

Communication of Parents, Sexual Content Intake and Teenage Sexual Behavior at Senior High School in Banjarmasin City

Komunikasi Orangtua, Asupan Muatan Seksual dan Perilaku Seksual Remaja di Sekolah Menengah Atas Kota Banjarmasin

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DOI: <http://dx.doi.org/10.21109/kesmas.v10i3.581>

Abstract

Free sex behavior among teenagers in Banjarmasin City is currently more worrying parents. Lack of sex education affects teenagers tend to commit premarital sexual intercourse that will cause unintended pregnancy and early marriage. Parent-child communication and exposure of both printed and electronic media are the way to reduce risky sexual behavior. This study aimed to determine correlation between communication of parents and sexual content intake with sexual behavior of teenagers at senior high schools (SHS) in Banjarmasin City. To reach the aim, analytic survey study with cross-sectional approach was conducted on July – October 2015 at two state SHS and one private SHS in Banjarmasin City. Subject was the second grade of SHS students from three SHS as taken with purposive sampling. Variables of study were teenage sexual behavior, communication of parents and sexual content intake measured using questionnaire. Test reliability was stated with cronbach alpha 0.746. Data obtained was analyzed using chi-square test and logistic regression test. Results showed that communication of parents and sexual content intake affected teenage sexual behavior, meanwhile age, sex and family structure did not affect teenage sexual behavior. A good communication of parents and low intake of sexual content may give a protection against risky sexual behavior among teenagers.

Keywords: Communication of parents, sexual behavior, sexual content intake, teenagers

Abstrak

Perilaku seks bebas di kalangan remaja Kota Banjarmasin belakangan ini semakin mengkhawatirkan para orangtua. Kurangnya pendidikan seksologi berdampak para remaja cenderung melakukan hubungan seksual pranikah yang akan berakibat pada kehamilan yang tidak diinginkan dan pernikahan dini. Komunikasi orangtua-anak dan paparan media baik media

cetak maupun elektronik merupakan cara untuk mengurangi perilaku seksual berisiko. Tujuan penelitian ini untuk mengetahui hubungan komunikasi orangtua dan asupan muatan seksual dengan perilaku seksual remaja sekolah menengah atas (SMA) di Kota Banjarmasin. Untuk mencapai tujuan tersebut, penelitian survei analitik dengan pendekatan potong lintang dilakukan pada bulan Juli – Oktober 2015 di dua sekolah negeri dan satu sekolah swasta di Kota Banjarmasin. Subjek penelitian adalah siswa SMA kelas XI dari tiga SMA yang diambil secara *purposive sampling*. Variabel penelitian adalah perilaku seksual remaja, komunikasi orangtua, dan asupan muatan seksual diukur menggunakan kuesioner. Reliabilitas uji dinyatakan dengan *cronbach alpha* 0,746. Data yang diperoleh dianalisis menggunakan uji kai kuadrat dan uji regresi logistik. Hasil penelitian menunjukkan bahwa komunikasi orangtua dan asupan muatan seksual memengaruhi perilaku seksual remaja sedangkan usia, jenis kelamin, dan struktur keluarga tidak memengaruhi perilaku seksual remaja. Komunikasi orangtua yang baik dan asupan muatan seksual yang rendah dapat memberikan proteksi terhadap perilaku seksual berisiko pada remaja.

Kata kunci: Komunikasi orangtua, perilaku seksual, asupan muatan seksual, remaja

Introduction

Time changes teenage sexual behavior in dating as things considered taboo by teenagers in a few years ago, such as kissing and sexual intercourse, have been justified by teenagers now and there is a small percentage of them agreed with free sex.¹ Study in Ghana stated that

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worth 32% of teens had sexual intercourse began at the age of 15 years, meanwhile in China at the age of 12 years and in Zimbabwe at the age of 9 years.^{2,3} Indonesia Demographic and Health Survey (IDHS) 2012 stated that 9.3% or 3.7 million teenagers claimed they had committed premarital sexual intercourse.⁴

