



Influence of Family Socio-Economic Factors on Prevention of Premarital Sexual Behavior in Jember Regency

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ABSTRACT

Background: the incidence of premarital sexual behavior by adolescents in the world has increased, so that adolescents need attention, guidance, supervision from parents, and good service planning related to reproductive health problems, so that teens will avoid risky behaviors namely premarital sexual behavior.

Method: The cross-sectional study design was conducted on 229 adolescents aged 16-17 years with multistage random sampling. Questionnaires were used to measure family socioeconomic factors and prevention of premarital sexual behavior using theory and have been modified by researchers. The family socioeconomic factor variables include indicators of education, income, employment and number of family members and the variables for preventing premarital sexual behavior include refusing skills, increasing religiosity, avoiding pornographic media, promoting sexual health and enhancing parent-teen relations.

Data analysis: using SEM using software (Analysis of Moment Structures (AMOS) version 21).

Results: The effect of family socioeconomic factors on the prevention of premarital sexual behavior with a P-value of 0.849 indicates that family socio-

economic factors do not significantly influence premarital sexual prevention by adolescents.

Conclusion: Family factors in this case are family socio-economic factors that have no effect on premarital sexual prevention in adolescents, this can be caused by the influence of individual adolescents' attitudes and the efforts of adolescents themselves to increase their religiosity and understanding of sexual behavior healthy and responsible who ultimately can make the right decisions and be responsible for their sexual lives and have the ability to resist premarital sexual behavior.



1. INTRODUCTION

Premarital sexual events among teenagers throughout the world have increased. Some studies in Africa have also increased pre-marital sexual activity among adolescents (WHO, 2001). Laurie et al. (2000) state that as many as 73% of teens in Sweden aged 15 have had dates and have been exposed to pornography. Loes et al. (2010) stated that as many as 70% of teenagers in the Netherlands have had sexual relations during adolescence. Sieverding et al. (2005) conducted a study on 241 adolescents in Australia stating that 44.4% of adolescents had had sexual intercourse for the first time and 55.6% of adolescents had sexual relations habits both with their partners and with female sex workers.

The results of the study were supported by research by Steven et al. (2011) more than half (52%) of teenagers in America have had sexual relations with their partners. The results of the 2006 National Campaign to Prevent Teen Pregnancy (NCPTP) survey in the United States found that 23% of adolescents both male and female had premarital sexual intercourse before the age of 15 years. Research shows that age at first sexual intercourse varies according to demographics and socio-economic factors (Makenzius & Larsson, 2013). The average age at first sexual intercourse in Hong Kong was 18 years (Yip et al. 2013), in many developing countries the first sexual age among boys and girls had sex before the age of 15 (Mueller, 2009). The study by Halpern & Haydon (2012) also shows that three quarters of adolescents, especially at the age of 18 years, have experience in sexual intercourse that is equal to 67%.

Adolescents need support from families, especially parents, besides physical and psychological. Financial support according to Friedman (2003) explains that economic status is a component of the social class that shows the level and source of family income, socioeconomic families can be measured by the level of education, income, employment and number of family members. Education is an

aspect of social status that is strongly related to health status because education is important to shape knowledge and behavior patterns. The number of family members in the house will affect income or income. Large families will have a greater burden, so that they pay less attention to the health of their family members because they pay more attention to their life needs

According to Soetjiningsih (2008) that premarital sexual prevention by adolescents can be done through improving the quality of parent-adolescent relationships, skills of resisting negative pressure from friends, increasing good adolescent religiosity, avoiding pornographic media and promotion of sexual health for adolescents involving school roles, government and non-government institutions.

Adolescents during growth and development require good attention, guidance, supervision and service planning related to reproductive health problems, so that adolescents will avoid risky behaviors and healthy growth occurs. Increased sexual interaction and early initiation of adolescents in premarital sexual behavior activities have led to irresponsible and risky premarital sexual behavior among adolescents. Adolescents are often involved in various risks of premarital sexual behavior that can be detrimental to health, social and economic consequences.

