to be reviewed is adolescent sexual behavior and related factors. 2) Intervention, No intervention 3) Comparison, The articles used are based on empirical studies of the last 5 years. 4) Outcome, The purpose of conducting a review is to find out factors related to adolescent sexual behavior 5) Study design selected articles that use design prospective observational study, survey study, correlation analytic, descriptive and qualitative study.

Search Result and Study Selection.

The authenticity of the research was carried out by reviewing several published literatures. Literature search using database searches from Scopus, Ebscohost, Sciencedirect, Sage, Proquest, Springer Link and Google Scholar from 2017 to 2022. The keywords and boolean operators used are “factors” AND “sex behavior” OR “risky sex” OR “risky sex behavior” AND “adolescent” AND “health promotion”. The flow of the literature search is shown in Figure 1 Systematic Review Flowchart.

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Inclusion</th>
<th>Exclusion</th>
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<tbody>
<tr>
<td>Population/Problem</td>
<td>Adolescent</td>
<td>Married adolescent</td>
</tr>
<tr>
<td>Intervention</td>
<td>No intervention</td>
<td>No intervention</td>
</tr>
<tr>
<td>Comparison</td>
<td>No comparison</td>
<td>No comparison</td>
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<td>Outcome</td>
<td>The factors correlate of adolescent sex behavior</td>
<td></td>
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<tr>
<td>Study design</td>
<td>Prospective observational study, survey study, correlation analytic, descriptive and qualitative study</td>
<td>Literature review</td>
</tr>
<tr>
<td>Year of Publication</td>
<td>2017-2022</td>
<td>before 2017</td>
</tr>
<tr>
<td>Language</td>
<td>English and Bahasa</td>
<td>Other than English and Bahasa</td>
</tr>
</tbody>
</table>

Figure 1. Systematic Review Flowchart

Records identified based on literature search Scopus, Ebscohost, Sciencedirect, Sage, Proquest, Springer Link and Google Scholar (n=898)

Inclusion criteria and exclusion criteria in article search using the PICOT scheme

- Participant/Population: Adolescents with sexual violence, history of violence against children, adolescent mental disorders
- Intervention: No intervention
- Outcome: Not assessing sexual behavior
- Type of Study: Full text, Method descriptor, design, sample, variable, data, instrument and analysis
- Inclusion criteria: Language English and Bahasa

- Exclusion criteria: Homeless, drug abuse, sex work, consent grade, non-implying consent grade, literature review
- Language: Other than English and Bahasa

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RESULTS
Searching and Screening

From the ScienceDirect, EBSCOhost, PubMed, SAGE, ProQuest, Google Shoolar and Scopus databases, all the 8399 articles obtained were imported to Mendeley for further processing. Subsequently, a further checking was conducted based on the article’s title. The study found that 691 articles were similar articles. Then re-screening was taken and the study found that some articles were irrelevant as their titles were not about coping. After the first screening stage, of 691 articles’ abstracts read, 127 articles were found irrelevant because they discussed Homeless, drug abused, and discussed about selected gender. After the second screening stage, of 44 articles read for the whole text, and finally the study selected 14 articles which were relevant and suitable for further review.

Characteristics of Research and Review.

This review included 14 articles: Malaysia, Brunei Darussalam, Korea, Ghana, six from Indonesia, Bohemia, two from Ethiopia, and Slovakia respectively. The research designs reviewed were four qualitative and ten quantitative studies (three cross-sectional studies, two intervention studies, five meta analyses). The selected 14 articles reported the study results with quantitative and qualitative designs, consisting of four themes. The theme correlates to adolescent sex behavior are interpersonal factors, individual factors, social environmental factors and family factors. The complete review results are presented in Table 2.