Risky teenage sexual behavior has a serious effect on public health and would burden them throughout life.⁵ Teenage sexual behavior, such as sexual intercourse at an early age without a protector and even committed with different partners, put teenagers at risk for unintended pregnancy and sexually transmitted diseases (STDs) including human immunodeficiency virus (HIV), infertility and cervical cancer.⁶

Sexual behavior is all behaviors driven by sexual desire, both with the opposite sex or the same sex. The forms of this behavior may vary, ranging from feeling attracted to dating, courtship and intercourse. Sexual object may be another person, person or self-delusion. Sexual behavior that appears without involving the couple is masturbation.⁷

Risky sexual behavior to health is influenced by several factors that are family, school, peers and community/society. In the family system, a permissive parenting attitude to sex affects risky sexual behavior and as the protection is family closeness and good communication to avoid intercourse.⁸

Parents should always communicate and supervise their children. Difficulty found by teenagers to communicate mainly with their parents causes unexpected sexual behavior. Poor communication of parents is also due to several other factors including teenagers who are not living with both biological parents, lack of parental supervision, lack of religion education (religiosity), low morality as well as the influence of media and peers increase the incidence of risky teenage sexual behavior.⁹ The worse communication level between parents and children, the more likely teenagers to commit sexual acts.⁷

The role of parents is very important and should be a role model for teenagers because parents are the first and foremost educators, so it is important for parents to have adequate knowledge of teenage reproductive health. A wise and not scaring way of delivering will make teenagers feel comfortable to discuss reproductive health issues with their parents.⁷

Almost all the people consider that educating children about sex is not an easy task for parents. Parents feel uncomfortable talking to their children about sex. They find it taboo and lack of sexual knowledge, wondering the age such education should be given at.⁶ Parents have a fundamental concern that no provision of sexual information that will lead teenagers to experiment with sex. Parents tend to feel shy to educate teenagers about sex. When teenagers do not get sexual information at home,

they will seek for sexual information from peers and media, which ultimately may give them a mislead view of teenage sex and deliver on sexual behavior that does not conform to the religious and social norms.⁹

Indonesia Adolescent Reproductive Health Survey 2007 stated that 15% of women and 29% of teenage boys never discussed reproductive health with someone. Those respondents who discussed reproductive health issue mostly discussed the issue with the group. There was 1% of women and 6% of 15 – 24 year-old boys had sexual intercourse. Results of study conducted by The Central Statistics Agency and International on December 2008 acquired 22% of women and 45% of men agreed/accepted premarital sexual relations appeared to have actively sexual intercourse.¹⁰

Another factor that influence teenage sexual behavior is media exposure. Printed and electronic media environment is closed to the teenagers. Early surveys found that on average, teenagers in the United States spent about six to seven hours per day to use the media, three hours to watch television, two hours to listen to the music, an hour to view the recorded videos and movies, three to four hours to read. Half of all American teenagers in their private room had a television and 16% with the computer. Among 15 – 17 year-old teenagers, 33% used the internet for six hours or more with the calculation worth 24% for three to five hours, 23% for one to two hours and 20% to less than an hour.¹¹

Modern families whose parents are always busy and rarely at home left their children at home with television as such an entertainer, a companion and even a nanny for the children. Unfortunately, the television these days tend to be less selective. Impressions during prime time hours often present any soap opera whose the story is inferior as dime novel, intrigue upper-class households, horror, vulgar comedy, etc. Soap opera contains scenes of romance or courtship, sexy, hedonistic life-oriented and plodding paced life always be easy and happy. Teenagers take mass media as a source of sexual information that is more important than parents and peers. Some studies suggest that media have an influence on teenage sexual attitude and behavior.¹²

Results of study in Semarang, Central Java, showed that 12.1% of college students had premarital sexual behavior at risk of unintended pregnancy. There were five variables significantly associated with premarital sexual behavior of students including religiosity, attitude, access and contact with media containing pornography, the attitude and the sexual behavior of close friends.¹³

