



Adolescent Experience in Performing Sifon Tradition (Post-Circumcision Sex) in the Village of Fatumonas- Middle Amfoang, East Nusa Tenggara

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Abstract

Adolescence is a transition period from childhood to adulthood, with many physical and psychological changes. Physical changes in adolescents are marked by signs of primary sex and symptoms of secondary sex, and psychological changes are characterised by emotional changes and changes in intelligence. The purpose of this study was to explore the experience of adolescents in performing Sifon circumcision. The qualitative research method has an exploratory design and a phenomenological approach. The primary informants were adolescents aged 17-24 with a Sifon circumcision. Supporting informants are Sifon circumcision shamans—data collection techniques through in-depth interviews and observation. Data analysis used phenomenological analysis techniques. The research was conducted from June to August 2023. The research was born in Fatumonas, Central Amfoang, Kupang Regency. The results of the study showed that adolescents perform traditional circumcision without being disturbed or ridiculed by friends so that the face does not look old on both the man and his wife, lack of confidence in doctor's circumcision because it is not neat, and has become a tradition that cannot be lost. Adolescents also do Sifon because they fear the genitals will die / not function. Communication, Information and Education (IEC) regarding reproductive health and free sex language must be carried out on an ongoing basis so that adolescents can be aware and do not have a wrong understanding of Sifon circumcision.

Keywords: Sifon Circumcision; Adolescents; Reproductive Health

Introduction

Adolescence is a transition period from childhood to adulthood, with many physical and psychiatric changes. Primary sex signs characterize physical changes in adolescents, and emotional changes and changes in

intelligence characterize secondary sex signs and psychiatric modifications. As the turmoil of sexuality increases, teens will meet these natural needs in ways they know are obtained from friends, the media, and other sources that are not necessarily true. Teenagers sometimes get caught up in misinformation and environments, leading to risky

premarital sex. The research results Govender D, [1] in South Africa show that adolescent knowledge about pregnancy, sexuality and reproductive health is still very lacking, even about repeated pregnancies. Teens are also not better informed about pregnancy and reproductive health. This shows that social determinants, as well as efforts/methods of delivering information about adolescent sexuality and reproductive health education, are critical.

Reproductive health is a state of complete physical, mental and social well-being, not solely free from disease or disability in all matters related to the reproductive system, as well as its functions and processes. Some infectious diseases that can attack the reproductive organs of adolescents, both men and women, are caused by a lack of attention to these organs. Several factors can cause infection in the reproductive organs, such as laziness to change underwear, free sex, etc. Building a secure sexual identity is an individual's primary developmental goal from childhood to adolescence and the years that follow. During puberty, not only do physiological and anatomical changes occur, but adolescents also become aware of sexual arousal, desire, and function, and adolescents begin to develop self-orientation and interpersonal sexual behavior. Several internal and external factors, biological and environmental factors, including mental disorders, can influence emerging sexuality. Developmental disorders that appear very early in life can affect the socialisation of adolescents and, as such, are essential for the development of sexuality [2].

Sexuality in human beings is not only a basic need but also a significant right to enrich interpersonal relationships, providing mutual satisfaction and pleasure. Improving self-esteem contributes to quality of life and overall physical and mental health. However, if it is not controlled, it can be a problem [3]. Not infrequently, teenagers think that premarital sex behavior is commonplace, even though premarital sex behavior causes more adverse effects on the lives and dignity of adolescents. Adverse effects can occur, namely unwanted pregnancy, increasing maternal and infant mortality, Risk of contracting sexually transmitted diseases, psychiatric trauma, and character development. Reproductive health and the development of reproductive organs need to be discussed with parents, including circumcision. The most commonly cited reasons for not discussing topics on reproductive health are lack of awareness, discomfort, and shame from adolescents and between doctors and patients [4]. Teenagers are sometimes shy and do not discuss circumcision with their parents.

Male circumcision is an important thing to do [5]. The efficacy of male medical circumcision against HIV incidence from randomised controlled trials is supported by the

effectiveness of observational studies in populations at diverse HIV risk and the changing context of the epidemic. Medical circumcision of men remains an essential evidence-based intervention for controlling the HIV epidemic. Strong and consistent research results from diverse designs and research methods have proven that circumcision reduces the risk of HIV infection in heterosexual men. Circumcision is also one of the most cost-effective and critical interventions to maintain progress towards the end of the HIV/AIDS epidemic [6][7][8][9].

Similarly, traditional circumcision can reduce the risk of HIV/AIDS infection in men [10]. HIV/AIDS prevention needs to achieve and maintain high circumcision coverage. Interventions for HIV prevention should focus on uncircumcised adolescent boys, who are found to be mostly younger, rural populations, low socioeconomic status, and traditionally uncircumcised communities [11][12].

The results showed that traditional circumcision is often associated with increased morbidity and mortality among people in South Africa. The investigation found that 743 people had to be hospitalised for injuries, and 12 had penile damage, including circumcision performed on children under five. The search also found that 9% of the 45 youths who required hospitalisation after traditional circumcision eventually died. Data shows that 63% of people prefer traditional circumcision, and 13% prefer medical circumcision. Traditional circumcision is becoming common in South Africa, and its impact is considerable. In addition, there have been reports of serious injuries resulting from ritual circumcision, so the circumcision procedure should at least be performed by a qualified and experienced medical practitioner [13].