Table 2. Review Results: Factors correlates with adolescent sexual behavior

<table>
<thead>
<tr>
<th>No</th>
<th>Author</th>
<th>Year</th>
<th>Country</th>
<th>Sample</th>
<th>Study Design</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Mengesha Srahbzu and Enguday Tirfeneh (Srahbzu &amp; Tirfeneh, 2020)</td>
<td>2019</td>
<td>Ethiopia</td>
<td>659 teens, 15-19 years old</td>
<td>Analytic Correlation with cross-sectional study</td>
<td>This study states that an alarming proportion of adolescents aged 15-19 years have participated in risky sexual behavior. This can significantly affect the quality of health in society and the country in general. Factors such as lack of social support, living outside the family, experiencing parental neglect, and using alcoholic beverages are risk factors that increase the likelihood of risky sexual behavior in adolescents aged 15-19 years.</td>
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<td>2</td>
<td>Oktriyanto &amp; Alfiasari (Oktriyanto &amp; Alfiasari, 2019)</td>
<td>2019</td>
<td>Indonesia</td>
<td>41.885 teens, 15-24 years old</td>
<td>Analytic Secondary Data</td>
<td>The results of the analysis show that male respondents who have girlfriends are higher than women who have girlfriends. On average, the age of the first date is 15.5 years. The most frequent activities during dating are holding hands, kissing lips, touching and stimulating sensitive body parts. Boys are more permissive about premarital sex than girls. Furthermore, boys admit to having sexual intercourse three times higher than girls. Teenagers who are dating have a higher chance of having premarital sex than teenagers who are not dating. Chances of premarital sex tend to increase if teens hold hands, kiss on the lips, and touch sensitive body parts on dates.</td>
</tr>
<tr>
<td>3</td>
<td>Pengpid, Supa Peltzer, Karl (Pengpid &amp; Peltzer, 2021)</td>
<td>2021</td>
<td>Brunei Darussalam</td>
<td>2.599 teens</td>
<td>Analytic secondary data GSHS Brunei Darussalam</td>
<td>The study found that among a national sample of school adolescents in Brunei Darussalam, the overall prevalence of having had sexual intercourse in the last 12 months was 11.3%, 13.2% for boys, and 9.4% for girls. The unsafe sexual behavior found in this study may be related to a lack of information about disease transmission or neglect of preventive behavior. In unadjusted analyses, older age, current tobacco use, current alcohol consumption, history of attempted suicide and bullying victimization were associated.</td>
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<td>4</td>
<td>Ibnu, Indra Fajarwati Wahjuni, Chatarina Umbul Devy, Shrimarti Rukmini (Ibnu et al., 2020)</td>
<td>2020</td>
<td>Indonesia</td>
<td>3 teens: 2 male and 1 female, 17-19 years old</td>
<td>Naratif Qualitatif from verbal history based on reflection story and individual experiences</td>
<td>The results showed that the three subjects started to have an interest in the opposite sex in their early teens. The courtship behavior shown by the subject included holding hands, kissing, and hugging which were one of the risk factors. Dating relationships provide the basis for adolescents to begin experimenting with new behaviors and identities. This behavior then prompted the three subjects to have sexual intercourse before marriage. The process by which risky behavior leads to sexual intercourse takes place in three stages, namely experience and risky dating behavior, opportunity to have sexual intercourse, and finally sexual intercourse activity.</td>
</tr>
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<td>5</td>
<td>Lian, Cheah Whye Awang, Halimah Thon, Chang Ching Yun, Low Wah Ting, Tong Wen Kaushal, Dev Nath Hassan, Hamizah Mohd (Lian et al., 2020)</td>
<td>2022</td>
<td>Malaysia</td>
<td>1.462 teens, 13-19 years old</td>
<td>Analitic correlational</td>