Data from the Health Agency of Banjarmasin City, South Kalimantan covered data of unintended pregnancy, such as increasing number of case from 35 cases in 2010 jumped to 220 cases in 2011. The data was based on reports of 26 public health centers in Banjarmasin in

collaboration with the school health units. Teenage sexual behavior in 2011 showed 148 cases of premarital sex, 30 cases of reproductive tract infections, 30 cases of sexually transmitted infections (STIs), 220 cases of unintended pregnancy or out of wedlock as well as 325 cases of juvenile labor.¹⁴

Free sex behavior of teenagers in Banjarmasin lately becomes more worrying parents. Lack of sex education affects teenagers tend to commit premarital sexual intercourse that will cause unintended pregnancy and early marriage. Chief medical officer of Banjarmasin said that frequency of the number of teenage sex behavior is increasing as characterized with more and more juvenile labor in various clinics and a maternity hospital. The cases occurred among teenagers who were still in junior high school and senior high school with the range of age between 16 to 19 years old.¹⁵

Results of a preliminary study conducted in 10 high school students in Banjarmasin City on January 5th, 2015 obtained the data that six students (60%) said they felt embarrassed to tell personal problems such as dating problems and prefer to tell it to friends, three students (30%) said rarely and only one (10%) who said often. Ten teenagers interviewed were reported always using the internet to mobile phones and electronic media, such as television more than six hours per day.

This study aimed to determine correlation between the intake of parent communication and sexual content with teenage sexual behavior at senior high schools in Banjarmasin. There was a significant relation between communication of parents and sexual content intake with teenage sexual behavior at senior high schools in Banjarmasin City as the hypothesis.

Method

The design of this study was analytic survey with cross-sectional approach. This study investigated the correlation between communication of parents and sexual content intake with teenage sexual behavior at senior high schools in Banjarmasin City. Subject of this study was the second grade of senior high school students as many as 225 people taken from three senior high schools in Banjarmasin City using a purposive sampling technique. The inclusion criteria were willing to become respondents, living with parents at home, having a close friends/dating with the opposite sex and domiciled in Banjarmasin. Meanwhile, the exclusion criterion was never having a close friend/dating.

The reasons for selecting Banjarmasin as the location of study were because Banjarmasin is the capital city of South Kalimantan, the senior high schools are located in downtown Banjarmasin and the health services data of Banjarmasin covered data of unintended pregnancy, such as the increasing number of case from 35 cases in 2010

jumped to 220 cases in 2011. This study was conducted at three senior high schools in Banjarmasin from July to October 2015.

The dependent variable was teenage sexual behavior as measured using questionnaire concerning sexual activity ever undertaken with a total of 12 units, alternative answers 'yes' and 'no', with a maximum score of 24. The reliability of the test expressed by *cronbach alpha* 0.746. The independent variable was parent communication as measured using questionnaire with a total of 14 pieces, the alternative answers were 'never', 'rarely', and 'often' with a maximum score of 42. The questionnaire asked about the limits during courtship (three problems), the impact of pregnancy (second question), the risk of STDs (2 questions), norms, moral and religion (three problems) and peer (four questions). Variable sexual content intake was measured using a questionnaire amounted to five pieces, alternative answers 'yes' and 'no' with a maximum score of 10. The questionnaire inquired about the intake of sexual content of the printed media, television, the internet and electronic frequency. Reliability of the test expressed by *cronbach alpha* 0.746.

The bivariate analysis using chi-square test was conducted to determine the relation between communication of parents and teenage sexual behavior, also the relation between the sexual content intake and teenage sexual behavior. Multivariate analysis using logistic regression test was conducted to determine other factors, such as age, gender and family structure.

Results

Teenage Sexual Behavior, Communication of Parents and Intake of Sexual Content

Most respondents had high-risk sexual behavior worth 51.1%, respondents who had a good communication with their parents worth 57.8%, and respondents who had a high intake of sexual content worth 72.9%. Most of respondents were 16 years old (52.0%), female (66.7%) and 80.4% having a complete family (father and mother) as this can be seen on Table 1.