Adolescents belong to risk groups, namely changes and prevention efforts are needed against cases of premarital sexual behavior, knowing pre-marital sexual prevention efforts can reduce the incidence of premarital sexual behavior and the impact that will occur, so that healthy teens who avoid sexual behavior premarital

2. METHOD

This research was conducted in January-June 2018 in Jember Regency, Indonesia. This study included a cross-sectional approach using students in several high schools. The inclusion criteria for the study included: 1) 5 Jember High School, Kartika 4 Jember High School, Pancasila Ambulu Teaching High School, Balung State High School, Kasyan Puger Islamic High School and 1 Kencong High School; 2) students in 6 high schools aged 16-17 years; 3) active students in 6 high schools; 4) students in 6 high schools who are male and female.

The sampling technique uses multistage random sampling, because the population is restricted according to certain cluster criteria (high school). Samples included students ($n = 229$) in 5 Jember High School, Kartika 4 Jember High School, Pancasila Ambulu Vocational School, Balung High School, Kasyan Puger Islamic High School and Kencong 1 High School. The research instrument used the Likert scale questionnaire to determine the personal factors of adolescents about biological, academic, social understanding, peer and sexual experiences. Data analysis using SEM with estimation of parameter data using analysis of moment structures (AMOS version 21).

The steps to collecting data are managing research permits from the National Unity Agency and Community Protection addressed to the Health Office, Jember District Education Office, permission to go to school to record the students used as respondents, Signing informed consent as a form of consent to respondent, Filling out questionnaires and collection of respondents' questionnaires. This research was conducted with an ethical test at the Faculty of Public Health, with the 2017 No.557-KEPK and stated that this research could be carried out with due regard to certain research principles.

3. RESULT AND DISCUSSION

3.1 Characteristics of Parents

Data on the characteristics of parents of respondents can be seen in table 1 as follows:

Table of Distribution of Characteristics of Adolescent Parents in Jember Regency in 2018

Characteristics	Frequency (%)	Percentage (%)
Education		
Elementary / middle school	112	48.9
High School / Vocational School	81	35.4
College	36	15.7
Total	229	100
Parents' job		
Civil servants	30	13.1
entrepreneur	159	69.4
Retired	40	17.5
Total	229	100
Income		
<Rp. 1 million	124	54.1
Rp. 1-3 million	72	31.4
> IDR 3 million	33	14.4
Total	229	100
Number of family members		
≤ 4	71	31.0
5	109	47.6
> 5	49	21.4
Total	229	100

Source: Primary Data, 2018

The distribution of the characteristics of the respondents' parents in table 1 states that the respondents' parents had a majority of elementary / junior high school education as many as 112 respondents (48.9%) and the work of the respondents' parents was 159 entrepreneurs (69.4%) and the parents' income was the majority <Rp. 1 million as many as 124 respondents (54.1%) and the number of family

members of the respondents' parents is a majority of 5 people as many as 109 respondents (47.6%).

3.2 Family Social Economic Factors

Family socio-economic factors are measured through 4 aspects of indicators, namely the importance of education, the importance of income, the importance of work, the number of family members. The average of the mean score of the family factor is 1.75 and the standard deviation value of the mean score of the family factor is 0.442. Minimum value of 1 and maximum value 3. Descriptive statistics of family factors can be seen in table 2 and table 3 below:

Table 2 Descriptive Statistics for the Family Social Economy

Indicator	Mini mum	Maximu m	Average Of Mean Score	Standard Deviation From Mean Score
The importance of education	1	3	1,67	0,734
The Importance of Work	1	3	1,60	0,728
Effect of Income	1	3	1,96	0,552
Effect of Number of family members	1	3	1,74	0,790
Composite	1,0	2,8	1,74	0,442

Source: Primary Data, 2018

Based on table 2 shows that the best average score on the effect of income is 1.96 and the lowest average of the importance of work is 1.60.

