



The Effect of Gender Equality Perspective Sexual Education on Self-Efficacy as an Effort to Prevent Sexual Violence in Adolescents at SMAN 1 Gorontalo

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ABSTRACT

Sexual violence is a sexual act that is carried out forcefully and can happen to anyone, including teenagers as a vulnerable group. The lack of gender-based sexual education in schools leads to low knowledge about sexual violence and gender equality, resulting in an impact on self-efficacy and high cases of sexual violence in adolescents. This study aims to determine the influence of sexual education from a gender equality perspective on self-efficacy as an effort to prevent sexual violence in adolescents at SMAN 1 Gorontalo. The study used a quantitative approach with a One Group pre-test and post-test design and involved 65 respondents selected through the Proportionate Stratified Random Sampling technique. The research instrument was in the form of a questionnaire on self-efficacy of sexual violence prevention efforts. The results of the study showed that there were differences before and after being given sexual education from a gender equality perspective about increasing self-efficacy as an effort to prevent sexual violence, the results obtained were $p=0,000 < \alpha=0,05$. In conclusion, there was a significant influence before and after being given sexual education from a gender equality perspective on self-efficacy as an effort to prevent sexual violence in adolescents at SMAN 1 Gorontalo so that it was needed Integrating gender equality-based sexual education in school health promotion programs, health agencies, especially nursing to develop sexual violence prevention programs in the school environment

INTRODUCTION

Sexual violence is any form of sexual act that is carried out by force by anyone against the victim, regardless of the relationship and the situation that occurs. This includes rape as a form of forced penetration of intimate organs using limbs or other objects (World Health Organization, 2014). Sexual violence is any form of action that degrades, insults, or attacks a person's body related to sexual desire and reproduction that is carried out forcibly and against the wishes of the victim (Awaru & Ahmad, 2023).

Global data shows that 1 in 3 (30%) women experience physical and/or sexual violence from a partner or non-partner throughout their lives (WHO, 2024). More than 370 million women have experienced sexual violence as children, with a prevalence of 1 in 8 girls and 1 in 11 boys experiencing sexual violence in childhood. The majority of sexual violence against children occurs in adolescence, with a significant increase at the age of 14-17 years (United Nations Children's Fund, 2024).

Sexual violence in Indonesia has also reached alarming levels and requires serious attention from various parties. This situation is even more worrying when referring to the results of data from the National Commission on Anti-Violence against Women and case reporting data from the 2024 Annual Record partners, the most reported is sexual violence with a percentage (26.94%) with 17,305 cases (National Commission on Anti-Violence Against Women, 2025).

Gorontalo Province is not immune to the problem of sexual violence. Data from the Gorontalo Provincial Women's Empowerment and Child Protection Office (PPPA) shows that cases of sexual violence

are still a significant part with a total of 257 cases of sexual violence against women and children in the 2023-2024 period, with Gorontalo City recording the highest number of 33 cases. It is recorded that until May 2025, sexual violence continues to threaten the safety of women and children in various districts/cities with a total of 79 cases of sexual violence, especially in Gorontalo City which consistently occupies the highest position with 29 cases.

The high prevalence of sexual violence certainly has a serious impact on its victims. Individuals who are victims of sexual violence can face a variety of psychological problems such as depression, excessive fear, nightmares, and prolonged suspicion of others. Psychologically, they experience mental distress, depression, psychological trauma, feelings of guilt and self-blame, fear of social interactions, flashbacks of traumatic events, sleep disorders such as nightmares and insomnia, fear of things that remind them of the event (such as certain objects, smells, or locations), problems related to self-esteem, and the risk of unwanted pregnancy (Affandi et al., 2020).

This worrying impact is even more serious considering that sexual violence can happen to anyone. Sexual violence can occur regardless of age, gender, status, or education, whether in private, public, digital, or educational spaces. However, adolescents are the most vulnerable group. This is based on data from the Ministry of Women's Empowerment and Child Protection (KPPPA) in 2025, there will be a significant increase in cases of sexual violence with adolescents aged 13-17 years who are the most frequent victims (Online Information System for the Protection of Women and Children, 2025).