Table 1. Teenage Sexual Behavior, Communication of Parents, Intake of Sexual Content, Age, Gender and Family Structure

Variable	Subvariable	Total (n = 225)	%
Teenage sexual behavior	High risk	110	48.9
	Low risk	115	51.1
Communication of parents	Bad	95	42.2
	Good	130	57.8
Intake of sexual content	High	164	72.9
	Low	61	27.1
Age	16 years	117	52.0
	≥17 years	108	48.0
Gender	Man	75	33.3
	Woman	150	66.7
Family structure	Incomplete	44	19.6
	Complete	181	80.4

There was a relation between communication of parents with teenage sexual behavior. Respondents who had poor communication with their parents as much as 57 respondents (60.0%) had high-risk sexual behavior with ratio prevalence value = 2.179, which means that teenagers who had poor communication with their parents would have approximately two times higher risk of high risky sexual behavior than those who communicated well.

There was a relation between the intake of sexual content and teenagers sexual behavior. Respondents who had a high intake of sexual content as much as 90 respondents (54.9%) had high risky sexual behavior with ratio prevalence value = 2.493, which means that teenagers who had high sexual content intake would have approximately two times higher risk of high risky sexual behavior than those who had a low intake of sexual con-

tent (Table 2).

There was no relation between external variables and the dependent variable that were the variable age, gender and family structure obtained value p value ≥ 0.05 , indicating no significant relation was found between age, gender and family structure with teenage sexual behavior (Table 3).

There was no relation between age and family structure with communication of parents. There was a relation between gender and communication of parents. Men respondents as many as 44 respondents (58.7%) had poor communication with parents with RP value = 2.755, which means that teenage boys would have approximately three times higher risk to communicate poorly with their parents than teenage girls (Table 4).

There was no relation between external variables and the independent variable namely variable age and family

Table 2. Communication of Parents, Intake of Sexual Content with Teenage Sexual Behavior

Variable	Subvariable	Teenage Sexual Behavior				p value	95%CI
		High Risk		Low Risk			
		n	%	n	%		
Communication of parents	Bad	57	60.0	38	40.0	0.007*	2.179 (1.27 - 3.74)
	Good	53	40.8	37	59.2		
Intake of sexual content	High	90	54.9	74	45.1	0.005*	2.493 (1.35 - 4.62)
	Low	20	32.8	41	67.2		

^achi-square test, * ≤ 0.05 = significant, RP = ratio prevalence, CI = confidence interval

Table 3. Age, Gender and Family Structure with Teenage Sexual Behavior

Variable	Subvariable	Teenage Sexual Behavior				p value	95%CI
		High Risk		Low Risk			
		n	%	n	%		
Age	16 years	62	53.0	55	47.0	0.251	1.409 (0.83-2.38)
	≥ 17 years	48	44.4	60	55.6		
Gender	Man	38	50.7	37	49.3	0.814	1.113 (0.659-1.937)
	Woman	72	48.0	78	52.0		
Family structure	Incomplete	24	54.5	20	45.5	0.504	1.326 (0.68-2.57)
	Complete	86	47.5	95	52.5		

^a chi-square test, * ≤ 0.05 = significant, RP = ratio prevalence, CI = confidence interval

Table 4. Age, Gender and Family Structure with Communication of Parents

Variable	Subvariable	Teenage Sexual Behavior				p value	95%CI
		High Risk		Low Risk			
		n	%	n	%		
Age	16 years	47	40.2	70	59.8	0.608	0.839 (0.50 - 1.43)
	≥ 17 years	48	44.4	60	55.6		
Gender	Man	44	58.7	31	41.3	0.001*	2.755 (1.56 - 4.87)
	Woman	51	34.0	99	66.0		
Family structure	Incomplete	21	47.7	25	52.3	0.513	1.320 (0.68 - 2.56)
	Complete	74	40.9	107	59.1		

^a chi-square test, * ≤ 0.05 = significant, RP = ratio prevalence, CI = confidence interval

structure with an intake of sexual content. There was a relation between gender and intake of sexual content. Men respondents as many as 64 respondents (85.3%) had a high intake of sexual content with ratio prevalence value = 2.909, which means that teenage boys would have approximately three times higher risk of a high intake of sexual content than teenage girls (Table 5).