<td>The prevalence of sexual involvement is 3.6%, the majority are 16-17 years old (58.5%). The mean age at first sexual intercourse was 16.8 ± 1.27 years, with a minimum age of 14 years. Respondent's age, knowledge of SRH, risk behavior, peer risk behavior, negative self-evaluation, cognitive efficiency, perceived lack of motivation, religious beliefs and family support were significantly related to sexual involvement. Logistic regression shows that age, respondent's risk behavior and peer involvement in sexual relations are significant risk factors of sexual involvement whereas strong religious belief is a significant protective factor.</td>
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<td>6</td>
<td>Maulida, Desi Safrida, Safrida (Maulida &amp; Safrida, 2020)</td>
<td>2020</td>
<td>Indonesia</td>
<td>4 mother and 4 teens</td>
<td>Qualitatif study</td>
<td>Lack of attention, busyness and awareness of parents related to education or understanding of premarital sex in adolescents can further strengthen the emergence of deviant behavior in adolescents, including the practice of premarital sex. Understanding of sex and moral education from parents is lacking, then teenagers look for it from various other sources, both from the internet, friends, and the surrounding environment. This results in adolescents interpreting sex information by themselves, thus giving rise to greater curiosity, trying things that are considered to present good value from their friends as teenagers who are up-to-date and literate about today's youth trends, including carrying out violating behavior that is considered brave, such as the practice of premarital sex.</td>
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<td>7</td>
<td>Puspita, Ivana Anggun Agusyvana, Farid Dharminto, (Puspita et al., 2019)</td>
<td>2019</td>
<td>Indonesia</td>
<td>127students of SMK grade XI</td>
<td>Explanatory Research with quantitative cross sectional study</td>
<td>The results of the correlation analysis found that there was no significant relationship between the level of knowledge and sexual behavior, religious understanding and sexual behavior, self-esteem and sexual behavior with a significance value. There is a significant relationship between: attitudes and risky sexual behavior; use of social media with risky sexual behavior; and the role of peers with risky sexual behavior. The variables of attitude, use of social media and the role of peers together have an effect of 84.3% on risky sexual behavior.</td>
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<td>8</td>
<td>Damtie, Yitayish C, Nigus F, Habtamu K, Bereket A, Elisabeth Y, Melaku A, Mastewal A, Bezaawit K, Assefa AA, Aregash Ayele, Fanos Yeshanew. (Damtie et al., 2022)</td>
<td>2022</td>
<td>Ethiopia</td>
<td>32 articles with 18,354 teens</td>
<td>Meta analysis</td>
<td>The pooled prevalence of premarital sex among young people in Ethiopia is 33.59%. Teens who experience peer pressure are three times more likely to have premarital sex than their peers. As shown by the results of the crude analysis, there is a significant relationship between viewing pornography (sex films) and premarital sexual practices. However, after conducting a trim-and-fill analysis, the publication-adjusted ORs showed no significant association between viewing pornography and premarital sex. The proportion of premarital sex among young individuals in Ethiopia remains high. Peer pressure has a statistically significant relationship with premarital sexual practices. However, OR publication bias suggests no significant association between viewing pornography and premarital sex.</td>
</tr>
<tr>
<td>9</td>
<td>Lee, Gyu Young Lee, Da Ye (Lee &amp; Lee, 2020)</td>
<td>2018</td>
<td>Korea</td>
<td>62,000 student of Yonji high school and senior high school</td>
<td>Analsysis secondary data</td>
<td>The results of this study showed that the experience of consuming alcohol increased the likelihood of students engaging in risky sexual behavior by 4.40 and 3.57 times, respectively, while the experience of using drugs increased the risk by 9.42 and 5.00 times, respectively. Personal factors (eg gender and academic achievement) and social environmental factors (eg school type and perceived economic status) were also found to influence adolescent sexual risk behavior, although, not to the same extent as sexual education or sexual health risk behavior.</td>
</tr>
<tr>
<td>10</td>
