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Research Article

The Relationship between Spiritual Self Efficacy and Premarital Sexual Behavior among High School Student in Makassar City 2019

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Abstract: Self-efficacy is one of the internal factors that influence premarital sexual behavior in adolescents. This study aims to determine the relationship between spiritual self-efficacy and premarital sexual behavior in high school adolescents in Makassar City. The research was conducted at 8th Makassar Vocational High School. The design of this study is Cross Sectional. A total sample of 163 female students in class IX and aged 14-18 years. Sampling was done using the proportionate stratified random sampling method. Data were analyzed using the Spearman correlation test. The results of univariate analysis showed that the respondents were at most 17 years old (39.3%), while the respondents who were at least 14 years old (1.2%). Bivariate results showed there was a correlation between spiritual self-efficacy (p = 0,000 and r = -0,532) with premarital sexual behavior in high school adolescents in Makassar City. The correlation value shows a negative correlation with the strength of the medium correlation. It was concluded that there was a relationship between spiritual self-efficacy and premarital sexual behavior in high school adolescents in Makassar City. It is expected that an increase in spiritual self-efficacy can be used as an effort to prevent premarital sexual behavior in adolescents. **Keywords:** self-efficacy, spiritual, premarital sex behavior, adolescence, Makassar.

INTRODUCTION

Adolescence is a transition characterized by physical, emotional and psychological changes. Adolescence, which is between the ages of 10-19 years, is a period of maturation of the human reproductive organs, and is often called puberty. Adolescence is a transition period from childhood to adulthood (Widyastuti, 2009). According to Rice (in Gunarsa, 2004), adolescence is a transition period, when individuals grow from childhood to become individuals who have maturity. At that time, there were two important things causing teenagers to exercise selfcontrol. These two things are, first, things that are external, namely the existence of changes in the environment, and the second is things that are internal, namely the characteristics in adolescents.

The existence of major changes in the stage of adolescent development both physical changes and psychological changes (in women after experiencing menarche and in men after experiencing wet dreams) causes adolescence to be relatively turbulent compared

to other developmental periods. Physical changes occur faster than psychological and social changes. This can make teenagers feel confused with the changes that occur. Sexual hormones have begun to function in adolescence. This encourages adolescents to carry out various types of sexual behavior (Kaplan, 2010). This causes adolescence to be important to note. If a teenager does not succeed in overcoming this situation, the teenager will be trapped into a negative behavior, including drug abuse and free sex (Zulhaini and Nasution, 2011).

Research conducted on high school students in the US in 2011 showed that as many as 47.4% of students had sexual intercourse, 33.7% had sexual intercourse in the last 3 months, 39.8% of them did not use condoms when making a relationship sexual and 76.7% did not use birth control pills to prevent pregnancy and as many as 15.3% had had sexual relations with four or more people during their lifetime (CDC, 2013).

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In Indonesia, the results of the 2012 Indonesian Adolescent Reproductive Health Survey (SKRRI) found 29.5% of adolescent boys and 6.2% of adolescents had touched or stimulated their partners, 48.1% of adolescents and 29.3% of adolescent girls never kissed lips, and 79.6% of teenage boys and 71.6% of teenage girls had held hands with their partners (Central Statistics Agency, 2013). The survey conducted by the Indonesian Child Protection Committee (KPAI) and the Ministry of Health, (Kemenkes) in October 2013 explained that around 62.7% of teenagers in Indonesia have had sex outside of marriage. As many as 20% of the 94,270 women who experience pregnancy outside of marriage also come from the teen age group and 21% of them have had an abortion. This figure is taken from 4,726 respondents of middle / high school students in 17 major cities. Based on data from the Youth Information and Services Center (PILAR) at the Indonesian Family Planning Association (PKBI) in Central Java in 2015, in 2011 there were 2,967 adolescents who consulted PILAR where 821 adolescents consulted about reproductive health issues and there were 79 cases of Unwanted Pregnancy (KTD). While in 2012, there were 63 cases of KTD in the youngest age of 12 years. And in 2013 there were 64 cases of KTD, 26 cases occurred in Semarang (PILAR Indonesian Family Planning Association Central Java, 2015). Meanwhile, based on a survey conducted by the National Family Planning Coordinating Board (BKKBN) found, the number of teenagers who had had sex at junior high to high school age in Makassar reached 47% to 54%. Nationally, even higher it reached 63% while 21% of them had had an abortion.