In East Nusa Tenggara, especially on the island of Timor, there is a tradition of Sifon circumcision. Sifon is a traditional sudat tradition passed down from generation to generation by the Timorese tribe, Atoin Meto in East Nusa Tenggara using bamboo or razor blades. This siphoning process will be closed with sexual intercourse which aims to heal the wound after circumcision and get rid of bad luck. Sifon is a part of the culture of the Atoin Meto people in several regions in the middle to the west of the island of Timor, namely circumcision activities (circumcision), but what is unique is that after circumcision, the man is required to have sex, which is believed to be able to heal the wounds after circumcision. So Sifon is post-circumcision sex that a patient must have when his circumcision wound has not healed. The goal is to dissipate heat so that the male sexual organs return to function correctly. Once Sifon has been performed, the patient should no longer have sex with the woman for the rest of his life [14].

In East Nusa Tenggara, especially on the island of Timor, there is a tradition of Sifon circumcision. Sifon is a traditional culture of the Atoin Meto people in several regions in the middle to the west of the island of Timor, namely circumcision activities (circumcision), but what is unique is that after circumcision, the man is required to have sex which is believed to be able to heal the wounds after circumcision. So Sifon is post-circumcision sex that a patient must have when his circumcision wound has not healed. The goal is to dissipate heat so that the male sexual organs return to function correctly. Once Sifon has been performed, the patient should no longer have sex with the woman for the rest of his life [14].

Sifon circumcision increases the risk of transmission of venereal diseases. Because the circumcision wound is not sterile, the wound can develop into an infection that results in tissue damage to the penile area. Then, because the young man must have sex immediately after circumcision, this increases the risk of sexually transmitted diseases such as syphilis, gonorrhoea, and even HIV — both for men and women [15]. The results of a qualitative study Tumina MS, et al. [16] On thirteen women through in-depth interviews found that there is still a lack of knowledge about HIV / AIDS transmission and unawareness of being a Sifon woman. The experience of Siphon women in performing Siphon rituals shows that Siphon is a risk factor for HIV / AIDS transmission.

Based on social phenomena that may occur due to women's involvement in the Implementation of the obligation to perform Sifon circumcision, several essential things need to be observed, namely: 1. Gender Issues. The involvement of women in the Implementation of customary circumcision obligations violates the concept of gender. 2. Health problems. In every traditional circumcision accompanied by a siphon as a complement, the woman's vagina is used as a trash can to collect faeces from circumcision. Thus, the suffering of women who are obtained/received from sexual intercourse after circumcision has an impact on the health of the body. 3. Human Rights Issues. If women are objectified for male sexual vitality, then in every traditional circumcision series, there will always be harassment and humiliation of women's dignity and dignity. 4. Religious Issues. The practice of Sifon accompanies every circumcision as a compliment, so according to the religious norms recognised in this country, Sifon is contrary to religious norms. 5. Legal Issues. Performing Sifon as a complement to traditional circumcision is against national criminal law. Legal problems seen and observed in traditional circumcision are the occurrence of adultery and the emergence of abortion and child murder [17].

Based on preliminary data collection, it is known that there have been incidents of severe bleeding experienced by adolescents after performing Sifon circumcision in the

central Amfoang area. This is because the methods and tools used do not follow the rules / of medical science. The practice of Sifon circumcision can also increase the risk of contracting sexually transmitted diseases due to the Sifon process or "hot defecation," required to have marital relations with a woman prepared by a shaman or sought by the Sifon circumcision practitioner himself. Based on preliminary data collection, it is also known that shamans still practice Sifon circumcision now in Oenenas village, central Amfoang and many teenagers practice Sifon circumcision in these shamans.

Based on the problem description above, researchers are interested in conducting a "Qualitative Study: The Experience of Adolescents performing Sifon circumcision in Bonmuti Village, Central Amfoang."

Method

This research is a qualitative type, using exploratory design and a phenomenological approach. The main informant was a teenager aged 17-24 years who had performed Sifon circumcision. The supporting informant was a Sifon circumcision shaman. Data collection was conducted using in-depth interviews and non-participant observation—questions in the in-depth interview related to adolescents' judgment, responses and feelings in performing Sifon circumcision. Non-participant observations were also made to see the circumcision process. Shamans carried them out. The method of retrieving informants is carried out using purposive sampling techniques. Researchers approach, introduce themselves and ask for willingness to be informants. The interview was conducted after the informant signed informed consent. The study was conducted from June-August 2023 in Oenenas Village, Central Amfoang, East Nusa Tenggara.

Data analysis was carried out using qualitative analysis with a phenomenological approach. Steps in data analysis: 1) Create a transcript; 2) Coding data; 3) Categorize information, namely grouping the same information from the coding results into a matrix, and each category is analysed based on the research theme (final category); 4) Interpret information, present data and draw conclusions in the form of research reports. The variables explored are the perceptions and experiences of adolescents in performing Sifon circumcision. Data validation/validity in this study uses the data triangulation method, namely by triangulation of sources and methods. Triangulation of sources by the way the author interviews core informants and supporting informants. The authors also compared the observations with the results of in-depth interviews. Triangulation method where the author, in addition to conducting in-depth interviews, also conducts non-participant conservation at the research site.

Result

Based on Table 1, it is known that the number of informants interviewed was six people. Four people were Key informants, namely teenagers aged 17-24 years who had performed Sifon circumcision. 2 were supporting informants,

namely traditional circumcision shamans. The highest age is 64 years, and the lowest is 18 years. The highest education is high school (), and the lowest is not finishing elementary school.

Report	Work	Age	Education
Respondent 1 (*)	Student	24 Years	Senior High School
Respondent 2 (*)	Student	19 years old	Senior High School
Respondent 3 (*)	self-employed	24 years old	Senior High School
Respondent 4 (*)	Student	18 years old	Senior High School
Respondent 5 (**)	self-employed	64 years old	Elementary School
Respondent 6 (**)	self-employed	54 years old	Elementary School

Table 1: Demographic.

