

## Factors Associated with Sexual Education Provided by Parents to Adolescents Aged 11-14 Years in Durian Village

### Faktor Yang Berhubungan Dengan Pemberian Pendidikan Seksual Oleh Orang Tua Remaja Usia 11-14 Tahun di Desa Durian

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#### ABSTRACT

Sexual issues are important to provide sexual education for children to straighten children's sexual perceptions and behavior to be more positive. Possible reactions related to parental knowledge, parental attitudes, parental communication, parental education level, parental taboo perception and parental income. The purpose of this study was to determine the factors associated with the provision of sexual education by parents by adolescents aged 11-14 years in Durian Village. This study used a cross-sectional research design with Chi Square test with 95% confidence level. The population in this study were 1,685 families and a sample of 94 people divided into 5 hamlets. The results of this study indicate that there is a relationship between parental knowledge and the provision of sexual education (p value = 0.001), parental education with the provision of sexual education (p value = 0.009), parental attitudes with the provision of sexual education (p value = 0.008) and the perception of taboo with the provision of sexual education (p value = 0.011). Variables that have no relationship are communication and parental income. Parents can increase knowledge about sexuality so that parents can understand the importance of sexual education given to their children.

#### ABSTRAK

Pendidikan seksual anak penting diberikan untuk meluruskan persepsi dan perilaku seksual anak menjadi lebih positif. Kemungkinan hal yang menghambat pendidikan seksual terhadap anak yaitu pengetahuan orang tua yang rendah, sikap orang tua, komunikasi orang tua dengan anak tidak terbuka, tingkat pendidikan orang tua rendah, persepsi tabu orang tua dan pendapatan orang tua. Tujuan penelitian ini adalah untuk mengetahui faktor yang berhubungan dengan pemberian pendidikan seksual oleh orang tua oleh remaja usia 11-14 tahun di Desa Durian. Penelitian ini menggunakan rancangan penelitian cross-sectional dengan uji Chi Square dengan tingkat kepercayaan 95 %. Populasi dalam penelitian ini sebanyak 1.685 keluarga dan sampel sebanyak 94 orang yang terbagi menjadi 5 dusun. Hasil penelitian ini menunjukkan bahwa terdapat ada hubungan antara pengetahuan orang tua dengan pemberian pendidikan seksual (p value=0,001), pendidikan orang tua dengan pemberian pendidikan seksual (p value=0,009), sikap orang tua dengan pemberian pendidikan seksual (p value=0,008) dan persepsi tabu dengan pemberian pendidikan seksual (p value=0,011). Variabel yang tidak ada hubungan yaitu komunikasi dan pendapatan orang tua. Bagi orang tua dapat meningkatkan pengetahuan mengenai seksual agar orang tua bisa memahami pentingnya pendidikan seksual yang dapat diberikan kepada anak mereka.



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## 1. INTRODUCTION

According to the World Health Organization (WHO), adolescence occurs between the ages of 12 and 24 years<sup>1</sup>. According to the Regulation of the Minister of Health of the Republic of Indonesia Number 25 of 2014, adolescents are residents aged 10-19 years. This age range is a period marked by rapid growth and development in terms of physical, psychological, and intellectual<sup>2</sup>. High curiosity and a willingness to try new things are typical characteristics of adolescents. This condition is often accompanied by spontaneous, careless, or thoughtless decision-making, such as marrying at a young age or early marriage<sup>3</sup>.

Based on data and sexual crimes against children and adolescents in Indonesia every year there is an increase, including 42% sexual harassment. In 2011 there were 2,426 cases (58% sexual harassment, in 2012 there were 2,637 cases, 62% sexual harassment). In 2013 there was a significant increase of 3,339 cases, with sexual violence at 62%. In 2014, sexual violence against children reached 5,066 cases. According to the Indonesian Child Protection Commission (KPAI) (2017), there were 6,006 cases of child sexual abuse from early 2015 to August 2015 (48%). Meanwhile, according to the DP3KB (2021), there were 8 cases of sexual violence in Sungai Ambawang District in 2020, there were 3 cases of men and 5 cases of women. In 2021, from January to November, there was 1 case of sexual violence recorded.

Based on a preliminary study at the Jember Integrated Service Center in 2011, 47 cases of violence against children were recorded, with 87% of the cases involving girls being sexual violence. This sexual violence included rape, sexual intercourse, or molestation. Most of the victims' parents admitted they did not provide sex education to their children, believing they had already received it in school.

According to data from the Office of Religious Affairs (KUA), there were 12 cases of early marriages under the age of 19 in 2020, with the marriage being refused by state law, with instructions to seek approval from the religious court for a dispensation. Meanwhile, in 2021, there were 10 cases of early marriages approved by the religious court and received dispensations from the Kubu Raya Regency Religious Court.