This vulnerability of adolescents to sexual violence does not occur without cause. One of the main factors that make adolescents vulnerable to becoming victims of sexual violence is the low level of sexual literacy regarding gender. This is in line with Schneider & Hirsch (2020) who in their journal say that unequal gender access to power is a fundamental cause of sexual violence and the understanding of unfair gender relations as a fundamental structural driver of sexual violence.

This gender inequality then puts women in a more vulnerable position. Gender inequality causes women to be victims of sexual violence more often. The stereotype that men are more aggressive or sexually dominant causes men to feel entitled to women's attention or bodies, which can lead to sexual harassment and assault. The existence of character differences with the assumption that women are weak is interpreted as a reason to be treated arbitrarily, thus giving birth to acts of violence (Afandi, 2019).

The lack of gender-based sexual education in schools is one of the factors that causes adolescents to lack knowledge about sexual violence and gender equality which contributes to the high rate of sexual violence in adolescents. Sexual education provided in schools is still limited and often does not cover important aspects such as consent, gender equality, and prevention of sexual violence. Existing sexual education tends to focus on the biological aspects of reproduction only, without discussing psychosocial, emotional, and sexual rights aspects (Amanda & Adhari, 2024).

Sexual education or education has an important role in preventing sexual violence, as it is designed to equip adolescents with knowledge, skills, attitudes, and values that support them in forming a positive view of sexuality (Banurea & Abidjulu, 2020). Thus, this education also contributes to increasing self-efficacy which is self-confidence in rejecting situations that have the potential to lead to sexual violence. The ability to say "no", even when faced with pressure or threats from others, thus becoming a concrete form of prevention of sexual violence that adolescents can have (Lismayanti et al., 2021).

Self-efficacy with all the elements contained in it affects risky behaviors, including those that lead to sexual violence. This is in line with Tantowi et al., (2025) who in their journal said that the level of self-efficacy is negatively related to risky behavior, where the higher the self-efficacy, the lower the risky behavior. Low self-efficacy is characterized by feelings of anxiety and inconfidence in one's abilities, so that in difficult situations individuals tend to reduce effort or give up, and are more susceptible to negative environmental influences. Thus it is important to increase self-efficacy in a person. Increasing self-efficacy can be done through education, this is evidenced in the research of Prihastuty et al., (2024) which found a significant increase in self-efficacy after being given psychoeducation on self-efficacy and stress management.

Based on an initial survey conducted at SMAN 1 Gorontalo, some students have never received education about gender equality, only reproductive health and prevention of sexually transmitted diseases. From a brief interview with 15 students, 7 of them admitted to having experienced sexual violence: 2 students received inappropriate touching on their thighs and legs by teachers, 3 students received calls "sexy" and comments about breast size, and the rest experienced cat calling from unknown people. Even though 2 students resisted, they did not report it because they were afraid and let the incident pass (it happened in junior high school). Other students also let the name inappropriate for fear of being considered excessive. Some students are even still in doubt whether their experience includes sexual violence or not. This condition shows a lack of adolescent knowledge about sexual violence and low self-efficacy in efforts to prevent it.

Some studies have addressed sexual education and sexual violence prevention separately, but most have not integrated gender equality perspectives in sexual violence prevention analysis. Therefore, this study is important to fill this gap by examining the role of gender equality-based sexual education as a strategy in increasing adolescent self-efficacy in preventing sexual violence. Based on these considerations, the researcher

raised the title: "The Influence of Sexual Education from a Gender Equality Perspective on Self-Efficacy in Efforts to Prevent Sexual Violence in Adolescents."