*Teenagers who undergo Sifon circumcision

**Circumcision Shaman

Theme	Category	Keywords
Factors driving adolescents to perform traditional circumcision	So as not to get ridiculed by friends	You will get ridiculed if you are at school and hanging out with friends.
		Reasons for Performing Circumcision to Look Clean
	Eliminates excess body odour and looks clean	
	So that the face does not look old, both on the man and his wife	People say that if you don't circumcise, you will be old... Children get ugly
	Lack of trust in the circumcision of doctors because it is not neat	Some circumcision doctors Come back here for re-circumcision
	It has become a tradition that cannot be lost.	It is impossible to ban because this is already a culture.
Attitude or Assessment towards Sifon	Fear of dead/dysfunctional/sterile genitals	The Sifon is a genie. He said otherwise, the genital siphon could malfunction.
	For the body to fat quickly	Suppose the body wants to get fat quickly. The rest of the wound should be slightly cooling.
		No siphon is not a problem. However, otherwise, the siphon means the wound will heal long ago.
	I'm afraid I must disagree and feel obligated, but I am still done, so the wound heals quickly.	
Sifon circumcision procedure		
	Performed in a ll cottage, bathroom or ll pool	Entering the pool, the body has begun to tremble, after which it comes out and cuts.
	Count stones as a way of confession and prayer.	We collect stones according to the number of people in contact. After that, we throw stones at the brilliance to forget the past.

		Use a razor blade or knife... can be both.
	Using razor blades, knives and bamboo	
		Use bamboo and an ordinary knife that we use every day to cut.
		Chew the betel stick, then attach it to the wound.
	Recovery process with folk remedies, modern medicine	At home, use amoxicillin and oil. Miss Mas
Recovery process		

Table 2: Analysis Results.

Factors Affecting Adolescents to Perform Traditional Circumcision

Based on the results of the study, it is known that adolescents will get ridiculed and pressured if they have not done traditional circumcision. The teenager finally decided to perform traditional circumcision to avoid ridicule and bullying by his circumcised friends.

"Iya, mereka suka mengejek begitu, jadi saya malu. Di sekolah kalau sudah duduk kumpul, pasti dapat olok, sebelum potong itu pasti malu, setelah itu pergi untuk menghindari" ("Yes, they like to make fun of me like that, so I'm embarrassed. "At school, if you're sitting together, you'll definitely get teased, before you interrupt, you'll be embarrassed, then you'll run away to avoid it.").

Teenagers who circumcised Sifon (HJ= 19 Years Old)

"Saling olok di sekolah, saling olok yang seru. Apalagi kalau duduk kumpul dan ada satu atau dua orang teman belum sunat, nanti kita sengaja omong : ini disini ada yang masih pakai mantel dan helm, ada 2 orang. Nanti mereka sudah tersinggung dan mereka sudah jalan. Nanti kita bilang : pergi lepas helm dulu. Itu nanti mereka sudah kabur.....Guru kita satu juga, kita selesai potong baru kita olok-olok dia. Tidak lama, besoknya pak guru kami juga pergi sunat" ("Making fun of each other at school, making fun of each other. Moreover, if we are sitting together and there are one or two friends who have not been circumcised, then we will deliberately say: here there are those who are still wearing coats and helmets, there are 2 people. Later they will be offended and they will be on their way. Later we said: go take off your helmet first. By then they would have run away.....We have one teacher too, we finished cutting then we made fun of him. Not long, the next day our teacher also went for a circumcision").

Teenagers who circumcised Sifon (TN= 18 Years Old)

This is supported by the statements of supporting informants who state that this traditional circumcision is a matter of pride. If there are teenagers or young men who have not been circumcised, it will be a mockery among them.

"Kalau mau dibilang jadi Kebanggaan..yang belum sunat dia bilang : "kenapa dia bisa, saya tidak bisa?. Fisik saya lebih kuat kok. Di satu sisi bikin semangat yang belum sunat. Di saat mereka saling olok, tujuannya bikin semangat, tapi kalau yang belum sunat tersinggung, ya dari dia. Memang kebanyakan begitu, Saya lihat yang belum sunat akan diolok dan dia tidak akan omong banyak" ("If you want to be called a Pride... those who haven't been circumcised will say: "Why can he do it and I can't? I'm physically stronger. On the one hand, it makes the uncircumcised person enthusiastic. When they make fun of each other, the aim is to encourage them, but if the uncircumcised person gets offended, that's from him. Indeed, most of them are like that, I see that those who have not been circumcised will be made fun of and they won't say much").

Healer of Sifon circumcision (PB= 54 years old)

"Kalau disini pak, kebanyakan sunat. Mungkin 90 % sudah sunat. Karena rasa minder apalagi kalau masih pemuda, kayak mereka duduk kumpul mereka cerita sunat. Orang yang belum sunat berarti dia tidak bisa omong apa-apa lagi. Dia tidak duduk dengan mereka lagi, karena dia sudah perasaan. disaat omong mengenai sunat, dia pasti bangun jalan" ("Here, sir, there are mostly circumcisions. Maybe 90% have been circumcised. Because they feel inferior, especially if they are still young, it's like when they sit together they talk about circumcision. A person who has not been circumcised means he cannot say anything else. He didn't sit with them anymore, because he had feelings. When he talks about circumcision, he definitely gets up.")

Sifon circumcision shaman (ET=68 Years Old)

Based on the results of the study, it is known that adolescents perform traditional circumcision to look clean and not smell bad. Teenagers believe that by performing traditional circumcision, body odour will be reduced.