Factors that prevent parents from providing sex education to teenagers include a lack of understanding, knowledge, and educational attainment, as well as the perceived taboo nature of sex education. Parents find it difficult to explain it to teenagers, leading them to believe that their children will receive this information or education from teachers at school. In fact, many parents still believe that providing sex education to children from an early age is taboo, even though one way to prevent sexual abuse is through providing sex education to their children<sup>4</sup>.

A preliminary study conducted by researchers in Durian Village, Sungai Ambawang District, Kubu Raya Regency, revealed that parents of teenagers reported that they had never provided information and education about sexuality to their children. A survey of 10 parents revealed that nine parents were unaware of sexuality education, citing a lack of understanding about sex, lack of knowledge, educational level, cultural values, and perceived taboos. These factors prevent parents from providing sexuality education to their children.

## 2. METHODS

This study uses a cross-sectional research design, which is a study that studies the correlation between exposure or risk factors (independent) with consequences or effects (dependent). This research will be conducted in Durian Village, Kubu Raya Regency. The time of implementation of this research was carried out from December to

January 2022. The population in this study were parents who have adolescent children with the age category 11-14 years in Durian Village, Sungai Ambawang District. Based on data obtained at the Durian Village Office, there are 1,647 heads of families who have adolescent children. This study is 94 parents who have adolescents with the category 11-14 years in Durian Village, Sungai Ambawang District. The data collection technique in this study used a questionnaire method. This analysis was carried out to see the possibility of a relationship between the independent and dependent variables. Bivariate analysis in this study used the chi-square test.

### 3. RESULTS

**Table 1. Respondent Characteristics**

<b>Characteristics</b>	<b>n= (94)</b>	<b>%</b>
<b>Age</b>		
>35 years	65	69.1
17 – 35 years old	29	30.9
<b>Religion</b>		
Islam	90	95.7
Catholic	4	4.3
<b>Number of children</b>		
>3 children	33	35.1
1-3 children	61	64.9
<b>Education</b>		
Senior High School	22	23.4
Junior High School	12	12.8
Elementary School	46	48.9
No school	14	14.9
<b>Sex education</b>		
Not enough	89	94.7
Good	5	5.3
<b>Level of Knowledge</b>		
Not enough	69	73.4
Good	25	26.6
<b>Parents' Attitude</b>		
Not enough	61	64.9
Good	33	35.1
<b>Parental Communication</b>		
Not enough	90	95.7
Good	4	4.3
<b>Taboo Perception</b>		
Taboo	72	76.6
Not Taboo	22	23.4
<b>Income</b>		
Low	47	50.0
High	47	50.0

Source: Primary Data, 2022

Based on table 1, the characteristics of respondents are the highest age, namely age above 35 years, as much as 69.1%, while the most religion is Islam as much as 95.7%, the highest number of children is as much as 1 to 3 children as much as 64.9%,

while the highest education is elementary school as much as 48.9%, while the respondents' sexual knowledge is poor as much as 94.7%, while the parents' attitudes are poor as much as 64.9%, poor parental communication as much as 95.7%, and taboo perceptions as much as 76.6%, and low income as much as 50%.

**Table 2. Bivariate Analysis**

Variables	Sexual Education				p-value	PR Value (95%CI)
	No		Yes			
	n	%	n	%		
<b>Knowledge</b>						
Not enough	69	73.4	0	0.0	0.001	1,250 (1.208- 1.521)
Good	20	21.3	5	5.3		
<b>Level of education</b>						
Low	72	76.6	71	1.1	0.009	16,941 (1,778- 161,400)
High	17	18.1	4	4.3		
<b>Parents' Attitude</b>						
Not enough	61	64.9	0	0.0	0.008	1,179 (1,021 – 1,361)
Good	28	29.8	5	5.3		
<b>Parental communication</b>						
Not enough	86	91.5	4	4.3	0.153	1.218 (0.988 - 1.502)
Good	3	3.2	1	1.1		
<b>Taboo Perception</b>						
Taboo	71	75.5	1	1.1	0.011	15,778 (1,660- 149,923)
Not taboo	18	19.1	4	4.3		
<b>Parents' Opinion</b>						
Low	45	47.9	2	2.1	1,000	1.023 (0.929 – 1.126)
High	44	46.8	3	3.2		

Source: Primary Data, 2022

Table 2 shows that there is a relationship between parental knowledge and the provision of sexual education (p value = 0.001), parental education and the provision of sexual education (p value = 0.009), parental attitudes and the provision of sexual education (p value = 0.008), and taboo perceptions and the provision of sexual education (p value = 0.011). The variables that have no relationship are communication and parental income

#### 4. DISCUSSION

The discussion contains an interpretation of the research results, linking them to relevant theories, literature, and previous findings. The discussion does not repeat the results. The insights sought are universal, with international sources preferred over

national ones, and sources not from the relevant university environment, as these are considered highly local. The writing on the results and discussion should take up approximately 55% of the total page count.