Table 3 Frequency Distribution of Respondents Based on Family Social Economic Factors in Jember Regency in 2018

Indicator	Not		Enaough		Good	
	n	%	n	%	n	%
The importance of education	0	0,0	193	84,3	36	15,7
The Importance of Work	0	0,0	196	85,6	33	14,4
Effect of Income	40	17,5	159	69,4	30	13,1
Effect of Number of family members	0	0,0	180	78,6	49	21,4
Composite	58	25,3	121	52,8	50	21,8

Source: Primary Data, 2018

Table 3 shows that the respondents with the lowest category in the socio-economic factors of the family in preventing premarital sexual behavior based on the influence of income of 17.5% and the highest good category on family factors in preventing premarital sexual behavior based on the influence of 21 family members. 4%.

3.3 Sexual Prevention of Premarriage by Adolescents (Y2)

Premarital sexual prevention factors by adolescents are measured through 5 aspects of indicators, namely refusing skills, increasing religiosity, avoiding pornographic media, promoting sexual health and improving parent-adolescent relationships. The mean of the mean score for premarital sexual prevention by adolescents is 1.96 and the standard deviation value of the mean score for premarital sexual prevention by adolescents is 0.622. Descriptive analysis results can be seen in table 4 and table 5

Table 4 Descriptive Statistics on Sexual Prevention of Premarriage by Adolescents

Indicator	Minimum	Maximum	Average Of Mean Score	Standard Deviation From Mean Score
Skills Refuse	1	3	2,00	0,786
Increase Religiyty	1	3	2,30	0,794
Avoiding Pornography Media	1	3	1,77	0,779
Sexual Health Promotion	1	3	1,85	0,873
Improving the Relationship of Parents and Teens	1	3	1,90	0,769
Composite	1,0	3,0	1,96	0,622

Source: Primary Data, 2018

Based on 4 shows that the best average score on the factor increases religiosity by 2.30 and the lowest average score on the factor avoids pornographic media by 1.77.

Table 5 Frequency Distribution of Respondents Based on Premarital Sexual Prevention by Adolescents in Jember Regency in 2018

Indicator	Not		Enough		Good	
	n	%	n	%	N	%
Skills Refuse	70	30,6	88	38,4	71	31,0
Increase Religiyty	48	21,0	181	79,0	0	0,0
Avoiding Pornography Media	0	0,0	180	78,6	49	21,4
Sexual Health Promotion	0	0,0	157	68,6	72	31,4
Improving the Relationship of Parents and Teens	80	34,9	92	40,2	57	24,9
Composite	44	19,2	130	56,8	55	24,0

Source: Primary Data, 2018

Table 6 Cross Tabulation of family socio-economic factors with sexual prevention of prenatal by teenagers

Indicator	Family Social Economic Factors							
	Less		Medium		Good		Total	
	n	%	n	%	N	%	n	%
Premarital Sexual Prevention by Adolescents								

Less	15	6,6	20	8,7	9	3,9	44	19,2
Is being	35	15,3	65	28,4	30	13,1	130	56,8
Well	8	3,5	36	15,7	11	4,8	55	24,0
Total	58	25,3	121	52,8	50	21,8	229	100,0

Based on Table 6, shows that the percentage of respondents about premarital sexual prevention by good teens and good family factors (4.8%) is greater than the percentage of respondents who are about premarital sexual prevention by adolescents lacking and good family factors (3.9%), meaning that respondents with premarital sexual prevention by good teens tend to have good family factors and conversely respondents with about premarital sexual prevention by adolescents are less likely to not have less family factors.

3.4 Normality test

Table 7 shows that normality testing of data is an assumption that must be fulfilled in the analysis of Structural Equation Modeling (SEM) with the results of cr (critical ratio) produced for the multivariate kurtosis coefficient of 0.471, because the critical value is $0.471 < 2.58$ ($\alpha = 1\%$), then multivariate normality is fulfilled. Data normality testing is explained in table 7 below:

Table 7: Normality Test

Variable	C.r
Multivariate	0,471

Source: Primary Data, 2018

3.5 The Influence of Family Social Economic Factors Against Premarital Sexual Prevention by Adolescents

Table 8. Shows that the socio-economic influence of the family on premarital sexual prevention by adolescents with a P-value of 0.849 shows that family socio-economic factors do not significantly influence premarital sexual prevention by adolescents.