The cause of adolescents falling prey to free sex is one that is weak. Self-efficacy becomes a determinant of changes in human behavior. Adolescents who are approaching adult demands, they must learn to take responsibility for themselves in every dimension of life. Teenagers can strengthen their sense of efficacy by learning how to be successful in dealing with various problems (Hidayat, 2013; Alwisol, 2004).

Self-efficacy is one of the potentials that exist in human cognitive factors which are part of the determinant of human actions other than the environment and internal encouragement. Bandura (in Pervin & Jhon) states that self-efficacy is the most important aspect of perception which is part of cognitive function (Pervin & Jhon, 2001: 447). A person with high self-efficacy believes that they are able to do something to change the events around him, while someone with low self-efficacy considers himself basically unable to do everything around him. In difficult situations, people with low self-efficacy tend to give up easily. While people with high self-efficacy will try harder to overcome existing challenges. The same thing was expressed by Gist, which shows evidence that feelings of self-efficacy play an important role in motivating workers to complete challenging work in relation to achieving certain goals (Ghufron & Rini, 2011: 76).

Adolescents who have high spiritual self-efficacy tend to avoid premarital sexual behavior. Teenagers who have spiritual intelligence can understand which things are good and bad, and can control their behavior (Zohar & Marshall, 2007).

Research conducted by Winarni (2017) shows that there is an influence of self-efficacy with premarital sexual behavior where the higher the efficacy of students, the lower the premarital sexual behavior. This is in line with Anggai's research (2015) which shows that there is a very significant negative relationship between self-efficacy and risk behavior towards health in adolescents. The higher self-efficacy, the lower the risky behavior towards health, on the contrary the lower the self-efficacy, the higher the risky behavior towards health. Based on the description above, important selfefficacy is owned by adolescents in order to be able to continue to face all the changes that occur both physical and psychological changes in their development. The purpose of this study was to determine the effect of selfefficacy in the spiritual field on premarital sexual behavior in high school adolescents in Makassar City.

METHODOLOGY

Research Design

The design in this study used an observational analytic design with a cross sectional approach. This research was held at 8 Makassar Vocational High Schools in Makassar City, South Sulawesi.

Population and Sample

The population in this study were all students of class XI Makassar 8 Vocational High School totaling 281 female students. The inclusion criteria from the sample of this study included female students aged 14-18 years who sat in class XI. The sample size is calculated using the sample formula for health research with population (N) known, as introduced by Lameshow, et al., (1997) to obtain 163 samples. The sampling was done by proportionate stratified random sampling. The number of multilevel sample members (stratified) is done by means of sampling by proportional random sampling which is using proportional allocation formula. Determination of sample members is done randomly by raffling names in each class so that they are obtained according to the number of samples needed.

Data Collection

The data collected consists of primary data and secondary data. Primary data is obtained by using a questionnaire that has been prepared in advance according to the purpose of the study. while secondary data is obtained from administration. Data collection was carried out by trained field officers and using questionnaires. Variables of premarital sexual behavior of adolescents and spiritual self-efficacy were measured

by interviews using questionnaires. Data on premarital sexual behavior is measured by 10 questions given a score of 1 if answered yes, and a score of 0 if answering no. Whereas spiritual self-efficacy data was measured by 8 questions which were given a score of 1-5 according to the Likert scale.

Data Analysis

Data on premarital sex behavior and spiritual self-efficacy are processed using SPSS for Windows 16.0. Bivariate analysis was used to determine the relationship between spiritual self-efficacy and premarital sexual behavior using the Spearman Correlation test.

