

COMPREHENSIVE SEXUALITY EDUCATION (CSE) OF ADOLESCENT IN HIGHER EDUCATION: IDENTIFICATION OF FIRST YEAR STUDENTS' KNOWLEDGE OF CSE IN AN EFFORT TO IMPROVE SEXUAL AND REPRODUCTIVE HEALTH

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Abstract

Adolescents' sex behavior can lead to infectious diseases, the death of young mothers, susceptibility to abortion, and other health risks. This will certainly affect the quality of life of adolescents and the next generation. However, those incidents could be prevented with a good quality of Comprehensive Sexuality Education (CSE) among the adolescent. The purpose of this study have identified the knowledge of first-year students about Comprehensive Sexuality Education (CSE) and their sexual activity. This study uses an analytical survey method with a cross-sectional survey design, data collection through a questionnaire survey. The results of data processing are presented in the form of a frequency distribution. We evaluated 248 students who answered the CSE questionnaire, 29 male (11,6%) and 219 female (88,3%). The age of sexarche of the students ranged from <17 years old (0,8%), >23 years old (0,8%), 17-19 years old (76,2%) and 20-23 years old (22,1%). Most of the student have a moderate CSE level 55,6% (138 students) followed by good level 35,4% (88 students) and low level 8,8% (22 students). The sexual activities identified were kissing, holding hands, breast touching, and sex. According to the result of this study, it can be concluded that there still lack CSE understanding among the adolescent. It needs a comprehensive intervention from the university to provide material of CSE together with adolescents' family members, especially the parents.

Keywords: sexual eduaction, adolescent, SDGs

Introduction

Comprehensive Sexuality Education (CSE) which is rooted in the SDGs goals of ensuring a healthy life, fair education, and ensuring gender equality is part of the contribution of the world of education. All children and adolescents need sexual education to understand healthy sexual behavior as a prevention from risky sexual activity.[Brunner & Matson, 2016].

The state recognizes the importance of sexual education for children and adolescents. Political commitment has the opportunity to improve existing programs or new innovations to ensure sexual education in providing information on reproductive health, STI prevention, and individual responsibility in managing sexuality safely. [Seiler-Ramadas et al 2020; de Castro et al 2018] Children and adolescents have the right to receive sex education information, in order to help they think about sex meaningfully in terms of religion, marriage and parenthood in their future. [Andari, Woro, & Yuniastuti, 2019; Kantor & Levitz, 2017; Milner, Mulekar, & Turrens, 2015; Nagpal & Fernandes, 2015]

CSE provides the information needed to help individuals take responsibility for their sexual health and well-being. [Banegas et al, 2020] Lack of sexual knowledge has a negative impact, such as deviant sexual behavior, sexual harassment and free sex life. [Pradikto & Sofino, 2019] The high level of child sexual abuse shows the importance of knowledge, attitudes and behavior to prevent child sexual abuse. [Andari et al, 2019]

Data from the Indonesian Child Protection Commission (KPAI) found 218 cases of sexual violence in 2015, 120 cases in 2016 and 116 cases in 2017. The Indonesian Demographic and Health Data Survey (2017) states that 2% of women and 8% of men aged 15-24 years have had sexual relations before marriage. 79.6% of boys and 71.6% of girls have held hands with their boyfriends. 48.1% of boys and 29.3% of girls had kissed on the lips. 29.9% of boys and 6.2% of girls have been touched/stimulated by their partners. Teenagers' premarital sex can lead to infectious diseases, death of young mothers, susceptibility to abortion, and other health risks.[Pradikto & Sofino, 2019] The CDC (2019) states that half of new STI sufferers are patients aged 15-24 years.[Ashcraft & Murray, 2017] WHO (2017), mentions more than 2 million young people living with HIV [Leung, Shek, Leung, & Shek, 2019]. This certainly affects the quality of life of adolescents. The urgency of this research, all parties are responsible for overcoming this problem, both from the family, government and related parties, including the world of education. The role of educators as an information provider contributes to ensuring that children and adolescents get complete information about sexuality. Age-appropriate information makes a positive contribution to children and adolescents in protecting their sexual rights and preventing negative impacts on the health and quality of life of adolescents.

Based on the description of the background above, the purpose of this study are; to identify the the knowledge of first year students about Comprehensive Sexuality Education (CSE) and their sexual activites.

Materials and Methods

We have carried out a quantitative approach with cross-sectional study, consisting of online survey to

assess the CSE. The Sampling in this study was carried out by total sampling, non-probability sampling technique, which is a sampling technique in which subjects who come sequentially and meet the selection criteria are taken as samples for a certain period of time until the required subjects are met based on certain considerations that have been determined by the researcher [Sastoasmoro, 2014]. Determination of the minimal sample using the Slovin formula as follows [Notoadmojo, 2017]:

$$n = \frac{N}{1+N(d^2)}$$

$$n = \frac{366}{1+366(0,05)^2}$$

$$n = \frac{366}{1,9}$$

$$n = 192.6 = 193$$

the minimun sample of this study was 193, however the total of the student who participate and meet the criteria was 248, which we included all as the respondent.