### **The Relationship Between Parental Knowledge to the Provision of Sex Education to Adolescents Aged 11-14 Years in Durian Village**

The results of the study indicate a relationship between parental knowledge and the provision of sex education to adolescents aged 11-14 in Durian Village. This finding aligns with the findings of other studies. Manda Kartika Putri (2012) with knowledge and behavior of providing sex education to children by parents of students at Madrasah Ibtidaiyah Hayatul Islamiyah Depok<sup>5</sup>.

Based on the results of the study, it was found that some respondents knew about activities to maintain the process of species sustainability as much as 78.7%, some knew about physiological bleeding as much as 20.2%, some knew about sexually transmitted infections as much as 25.5%, some knew about a good age as much as 33%, some knew about pregnancy outside of marriage as much as 24.5%, respondents who knew about premarital sex as much as 56.4%, respondents who knew about abortion as much as 51.1%, respondents who knew about the impact of pregnancy as much as 47.9%, respondents who knew about efforts to increase knowledge as much as 47.9%, and respondents knew about the culture of early marriage as much as 36.2%.

Previous research also stated that there is a relationship between respondents' knowledge about providing sex education to adolescents and respondents' actions in providing sex education to adolescents<sup>6</sup>. By increasing education and information for parents about sex education for early childhood, it will increase good knowledge so that parents can provide sex education knowledge to children as early as possible

### **The relationship between parental education to the provision of sexual education to adolescents aged 11-14 years in Durian Village**

The results showed a p-value of 0.009, indicating a relationship between parental education and the provision of sexual education to adolescents aged 11-14 in Durian Village. This study aligns with previous research that found that the provision of health education significantly impacted the incidence of sexual violence among elementary school children<sup>7</sup>.

Based on the results of the study, it was found that some respondents answered the first statement question regarding the introduction of reproductive organs as much as 56.4%, had explained about menstruation and wet dreams as much as 42.6%, explained the language of sexually transmitted diseases as much as 9.6%, explained the ideal age for marriage as much as 14.9%, explained pregnancy outside of marriage as much as 18.1%, explained how to prevent pregnancy as much as 45.7%, explained about abortion as much as 12.8%, explained about the impact of unwanted pregnancy as much as 10.6%, explained about sex education for children under 10 years old as much as 10.6%, explained the dangers of early marriage as much as 19.1%.

Knowledge and information about sex are crucial for the nation's future generations. However, children and adolescents are vulnerable to misinformation about sex. Without proper sex education, they will believe in untrue myths about sex. Information about sex should be obtained from parents, teachers, or other trusted sources<sup>8</sup>.

This education can also indirectly teach children not to carelessly allow others to clean their genitals. The way sex education is delivered should not be overly vulgar, as

this can negatively impact children. In fact, both girls and boys face the same dangers from their environment. Research shows that perpetrators of sexual violence are those closest to the child. Therefore, it is important to develop early childhood sex education materials with a gender perspective<sup>9</sup>.

Providing sexual health education can increase knowledge and change children's behavior patterns to avoid forms of risk and incidents of sexual violence, where in this study it was seen that after providing sexual health education, there was a decrease in the incidence of sexual violence, where there was a decrease in the incidence of sexual violence after providing sexual health education. Therefore, sexual health education is important to be provided as early as possible to children to form character and behavior patterns that can prevent them from behaviors that are at risk of sexual violence and deviant sexual behavior.

### **The Relationship of Parents' Attitudes to the Provision of Sex Education to Adolescents Aged 11-14 Years in Durian Village**

The results of the study showed a p-value of 0.008, indicating a relationship between parental attitudes and the provision of sexual education to adolescents aged 11-14 in Durian Village. Previous research has also found a statistically significant relationship between parents' attitudes regarding sex education in children and parent's behavior in providing sex education to children<sup>10</sup>.

Based on the results of interviews regarding parental attitudes, among others, respondents who agreed to provide sexual education were 31.9%, agreed that providing sex education can prevent sex was 39.4%, agreed to be open and tell children was 18.1%, children received sex education from an early age was 5.3%, and implemented the rules that apply at home according to mutual agreement was 46.8%.

The positive attitude held by parents in providing sex education to children is likely due to the knowledge they have<sup>11</sup>. Efforts should be made by fulfilling the role of parents as educators, encouragers, role models, supervisors, friends, counselors, and communicators. This will allow adolescents to monitor their growth and development, especially in sex education. Furthermore, knowledge of both adolescents and parents can be increased through both print and technological media. Furthermore, the techniques and methods used to deliver sex education to adolescents need to be considered so that it does not appear taboo and conspicuous. Besides parents, schools are also an appropriate place to provide sex education<sup>12</sup>.