RESEARCH METHODS

This research has been carried out at SMAN 1 Gorontalo on November 3, 2025. The type of quantitative research uses a pre-experimental research design using a One Group pre-test and post-test design. The sampling technique in this study uses probability sampling with a sample of 65 respondents which will then be taken by Proportionate Stratified Random Sampling or random proportional allocation in each class and the selection of the number of representative samples from each class is randomly selected. This research instrument uses the Self-Efficacy Questionnaire for Sexual Violence Prevention Efforts to see the level of self-efficacy in adolescents, especially in students at SMAN 1 Gorontalo as an effort to prevent sexual violence.

RESEARCH RESULTS

Univariate Analysis

Characteristics of Respondents Based on Demographic Data

Table 1. Characteristics of respondents by level of Gender

Yes	Classification of Adolescents	(n)	(%)
1	Male	26	40
2	Women	39	60
Total		65	100

Source: Primary Data 2025

Based on the table above, data was obtained that most of the respondents were female with a total of 39 respondents (60%) and men only 26 respondents (40%).

Table 2. Characteristics of respondents by age

Yes	Age	(n)	(%)
1	years	1	2
2	years	5	8
3	years	45	69
4	years old	14	22
Total		65	100

Source: Primary Data 2025

Based on the table above, it can be seen that based on the age of 65 respondents, most of them are at the age of 15 years old at 69% or as many as 45 people then 22% or as many as 14 people with the age of 16 years and only a small number of those who are at the age of 14 years with a total of 5 students (8%) and the age of 13 years with a number of 1 student (2%).

Table 3. Characteristics of self-efficacy before and after being given sexual education from a gender equality perspective

NO	Self-Efficacy	Before Education		After Education	
		(n)	%	(n)	%
1.	Very Not Good Not Good Good Excellent	0	0	0	0
2.		19	29	0	0
3.		44	68	27	42
4.		2	3	38	58
TOTAL		65	100	65	100

Source: Primary Data 2025

Based on the table above, it can be seen that the self-efficacy of students or respondents as a prevention of sexual violence before being given sexual education from a gender equality perspective is dominated by the self-efficacy of the good category, which is 68% or as many as 44 people, then the bad category is 29% or as many as 19 people, and the very good category is 3% or as many as 2 people.

The univariate analysis of the self-efficacy variable as an effort to prevent sexual violence after being given sexual education from the perspective of gender equality was dominated by self-efficacy in the very good category, which was 58% or as many as 38 students, and the good category, which was 42% or as many as 27 people.

Table 4. Bivariate Analysis

Variable	Pre-Test	Post-Test	P Value
	Mean±SD	Mean±SD	
Self-efficacy as an effort to prevent sexual violence	64.87 ± 11.078	78.66 ± 5,893	0,000

Source: Primary Data 2025

Based on the table above through the Paired samples T-Test, it is proven that there is a significant influence before and after being given sexual education from a gender equality perspective on increasing self-efficacy as an effort to prevent sexual violence. Post-test data (M=78.66; SD=5,893) had a greater average than the pretest data (M=64.87; SD=11.078). With the results of the Paired samples T-Test, the value of p = 0.000 (<0.05) was obtained. Thus, it can be said that there is an influence of sexual education from a gender equality perspective on increasing self-efficacy as an effort to prevent sexual violence.

DISCUSSION

Self-Efficacy as an Effort to Prevent Sexual Violence in Adolescents at SMAN 1 Gorontalo Before Being Given Sexual Education from a Gender Equality Perspective

The results of the research obtained based on table 4.3 are the awareness of respondents of SMA Negeri 1 Gorontalo before being given sexual education from a gender equality perspective dominated by good efficacy, which is 68% or as many as 44 people, then the bad category is 29% or as many as 19 people and the very good category is 3% or as many as 2 people.

The above results prove that the category of self-efficacy of student sexual violence prevention efforts still varies. Most of the students were in the good category which shows that the majority of SMAN 1 Gorontalo students have a basic understanding of sexual violence prevention and enough beliefs to take some preventive measures. However, the "good" category indicates that there is still room for improvement towards the "excellent" category.

