

TEEN INSIGHTS ON PREMARITAL SEX: A GUIDE TO EFFECTIVE INTERVENTION

Elnie D. Calunsag¹ Leyden D. Suarez², Belen Y. Lopina³
Cotabato State University, Cotabato City, Philippines

Corresponding Email: elnie_calunsag@ccspsc.edu.ph

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Abstract

Numerous research works have documented the various hazards associated with premarital sex (PMS) and the attitudes held by teenagers regarding it. Reexamining PMS in the context of a society with a varied cultural background and religious beliefs, however, may lead to new insights. This study initially evaluated university students' perceptions of PMS and other related concerns on their sexuality, given that PMS is a worldwide issue and concern. Gaining an awareness of the sexual attitudes and development abilities of today's adolescents, this study able to identify and suggest potential care that could serve as the foundation for implementing programs that address the risks associated with PMS. A forty-item research-made questionnaire was employed in this study, with 250 respondents from various colleges; predominantly female (168), primarily between the ages of 20 and 21 (129). According to the study, young people view PMS as a widespread practice in terms of prevalence. Furthermore, regarding social norms, moral values, and beliefs, majority of respondents indicated that practicing PMS puts one's reputation and respect at risk. Not only can the individual practicing face social shame, blame, and dishonor, but family members of the practicing person may also suffer from these same emotions, particularly if the practicing person becomes pregnant. This study also showed that sexual interest and pleasure play a role in how PMS is perceived. Respondents found it challenging to talk about and be honest about their sexuality when it came to communication, knowledge, and learning about it.

Keywords: *Premarital Sex, Perception, Adolescents, growth, development*

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INTRODUCTION

Sexual relations before marriage, known as premarital sex (PMS), are widespread among young people across the globe (**Hussain & Finer, 2013**). The consequences of unsafe sex practices can have far-reaching and life-altering impacts on individuals and society as a whole. Unintended pregnancies can disrupt educational and career plans, while abortions may lead to physical and emotional trauma. Moreover, the spread of HIV and other sexually transmitted infections can result in long-term health complications and increased healthcare costs for communities. (**Bogale & Seme, 2014; Dalman, 2015; Abdissa, Addisie & Seifu, 2015; McCann & Brown, 2017**). In response to the rapid emergence of this concern, numerous educational institutions have chosen to advocate for. As time progressed, teaching abstinence became less favored as an educational approach. According to Laura Lindberg, a specialist in adolescent sexuality research and policy, these educational programs fail to impart crucial sexual health information and often present medically inaccurate data, which hinders the healthy sexual development of young people (**Journal of Adolescent Health, 2017**). The World Health Organization (WHO) has proposed that institutions and schools should emphasize sexual responsibility, given that access to comprehensive and accurate sexual health information is considered a fundamental human right (**Santelli & Kantor, 2008**). Sexual responsibility involves educating individuals to make well-informed decisions and opt for safer choices. This approach aims to encourage youth to respect their partners, engage in open dialogue about sexual activities, and actively prevent sexually transmitted infections (STIs), Human Immunodeficiency Virus (HIV), and unintended pregnancies (**WHO, 2017**). Despite these efforts to promote sexual responsibility, the annual statistics on teenage pregnancy indicate that these initiatives have not been as effective as hoped (**WHO, 2018**).

Youth sexual activity is on the rise in the Philippines, and the occurrence rates are still concerning. On October 23, 2019, President Rodrigo Duterte was urged to issue an executive order designating adolescent pregnancy as a national emergency by Juan Antonio Perez III, Executive Director of the Commission on Population and Development (Abad, 2019). In 2017, a survey conducted by the Philippine Statistics Authority (PSA) that shows that 196,478 young women ranging from ages 10 to 19 have experienced pregnancy. The report showed that in a group of 200,000 female adolescents, 60,000 had experienced repeat pregnancies. In addition, an average of 150,000 teenagers are giving birth annually and starting a family of their own (**Diaz-Sabado, 2019**). Further data from the PSA also shows that teenage women who have experienced pregnancy belong to poor households and have less or did not receive any formal education compared to women who got pregnant during their adulthood (**Recide, 2014**).

Furthermore, PopCom reports that Filipino parents refuse to discuss and teach sexuality to their adolescent children. Conversely, teens find it difficult to open up to parental authority about STIs, HIV/AIDS, teenage pregnancy, and PMS to parents (**Jaymalin, 2019**). Another study shows that this discomfort will likely cause anxiety due to fear of parental disapproval (**Salvador, Sauce, Alvarez & Rosario, 2016**). Eighty-three percent of women between the ages of 15 and 24 felt that maintaining their virginity before marriage was important (Nagai et al., 2019). Filipino teenagers believe that participating in PMS puts their reputation and respect from others at risk because of the traditional moral beliefs that are still ingrained in them (**Bocar & Perez, 2013**).

However, despite risks and taboo against PMS expressed by the youth, many women in this age bracket report that they still engage in sexual behavior (**Nagai et al., 2019; Hussain & Finer, 2013**). Since abortion is highly stigmatized and banned in the Philippines under all circumstances (**Singh, Sedgh, Kwok, & Onda, 2017**), many young women with unplanned pregnancies also seek unsafe abortion procedures (**Hussain & Finer, 2013**) performed in a climate of fear and shame due to strict legal and religious prohibitions (**Field & Quiano, 2018**).

