

PERCEPTION OF RISK BEHAVIORS AFFECTED TO SEXUAL RELATIONSHIP AMONG TEENAGERS

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ABSTRACT:

Background: The purpose of this research is to study the relationship between sexual relationship among teenagers and risk behaviors, perception of risk behaviors.

Methods: A cross-sectional survey was used. The data were collected through self-administered, anonymous questionnaire from 400 students aged 18-20 years old who currently study in vocational schools in Bangkok. The data were analyzed by descriptive statistics. Chi-square was used to examine the relationship between risk behaviors and sexual relationship experiences.

Results: The results showed the percentage among total samples of alcohol drinking, cigarette smoking, psychotropic drug and marijuana use in their lifetime were 73.5%, 30.0%, 14.1% and 6.0%, respectively. Moreover, 61.8% (male: 63.2%, female: 60.3%) had ever had sexual relationship. The significant relationship (p -value $< .05$) was found between risk behavior (have lover/partner, using media to arouse sexual desire, alcohol drinking, using drugs, going to entertainment places) and sexual intercourse experience.

Conclusion: The study has a significant report that the teenagers have practiced risk behaviors leading to have sex. Among 8 individual practices that might be related to sexual relationship practice, the students who have ever had sex practiced more than students who never had sexual relationship. Regarding perception, the risk behaviors which leading to having sex can be classified into 5 categories, i.e. 1) staying with lover/partner 2) using media to arouse sexual desire 3) Drinking alcohol 4) using drugs and marijuana and 5) going to entertainment places.

Keywords: Risk behavior; Sexual relationship; Vocational students; Teenagers

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INTRODUCTION

At present, the imitation of western cultures made Thai teenagers have more freedom of self-expression [1] and the advance of technology which allowed teenagers to access and consume many kinds of media including sexual arousal kind. Moreover, there are many entertainment venues such as pubs, discotheques, bars or cafés where there are perform sexual arousal shows, and teenagers can easily assess. These can rapidly arouse teenagers to have risky sexual behavior and early first sex.

According to the Department of Provincial Administration, Ministry of Interior, in 2009 there were 81.9% of high school students and vocational

training school students in Bangkok having risky sexual behavior or activities which led them to having sexual relationship such as drinking alcohol, beer, wine, consuming news regarding sex, or using drugs etc.

Many studies [2-5] reported drinking and health-risk behaviors among students. For instance, a study of 11,135 students [2] in the southern of Thailand reported the prevalence rates of past-year drinking, past-30-day binge drinking, and drinking until intoxication were 25.5, 9.5, and 17.3% in boys and 14.5, 3.7, and 7.2% in girls, respectively. In addition, 7.0% of all students admitted to having had sexual intercourse. Among these students, 13.7% reported that neither party had used birth control during this encounter nor 13.9% had been pregnant or made someone pregnant.

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Nowadays, the widespread of media is unlimited. Juveniles learn sex from books and obscene publication including video and internet. And the aforesaid learning led them to having sex at last. The environment around teenagers is also important.

The risk behaviors above may lead teenagers to have sex. As regards having sex while studying, teenagers mostly lacked responsibility, protection and safety. This caused pregnancy or sexual transmitted disease. According to the report from Bureau of Reproductive Health, Department of Health, Ministry of Public Health [6], the rate of teenagers who had sex was increasing (during 2009-2015, it was increased from about 40% to 47%). The average age of their first sex was at 15-16 years old. The report of Disease Surveillance by the Bureau of Epidemiology, Department of Disease Control, Ministry of Public Health in 2011 [7] revealed that the number of sexual transmitted disease patients had been increasing from previous years and the report of HIV infected people in Thailand also showed that there were many increasing teenagers among those infected people increasingly [7].

According to the research by Thai Health Promotion Foundation cooperating with Mahidol University ASEAN Institute for Health Development [8], more vocational training school students (77%) had sex while studying than high school students. However, there were few studies about perception of risk behavior and sexual relationship among the vocational school students. Therefore, this study specifically focused on vocational school students with main objective to learn about practice of risk behavior affected to sexual relationship in order that we can use the knowledge and result as a guideline for promotion and protection of risky sexual behavior among students and prevent other social and health problems such as pregnancy while studying, sexual transmitted disease and AIDS.

METHODS

A cross-sectional survey was used in this study. Vocational school students for Diploma aged 18 and above, under Vocational Education Commission, Ministry of Education, Bangkok were our target population. Taro Yamane formula in 1967 was used to calculate sample size. We used a multi-stage sampling by classifying schools into 2 groups, i.e. Technique and Commercial schools. Then within group, we randomly selected 3 schools for each

group. Four hundred students were recruited with proportional to size of the schools and their branch of study. The proportion of male and female samples was similar.