On the Difficulty (Magnitude) dimension, respondents in the good category generally gave an answer of Yes (S) to the majority of positive statements, indicating moderate confidence in the ability to protect themselves. However, doubts and inconsistencies arise when faced with more complex and threatening situations, such as helping a friend who is forced to undress or facing a potentially harmful invitation. Although they are confident they can protect themselves in relatively simple situations, their confidence decreases significantly when faced with situations that require greater courage or quick action. This pattern suggests that respondents in the good category have basic beliefs but have not yet reached the optimal level of confidence necessary to act decisively and quickly in complex emergency situations.

This may be because the respondents in the good category generally have access to information about sexual violence and how to prevent it, usually from sexual violence prevention education directly from several organizations or through social media, but the information may not be completely comprehensive or in-depth. The information obtained may be more theoretical and provide less practical guidance on how to act in The real situation. According to research by Widiyastuti & Hakiki, (2022) in "The Influence of Reproductive Health Education on Adolescents' Knowledge and Attitudes about Reproductive Health", Indonesian adolescents generally have fairly good knowledge about reproductive health theoretically, but have difficulty applying this knowledge in concrete situations due to a lack of skills practice and role-playing.

In the Generality dimension, respondents in the good category showed a fairly good understanding of various forms of sexual violence. They mostly reject statements about risky behaviors such as following invitations to quiet places or being passive when harassed, showing awareness of danger. However, inconsistencies arise in situations that involve conflict with social norms, such as refusing gifts from strangers or resolutely refusing physical coercion. This conflict occurs because of the consideration of politeness norms, feeling uncomfortable refusing to give or afraid of being considered impolite which is contrary to the awareness of self-security. This shows that even though they have knowledge of risky situations, the application of that knowledge in complex social contexts is still hampered by the pressures of cultural norms.

This finding can be caused by Indonesia's socio-cultural context which is still strongly influenced by traditional values and gender norms that can be an inhibiting factor in the formation of optimal self-efficacy.

According to research by Donnell et al., (2020) in "Premarital sex and pregnancy in Greater Jakarta" published in *Genus, Journal Of Population Sciences*", explains that in the Indonesian context, social norms and religious values create a strong stigma against premarital sex, especially for women, which impacts the reporting of such behaviors with men more likely to report premarital sexual experiences than women who face greater social pressure and severe consequences. For female respondents in the good category, these gender norms can create an internal conflict between the desire to protect oneself (which requires an assertive attitude) and social expectations to be gentle, non-confrontational, and always take care of the feelings of others.

In the Strength dimension, respondents in the good category showed significant variation in beliefs to act. They generally show trust in parental support and are willing to report unpleasant events to the family. However, considerable variation in answers emerged related to psychological barriers to reporting, where some respondents admitted to feeling afraid or embarrassed, especially when having to tell teachers or authority figures outside the family. This indicates that there are psychological and social barriers that prevent them from consistently seeking help, even though they are aware of the importance of it. This pattern shows a gap between knowing and doing, where an understanding of the importance of reporting has not yet been fully translated into the belief to actually do so.

The next finding was that 29% or as many as 19 students were included in the category of poor efficacy. In this finding, it was found that 19 students with poor self-efficacy consisted of 14 males and 5 females. Adolescent boys tend to be less easily conformed because they are often portrayed as independent, rational, and logical individuals, so this stereotype makes them reluctant to admit vulnerability or ask for help and makes men feel ashamed if they admit to being a victim (Saiful, 2023). This is in line with the results of the student questionnaire on the dimension of difficulty level (Magnitude), respondents in the bad category showed low confidence in dealing with situations that have the potential to lead to sexual violence. They tend to give negative answers to statements about the ability to avoid lonely places, help themselves from inappropriate touches, or help a friend who is threatened. This inconfidence indicates that they feel they lack control or ability to deal with risky situations, even in the most basic levels of difficulty. This pattern indicates the absence of the foundation of self-confidence necessary to act protectively.