<td>Appulembang, Yeni Anna Fajar, Nur Alam Tarigan, Angelina Hosana Zefany (Appulembang et al., 2019)</td>
<td>2019</td>
<td>Indonesia</td>
<td>144 student male/female</td>
<td>Study comparative causal</td>
<td>There is no role of family function on adolescent premarital sexual behavior. The role and function of the family as an institution of socialization and affection has undergone changes. This causes disruption of the process of socialization of children in the family.</td>
</tr>
<tr>
<td>11</td>
<td>Jaryyah, Ainun Arliatin, Hartati S. Asrida A (Jaryyah et al., 2022)</td>
<td>2022</td>
<td>Indonesia</td>
<td>6 teens did premarital sex, Parent and Public person 4</td>
<td>Kualitatif</td>
<td>This study shows that the source of information on adolescent knowledge about premarital sex is dominated by peers through stories and discussions among them. This research also shows that the majority of adolescents have premarital sex at home when they are in an empty house without parental supervision and a small proportion are in hotels and boarding houses. The results of the study indicate that parents need to increase supervision of adolescent attitudes and behavior through intensive and quality communication without limiting children's rights to interact with their environment and the need for the role of the Education Office in developing adolescent reproductive health curriculum.</td>
</tr>
<tr>
<td>12</td>
<td>Krugu, John K. Mevissen, Fraukje E.F. Van Breukelen, Gerard Ruiter, Robert A.C. (Krugu et al., 2018)</td>
<td>2018</td>
<td>Ghana</td>
<td>1822 teens, 892 boys and 930 girls</td>
<td>RCT</td>
<td>SPEEK is effective in increasing risk-sex prevention, however, implementing peer-led interventions at the national level will have cost and sustainability implications, and cost-effectiveness should be weighed against teacher-led interventions. The results of the study also showed that the SPEEK program could not change students’ behavioral intentions in using condoms. Evidence shows that it is more difficult to change intentions regarding safe sex, especially intentions to use condoms.</td>
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<td>No</td>
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<td>Sample</td>
<td>Study Design</td>
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<tr>
<td>13</td>
<td>Šaffa, Gabriel Duda, Pavel Zrzavý, Jan (Šaffa et al., 2022)</td>
<td>2022</td>
<td>Bohemia</td>
<td>128 person of nonindustrial area</td>
<td>Qualitatif Study ethnographic</td>
<td>A society that is intolerant of sex outside of marriage as well as arranged marriages by parents, marital fidelity and parental conflict are identified as possible mechanisms for limiting premarital sex. The results also emphasize the importance of social roles, rather than stereotyped sex roles, as a more useful approach to understanding the evolution of restrictions on premarital sex.</td>
</tr>
<tr>
<td>14</td>
<td>Pavelová, Luboslava Archalousová, Alexandra Sležáková, Zuzana Zrubcová, Dana Solgajová, Andrea Spáčílová, Zuzana Kríšňová, Erika Slamková, Alica (Pavelová et al., 2021)</td>
<td>2021</td>
<td>Slovakia</td>
<td>438 teens, 12-15 years old (186 boys dan 252 girl)</td>
<td>Quasy experiment</td>
<td>The results showed that there were no differences regarding the sources of information about sexuality between female and male adolescents. Significant differences exist in who is competent to provide sexual education, female adolescents prefer sexologists, and practitioners, teachers are considered incompetent. In Slovakia, the position of school nurse, whose job description could also be that of a sex education provider, is not defined. Research has found that girls and boys have the most public information about sexuality from their parents and friends. They don't often get information from teachers, but in the future they will be interested in talking to teachers in this area as well. Peers and the mass media are important sources of information for sexually active adolescents, in contrast to adolescents who do not have sexual experience. Important sources of information are teachers and parents.</td>
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</table>