Table 8 The Influence of Family Social Economic Factors Against Premarital Sexual Prevention by Adolescents

Effect	Structural Coefficient	P-value	Description
Family Social Economic Factors → Premarital Sexual Prevention by Adolescents	0,440	0,849	Not significant

Source: Primary Data, 2018

4. DISCUSSION

The results of the study explained that significant family socioeconomic factors did not influence the prevention of premarital sexual behavior by adolescents, because it did not have a significant effect, the magnitude of the influence could not be used in predicting the influence of family socioeconomic factors on preventing premarital sexual behavior by adolescents.

The results of the study explained that significant family socioeconomic factors did not influence pre-marital sexual prevention by adolescents, because it did not have a significant influence, the magnitude of the influence could not be used to predict the influence of family factors on premarital sexual prevention by adolescents. The family factors referred to in this study are family factors perceived by adolescents in the form of the importance of education, income, employment, number of family members. Premarital sexual prevention by adolescents in the form of how the implementation of refusing skills, increasing religiosity, avoiding pornographic media, promotion of sexual health and improving parent-adolescent relationships carried out by adolescents themselves.

According to Sarwono (2010) defining sexual behavior is all behavior driven by sexual desire, both with the opposite sex and with same-sex. These behavioral forms can vary, from feelings of attraction to dating behavior, flirting and intercourse. According to Jahja (2010) that one of the factors that will influence adolescent sexual behavior is individual attitudes.

If adolescents are supportive of premarital sexual behavior, then adolescents will tend to engage in premarital sexual behavior that can cause a variety of negative effects on adolescents themselves. According to Sunaryo (2004) factors that influence the formation and alteration of individual sexual attitudes are factors that originate within individuals, where individuals receive, process and choose everything that comes from outside.

The results showed that premarital sexual prevention by adolescents with the highest good category in preventing premarital sexual behavior was increasing religiosity by 33.2%. The results of the study there is a negative and significant relationship between religiosity and premarital sexual behavior, the higher the religiosity, the lower the premarital sexual behavior and vice versa, the lower the religiosity, the higher the premarital sexual behavior (Khairunisa, 2013).

According to Sarwono (2005) also suggests that one of the factors that influence the emergence of premarital sexual behavior is the weakening of the values of belief in religion. According to Waruwu (2003) states, religiosity becomes important because religiosity is a belief or belief that is owned by someone and plays a role in someone in making decisions about what he does everyday. According Ancok, 2005, that the function of religiosity in individual life is as a value system that contains certain norms. These norms become a reference frame in behaving and behaving so that they are in line with their religious beliefs, so that adolescents who have high religiosity will believe, believe, obey in carrying out orders and stay away from everything that God forbids, so that the teenager will

behave according to norms adhered to and being able to control negative behavior such as not engaging in premarital sexual behavior.

5. CONCLUSION

Family factors in this case are family socioeconomic factors that have no effect on premarital sexual prevention in adolescents, this can be caused by the influence of individual adolescents' attitudes and the efforts of the teenagers themselves to increase their religiosity and understanding of healthy sexual behavior and responsible which ultimately can make the right decisions and be responsible for their sexual lives and have the ability to refuse premarital sexual behavior. This study can provide recommendations related to family socioeconomic factors that can improve premarital sexual prevention, then interventions for adolescents in premarital sexual prevention programs are more focused on the activities of adolescent religiosity, thus avoiding premarital sexual behavior

6. THANK-YOU NOTE

The Faculty of Public Health, Airlangga University as a place of study and the 5 Jember High School, Kartika 4 Jember High School, Pancasila Ambulu Vocational School, Balung High School, Kasyan Puger Islamic High School and Kencong 1 High School as the research location for their participation in this research activity.

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