Poor self-efficacy dominated by the male sex can also be influenced by masculinity and gender expectations that indirectly teach boys and adolescents that they cannot be victims, causing them to worry about the opinions of those who will consider them homosexual and the fact that they cannot prevent such sexual violence (Ahnaf & Hakim, 2025). This was found based on a questionnaire on the dimension of general circumstances (Generality), respondents in the poor category showed limited understanding of various forms and situations of sexual violence. They are inconsistent in recognizing danger in various contexts, such as having difficulty distinguishing risky situations from safe ones, or hesitating in rejecting suspicious invitations. These inconsistencies indicate that they do not yet have adequate generalization capabilities to apply the principles of sexual violence prevention to a wide range of situations. As a result, they are vulnerable because they are unable to anticipate or recognize danger signs in different contexts.

Another factor that can cause poor self-efficacy in this finding is the absence or lack of a comprehensive sexual education program, one of which includes gender equality in schools, can be one of the causes of low self-efficacy of students in protecting themselves from sexual violence. A meta-analysis by Walsh et al., (2018) of school-based sexual violence prevention education programs found that overall sexual violence prevention education programs were effective in increasing children's knowledge of violence, self-efficacy and the use of protective behaviors (Walsh et al., 2018). This condition puts them at a higher risk of becoming a victim of sexual violence due to a lack of ability to recognize danger, resist pressure, or seek help when needed.

This was found based on the results of the questionnaire on the Strength dimension, respondents in the bad category showed significant resistance. Their response patterns show a reluctance to report the incident to parents or teachers, as well as admitting fear and embarrassment to talk about things they don't like or bother them. This pattern indicates that they are not only less confident in their ability to protect themselves, but are also hampered by the fear of rejection and the shame of being considered weak, thus putting them in a very vulnerable position of not having a mechanism to seek help even when faced with dangerous situations.

The next finding was that students who were in the category of self-efficacy were very good by only 3% or as many as 2 people. Respondents who have excellent self-efficacy tend to come from a group of students who are actively involved in health education activities because they provide important insights into the factors that contribute to optimal self-efficacy. Feriyanti, (2025) in his research on the effectiveness of experiential learning methods in increasing knowledge and self-efficacy of mental health in high school students in Balikpapan City found that students who are actively involved in health learning activities not only become more active in the learning process, but also absorb more information and have high critical thinking skills. The study showed that active participation was positively correlated with higher self-efficacy.

In the dimension of difficulty level (Magnitude), both respondents showed very high confidence in dealing with various levels of difficulty in situations that have the potential to lead to sexual violence. They gave a Strongly Agree (SS) or Agree (S) answer to all positive statement items, demonstrated strong

confidence in the ability to help a threatened friend, avoid risky places, and protect themselves from inappropriate touch. This belief indicates that they not only feel capable of dealing with simple situations, but also complex situations that require quick and decisive action.

In the generality dimension, the respondents in the category showed a comprehensive understanding of the various forms and situations of sexual violence. They consistently reject (Strongly Disapprove/STS) statements that describe risky behaviors such as following invitations to quiet places or being passive when harassed, while strongly approving (SS) protective measures such as yelling for help and refusing inappropriate touching. This consistent response pattern shows good generalization ability in applying the principle of prevention of sexual violence to a variety of contexts, not limited to just one type of threat.

In the dimension of strength, both respondents showed high determination in taking preventive and self-protection measures. They show a strong belief to report the incident to their parents and have the courage to physically resist when forced into dangerous situations. The consistency of positive answers in this dimension indicates that they not only have knowledge of what should be done, but also have a strong internal belief to actually act in real-life situations, without being affected by the fear or shame that generally prevents victims from resisting or reporting.

UNESCO., (2018) in "International Technical Guidance on Sexuality Education" also emphasizes that comprehensive sexuality education that covers biological, psychological, social, human rights, and gender equality aspects has proven effective in improving adolescents' knowledge, attitudes, and skills in protecting themselves from sexual violence. Respondents with excellent efficacy are likely to have been exposed to accurate and comprehensive information about reproductive health, consent, personal boundaries, and their rights to their own bodies.