**Interpersonal factors related to adolescent sexual behavior**

Peer involvement in sexual relations is a significant risk factor for sexual involvement. The findings indicated that the predictors of sexual involvement were age, respondent’s risky behavior, and peer involvement in sex. Teenagers are considered capable enough to determine their attitude every time they do something. In fact, it is common for teenagers to be unstable, easily influenced by things that are not necessarily good, easy to imitate from those who are considered a reference group such as peers, and tend to want to try new things based on the results of a cursory observation. (Siraj et al., 2021).

**Social environmental factors related to adolescent sexual behavior**

Predisposing and protective factors for risky sexual behavior, most are due to factors leading to risk, and others are related to protective influences. These factors are social environmental factors, economic activity, insecurity, the tourism industry, school environmental factors including those who are still in school and students dropping out. These factors coexist or influence each other at various ecological levels (Ssewanyana et al., 2018). Strong religious beliefs are a significant protective factor for adolescents in preventing risky sex.

**Individual factors related to adolescent sexual behavior**

The results of a literature search on age, knowledge of reproductive health, negative self-evaluation, cognitive efficiency, perception, lack of motivation, religious beliefs and use of social media are significantly related to sexual involvement. The age range of teenagers engaging in risky sexual behavior is around 15-16 years (Oktriyanto & Alfiasari, 2019; Srahbzu & Tirfeneh, 2020). Logistic regression shows that the respondent's age and risk behavior are significant risk factors of sexual involvement whereas strong religious belief is a significant protective factor (Lian et al., 2020). Individual factors include indifference, coping and biological responses, behavioral problems,
problems negotiating for safe sex. Personal resources such as self-efficacy can encourage adolescents to communicate and negotiate safer sexual practices with their partners (Masa et al., 2020). Teenagers who frequently use social media (social applications/networks) have greater opportunities for all sexting activities. Sexters are more likely to have only penetrative sex (oral, vaginal, and anal sex). Half of the participants reported parental access to social media profiles. Female participants had a higher chance of parental access to online profiles, and having discussions for that access. They discuss about privacy settings. Opportunities for risky sexual behavior are lower in the use of SMS. The use of social media with sexting is associated with an increase in all types of sexual behavior, where sexting itself is associated with life and sexual partners (Romo et al., 2017).

**Family factors related to adolescent sexual behavior**

Family factors include family welfare, closeness of parents, communication between parents and adolescents. The results of another study stated that negative communication between parents and adolescents had a 59.3% percentage risk of supporting adolescents to have premarital sex. Gender is significantly related to parent-adolescent communication (Widyatuti et al., 2018a). Sexual communication between adolescents and caregivers influences adolescents’ sexual behavior. It is believed that low adolescent-caregiver communication in Unguja has something to do with an increase in risky sexual behavior among adolescents. Topics rarely discussed with teenagers are safer sex and contraceptive use (Seif et al., 2018). Parental involvement with adolescents in discussing sexuality issues can also be seen from the ease with which parents can access their child's social media. Parent-child discussions about privacy settings are protective of the child. Parents should be aware of the influence of social media on adolescent sexual behavior. The results showed that half of the participants reported that parents had access to their child's social media profiles. Female participants were higher in providing opportunities for parents to access online profiles, conduct discussions for access and privacy settings on their social media. They discuss about privacy settings. Social media makes it easy for teenagers to do various things related to sexual behavior. The use of social media for sexting is reported to be associated with an increase in all types of sexual behavior. Sexting is also associated with life and sexual partners in the present (Romo et al., 2017).

**DISCUSSION**

The results of the study state that the use of social media is one thing that significantly influences adolescent sexual behavior. Considering that the world has just been freed from the pandemic period which forced all activities to be carried out at home, and mostly done online. Increasing access to internet use risks increasing access to pornographic content by adolescents. Efforts to prevent adolescent sexual behavior can be started by strengthening comprehensive sexual health education and the importance of religious belief at both the school and community levels to reach all adolescent age groups, including those who are no longer in school. Nurses can follow up in the form of health counseling on how to maintain good communication with adolescents. Communication must be aligned with the developmental tasks of adolescents. Lack of attention and awareness of parents related to education or understanding of premarital sex in adolescents can further strengthen the emergence of deviant behavior in adolescents, including the practice of premarital sex (Maulida & Safrida, 2020). This is because many teenagers who have not or are not even equipped with an understanding of sex and moral education from their parents then look for it from various sources, both from the internet, friends and the surrounding environment. Parent-child communication about sexual issues in rural communities is limited to messages warning against pregnancy. It is also loaded with cultural idioms which are not well explained. The school sexual health curriculum also fails to adequately equip
youth to make informed decisions about sexual matters (Mpondo et al., 2018).

