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Attitude And Behavior Sexual Among Adolescents In Yogyakarta

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Yogyakarta as a tourism city given more impact on attitude and behavior sexuality among adolescents. Notion and ideas about sexuality much influenced by the Globally issued environment. This study is basically on the attitude and behavior about sexuality among adolescent. It is of public health importance to examine this topic to inform sex education, policymaking, prevention and intervention program. This study explored the characteristics of sexual attitudes, and high risk premarital sexual behaviors among 106 unmarried youth aged 15 to 17 years used sexual behavior questionnaire and adopted from *Brief Sexual Attitude Scale* to investigate sexual attitudes. The scale measures sexual attitudes on four dimensions, being permissiveness, birth control (sexual practices), communion (investment in relationship), and instrumentality (pleasure-orientation to relationship). This study shown to female prefer low being permissiveness and male prefer high birth control, communion, and instrumentality for aspect sexual attitude. The male shown to prefer high premarital sexual behavior than female. Adolescents still have high risk sexual behavior, so parent, school and government should arrange intervention program together toward sex education for adolescents.

Keywords: attitude, behavior, sexuality, adolescent

1. INTRODUCTION

The children of today are not the children of yesterday. Growth in terms of maturity and knowledge can be seen on a large scale for the adolescent population of today (Guha, 2013). Adolescents had a developmental stage associated with increased risk taking behaviors that contribute to negative sexual health outcomes. (Ramos et al. 2015) Attitude towards sex have been changing dramatically, with premarital sex, even high risk sexual behavior and adolescent pregnancy present a serious social and public health problem. The 2012 data center and information of Indonesia health ministry documented the prevalence of premarital sexual behavior has increased from 3.7% in 2007 to 4.5 % in 2012 among Indonesia young man (unmarried) aged 15 – 19 years. (<http://www.depkes.go.id>, 2014). The data indicating that many adolescent are at risk for pregnancy. According to data center and information of Indonesia health ministry (2014), the prevalence of young woman (15-19 years aged) had a pregnancy is 1.28%. Early childbearing is often associated with a young woman's failure to complete her education, thus limiting her future job prospects and her child's economic well being (Eggleston E, Jackson J, Hardee K, 1999).

Early adolescence is considered to be the most critical stage of development, a period of accelerated growth and change. The behavior patterns which are adopted in these years can have lifelong consequences, both positive and negative for an individual from inappropriate information about sexuality. Premarital sexual behavior can cause various negative impacts on adolescents, both psychological, physical and social impact. Psychological effects such as feelings of anger, fear, anxiety, depression, low self-esteem, guilt and sinning while physical effects can lead to unwanted pregnancies and abortions as well as the development of sexually transmitted diseases (STDs) among adolescents. Sexually transmitted diseases can cause infertility and may increase the risk of contracting HIV / AIDS and will produce a quality generation (Sarwono, 2011), from the social point of view, the impacts that are being treated are ostracized, dropping out of school for pregnant female adolescents, and changing the role of mother or father, as well as the stigma of society who denounces and rejects the situation. The success of the population in the adult age group is highly dependent

on adolescence. If the age of adolescence is passed well then the quality of the population concerned in the adult age phase will tend to be better and then. If not well prepared teens are very risky to premarital sexual behavior.

Early adolescence a time of opportunity and risk and a positive school environment is critical to ensuring this age group's learning, social and physical needs are met along with that the support and guidance from parents is one of the most important facet which can mold the individual in the best positive way or the least positive way. Such information is necessary for health professionals to prevent and intervene on not only unmarried young people sexual behavior, but also other negative consequence (Yip et al, 2013) .The purpose of this study is to describe sexual attitude and behavior among adolescents.

2. EXPERIMENTAL DETAILS

The design used is descriptive quantitative design. The study was conducted in high school in the city of Yogyakarta in February 2016. The population of this study is adolescents aged 15-17 years. The number of samples from this study was 106 people. The research ethical test from Faculty of Medicine and Health Sciences, Universitas Muhammadiyah Yogyakarta, Indonesia. The sexual attitudes of this study were measured by the "Brief Sexual Attitude Scale (BSAS)" questionnaire developed by Hendrick et al. (2006). BSAS consists of 23 questions classified based on fourth category of sexual attitudes, being permissiveness, birth control (sexual practices), communion (investment in relationship), and instrumentality (pleasure-orientation to relationship). Brief Sexual Attitude Scale (BSAS) is an empirically reliable and valid empirical questionnaire with $\chi^2 (21,525) = 29.88, P < .001$. This reliability test results in get r table number 0.396. Each question in a measurement concept is considered reliable if the reliability coefficient ≥ 0.396 . Based on the reliability test results used Alpha Cronbach, note that the value of Alpha of 0.861. (Comotto, 2010)

The questionnaire of sexual behavior used was a questionnaire from Tara (2015) adopted from Elizar (2010). The questionnaire contains ten statements that will be answered by the respondent by giving a checklist (√) on the yes or no answer. Each category of responses, then will be

in percentage using the frequency distribution. Data analysis used a descriptive analysis in the form of frequency display and percentage with the help of computer.