Descriptive statistics with numbers, percentage, mean, median, standard deviation, and chi-square test were used to describe the sample characteristics and their association.

Due to the sensitive nature of the study, the data were collected through a self-administered, anonymous questionnaire. It was divided into 3 sections: socio-demographic characteristics, practice and perception of risky behaviors. The content validity of questionnaire was checked by three experts. In order to find the reliability value, we tested the questionnaire with 30 vocational school students who were not the samples. Then its raw results were taken to find Alpha coefficient belonging to Cronbach. The result showed at 0.82.

Ethical approval was granted by the Ethics Review Committee for Research Involving Human Research Subjects, Health Science Group, Chulalongkorn University. Verbal informed consent was obtained from the participants before they were enrolled in the study.

RESULTS

In this study, the demographic characteristics of 400 students were almost equally (male =201, female = 199). The age range was 18-20 years old. Regarding their socio-economic characteristics, 97.3% was Buddhist and 67.8% received their allowances from their parents around 3,000 – 3,999 baht per month or the average of 3,567.25 baht per month.

According to a sexual relationship behavior, it is found that 61.8 % of students used to have sex (127/201 males or 63.1% and 120/199 females or 60.3%). The average age of having the first sexual intercourse was about 17-18 years, and 52.5% of the students used condoms when having the first sex; 48.5% of the students used condoms when having sex last time. The reason why they used condoms was to prevent from pregnancy.

Most students had ever had an alcohol drinking (73.5%) and 34.2% drank more than one time in a month during the past 6 months. The average age of first drink was 16.2 years old. The reason they first drink was to have experiences or curiosity (37.8%), followed by peer pressure (34.7%) and stress relief (24.8%). The majority preferred beer (43.5%), especially the girls (50.0%). It is noticed that about

Table 1 Demographic characteristics and their risk behaviors

Variables	Male		Female		Total	
	n/N	(%)	n/N	(%)	n/N	(%)
Gender	201/400	(50.2)	199/400	(49.8)	400/400	(100.0)
Average age (Mean±SD)	18.75±0.71		18.66±0.70		18.71±0.72	
Drinking alcohol	154/201	(76.6)	140/199	(70.4)	294/400	(73.5)
Average age first drink (years) (Mean±SD)	15.77±1.62		16.68±1.45		16.20±1.61	
Beer	58/154	(37.7)	70/140	(50.0)	128/294	(43.5)
Wine	13/154	(8.4)	27/140	(19.3)	40/294	(13.6)
Whisky	83/154	(53.9)	43/140	(30.7)	126/294	(42.9)
Having sexual desire after drinking	65/154	(42.2)	53/140	(37.9)	118/294	(40.1)
Using other addictive substances	108/201	(53.7)	65/199	(32.7)	173/400	(43.2)
Average age first substance used (years) (Mean±SD)	16.32±1.42		17.17±1.63		16.64±1.55	
Cigarette	79/108	(73.1)	41/65	(63.0)	120/173	(69.4)
Marijuana	20/108	(18.5)	4/65	(6.1)	24/173	(13.9)
Psychotropic drugs	9/108	(8.3)	20/65	(30.8)	29/173	(16.8)
Having sexual desire after using drugs	42/108	(38.9)	18/65	(27.7)	60/173	(34.7)
Ever had sexual relationship	127/201	(63.2)	120/199	(60.3)	247/400	(61.8)
Average age first having sex (years) (Mean±SD)	16.60±1.40		16.80±1.22		16.70±1.32	
Regular used condom	66/127	(52.0)	58/120	(48.3)	126/247	(51.0)

Table 2 The risk behaviors leading to have sexual relationship which the students practiced more than one time in a month during the past 6 months compared between students who have ever had and never had sex

Practice more than one time in a month during the past 6 months	Ever had sexual intercourse		Never had sexual intercourse		p-value
	Male (N=127)	Female (N=120)	Male (N=74)	Female (N=79)	
	N(%)	N(%)	N(%)	N(%)	
1) Reading or watching pornography	40(31.5)	28(23.3)	15(20.3)	6(7.6)	.0012
2) Watching movie, VCD, CDs about making love between male and female	30(23.6)	21(17.5)	13(17.6)	10(12.7)	.1598
3) Watching movie, VCD, CDs about making love between the same sex	9(7.1)	1(0.8)	1(1.4)	0(0.0)	.0436
4) Watching sexual arousal websites	65(51.2)	40(33.3)	14(18.9)	11(13.9)	.0000
5) Chatting about sex with friends on internet	51(40.2)	60(50.0)	15(20.3)	21(26.6)	.0000
6) Drinking alcohol	52(40.9)	50(41.7)	18(24.3)	17(21.5)	.0001
7) Smoking cigarette	58(45.7)	5(4.2)	19(25.7)	7(8.9)	.0466
8) Using psychotropic drugs	8(6.3)	7(5.8)	0(0.0)	2(2.5)	.0216

40% would like to have sex after drinking.