Self-Efficacy as an Effort to Prevent Sexual Violence in Adolescents at SMAN 1 Gorontalo After Being Given Sexual Education from a Gender Equality Perspective

After being given sexual education on gender equality, then given a post-test regarding self-efficacy in students who have been given education, it was found that self-efficacy as an effort to prevent sexual violence in students at SMAN 1 Gorontalo was dominated by very good self-efficacy, which was 58% or as many as 38 people, and the good category, namely 42% or as many as 27 people.

The majority of respondents with very good self-efficacy came from respondents who previously had good self-efficacy. This can be influenced by the increase in self-efficacy that occurs due to the sexual education provided. Vocational education in the form of a gender equality perspective can help prevent sexual violence. Respondents with the self-efficacy category were very good at showing strong and consistent confidence in all dimensions of self-efficacy, namely the level of difficulty (magnitude), generality (generality), and strength (strength). In the Magnitude dimension, respondents with the excellent category showed high self-efficacy strength, which is reflected in their confidence in dealing with various levels of risky situations. Students feel able to take preventive measures, protect themselves from the threat of sexual violence, and help others in dangerous conditions. These findings show that students are not only confident in dealing with simple situations, but also have courage and determination in responding to more complex and risky situations.

In the generality dimension, respondents with the excellent category showed strong generalization ability of self-efficacy in dealing with various forms and contexts of sexual violence. Students are able to apply a consistent attitude of rejection and self-protection, both in situations involving strangers and in close social relationships. These findings show that sexual education from a gender equality perspective plays a role in building an understanding that sexual violence can occur in a variety of situations and by anyone, so a firm response is needed without being tied to norms of politeness or relationship hierarchy.

In the strength dimension, the respondents in the very good category showed high determination in seeking help and protecting themselves. Positive and consistent responses to reporting items to parents, teachers, as well as resistance to acts of violence show that students not only have knowledge, but also the courage and conviction to act. This is in line with the findings of the meta-analysis of Walsh et al. (2018) which found that school-based sexual violence prevention education programs were overall effective in increasing children's knowledge of violence, self-efficacy, and the use of protective behaviors (Walsh et al., 2018). The results of this study prove that comprehensive sexual education that contains a gender equality perspective is able to have a substantial positive impact on students' ability to protect themselves from sexual violence.

Although most of them are dominated by very good self-efficacy, there are still 42% or 27 students who have not reached the very good category. This condition suggests that although gender equality perspective sexual education interventions delivered in the classroom have been successful in significantly improving self-efficacy, there are variations in individual responses to the interventions provided. Respondents with good self-efficacy came from respondents who had previously had poor self-efficacy and according to Bandura's theory of self-efficacy, the formation of strong self-confidence requires four main sources: mastery experience, vicarious experience, verbal persuasion, and physiological and emotional conditions. This

variation in the level of self-efficacy can be influenced by differences in individual characteristics of students, the speed of internalization of knowledge and skills, previous personal experience, and the level of basic confidence that each student has.

Students who were still in the good efficacy category had shown a positive improvement from the previous condition, which showed that they had sufficient knowledge and self-confidence to protect themselves from sexual violence, although it was not yet optimal as the excellent category.

In the magnitude dimension, respondents in the good category generally answered Yes (S) to positive statements, but doubts were still found in situations that were considered more risky, such as helping a friend in the event of physical coercion or facing direct threats from strangers. This shows that their beliefs are still moderate and not fully stable when faced with high situational pressures.

In the generality dimension, respondents in the good category showed a fairly good understanding of the forms of sexual violence, characterized by rejection of invitations to lonely places and physical violence behavior. However, inconsistencies were still found in items related to refusal of giving or invitations wrapped in norms of politeness. This indicates that although sexuality education has increased risk awareness, the internalization of gender equality-based assertiveness values still needs strengthening, especially in complex social contexts.