### **The Relationship Between Parental Communication and the Provision of Sexual Education to Adolescents Aged 11-14 Years in Durian Village**

The results of the study showed that the p value was 0.51, meaning that there was no relationship between parental communication and the provision of sexual education to adolescents aged 11-14 years in Durian Village.

Based on the interview results, it was found that 20.2% of parents were open with their children, 10.6% talked about sex with their children, 10.6% shared information with their children, 5.3% asked their children about sex, 48.9% spent time talking with their children, and 94.7% implemented things that should not be done.

Effective communication between parents and adolescents has been identified as a key strategy in increasing responsible sexual behavior and minimizing risky sexual experiences in adolescents<sup>13</sup>. Sex education is defined as learning about sexuality that encompasses cognitive, emotional, social, interactional, and physical aspects aimed at

supporting and protecting sexual development. The goal of this activity is to raise awareness of the importance of reproductive health so that sexual harassment and sexually transmitted diseases can be prevented<sup>14</sup>.

Besides parents considering sex taboo, there are other factors that prevent parents from providing their children with the necessary tools to communicate or discuss sex with them. Parents admit that communicating or discussing sex with their children is wrong. Parents often perceive sex education as encouraging sexual behavior, which makes them reluctant to communicate about sex<sup>15</sup>.

Lestari's (2019) research found that there was no specific time for delivering sexual education by parents to children, as all subjects stated that the timing of delivery was flexible. This was revealed in an interview excerpt with a parent subject. The increasing interest in sexuality must be balanced by parents providing accurate and complete information. Adolescents have a natural curiosity and a strong desire to try new things, with their adventurous spirit extending into relationships and love affairs<sup>14</sup>.

Sexual education is also communicated to children starting from early childhood. The depth or simplicity of the sexual education content should be adapted to the child's needs and developmental stage. This means that the success and effectiveness of sexual education communication between parents and children depend greatly on the stage of content delivery, starting from early childhood and progressing gradually through subsequent stages<sup>17</sup>.

### **The Relationship Between Parental Taboos and Sexual Education for Adolescents Aged 11-14 Years in Durian Village**

The results of the study show a p-value of 0.011, indicating a significant relationship between parental perceptions of taboo and the provision of sexual education to adolescents aged 11-14 years in Durian Village. According to interview results regarding parental perceptions of taboo towards sexual education, 53.2% agreed that their children would receive sexual education from their teachers, 79.8% of parents were reluctant to discuss reproductive organs with their children, and 70.2% agreed to introduce reproductive organs to their children using different terms.

The taboo perception shapes parents' belief that sexual education is too vulgar and inappropriate to be taught to children. According to parents, sexual education could prompt children to seek out information related to sex, leading to concerns that children may imitate negative sexual behaviors. Therefore, parents believe that children do not need explanations about sex at this stage, as they will understand it when they are older<sup>18</sup>.

Nyarko's (2014) research also indicated that there are several factors influencing parental perceptions of sexual education, one of which is the general perception of society. Consequently, the community tends to be closed off when it comes to discussions about sex. The taboos prevalent in society make parents feel embarrassed and reluctant to talk about sex-related matters with their children<sup>18</sup>. This perception also causes parents to hesitate in providing sexual education to their children. Parents' personal experiences also play a role in shaping their perceptions of sexual education, as each parent has different backgrounds and experiences with sex<sup>19</sup>.

### **The Relationship Between Parental Income to Sexual Education for Adolescents Aged 11-14 Years in Durian Village**

The results of the study show a p-value of 1.000, meaning there is no significant relationship between parental income and the provision of sexual education to

adolescents aged 11-14 years in Durian Village. This finding aligns with previous research that indicates economic status does not influence early sexual education behaviors for children. Whether the income is high or low does not affect the pattern of sexual education provided to children<sup>20</sup>.

In this study, socioeconomic status was measured based on monthly expenditure. This study is supported by previous research that measured monthly expenditures, including daily food, education, and transportation. The highest expenditure by parents was for daily food, while the lowest expenditure was for education-related costs, including school fees, courses, and educational resources like books<sup>21</sup>.

Family income levels can be influenced by the adequacy of primary and secondary needs, as well as the attention and affection children receive. If both parents work, the opportunity for parents to provide attention and affection to their children may be limited, which could affect the child's development and well-being<sup>10</sup>.

## 5. CONCLUSION

There is a relationship between parental knowledge, parental education, parental attitudes, and perceptions of taboo with the provision of sexual education. The variables that were not found to have a significant relationship are communication and parental income.

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