"Bau badannya pasti beda dengan yang sudah sunat. Orang kalau sudah sunat bau badannya pasti berkurang. Tidak setajam yang belum sunat. Alasan mau potong ne karena

itu. Karena kalau tidak sunat banyak yang suka ganggu bilang tidak bersih. Sebagian bilang bau badan apa segala.... jadi alasan sunat ini maksudnya supaya saya juga kelihatan bersih begitu” (“His body odor is definitely different from someone who has been circumcised. If someone has been circumcised, their body odor will definitely decrease. Not as sharp as uncircumcised ones. The reason I want to cut it is because of that. Because if you don’t circumcise, many people like to tease you and say you’re not clean. Some say what body odor is...so the reason for circumcision is so that I can look clean too”).

Teenagers who circumcised Sifon (SK = 24 Years Old)

“Kayak yang tidak sunat dulu, tidak terlalu aktif tapi bau badan. Tidak mandi 1 hari saja, itu bau badan. Kalau sudah potong muka cerah, lalu kalau tidak mandi 2 sampai 3 hari juga biasa-biasa saja. Tidak terlalu bau badan” (“Like those who weren’t circumcised before, they weren’t very active but they had body odor. Not showering for just 1 day, that’s body odor. If you have cut your face bright, then if you don’t shower for 2 to 3 days it’s also normal. Doesn’t smell too bad”).

Adolescents who circumcised Sifon (TN = 18 years)

This is also supported by supporting informants, who state that uncircumcised people smell sharper than those who have been circumcised. This can be seen from the quotation as follows.

“Dari aroma, walaupun orangnya mandi setiap hari tapi kita sudah tahu....kalau yang tidak sunat, dari aroma tubuhnya saja walaupun dia sudah tua kalau lewat tetap kita cium. Kita yang tidak sunat ini aroma tubuhnya kentara na....biar mau cuci pakaian pakai sabun juga tetap kalau lewat juga, itu kentara bau badannya” (“From the smell, even though the person bathes every day, we already know... if it’s an uncircumcised person, just from the scent of his body, even though he’s old, we still smell it when we pass by. “For those of us who are not circumcised, our body odor is obvious... even if we want to wash our clothes with soap, but when we pass by, our body odor is obvious.”.

Healer of Sifon circumcision (PB= 54 years old)

The results also showed that teenagers choose circumcision because they want their faces not to look old. Information is also growing among teenagers that those who do not perform traditional circumcision will look older than their peers. It can even impact children and wives when they are married.

“Orang-orang bilang kalau tidak sunat nanti muka kita tua, anak-anak juga jelek na. Kata orangtua begitu... Kita yang habis sunat, kita rasa segar, muka kayak lebih cerah. Mereka yang tidak sunat lihat saja mukanya nanti sama kayak orang tu. Biar mandi juga, kita lihat dia seperti tidak mandi lalu dia

kelihatan muka lebih tua dari kita walaupun umur sama” (“People say that if we don’t circumcise our faces we’ll grow old and our children will be ugly too. Parents say that... Those of us who have been circumcised feel refreshed, our faces seem brighter. Those who are not circumcised just look at their faces and they will be the same as that man. Let’s take a shower too, we see that he doesn’t take a shower and he looks older than us even though we are the same age”).

Teenagers who circumcised Sifon (AN= 24 Years Old)

“Ada perbedaan kalau yang tidak sunat itu, mukanya berbeda dengan orang yang sudah sunat. Pokoknya muka dan testa itu berkerut, dan kelihatan tebal. Yang sudah sunat testa mereka tipis... perbedaannya di muka. Kadang di isteri kalau sudah menikah. Contohnya isteri masih umur 20 Years Old begitu, dia kelihatan seperti nenek-nenek. isteri muka tua. Kalau kita sunat baru menikah nanti isteri mukanya cerah” (“There is a difference in those who are not circumcised, their faces are different from those who have been circumcised. Anyway, the face and testa are wrinkled, and look thick. Those who have circumcised their testa are thin... the difference is in the face. Sometimes it’s the wife if they’re married. For example, the wife is still 20 years old, she looks like a grandmother. wife looks old. “If we circumcise and then get married, the wife’s face will be bright”).

Sifon circumcision shaman (ET=68 Years Old)

Based on the study’s results, it is known that adolescents do not trust modern circumcision carried out by health workers because they feel less neat. It is even known that informants claim that most teenagers choose re-circumcision in traditional herbalists even though they have performed circumcision in a modern way.

“Iya, di amfoang sini 99% semua pasti sunat, kecuali yang sekolah di luar, mereka pasti belum. Tapi kadang-kadang yang sekolah di luar, mereka sudah selesai sunat di dokter, mereka pergi potong tambah lagi di sini. Kadang-kadang kayak kelihatan tumbuh kembali dan tutup Kembali” (“Yes, in Amfoang here 99% of everyone is circumcised, except for those who go to school outside, they definitely haven’t. But sometimes those who go to school outside, they have finished their circumcision at the doctor, they go and get another cut here. Sometimes it seems like it grows back and closes again.”).