In the strength dimension, respondents in the good category showed confidence in the support of parents and teachers, but some still admitted to being afraid or embarrassed to report unpleasant events. This pattern reflects the knowing-doing gap. In line with Abidah et al. (2025), psychological barriers and social pressure are still factors that affect the courage of adolescents, especially women, in asserting their rights and limitations.

In the category of good self-efficacy after providing sexual education from a gender equality perspective, respondents not only came from students who previously had poor self-efficacy, but also from students who had been in the category of good self-efficacy from the beginning. It was found that as many as 7 respondents were still in the same self-efficacy. Four people are male and three are female. This condition can be influenced by differences in psychological readiness and personal experience of each student in interpreting the material given. Some students may have had a good enough understanding and self-confidence prior to the intervention, so the improvement that occurred has not been significant enough to push them into a higher category (Roorda et al., 2021).

For the 4 male respondents who remained in the good category, internalization of the concept that "asking for help is a sign of weakness" or "men should be able to solve problems on their own" may still be so strong, that even though they cognitively understand the importance of reporting and seeking help, the confidence to actually do so has not increased significantly. They are often portrayed as independent, rational, and logical individuals, so this stereotype makes them reluctant to admit vulnerability or ask for help and makes men feel ashamed if they admit to being a victim (Saiful, 2023). Similarly, female respondents may still be constrained by femininity norms that emphasize obedience, modesty, and conflict avoidance. These internal conflicts can hinder the increase in self-efficacy from the good to excellent category, since although they understand the importance of assertiveness, their application in a real social context still faces strong psychological obstacles.

These findings also indicate that the time it takes each individual to achieve optimal levels of self-efficacy can vary. Some students may need longer to fully internalize the concepts of gender equality, rights to bodies, and assertive communication skills that have been taught through lectures, case studies, and group discussions. The process of learning and the formation of self-efficacy is a dynamic process and continues to develop along with students' personal experiences and reflections.

Analysis of the Influence of Gender Equality Sexual Education on Self-Efficacy as an Effort to Prevent Sexual Violence in Adolescents at SMAN 1 Gorontalo

Based on statistical tests using the One group pre-experiment test pre-post test design, self-efficacy data before and after being given sexual education from the perspective of gender equality were normally distributed by using the paired test obtained a sig (2-tailed) value of 0.000, the significance value was smaller than the alpha value used (0.05) so that H₀ was rejected. It was concluded that there is an influence of sexual education from a gender equality perspective on self-efficacy as an effort to prevent sexual violence in adolescents at SMAN 1 Gorontalo

The results of the study conducted on 65 respondents, before being given sexual education from the perspective of gender equality, good efficacy was obtained, which was 68% or as many as 44 people, then the bad category was 29% or as many as 19 people and the very good category was 3% or as many as 2 people. Meanwhile, the results obtained after being given an intervention in the form of sexual education from a gender equality perspective were obtained by very good self-efficacy, which was 58% or as many as 38 people and the good category, which was 42% or as many as 27 people. It can be concluded that self-efficacy as an effort to prevent sexual violence before and after the intervention was given there was an increase in self-efficacy where self-efficacy was very good from 3% to 58%, self-efficacy was good from 68% to 42% and

poor self-efficacy from 29% dropped to none after sexual education intervention from a gender equality perspective, meaning that as many as 19 students with poor efficacy experienced an increase so that there was no longer a bad efficacy, and the previous one as many as 44 people with self-efficacy to 27 people with an increase in very good efficacy which was previously 2 people to 38 people.

Before sexual education from a gender equality perspective was given, the results of the study in table 4.3 showed that only a small percentage of students were in very good self-efficacy, which was 3% or as many as 2 people. These students tend to come from groups of students who are actively involved in health education activities as they provide important insights into the factors that contribute to optimal self-efficacy. This finding is in line with research from Feriyanti, (2025) who said that students who are actively involved in health learning activities not only become more active in the learning process, but also absorb more information and have high critical thinking skills. The study showed that active participation was positively correlated with higher self-efficacy.