The questionnaire which used in this study was Comperhensive Sex Education Questionnaire [UNESCO, 2018]. The questionnaire consist of 8 concept of sex education as follows:

- relationship
- value, rights, culture and sexuality
- gender understanding
- sexual violence
- skill for health and well being
- body and human development
- sexuality and sexual behavior
- sexual and reproductive health

The questionnaire has been tested for its validity and reliability with cronbach alpha 0,974, which considered to be valid and ideal to be used.

This study has been done from january to august 2021. After obtaining a research permit (through an ethical session) from the Ethics Committee, the researcher socialized the research plan to be carried out to all Sari Mulia University nursing students who met the population criteria which aimed to explain the benefits of the research, the purpose of the research and the implementation procedure. Researchers determine respondents based on inclusion criteria who meet the requirements to be respondents according to sampling techniques. Data collection was carried out by researchers and research assistants themselves.

Results and Discussion

Socio – Demographic Characteristics of respondent

Table 1: Age of respondent

No	Age	Number (n)	Percentage (%)
1.	<17 years old	2	0,8
2.	>23 years old	2	0,8
3.	17-19 years old	189	76,2
4.	20-23 years old	55	22,1
	Total	248	100

Table 2: Gender of respondent

No	Gender	Number (n)	Percentage (%)
1.	Male	29	11,6
2.	Female	219	88,3
	Total	248	100

Table 3: Sexual education material which has been obtained

No	Sexual Education Material	Number (n)	Percentage (%)
1.	Human reproductive system	124	27,3
2.	HIV-AIDS & sexual transmitted disease	164	36,1
3.	Human anatomy	72	15,8
4.	Heterosexual and homosexual	40	8,8
5.	None	54	11,8
	Total	454	100

Table 4: Discussion partner about Sexuality

No	Γ	Discussion partner	Number (n)	Percentage (%)
1.	Friends		178	48,2
2.	Doctor		45	12,1
3.	Parents		43	11,6
4.	Siblings		33	8,9
5.	Teacher		15	4

6.	Lecturer/ academic assistant	8	2,1
7.	Youth Red Cross Discussion Forum	1	0,27
8.	Community organization	1	0,27
9.	Cousin	1	0,27
10.	Spiritual teacher	1	0,27
11.	None	43	11,6
	Total	369	100

Table 5: Things to discuss about Sexuality, dating status which known by parents

No	Things to discuss	Number (n)	Percentage (%)
1.	Dating/ marriage	132	28,1
2.	Reproductive system	125	26,6
3.	Pregnancy	91	19,4
4.	Sexual activity	78	16,6
5.	None	43	9,1
	Total	469	100

Table 6: Dating status which known by parents

No	Dating status	Number (n)	Percentage (%)
1.	No dating	154	62
2.	Known by parents	88	35
3.	Did not known by parents	6	2,4
	Total	248	100

Sexual behavior

Table 7: Sexual activities with lover, the first sexual activity, sexual activity without relationship

No	Sexual activity which has been	Number (n)	Percentage (%)
	done with lover		
1.	Nothing	245	98,7
2.	Kissing	1	0,4
3.	Breast touching	1	0,4
4.	Sex	1	0,4

Total	248	100

Table 8: The first sexual activity, sexual activity without relationship

No	The first sexual activity	Number (n)	Percentage (%)
1.	Never	245	98,7
2.	17 years old	1	0,4
3.	19 years old	1	0,4
4.	20 years old	1	0,4
	Total	248	100

Table 9: Sexual activity without relationship

No	Sexual activity without	Number (n)	Percentage (%)
	relationship		
1.	Never	246	99
2.	Holding hands	1	0,4
3.	Kissing	1	0,4
	Total	248	100

Comperhensive Sexuality Education (CSE) Level

Table 10: Overview of Comprehensive Sexuality Education (CSE) Levels

No	Comprehensive Sexuality Education (CSE)	Number (n)	Percentage (%)
	Levels		
1.	Good	88	35,4
2.	Moderate	138	55,6
3.	Low	22	8,8
	Total	248	100

Overview of Comperhensive Sexuality Education (CSE) Levels

The results show that the majority of first year students have moderate CSE level as many as 138 people (55.6%), low as many as 22 people (8.8%) and good as many as 88 people (35.4%). From the result we can see that it still has the risk of misperceptions about sexual behavior. This level of knowledge can affect individual sexual behavior, in line with research by Usfinit, Kuduma, & Widiani [2017] which

states that there is a tendency that the better the level of premarital sexual knowledge, the better the controlling behavior will be. It is also in line with Notoadmojo's [2017] theory, that thinking or cognitive ability is the main factor in shaping a person's behavior that stays on him in the long term.