Teenagers circumcised Sifon (TN=18 years old)

“beda jauh perbedaannya, ada yang sunat dokter kembali datang sini untuk sunat ulang. Karena bentuknya itu jelek, sebentar masih kurang rapi di bagian bawah. Setelah sembuh kita lihat, istilah kayak ada batangga begitu...kurang bersih atau kurang rapi begitu” (“There is a big difference, there are doctors who have been circumcised who come back here for re-circumcision. Because the shape is ugly, for a while it

was still not neat at the bottom. After we recover, we will see, terms like there are things like that...not clean or not neat enough)

Sifon circumcision shaman (ET=68 Years)

“Contohnya kita pergi rumah sakit, banyak orang yang lihat kita, ini hari ketemu perawat Laki-laki, besok perempuan, dengan sendirinya kita tidak akan pergi lagi. Kita akan tetap cari dukun. Seperti beberapa waktu yang lalu ada pembukaan sunat massal di sini. Tidak ada yang daftar. Mungkin di kota saja kalau di kampung susah. Artinya untuk medis mereka tidak akan ikut. Di kota mungkin tapi di desa tidak mungkin mereka mau pakai sunat medis” (“For example, we go to the hospital, many people see us, today we meet the male nurse, tomorrow we will meet the female nurse, naturally we will not go again. We will still look for shamans. Like some time ago there was a mass circumcision opening here. Nobody registered. Maybe in the city if it’s difficult in the village. This means that for medical reasons they will not participate. In the city maybe but in the village it’s impossible for them to use medical circumcision”).

Sifon circumcision shaman (PB: 54 Years Old)

Based on the study’s results, it is also known that Sifon circumcision is considered a culture or tradition that is difficult to eliminate. Teenagers state that if it is banned, many people even refuse. Teenagers also see that it has become a tradition because of the habit of making fun that occurs among them.

“Tidak mungkin dilarang karena ini sudah budaya dan tradisi juga, jadi kalau mau dihilangkan atau dilarang juga pasti banyak yang menolak” (“It is impossible to ban it because this is culture and tradition too, so if it were to be removed or banned, there would definitely be many people who would refuse.”)

Teenagers who circumcised Sifon (AN= 24 Years Old)

“Kalau menurut saya, sunat ini sebuah tradisi. Karena kebiasaan kita disini siapa yang belum sunat berarti akan mendapatkan di harus. Saya anggap sebagai tradisi tuw karena itu sudah (“In my opinion, circumcision is a tradition. Because of our custom here, anyone who has not been circumcised means they will have to. I consider it a tuw tradition because that’s what it is.”)

Teenagers who circumcised Sifon (SK= 24 Years Old)

“Kalau memang kita mau hilangkan tradisi tidak bisa. Hal ini sudah belaku sejak dari zaman nenek moyang kami.. Kalau tidak lakukan kita bisa mendapatkan ancaman luar biasa dari orang lain. Dengan berbagai jenis bahasa yang digunakan.... misalkan kalau saya tidak sunat, saya malu dan dipedulikan lagi.Jadi mau atau tidak mau harus disunat” (“If we really want to get rid of tradition, we can’t. This has been true since

the time of our ancestors. If we don’t do it, we could face extraordinary threats from other people. With various types of language used.... for example, if I don’t circumcise, I will be embarrassed and will be cared for again. So whether I want it or not, I have to be circumcised.”)

Sifon circumcision shaman (PB: 54 Years Old)

Attitude or Assessment of the Tradition of the Siphon (Ritual of Having Sex After Circumcision)

Based on the study’s results, it is known that informants carry out the Sifon process because they judge that if they do not do Sifon, the genitals die or do not function. This causes teenagers to continue to do Sifon even though there are teenagers who feel it is not mandatory.

“Wajib sifon, katanya kalau tidak sifon kelamin mati. Jadi ada ketakutan juga” (Sifon is mandatory, he said, if not Sifonating the genitals will die. So there is fear too).Teenagers who circumcised Sifon (AN= 24 Years Old)

“Kasi dingin itu kita harus pergi ke perempuan...pokoknya tidak terlalu wajib tapi minimal harus kasi dingin. Saya Kasi dingin 1 kali, di Kupang, di alun-alun. Kayak kermana ya? kasi dingin supaya bebas, jangan terbebani juga karena belum kasi dingin.Karena kalau belum kasi dingin kadang-kadang bisa efeknya ke mandul na” (We have to go to the women to give the cold... basically it’s not really mandatory, but at least you have to give the cold. I Kasi cold 1 time, in Kupang, in the town square. Like where to? give it cold so that you are free, don’t be burdened because you haven’t given it cold. Because if you haven’t given it cold, sometimes it can result in infertility). Teenagers who circumcised Sifon (TN= 18 Years Old).

This is also supported by statements from supporting informants who state that if not done, Sifon can impact the genitals that cannot function properly.

“Oh, kalau tidak sifon nanti kelamin tidak bisa bergerak. Kelamin mati. Tapi kadang-kadang kalau di saya , biar tidak pakai sifon juga tidak apa-apa. Tapi di dukun yang lain mereka punya wajib sifon”(“Oh, if you don’t Sifon, your genitals won’t be able to move. Dead genitals. But sometimes on me, it’s okay not to wear Sifon. But in other shamans they have obligatory siphons.”)

Sifon circumcision shaman (ET=68 Years Old)

“Saya kalau terlambat sifon juga saya bisa upayakan. Di saya wajib untuk sifon, artinya kasi dingin. Tidak kasi dingin sebentar jadi perempuan begitu,alat kelamin mati. Jadi harus sifon supaya berfungsi terus. Pokoknya Wajib. Di Saya kalau terlambat sifon juga tetap harus, yang penting kasi tahu, supaya saya bantu upayakan....karena orang bilang barang panas, jadi buang panas di orang lain” (“If I’m late for Sifon, I can try. I’m obliged to siphon, which means give it cold. If

you don't cool down for a while, you become a woman, your genitals die. So it has to be a siphon so that it continues to function. Basically mandatory. "If I'm late, I still have to Sifon, the important thing is to let you know, so that I can help you make an effort... because people say things are hot, so waste the heat on other people").

Sifon circumcision shaman (PB: 54 Years Old)

One of the informants also stated that he got information from his friends that the body would get fat quickly by doing Sifon. This makes teenagers continue to do siphon after circumcision.