In contrast, the majority of respondents (68%) are at a good level of self-efficacy because they have basic beliefs but have not yet reached the optimal level of confidence needed to act decisively and quickly in an emergency situation. This could be because well-meaning respondents generally have access to information about sexual violence and how to prevent it, but this information may not be completely comprehensive or in-depth. The information obtained may be more theoretical and provide less practical guidance on how to act in real-life situations. According to research by Widiyastuti & Hakiki, (2022) in "The Influence of Reproductive Health Education on Adolescents' Knowledge and Attitudes about Reproductive Health", Indonesian adolescents generally have fairly good knowledge about reproductive health theoretically, but have difficulty applying this knowledge in concrete situations due to a lack of skills practice and role-playing.

Another finding that self-efficacy before sexual education was given was that 29% showed poor self-efficacy. This is because students with good efficacy may already have theoretical knowledge of sexual violence, but are not yet fully confident in their ability to apply that knowledge in real-world situations, especially in complex or stressful contexts. Other factors that also affect the poor self-efficacy found in this study tend to be caused by the absence or lack of comprehensive sexual education programs, one of which includes equality. This is supported by a meta-analysis of research by Walsh et al., (2018) on school-based sexual violence prevention education programs found that sexual violence prevention education programs were overall effective in increasing children's knowledge about violence, self-efficacy, and the use of protective behaviors (Walsh et al., 2018).

After the implementation of sexual education from a gender equality perspective, the results of the post test in table 4.4 showed a significant increase in self-efficacy as an effort to prevent sexual violence in adolescents at SMAN 1 Gorontalo. As many as 58% of students (38 people) and 42% (27 people) were at good self-efficacy levels and none were at the level of poor self-efficacy and efficacy was very poor. This shows that sexual education that focuses on the perspective of gender equality is effective in increasing self-efficacy in adolescents at SMAN 1 Gorontalo. Providing education on gender equality equips students with the ability to recognize danger, resist pressure, or seek help when needed. The education provided does not only focus on biological or informative aspects, but also discusses issues of gender, power, rights to the body, and assertive communication skills. This approach is in line with the findings that comprehensive sex education programs, one of which discusses gender and power, has much better results in the aspects of reproductive health and violence prevention (Haberland, 2015).

CONCLUSION

Before being given sexual education, the perspective of gender equality on self-efficacy as an effort to prevent sexual violence in adolescents at SMAN 1 Gorontalo, the results of respondents were dominated by self-efficacy, which was 68% or as many as 44 people, then the bad category was 29% or as many as 19 people and the very good category was 3% or as many as 2 people.

After being given sexual education from the perspective of gender equality to self-efficacy as an effort to prevent sexual violence in adolescents at SMAN 1 Gorontalo, the results of the respondents were dominated by very good, namely 58% or as many as 38 students and the good category, namely 42% or as many as 27 people.

There was a significant influence before and after being given sexual education from a gender equality perspective on self-efficacy as an effort to prevent sexual violence in adolescents at SMAN 1 Gorontalo with the results obtained were $p=0.000 < \alpha=0.05$.

ADVICE

This research can be information for health service providers and serve as a basis for the implementation of education to increase knowledge and awareness in preventing sexual violence in adolescents. The benefits for health, especially nursing, are that they can be used as a reference and used to make follow-ups in the school scope.

This research can be an input to further improve health promotion within the school environment, especially about the prevention of sexual violence in adolescents. And it can be used as basic data for further research or consideration to evaluate sexual violence in adolescents, especially students.

It can increase researchers' understanding of the prevention of sexual violence in adolescents, especially students, and increase the knowledge of researchers and can provide information about increasing self-efficacy as a prevention of sexual violence.

This research is expected to be used as a reference for researchers to develop research that will be carried out next.

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