About 43% (108 males and 65 females) reported of using substances. Among those, the majority was cigarette smoking (120/173=69.4%), marijuana (13.9%) and psychotropic drugs including methamphetamine (16.8%). The main reason of first drug use was persuading by friends (57.8%). And 34.7% reported of sexual desire after drug used. During the past 6 months, 22.2% smoked cigarette and 4.2% used marihuana and psychotropic drugs. Noticeably, the rate of regular use condom among students who have ever had sex is about 50% and a bit lower among female (48.3%), Table 1.

Table 2, there were 8 individual practices that might be related to sexual relationship, i.e. 1) Reading or watching pornography, 2) Watching CD

which showed making love between male and female, 3) Watching CD which showed making love between the same sex, 4) Watching sexual arousal websites, 5) Chatting about sex with friends on internet, 6) Drinking alcohol, 7) Smoking cigarette, 8) Using psychotropic drugs. Their responses about doing those activities in the past 6 months more than one time in a month should be considered as their risk to have sex. Comparing between students who have ever had and never had sexual intercourse, it is found that students, both males and females who have ever had sex did those activities more than one time in a month more than students who never had sexual relationship. The popular activities were "Watching sexual arousal websites" (51.2% for male and 33.3% for female), "Chatting about sex

Table 3 Perception of risk behaviors leading to having sex compared between students who have ever had sex and never had sex

Perception of risk behaviors	Ever had sexual intercourse		Never had sexual intercourse		p-value
	Male (N=127)	Female (N=120)	Male (N=74)	Female (N=79)	
	N(%)	N(%)	N(%)	N(%)	
1. Stay with lover/partner in public place	32(25.2)	24(20.0)	13(17.6)	13(16.5)	0.1715
2. Stay with lover/partner in private place	92(72.4)	71(59.2)	44(59.5)	41(51.9)	0.0366
3. Petting with lover/ partner in public place	38(29.9)	30(25.0)	29(39.2)	16(20.3)	0.6846
4. Petting with lover/ partner in private place	97(76.4)	97(80.8)	47(63.5)	58(73.4)	0.0265
5. Read a book, watch a movie about sex	85(66.9)	75(62.5)	39(52.7)	42(53.2)	0.0187
6. Read a book, watch a movie, CDs about sex with lover/partner	90(70.9)	100(83.3)	46(62.2)	51(64.6)	0.0035
7. Chat about sex on internet with a friend	70(55.1)	89(74.2)	33(44.6)	46(58.2)	0.0117
8. Drink alcohol	82(64.6)	85(70.8)	31(41.9)	50(63.3)	0.0033
9. Drink alcohol at a party	53(41.7)	55(45.8)	24(32.4)	27(34.2)	0.0390
10. Drink alcohol at a party with lover/partner	58(45.7)	70(58.3)	23(31.1)	32(40.5)	0.0019
11. Use psychotropic drugs, e.g. methamphetamine	61(48.0)	88(73.3)	31(41.9)	40(50.6)	0.0065
12. Smoke marijuana	52(40.9)	36(30.0)	33(44.6)	35(44.3)	0.0789
13. Visit pub, discotheque, night club, etc.	64(50.4)	69(57.5)	26(35.1)	27(34.2)	0.0002
14. Go to fitness center	45(53.4)	50(41.7)	30(40.5)	29(36.7)	0.9840
15. Go to massage parlor	87(68.5)	96(80.0)	27(36.5)	38(48.1)	0.0000
16. Visit male/female sex worker	98(77.2)	80(66.7)	35(47.3)	30(38.0)	0.0000
17. Go to traditional massage	74(58.3)	69(57.5)	40(54.1)	28(35.4)	0.0088

with friends on internet” (40.2% for male and 50.0% for female) and “Drinking alcohol” (40.9% for male and 41.7% for female). Almost activities showed highly significant at $p < .05$, except “Watching CD about making love between male and female”.