"Baru teman-teman bilang kan nanti dia sembuh itu, di bagian bawah yang paling terakhir. Biasa urat bagian bawah, karena kasi putus itu.... Jadi teman-teman bilang kalau badan mau gemuk cepat. Sisa luka sedikit na harus pergi kasi dingin sudah" ("My friends just said that later he would recover, at the very bottom, last. Usually the lower vein, because it broke... So friends say that your body wants to gain weight quickly. There's a small wound left and I have to go and let it cool down").

Teenagers who circumcised Sifon (HJ)= 19 Years Old)

The informant also stated that Sifon is not mandatory because there are shamans who do not require it. However, teenagers still choose to do Sifon because they feel the wound will heal quickly.

"Kan pernah, saya dan teman pergi ...Teman saya bertanya : kalau tidak sifon, tidak apa-apa kow ba'i? Ba'i bilang tidak apa-apa. Kadang-kadang Mereka omong kosong tentang sifon. Tidak sifon kelamin mati. Tidak benar. Tidak sifon juga tidak apa-apa" ("Once, my friend and I went... My friend asked: if it's not Sifon, is it okay kow ba'i? Ba'i says it's okay. Sometimes They crap about Sifon. No dead genital Sifon. Not true. It's not Sifon either, it's okay")

Teenagers who circumcised Sifon (HJ)= 19 Years Old)

"Kalau menurut saya, contohnya baptua kan tidak haruskan untuk sifon juga jadi saya tidak percaya juga kalau tidak sifon kelamin mati. Saya tidak percaya. Tidak sifon juga tidak jadi persoalan. Tergantung dari kita saja. Karena orang biasa bilang kalau tidak sifon berarti lama baru luka sembuh. Berarti dari kita kalau mau cepat sembuh, mau tidak mau harus sifon....Itu waktu memang ada rasa takut, berpikir salah juga. Memang waktu mau pergi sifon saya merasa itu perbuatan tidak baik, tapi mau kermana lagi, harus. Karena Saya berpikir untuk cepat sembuh, cepat kering mau tidak mau harus pergi sifon" ("Oh, if you don't sifon, your genitals won't be able to move. Dead genitals. But sometimes it's just us. Because people usually say that if you don't Sifon, it will take a long time for the wound to heal. This means that if we want to get well quickly, like it or not, we have to Sifon...")

That's when there is fear and wrong thinking too. Indeed, when I wanted to go to Sifon I felt that it was not a good thing to do, but where else do I want to go, I have to. Because I think to get well quickly, dry quickly, I can't help but go Sifon."). Teenagers who circumcised Sifon (SK= 24 Years Old)

Sifon Circumcision Procedure

Based on the research results, it is known that traditional circumcision is carried out in all ponds or a bathroom. A shaman must be done in the ll pond around the shaman's house. There are shamans as well that can be done inside the cottage or bathroom.

"Mereka datang sini, pokoknya di lolok-lolok kecil begitu, atau kolam kecil. Kasi masuk di dalam kolam setelah itu badan sudah mulai gemetar baru keluar untuk potong.... pokoknya dapat kolam dimana na kasi masuk mereka disitu.. lolok bentuk kolam begitu supaya bisa masuk rendam badan" ("They come here, basically in small loloks, or small ponds. "Kasi entered the pool, after that the body started to shake and then came out to cut... basically, they found a pool where na kasi entered, they were there... the shape of the pool was so that the body could soak in"). Sifon circumcision shaman (ET=68 Years Old)

"Saya potong kadang-kadang masuk di kamar mandi saja bisa atau pergi di kolam juga bisa" ("I think sometimes you can just go to the bathroom or go to the pool too.")

Sifon circumcision shaman (PB: 54 Years Old)

The informant also stated that the tools used were bamboo, knives and razor blades. Bamboo is used to clamp the skin, while a knife or razor blade is used for cutting. The knife is also generally used daily to cut areca nuts. Nuts

Pakai bambu, lalu pakai pisau biasa yang setiap hari kita pakai potong. Tidak pakai silet kayak yang lain-lain. Sekarang bilang yang lain pakai pisau silet, saya tidak. Saya pakai pisau biasa. Pisau untuk potong-potong pinang. Pokoknya dapat pisau dimana lalu kita gosok dan tajam na pakai sudah..... tidak ada pisau khusus.Nanti saya tes-tes di rambut kalau rambut putus berarti sudah tajam betul dan itu potong satu kali saja" (Use bamboo, then use a regular knife that we use to cut every day. Don't use a razor like the others. Now say others use razor blades, I don't. I use a regular knife. Knife for cutting areca nut. Anyway, we got a knife from somewhere, then we rubbed it and it was sharp and then we used it.....no special knife. Later I tested it on my hair. If the hair broke, it meant it was really sharp and I only cut it once.)

Sifon circumcision shaman (ET=68 Years Old)

"Saya pakai silet atau pisau. Bisa dua-duanya. Kalau tidak ada pisau ya pakai silet. Tapi kalau dapat yang kulit keras maka

harus pakai silet" ("I use a razor or knife. Can do both. If you don't have a knife, use a razor. But if you get one with hard skin, you have to use a razor").

Sifon circumcision shaman (PB: 54 Years Old)

The results also showed that before the circumcision process, there was a confession stage. Teenagers must pick up and count stones according to how many women have had sex with them. Teenagers or people who want circumcision must remember how many women have had sex with them. Otherwise, there will be challenges in the circumcision process, such as heavy bleeding and pain.