3. RESULT AND DISCUSSION

Table.1 Characteristics of respondents sexual attitude and behavior in adolescents in Yogyakarta, 2016 (n = 106)

Variable	f (%)
Gender	
Male	64.6
Female	42.4
Age group	
15	16.1
16	39.4
17	51.5
Information about sexuality	
Friend	32.7
Parents	11
Social media	
Electronic media	39
Communication with parents about sexuality	
Yes	34.3
No	72.7

Socio demographic characteristics of the respondents

As shown in table 1, 64.6% of the youth are male, with 51.5% were 17 years old. This age feared didn't have life skills. In recent times rather in the present society at large it is very important to impart sex education changes too that are taking place in the body structure; particularly in the sex organ, making the teenager curious to explore these change and added to all these factors there is an immense urge in taking risks in life o indulge what is forbidden combined with the absence of adequate wisdom to control these impulses. The sexual arena is in constant focus among the teens; in the absence of proper guidance, this can results in more harm than good. 39 % of the adolescent getting information about sexually from electronic media and 72.7 % without communication about sexuality with their parents. There are various aspects which need to be followed when a parent

is having a talk with their children especially on topics like sex and sexuality. The first aspect understands the fact that adolescents have a culture of their own and the parents cannot be a part of that culture. The culture gap (between parents and adolescents) can become a real wall between the parent and the adolescents. It is important for the parents to understand their child's need for a Javanese culture. The parents also have to choose the areas of disagreement. The second factor which should be taken consideration is timing where scheduling a certain time each week to talk to the adolescent may be needed. The parents should act as if they are looking forward to them and enjoy them and discussion like that should be completely informal. Adolescent should be completely informal. Adolescents should feel relaxed and open up to their parents. The third and fourth aspect is listening and feeling, a parent should listen to what their adolescent kid has to say and also feel empathetic and through touching and giving the love and assurance makes the communication more effective and helpful for both the adolescent and their parents(Guha, 2013).

Table.2 Percentage of sexual attitude in adolescents in Yogyakarta, 2016 (n =106)

Attitudes	Male (%)	Female (%)
Permissiveness		
Low	42.2	88.1
Moderate	37.5	9.5
High	20.3	2.4
Brith control		
Low	9.4	14.3
Moderate	25.0	23.8
High	65.6	61.9
Communion		
Low	12.5	28.6
Moderate	14.1	45.2
High	73.4	26.2
Instrumentally		
Low	20.3	61.9
Moderate	31.3	31.0
High	48.4	7.1

As shown in table 2 female being permissiveness lower than male, 88.1% female is low permissiveness.

And 65.6 % of youth male have a high birth control (sexual practices), 73.4 % of youth male have a high communion (investment in relationship), and 61.9% of youth female have a low instrumentality (pleasure-orientation to relationship). Through a study by hulton et al in 2000, he illustrated that youth were aware about the problems that early sexual encounters had, but had difficulties to face the reality about how to act on that knowledge due to gender roles as it was also shown that boys' sexual activity is forgiven as an excuse for boys to represent their manhood, while the boys themselves had lack of responsibility of what they had done and in this way, girls felt more powerless. Due to the complicated sexual and gender expectations, it poses threats for girls. It is believed that boy's and men are allowed to have intercourse, but pointing out that girls need to be protected, isolated and restricted in their movements in order to avoid possible sexual encounters with boys or men generally tend to "move around freely". Culturally, the girls are expected to become more protective to them and restricted themselves to romance and sex. (Eggleston E, Jackson J, Hardee K, 1999) .

Table 3. Percentage of premarital sexual behavior in adolescents in Yogyakarta, 2016 (n=106)

Statement	Male		Female	
	Yes	No	Yes	No
Dating	50	10.4	37.7	1.9
Hand in hand	51.9	8.5	34	5.6
Embracing	44.3	16.1	22.0	17.6
Kissing	33.0	27.4	24.5	15.1
Masturbation	39.6	20.8	0.9	38.7
Necking	20.8	39.6	13.2	26.4
Petting	20.8	39.6	4.7	34.9
Rubbing the genitals	14.2	46.2	0.9	38.7
sexual intercourse	11.3	49.1	0.9	38.7
Oral sex	12.3	48.1	0.9	38.7

As shown in table 3 reported 11.3% male and 0.9% female had already sexual intercourse. The boys and girls have suggested experienced sexual intercourse indicated that curiosity and love so if you really love your boyfriend or

girlfriend, you should have sexual intercourse with them. The family, as the first-life education-teachers, need to be aware of the strong influence of gender norms on the attitudes and behavior of boys and girls regarding relationships, sex and reproduction. It is needed to set up some programs to help adolescents developing the skills to make informed decisions about engaging in sexual intercourse and using contraceptives in a social context that sometimes encourages risky sexual behavior (Eggleston E, Jackson J, Hardee K, 1999). Adolescents of either sexual orientation experience similar mechanisms of sexual arousal. Masturbation facilitates sex citement and frequently serves as an outlet for adolescents. Successful transitions depend on how to maintain positive feelings about self, engaging in sexual experiments without intercourse, and engaging in intercourse with commitment. (Rosenhan & Seligman, 1995).

4. CONCLUSION.

This study shown to female prefer low permissiveness and male prefer high birth control , communion, and instrumentality for aspect sexual attitude. The male shown to prefer high premarital sexual behavior than female. Adolescents still have high risk sexual behavior, so parent, school and government should arrange intervention program together toward sex education for adolescent

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