Multivariable analysis was conducted to analyze the relation between communication of parents and intake of sexual content with teenage sexual behavior without the involvement of outside variables because based on bi-variable analysis, external variables (age, gender and family structure) were not associated with the dependent variable (teenage sexual behavior).

Model 3 was made by combining two independent variables and one dependent variable. This model aimed to examine the relation between communication of parents and intake of sexual content with teenage sexual behavior. Model 3 could predict teenage sexual behavior 69% (Table 6).

Discussion

Teenage sexual behavior in Banjarmasin City mostly had high risky sexual behavior. Frequent sexual activity by teenagers are holding hands, kissing, hugging, stroking, fondling.¹⁶ Communication of parents with teenagers is an interaction between parents and teenagers in which parents knowingly attempted to provide information about sex.¹⁷ Sexual behaviors of teenagers at senior high schools in Banjarmasin based on the largest to the smallest percentage were holding hands, hugging the

shoulders, kissing, spending time with dating partners, hugging the waist, kissing lips, masturbation, touching genitals and breasts, petting, oral genital and sexual intercourse. Premarital sex is the lowest percentage of sexual behavior. The premarital sex was committed with a dating partner and a prostitute.

Parent-teen communication in Banjarmasin was mostly good. Communication of parents with teenagers is very important and parents are the most influential factor on teenage behavior. In theory of social ecology Bronfenbrenner stated that teenage behavior is influenced by the interaction between the teenagers with the environment, policies and norms that exist in the vicinity. Parents and their teenagers need to communicate about the presence of children while outside the home, peers, the activities outside the home, personal problems of children, close friends, religious norms, then they need to discuss limitation that could be done and should not be done during courtship, negative things that would happen if pregnancy occurred during teen age out of wedlock, the prohibition of premarital sex, the risk of sexually transmitted diseases and HIV/AIDS if they had sex before marriage, disgrace and shame of the parents in case of unintended pregnancy. Poor communication between parents and teenagers are caused by several factors, such as the culture. Cultural factors may inhibit communication because parents consider it taboo to talk about sex and think that sex education will further stimulate teenagers to attempt to commit sexual intercourse.⁶

Senior high school students in Banjarmasin mostly got the intake of high sexual content from television.

Table 5. Age, Gender and Family Structure with Intake of Sexual Content

Variable	Subvariable	Teenage Sexual Behavior				p value	95%CI
		High Risk		Low Risk			
		n	%	n	%		
Age	16 years	81	69.2	36	30.8	0.257	0.678 (0.37 - 1.23)
	≥17 years	83	76.9	25	23.1		
Gender	Man	64	85.3	11	14.7	0.005*	2.90 (1.41 - 6.00)
	Woman	100	66.7	50	33.3		
Family structure	Incomplete	34	77.3	10	22.7	0.589	1.334 (0.61 - 2.90)
	Complete	130	71.8	51	28.2		

^achi-square test, * ≤ 0.05= significant, RP = ratio prevalence, CI = confidence interval

Table 6. Multivariable Analysis

Variable	Subvariable	Model 1 RP 95%CI	Model 2 RP 95%CI	Model 3 RP 95%CI
Communication of parents	Bad	2.890 (0.061 - 0.323)		2.712
	Good			(0.049 - 0.308)
Intake of sexual content	High		2.992	2.819
	Low		(0.075 - 0.366)	(0.062 - 0.350)
R		0.36	0.39	0.69

Teenage development is influenced by the media as teenagers use media as source of information including information about sex. The mass media can be an educator for sexual development. The charge of sexual intake in the media is also a motivation for teenagers to act sexual behavior. When the sexual behavior is perceived as a normal and interesting stuff, behavior can occur.¹²