From the Table 3, it showed the perception of risky behaviors which leading to having sex. It is found that males and females students that used to have sex had different opinions about staying alone with lover/partner at private places, and petting with lover/partner at unseen places was a risky behavior leading to having sex. Using media to arouse sexual desire, male and female students who used to have sex had different views about reading books, comics, watching movies, VCD, DVD or websites which showed inappropriate pictures, and contents being tempted to lovers, and chatting via the Internet with friends about sex was a risky behavior leading to having sex. Regarding drinking alcohol, male and female students who used to have sex had different views on drinking alcohols with lover/partner at any entertainment places/parties as a risky behavior leading to have sex. As for taking illegal drugs, male and female students who used to have sex had different opinions on taking psychotropic drugs (including methamphetamines) was a risky behavior leading to having sex. Hanging out entertainment

places, it was found that male and female students who used to having sex had different views on going to discotheques, night clubs, cocktail lounges, massage parlors, and buying one night stand sex were risky behavior leading to having sex.

DISCUSSION AND CONCLUSION

The study has a significant report that the teenagers have practiced risk behaviors leading to have sex. Among 8 individual practices that might be related to sexual relationship practice, the students who have ever had sex practiced more than students who never had sexual relationship. Regarding perception, the risk behaviors which leading to having sex can be classified into 5 categories, i.e. 1) staying with lover/partner 2) using media to arouse sexual desire 3) Drinking alcohol 4) using drugs and marijuana and 5) going to entertainment places, the study has reported the following outcomes:

1) Staying with lover/partner

Staying alone with the lover/partner and petting at private place are risk behaviors leading to having sex. Meanwhile, staying alone with the lover/partner and petting at public places is not a risk behavior leading to having sex. To be corresponding with the research of Department of Mental Health [9], it

showed persuasion to private place, house or car leading to petting or foreplay and having sex. The study by Sittipiyasakul, et al. [10] showed that physical environments such as private places or entertainment places affected risk of having sex among teenagers.

2) Using media to arouse sexual desire

To do activities with the lover; reading books and comics, watching movies, VCDs, DVDs, and websites showing sexual arousing pictures and contents, and chatting via internet are risk behaviors leading to having sex. Many studies [11, 12] showed the sample that experienced watching pornography movies used to having sex more than those who never watched.

3) Drinking alcohol

Drinking alcohol such as liquor, wine, beer with lover in entertainment places /parties was a risk behavior leading to having sex. It had statistical significance corresponding with the research by Thai Health Promotion Foundation in 2011 which showed that 3.75% of girl students who drank alcohol had sex more than those who did not drink. Alcohol consumption is another situational factor that has frequently been linked to sexual assault perpetration. Many studies [13-15] reported under intoxicated of alcohol, teenagers tended to practice sexual risk behaviors such as more willing to have unprotected sex, having higher sexual desire, having sex with a casual partner, and less condom use.

4) Using drugs

National Institute on Drug Abuse (NIDA) [16] mentioned, “*Adolescents and other young adults who use drugs and alcohol often take risks that endanger their health and the health of others. One of the most harmful risks is that of engaging in risky sexual activities*”. The study showed that the use of psychotropic drugs such as methamphetamines was a risk behavior leading to having sex while smoking marijuana was not a risk behavior leading to having sex. To be corresponding with the study, a study about sexual pleasure and sexual risk among women who use methamphetamine: a mixed methods study, by Lorvick, et al. [17] reported that women described feelings of power and agency related to sexual behavior while high on methamphetamine. Besides, some studies mentioned about using of different drug made the different sexual desire. For instance, a study by Kopetz, et al. [18] found that compared to heroin, cocaine had deleterious effects on participants’ perceived sexual desire and performance. A study by Strunin, et al. [19] showed

that 15% of the samples had sex after using drugs and 32%, said they would be more likely to have sex if they and their partner had used drugs, with 10% less likely to use condoms after drug use.

5) Going to entertainment places

Going to entertainment places such as pubs, discotheques, nightclubs, cocktail lounges, massage parlors were risk behaviors leading to having sex. However, going to fitness club got less risk behavior to having sex when compared to those activities. This is due to the persons who went to pubs, discotheques, nightclubs, cocktail lounges have to drink or use drugs. The study found that the students who went to entertainment places used to having sex higher than those who never went there. To be corresponding with the study, at the beginning of 2001, a fairly large student survey study was conducted in Payao Province in the northern region. The study recruited student from all secondary schools and vocational colleges, 16,160 (77.8%) and 3,416 (64.7%) students respectively. It was reported that the experience on attending the various type of common entertainment namely music concert, karaoke club, discotheque, snooker club, gambling with high stake and use pornographic media was significantly much higher among students with sexual intercourse experience regardless of gender and educational level [20].

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