The role of parents is also very important, especially when the Covid-19 pandemic hit, teenagers who usually prefer to be with their peers, they also inevitably have to always be with their families at home. However, the busyness of parents in meeting economic needs which are increasingly difficult during the pandemic requires parents to find ways to solve family problems. The busyness of parents is also one of the reasons for not conveying a specific understanding of sex to children. Most parents tend to give choices to teenagers in behaving with a warning that they must still do positive things and as long as they are not considered detrimental. All of this opens up opportunities for adolescents to receive inaccurate information, to access the internet more to fulfill their curiosity, as a result, adolescents interpret sex information by themselves. Parent-adolescent discussions about privacy settings in terms of using social media must make it clear to teenagers that the intent and purpose is to protect them. Parents should be aware of the influence of social media on sexual behavior and discuss restrictions so that their teen’s activities outside the home are monitored (Romo et al., 2017).

Greater curiosity also makes teenagers try things that they think will bring more value than their friends as teenagers who are up-to-date and follow today's youth trends, including committing violating behavior that is considered brave, such as sexual practices. Premarital. Peer influence is positively correlated with risk-taking behavior in adolescents. Adolescents who are highly aware of the behavior and activities of their peers are more likely to participate in risky activities. They justify their own behavior by using their perceptions of their peers' participation in risky behavior (Siraj et al., 2021).

Nurses can also create health promotion programs on parent-adolescent communication topics (Widyatutti et al., 2018a). Peers and the social media are important sources of information for sexually active adolescents, in contrast to adolescents who have no sexual experience, important sources of information are teachers and parents. Girls are more receptive to school nurses as a source of information than boys for sex education purposes (Pavelová et al., 2021). The results of this research can be an illustration of who is most suitable in providing sexual reproductive health education to adolescents, whether from school nurses, psychologists, parents, or teachers. The results of the study show that encouraging good relationships with adults at school as well as providing specific career support at school can assist adolescents not only in preventing involvement with risky behavior but also in the transition out of engaging in risky behavior. (Animosa et al., 2018). The success of a program must be supported by funding, staff resources, and community attitudes so that the program can be sustainable. The form of intervention that will be implemented as an effort to prevent adolescent sexual behavior in further research must be easy to implement in the field, acceptable to all groups, and with efficiency in funding.

The programs that have been studied to reduce the incidence of risky sexual behavior in adolescents are SBHC and SPEEK. Studies show students with access to SBHC are more likely to receive reproductive health information from care providers, be screened for STDs, receive pregnancy and disease prevention care, and receive and use contraception at their last sexual encounter. Studies also show lower pregnancy rates in schools with SBHC, and reduced rates of STDs in adolescents (McCann et al., 2020). Peer counseling services, sex education, and behavior change communication should be strengthened to address factors associated with premarital sexual practices. It is necessary to strengthen comprehensive sexual health education and the importance of religious belief both at the school and community levels to reach all adolescent age groups, including those who are no longer in school (Widyatutti et al., 2018b).

Adolescents who have traditionally been classed as "bad boys," think of themselves at some point in the past, can and do change if
given the right support. It highlights some very important aspects of the experience of today's youth living in high-risk urban settings. Factors of parental support, peer influence, and school support are factors that are considered as important assets that influence adolescents in sexual behavior. The results show that encouraging good relationships with adults at school as well as providing specific career support at school can help adolescents not only prevent involvement with risky behavior but also in the transition out of engaging in risky behavior. Research has also found that adolescents perceive their environment as a source of motivation, often portrayed with strong emotions, and help adolescents make positive behavioral transitions. (Animosa et al., 2018).

CONCLUSIONS

The factors are grouped into 4 major groups. Interpersonal factors (the role of peers), social environmental factors (economic activities, tourist interests, social norms), individual factors (biological responses, ignorance, knowledge, lack of information, religious understanding, attitudes, self-esteem, motivation, use of social media), family factors (social economy, closeness of parents, communication between parents and children). The study used a systematic review method, which analyzes the results of research that has been carried out by other researchers, various research designs used, thus allowing for errors in perceiving research results.

REFERENCES


Widyatuti, Hafilah Shabrina, C., & Yuni Nursasi, A. (2018a). Correlation between parent-adolescent communication and adolescents’ premarital sex risk. Enfermeria Clinica,