The prevalence of teenage sexual behavior at high risk is more common in poor communication of parents compared to good communication. Teenage sexual behavior may also be related to a number of factors from parents. These factors are the parenting process including parents, communication, values of the control, supervision, support and warmth. The frequency of communication of parents is positively associated with teenage sexual health. The intensity of parental supervision in moderation may increase healthy sexual behavior. In developmental psychology, teenage is a very important period in the formation of values, morals and attitudes, as an aspect which develops through the interactions between teenage self and the environment. A social system that is responsible for the earliest developing value systems, morals and attitude to the youth is the parents. Parents expect their children to grow and develop into individuals who own and uphold the values and able to distinguish the good and the bad, and has a commendable attitude and behavior.¹⁶ Good communication between parents and teenagers about sexuality will affect the sexual behavior of teenagers. High risky sexual behavior in teenagers is two times higher among teenagers who communicate poorly with their parents than youth who communicate well with parents. Morality of teenagers also affect their self-control. Teenagers who have a mature moral will have a sense of guilt and shame. Both will control teenage behavior, particularly sexual behavior.¹⁷ This is in line with the theory of planned behavior of Fishbein and Ajzen stating that communication has a great influence in the activities change attitudes, interests, beliefs, opinions and behavior.¹⁸

Study in Oklahoma City reported that parents and young people who did communication related to the positive behavior of teenagers tend to not commit sexual intercourse or use contraception if sexually active.¹⁹ Another study in the United States found that teenagers who did not discuss sexual health issues to their parents, friends and dating partner had a tendency to have unsafe sexual behavior.²⁰

The prevalence of teenage sexual behavior at high risk is more prevalent in teenagers who have a high intake of sexual content compared to teenagers who have low sexual intake. Some factors contributing to teenage sexual behavior are internal, external factors and a mixture of both. Internal factors or that comes from within the individual is the factor getting better nutrition. Good

nutrition is increasingly influencing the growth rate and speeding the maturation of hormones. External factors suspected to affect sexual behavior are peers, the impact of globalization, media exposure and cultural materialism. When teenagers begin to understand about sex, sexual content in the media is an interesting thing.¹² The study stated that teenagers who watched television programs with high sexual content tend to commit sexual intercourse than those who watch television with low sex charge as well as teenagers who had sexual experiences tend to seek a charge of sex on television than teenagers who did not have sex experience. Teenagers in entering a period of transition without adequate knowledge of sex and without clear control of parents would give rise to conflicts in teenagers themselves. This is caused by parent who find it taboo to discuss sexual issues with their children, parent and children might have fray relationship that caused children choose an inaccurate source such a friend.⁷

In 2007, Indonesian Institute of Sciences well-known as LIPI presented the study on child's addiction of accessing pornography in the online media and films, VCDs or DVDs and reading porn magazines or books then triggered to have premarital sex. If do not get a proper briefing feared their future is at stake. Ultimately, this will have an effect on sexual development and teenage mental. Another role is the increasing varied printed and electronic media that were also not in accordance with teenage mental development. The role of the family, especially the father and mother are very important in monitoring and control children in term of using media, such as television, newspapers and the internet to prevent young people from negative behaviors. The family is the primary education forum enormously influencing child's development both physical and psychological, therefore the education of children may not be separated from the family because the family is the first place where children learn to assert themselves as social beings interact with the group. Families must have rules and restrictions for children to access the media according to age. Families need to provide assistance and guidance to the children, which should and should not be seen or accessed by children. Family education to children must be applied in the form of surveillance, cultivation of moral values and guidance, so children do not perform negative behaviors and be successful in future days.²¹

Study at high school in the United States found that teenagers were exposed to more sexual content from broadcast media especially the sexual life of teenagers, reportedly have a tendency to have sexual intercourse and other sexual activities.²² The study stated that the age, gender and family structure did not affect the dependent variable teenage sexual behavior. Study in Nigeria stated that the age, gender, religion and family structure influ-

enced teenage sexual behavior.¹⁶ These results were not in accordance with the theory and only communication of parents and intake of sexual content were associated with teenage sexual behavior. The results showed that teenagers aged 16 years old and ≥ 17 years old had the same percentage to commit risky sexual behavior, male and female have the same percentage to commit risky sexual behavior and teenagers from family structure both complete and incomplete had the same percentage of high risky sexual behavior.

Conclusion

Good communication from parents and lower intake of sexual content may provide protection against risky sexual behaviors among teenagers. Intake of sexual content more influences teenage sexual behavior compared to communication of parents.

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