RESULTS

In this study univariate analysis was conducted to determine the frequency and distribution of respondents based on the characteristics of respondents and research variables. The general characteristics of the respondents consisted of age, residence, education, occupation, and parents' income.

Table 1. Distribution of Respondents according to the Characteristics of Respondents in 8 Vocational High Schools in Makassar City in 2019

Respondent Characteristics	n	%
Age (Year)		
14	2	1.2
15	16	9.8
16	54	33.1
17	64	39.3
18	27	16.6
Total	163	100.0
Live with parents		
Yes	150	92.0
No	13	8.0
Total	163	100.0
Parents' education		
Elementary School	10	6.1
Junior School	22	13.5
High School	107	65.6
Diploma 3/Undergraduate	20	12.3
Master Degree	4	2.5
Total	163	100
Parents Occupation		
Civil Servant	11	6.7
Entrepreneur	89	54.6
Employee/Functionary	23	14.1
Workman	4	2.5
Labor	27	16.6
Etc.	6	3.7
Unemployed	3	1.8
Total	163	100
Parents' Income		
Unemployed	3	1.8
<rp.1000.000,-< td=""><td>29</td><td>17.8</td></rp.1000.000,-<>	29	17.8
Rp.1.000.000,- to	87	53.4
3.000.000,-	36	22.1
Rp.3.000.000,-to	8	4.9
5.000.000,-		
>Rp. 5.000.000,-		
Total	163	100

Source: Premier Data, 2019

Based on the table 1 respondent is at most 17 years old (39.3%), while the respondents who are at least 14 years old (1.2%). Based on place of residence, at most respondents lived with parents (92.0%) compared to those without (8.0%). Based on the parents' latest education, most of them had high school education level (65.6%) while those with the least had S2 education level (2.5%). Table 3 also shows the distribution of respondents based on the work of parents. Most of the respondents' parents worked as entrepreneurs (54.6%) while the least were those who did not work (1.8%). In addition, based on the parents' income, most of them have an income of Rp.1, 000,000 to Rp.3, 000,000 (53.4%) while the least are those who have no income (1.8%).

Table2. Distribution of Respondents according to Premarital Sex Behavior Variables for Students in Makassar 8 Vocational High School

Makassar 8 Vocational High School			
Premarital Sexual Behavior	n	%	
Dating			
Yes	143	87.7	
No	20	12.3	
Watch Porn Video			
Yes	117	71.8	
No	46	28.2	
Holding Hands			
Yes	161	98.8	
Yes	2	1.2	
Hugging			
Yes	133	81.6	
No	30	18.4	
kissing Cheeks			
Yes	107	65.6	
No	56	34.4	
Kissing Lips			
Yes	71	43.6	
No	92	56.4	
Masturbating			
Yes	27	16.6	
No	136	83.4	
Touching Sensitive Area			
Yes			
No	32	19.6	
	131	80.4	
Petting			
Yes	21	12.9	
No	142	87.1	
Oral Sex			
Yes	10	6.1	
No	153	93.9	
Sexual Intercourse			
Yes	19	11.7	
No	144	88.3	
Total	163	100	

Source: Premier Data 2019

Table 2 shows the characteristics of respondents according to the variables of premarital sex behavior. Premarital sexual behavior is the most widely done, namely holding hands as much as 98.8% while the least is doing oral sex (6.1%). Of the 163 respondents, 87.7% claimed to have been dating, 71.8%

had watched pornographic videos, 81.6% had hugs with boyfriends, 65.6% had kissed cheeks, 43.6% kissed lips, 16.6% had masturbated, 19.6% had held sensitive areas of the opposite sex, 12.9 % had done petting, and as many as 11.7% claimed to have had sexual relations.