"Kita pergi ke sana dan sebelum potong kakek itu bilang kita sudah pernah berhubungan dengan perempuan siapa, maka kita pilih batu begitu. Kita kumpul sesuai berhubungan dengan berapa orang. Setelah itu kita buang belakang lewat kepala supaya lepas beban.....yang kita masih belum potong lalu berhubungan dengan siapa-siapa"

Teenagers who circumcised Sifon (AN= 24 Years Old)

"Nanti kita pergi lalu tanya kita sebelum potong tuw kita sudah berhubungan berapa kali atau dengan berapa Nona begitu. Jadi dari situ bapua suruh kita keluar pilih batu untuk lempar belakang. Kalau kita rasa tidak ingat berarti kita ambil banyak batu lalu buang. Katanya kalau tidak mengaku yang kita sudah buat berarti ujung-ujungnya kalau potong berarti sakit dan darah. Jadi kita harus mengaku supaya proses jalan lancar" (remember that means we take a lot of stones and then throw them away. He said that if we don't admit what we have done, it means that if we cut it, it will mean pain and blood. So we have to admit it so that the process runs smoothly").

Teenagers who circumcised Sifon (SK= 24 Years Old)

"Artinya sesuai dengan kita sudah pernah berhubungan. Sebelum potong kita dengan perempuan berapa banyak na hitung itu . Pilih batu sesuai banyaknya perempuan yang pernah berhubungan dengan kita. Istilahnya pengakuan dosa" ("This means that we have already had contact. Before we cut to women how many and count them. Choose a stone according to the number of women we have had contact with. The term is confession of sins")

Sifon circumcision shaman (ET=68 Years Old)

The results showed that after circumcision, the wound was bandaged using betel nut stems that had been chewed and using a plant called white grass. When arriving home, the teenager will treat the wound using amoxicillin, oil and powder.

"Jadi kita Pergi beli bawa dengan sirih batang, sesudah potong kan nanti bapua kunyah sirih atau kita sendiri yang kunyah. Jadi bapua tempel ikut yang luka itu lalu bapua bungkus

pakai kain. Sampai di rumah baru kita mulai bersihkan pelan-pelan. Di rumah kita pakai amoxilin dan minyak nona mas. Ada yang pakai bedak juga" ("So we go buy it and bring it with betel stems, after cutting it, the father will chew the betel or we will chew it ourselves. So Bapua sticks it to the wound and then Wraps it in cloth. When we got home we started cleaning slowly. At home we use amoxilin and Miss Mas oil. Some people use powder too").

Teenagers who circumcised Sifon (AN= 24 Years Old)

"Setelah potong langsung taruh sirih dengan rumput putih tuh sudah campur. Lalu ikat pakai kain. Di rumah kita rawat sendiri Pakai bedak viva dengan nona mas" ("After cutting, immediately put the betel and the white grass mixed. Then tie it with cloth. At home we take care of it ourselves using Viva powder with Miss Mas.")

Teenagers who circumcised Sifon (HJ = 19 Years Old)

Discussion

Male circumcision is one of the oldest and most common surgical procedures worldwide and is performed for many reasons: religious, cultural, social and medical. [18]. Male circumcision is medically a good thing for health, especially in the prevention of sexually transmitted diseases. Male circumcision has the opportunity to support their health and well-being in the future [19]. Circumcision is a widely performed procedure with risks that must be considered to reduce the likelihood of its occurrence. The prevalence of circumcision is unlikely to decrease because the practice is associated with cultural and religious rituals. Given the variety of methods, conditions, and ages of patients undergoing circumcision, it should be noted that not all circumcision is the same. Since this ritual is often performed by traditional circumcision herbalists, unwanted long-term complications can occur, complications that can occur, such as narrowing of the urethra, abnormalities in the penis and unwanted appearance of the penis. Previous research has concluded that due to complications and risks, circumcision must be performed by medically trained professionals and in a sterile environment [20].

Based on the results of the study, it is known that adolescents will get ridiculed and pressured if they have not done traditional circumcision. The teenager finally decided to perform traditional circumcision to avoid ridicule and bullying by his circumcised friends. Social pressure or peer pressure is the direct impact peers have on an individual that makes them follow their peers by changing behaviors, values, and attitudes to fit into the group or individual that affects them. Peer pressure can have a direct negative impact on students and their peers. In general, peer pressure in school affects academic achievement among students in terms of diverse content [21]. Adolescent boys appear to be more

susceptible to peer influence that encourages risk-taking of certain behaviors than women [22]. Peer pressure has been shown to affect adolescent behavior in the real world and cyberspace [23].

Social norms formed in the group will be something that is maintained. If friends do not follow social norms, they will get pressured, insulted and ridiculed. This also occurs in the practice of Sifon circumcision. Teens who do not perform will get pressure and ridicule from peers who have performed Sifon circumcision. Changes in behavior at the individual level can be influenced by interpersonal communication among family, members, and friends. People's experiences tend to change other people's perceptions and attitudes toward health interventions such as circumcision, increasing participation in modern and traditional circumcision. Research conducted Shezi MH, et al. [24] shows that adolescents who have circumcised friends are almost four times more likely to be circumcised than those who have uncircumcised friends. Men who have the social support to perform circumcision from their friends are more likely to be circumcised. Circumcision in males in the area is influenced by complex factors on a multi-social level. Macrosystem factors related to stigma and discrimination in people/friends who have not performed circumcision have been shown to influence circumcision behavior [25].