The level of CSE level can be influenced by various factors, such as the age of the majority of respondents which >17 years. At that age, the reproductive organs have reached maturity and have extensive exposure to inappropriate mass media. Furthermore, the gender factor, where male adolescents are more likely to engage in sexual behavior than female adolescents, as found in Lyu, Shen, & Hesketh [2020] that male students are more in the habit of having premarital sexual relations with more than one partner than female students. (41.8% and 28.8%). Furthermore, in this study, (11.8%) students did not receive any prior sexuality education. This needs to be an important concern, the lack of information can lead to independent searches by students so that there is a potential for errors in collecting information [Mariani & Arsy, 2017]. The inaccurate accumulation of information also has the potential to be caused by the environment or opponents of discussion in discussing sexuality education. In this study, most of the respondents had discussions about sexual education with their friends (48.2%) with the highest topic of discussion being about dating/marriage (28.1%). According to Sari & Yulianti [2020], the influence of friends in forming knowledge about sexuality has a significant relationship (p = 0.007) which means, an individual can gain knowledge about sexuality behavior from his peers and coupled with a young age who has dreams of the beauty of life after marriage or when they have a date. This phenomenon is influenced by social media, both print and digital mass media which intensively displays the beauty of romance in youth which is carried out with physical contact. Furthermore, physical contact without proper knowledge base has the potential to result in many losses, such as sexual violence to early marriage.

In this study, it was found that as many as 88 (35%) respondents had date known by their parents and as many as 6 (2.4%) respondents had date without their parents knowing. According to research by Mulya, Lukman, & Yani [2020], the role of parents has a relationship with education and adolescent sexual behavior (p = 0.00). Indeed, parents have a very big role in providing sexuality education, namely as a companion, a place to ask questions, and as observers for their teenagers.

The level of knowledge that has been identified in this study certainly requires special attention so that appropriate interventions might given in order to increase the CSE level. Futhermore, there is a need for a holistic support system, both from the educational environment and the family environment.

Sexual behavior

The sexual activities which has been done by respondents who have a date include kissing (0.4%), breasts touching (0.4%) and sex (0.4%). While the sexual activities by respondents without dating include

holding hands (0.4%) and kissing (0.4%). Based on age, respondents had sexual intercourse for the first time at the age of 17 years (0.4%), 19 years (0.4%) and 20 years (0.4%). Sexual behavior can be motivated by various internal and external factors.

Several internal factors that have the potential to cause sexual activity among adolescents are age, hormones, and body image. The more mature a person's age, the greater his desire for sexual activity, this is a manifestation of the maturity of psychological and physical functions that are increasingly developing. Furthermore, the influence of hormones that trigger feelings of wanting to get a romantic atmosphere with a partner [Arruda, et al 2020]. The findings of the study [Gazendam, Cleverley, King, Pickett, & Phillips, 2020] identified a significant relationship between assessments of the physical condition of adolescent girls and their sexual activity. The lower the satisfaction with their physical appearance, the higher the risk of sexual activity carried out by adolescent girls. This can be caused because young women who are not satisfied with their physical appearance need recognition and praise for the physical appearance of the opposite sex through sexual activity.

External factors that have the potential to encourage sexual activity include having a lover, family economic circumstances, poor family relationships and social media. Teenagers who have lovers/ a date tend to engage in romantic activities, especially if they have a female partner who is 2 years older, because women are likely to enter puberty 2 years earlier than men [Pringle et al, 2017]. Furthermore, low family economic conditions also affect adolescent sexual activity. This can be due to the lower the economic situation, the living environment and the quality of education obtained are also affected. Moreover, less harmonious family may cause poor communication between family members, so teenagers tend to seek comfort outside their families. The use of social media among teenagers can trigger irresponsible sexual activity. Adolescents who spend more time playing social media are found to have higher sexual activity than those who rarely play social media [Gazendam et al, 2020]. Through social media, teenagers are easily exposed to various risky content.

Those sexual activities have the potential to cause many losses, one of which is very real is the disruption of the adolescent's academic activities. Adolescent sexual activity can cause various negative impacts, such as sexually transmitted diseases, pregnancy, and sexual violence. This surely affects the performance of a teenager in studying.

Conclusions

• The level of Comprehensive Sexuality Education mostly at a moderate, as many as 138 people (55.6%), followed by low level as many as 22 people (8.8%) and good as many as 88 people (35.4%).

- Sexual activities carried out by students who have date include kissing (0.4%), breasts touching (0.4%) and sex (0.4%).
- Sexual activities carried out by students without dating include holding hands (0.4%) and kissing (0.4%).
- Based on age, students had sexual intercourse for the first time at the age of 17 years (0.4%), 19 years (0.4%) and 20 years (0.4%).

Since this study only identified the overview of the CSE level, in the future, it will be need a research which identified factors which related with CSE level among adolescents. At the end, we suggest that academic sector need to enhance sexual education material together with the support of the parents as a closest person to the adolescent at home.

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