Table3. Relationship between Spiritual Self-Efficacy and Premarital Sexual Behavior in High School Adolescents in Makassar City 2019

	Premarital	Sexual
	Behavior	
Efficacy and Spiritual	r = -0.532	
	p = 0.000	
	n = 163	
Spearman Correlation		
Test		

Source: Premier Data 2019

Bivariate analysis was conducted to see the relationship between premarital sex behavior and spiritual self-efficacy variables. The analysis between the dependent and independent variables can be seen in table 3. The results of bivariate analysis between premarital sex behavior and spiritual self-efficacy obtained p 0,000 <0,05 which indicates that there is a correlation between spiritual self-efficacy and premarital sexual behavior in high school adolescents in the city Makassar. The Spearman correlation value of -0.532 shows a negative correlation with the strength of the medium correlation. Negative correlation shows that the higher the spiritual self-efficacy score, the lower the premarital sexual behavior score. Or it can be concluded that 53.2% of premarital sex behavior is determined by spiritual self-efficacy.

Spiritual self-efficacy is the belief in the ability to organize and display the actions needed to produce spiritual skills. Adolescents who have high spiritual self-efficacy tend to avoid premarital sexual behavior. Teenagers who have spiritual intelligence can understand which things are good and bad, and can control their behavior (Zohar & Marshall, 2007). Respati and Syifa (2008), prove that there is a very significant positive relationship between spiritual intelligence and self-control in adolescents. This can be seen from the analysis of the data obtained in the study which shows the high correlation coefficient obtained (r = 0.777, p <0.001). Teens that can control their behavior have good self-control, so that they will behave according to the norms and rules that apply.

The results of bivariate analysis between premarital sex behavior and spiritual self-efficacy obtained p value 0,000 <0, 05 which indicates that there is a correlation between spiritual self-efficacy and premarital sex behavior in high school adolescents in Makassar City. The Spearman correlation value of -0.532 shows a negative correlation with the strength of the medium correlation. Negative correlation shows that the higher the spiritual self-efficacy score, the lower the premarital sexual behavior score. Or it can be

concluded that 53.2% of premarital sex behavior is determined by spiritual self-efficacy. The results of this study are in line with Rahmawati's research (2015) which shows that there is a relationship between spiritual value and sexual drive control and has a positive relationship direction, namely the higher spiritual value, the control of sexual drive is good, and vice versa the lower the spiritual value of controlling sexual drive not good. Magdalena and Notobroto (2016) research shows that there is an influence of religious adherence to teenage pregnancy. Adolescents who are not religious have a high risk of pregnancy compared to religious adherents with a P value of 0,000. Hidayah's research (2007) shows that there is a relationship between spiritual factors and adolescent sexual behavior with p value 0.031 $<\alpha$ (0.05). Of the 18 studies, 17 studies showed a link between spirituality and premarital sexual behavior in this case, namely the first sex delay, number of sex partners and contraceptive use (Amiri et al., 2013).

Spiritual intelligence is important for a teenager to have in an effort to control negative impulses that can affect the behavior and mentality of a teenager. The development of spiritual values in children becomes hampered and does not develop optimally. This causes children to experience spiritual emptiness (spiritual-emptiness), thus giving rise to spiritual meaninglessness in children. This spiritual meaninglessness causes children to be easily swayed by the influence of the surrounding environment. Children will be more reluctant to commit acts that violate moral and humanitarian values (Safaria, 2007), which is specifically doing premarital sexual behavior. Sex education such as religious education is one way to reduce or prevent sex abuse (Sarwono, 2013). Religious education can be given to adolescents from an early age, so adolescents can better understand existing human, moral and social norms, if adolescents have a strong religious foundation it can facilitate adolescents to achieve spiritual intelligence (Safaria, 2007).

CONCLUSION

We conclude that spiritual self-efficacy and premarital sexual behavior in high school adolescents negatively correlates in the study area. Negative correlation shows that the higher the spiritual selfefficacy score, the lower the premarital sexual behavior score. Early religious education should be given in the family environment so that adolescents have a strong religious foundation. The government is expected to be able to implement a religious education-based curriculum from an early age and maximize reproductive health Counseling, Education Information (KIE) programs in each school in an equitable and comprehensive manner. The school is expected to conduct religious education to students, an intervention program to improve student self-efficacy, provide counseling, education, and comprehensive information on reproductive health and sexual

education, and peer educator programs or peer counseling to maximize reproductive health IEC programs in school.

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