Based on the results of the study, it is known that adolescents perform traditional circumcision to look clean and not smell bad. Teenagers believe that by performing traditional circumcision, body odor will be reduced. The attitudes and beliefs within him influence a person's behavior. If the teenager has a positive attitude towards traditional circumcision, then traditional circumcision will be performed. Fishbein and Ajzen cit. Donovan RJ, et al. [26] says that a person's willingness to perform an action or behavior is strongly influenced by intention. Subjective attitudes and norms influence intention. Attitude is a function of belief in the impact or consequences of behavior. In contrast, the subjective norm is a function of how significant others see or judge the behavior and is weighed by their motivation to conform to others.

This model explains two essential things: First, a person who uses this theory must clearly distinguish between his attitude towards objects, issues and events and his attitude towards the way of doing it. For example, a person may like luxury cars and have a positive attitude. Still, his attitude will be negative when he wants to buy them because they are costly. Second, this theory must distinguish between one's belief in objects, issues and events and one's belief in what others think about objects, issues and what others will do related to these objects and issues [26]. This theory also explains subjective norms that people around them influence.

The motivation to obey or obey the input or encouragement of others around will also affect intentions, and eventually, a behavior can arise. Two essential components in this theory are subjective attitudes and norms that can give rise to the intention to behave.

Based on the study's results, it is known that informants carry out the Sifon process because they judge that if they do not do Sifon, the genitals die or do not function. This causes teenagers to continue to do Sifon even though there are teenagers who feel it is not mandatory. This misunderstanding keeps teenagers from sex (traditional post-circumcision sexual intercourse) by hiring commercial sex workers. Teenagers assume that by doing Sifon, it will not be barren. Fear of dysfunctional or barren genitals keeps teenagers from choosing traditional post-circumcision Sifons.

In many ways, people's daily lives during this pandemic reflect misinformation experiments. Even with technological advances trying to stem the flow of misinformation, it abounds on social media and everyday life. This problem may grow with sophisticated misinformation, including engineered photos and videos. Detecting this engineered information is very difficult and may be very impactful. Decades of research have shown that misinformation, mainly health-related information, can affect people's lives in many ways. Misinformation can affect beliefs about the impact of a disease, effective preventive behaviors a person can take, and even people's memories of their own past experiences. Thus, combating the infodemic, now and in the future, maybe best done with an interdisciplinary approach that brings together research and expertise from fields such as technology, journalism, public policy, and cognitive science [27].

Adolescents who do not experience barriers have a higher tendency to access reproductive health information than those who experience barriers to access information. There is a significant relationship between barriers to psychosocial access and access to reproductive health information. Psychosocial barriers indicate barriers to the receipt of health services. Culture also makes it difficult for teens to learn about sex and reproduction. Social stigma in the form of taboos in discussing sexuality and reproductive health limits education and social space to provide knowledge to adolescents about sexual and reproductive health. Studies show that adolescents do not approach information services because they feel ashamed and insecure and do not trust health workers to tell stories about their reproductive health problems [28].

Such behavior in culture is certainly not recognized or justified regarding gender and human rights. However, this issue remains a work that is not easily eradicated because

this tradition has long been accepted and justified in people's lives. Not only health problems, the placement of women as a medium to put "heat" and limiting the essence of women as commodities where Sifon women in processions clearly show the phallogentrism that develops in the beliefs of the Atoni Meto tribe. Phallogentrism is an assumption that puts the penis at the center of sexual development. Directly, Sifon places women as objects [17].

Providing excellent and correct information allows for informed choices and appropriate decision-making related to the prevention of sexual behavior and adolescent reproductive health, likewise, in efforts to prevent Sifon in adolescents after performing traditional circumcision. Adolescents' limited access to information about reproductive health and the dangers of sex before marriage are also obstacles. Efforts must be made to limit barriers to accessing health services and facilitate more adolescent-friendly reproductive health information and services, including reconsidering health training strategies [29].

Circumcision services should be provided with respect and consideration for the cultural beliefs and practices that exist in the community. Coordination and collaboration between local leaders, community leaders and health workers should be encouraged so that circumcision services can be provided in traditional settings but allow for safe outcomes, minimize health-related harm and increase the number of circumcision offenders in rural communities [30]. Likewise, in the practice of Sifon circumcision, collaboration between community leaders and health workers can be carried out. It is necessary to conduct training to familiarise with surgical techniques and hygiene procedures standard to traditional circumcision and the cross-referral system between traditional circumcision and health workers [31] [32][33][34]. Education and assistance must continue so that traditional circumcision can be carried out correctly and healthily and the Sifon tradition can be prevented or even eliminated.

Health education is essential so adolescents understand reproductive health and the dangers of doing siphon tradition (post-circumcision sexual intercourse). The risk of disease transmission becomes excellent. The study results were conducted [35] on two groups of students where the experimental group received two 40-minute sessions of the Health Education program. In contrast, the control group received the usual mode of sexual and reproductive health education. Compared to the control group, students in the experimental group gained more knowledge about sexual health ($p < 0.01$). They developed more positive sexual attitudes ($p < 0.05$) and stronger sexual self-efficacy ($p < 0.05$) during the study period. The proposed sexual and reproductive health education program incorporating

various interactive activities proved effective and can be used for school-based Implementation.

Conclusion

Teenagers continue to practice traditional circumcision to avoid being bullied and ridiculed by their peers. The Siphon stage is also carried out because there is a fear that the genitals will not function, so teenagers continue to do siphon (post-circumcision sex) by hiring Commercial Sex Workers in Kupang City. Communication, Information, and Education (KIE) about reproductive health and free sex language must be carried out continuously so that adolescents can be aware and do not misunderstand Sifon circumcision. The role of all parties, such as health workers, community leaders and parents, is significant to prevent the act of Sifon after traditional circumcision. Further researchers can also examine the social pressure of adolescents that encourages adolescents to perform Sifon circumcision.

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