In order to encourage young people to engage in healthy and responsible sexual behavior, this study attempts to comprehend and characterize the perspectives of adolescents toward premarital sex (PMS). Additionally, this study hopes to create an intervention program design to help adolescents avoid the risks of engaging PMS based on their perception. Therefore, results from this study shall be used to locate and endorse apt responsible sexuality programs and services that positively manage the youth's emerging sexual transformation.

Objectives

This research specifically aimed to answer the following questions:

1. What are the insights of adolescents on pre-marital sex?
2. What interventions can be use as effective guide to help adolescents avoid the risks of engaging PMS?

METHODS

The researchers utilized a descriptive quantitative method of research design to collect measurable information for collecting, analyzing, interpreting, and writing the results of the study (**Creswell, 2009**) from the two hundred fifty (250) respondents to find out the insights on premarital sex using a researcher-made questionnaire. The said instrument underwent validation by three (3) experts, composed of two (2) license guidance counselors and one (1) psychometrician.

The researchers used opportunity or convenience (**Coolican, 2018**) sampling for the respondents to get hold of in in a classroom. Randomly selected respondents are from the College of Arts and Sciences (63), College of Business and Public Administration (43), College of Teacher's Education (50), College of Forestry (51) and College of Engineering and Computing (43).

Ethical considerations were taken into account. They were gathered in a schoolroom to complete the survey questionnaire which took for around ten (10) to fifteen (15) minutes. The research objectives were properly verbalized and explained to the respondents at the beginning of the data gathering. They were also informed that any responses they provide were kept strictly confidential. It was also emphasized that the students' participation were voluntary and would have no negative consequences if they opt not to continue their participation.

RESULTS and DISCUSSION

General Information of the Respondents

Table 1 is the general information of the respondents. Most of the respondents belong to the ranges of 20-21 (51.6%), followed by respondents aged 18-19 (26%). Others, were from aged 22-23 (16.4%), 24-25 (4 %) and 26-27 (5%). Moreover, out of 250 respondents 67.2 % (168) females as majority in number and there were only 32.8 % (82) were males. In terms of religion, it is evident apparent that respondents were mostly Islam believers with 81.2 % (203) and only 18.8 % (47) were non-Islam.

Table 1

General Information of the Respondents

Profile		Frequency	Percent (%)
Age			
	18-19	65	26
	20-21	129	51.6
	22-23	41	16.4
	24-25	10	4
	26-27	5	2
Sex			
	Female	168	67.2
	Male	82	32.8
Religion			
	Islam	203	81.2
	Non- Islam	47	18.8
Total		250	

Respondents' Perception on the Prevalence PMS

Table 2 displays the respondents' perception on PMS based on prevalence (Q¹). The respondents agreed that PMS is common practice nowadays with 29.6 % (74), closely followed by 22.4% (56) who strongly agreed and 12.4% (31) somewhat agreed. According to studies by **Finer and Hussain (2013), Bogale and Seme (2014), Dalman (2015), Abdissa, Addisie, and Seifu (2015), and McCann and Brown (2017)**, PMS is prevalent in teenagers all over the world. Contrary to the previously indicated findings, only 13.6% (34) of the 250 respondents strongly disagreed, compared to 6.8% (17) who disagreed and 4.8% (12) who somewhat disagreed.

Table 2

PMS Perception based on Prevalence

Q1	Statements	Strongly Disagree		Disagree		Somewhat Disagree		Neither Agree or Disagree		Somewhat Agree		Agree		Strongly Agree	
		f	%	f	%	f	%	f	%	f	%	f	%	f	%
1.	A. Adolescents Perception on Premarital Sex Premarital Sex (PMS) or sex before marriage is common among adolescents nowadays.	34	13.6	17	6.8	12	4.8	26	10.4	31	12.4	74	29.6	56	22.4

Respondents' Perception according to Social Norms, Moral Values and Beliefs

Table 3 shows the respondents' perception in terms of social norms, moral values and beliefs. Responses to Q² shows that 25.2 % (63) respondents agreed; 22.8 % (57) somewhat agreed; neither agree/disagree 20.4 % (51) neither agree and 12.4 % (31) strongly agree that engaging in premarital sex as Filipino adolescent will risk someone's reputation and respect to others. **El Hajj (2016)** conducted a study that supports this finding. According to this study, people's decisions to engage in or refrain from premarital sex are influenced by cultural norms, moral values, and social pressures and control. When moral principles are transgressed, societal risks manifest in three main ways. First of all, he believes that it presents a moral risk, whereby defying societal norms and moral boundaries could endanger one's respect and reputation. Second, there is a shared risk: if one's moral character is damaged, their family may be subjected to societal humiliation, guilt, and disgrace. Lastly, it presents a risk for the future, as women may become "unmarriageable." Merely 6% (15) disagreed strongly, 8% (20) disagreed, and 5.2% (13) disagreed somewhat.

In Q⁵ 22% (55) of respondents were neither in agreement nor disagreement, while 20% (50) and 19.6% (49) firmly and slightly agreed that PMS is a bad behavior and a regrettable experience, respectively (**Calunsag, 2019**). PMS is still considered taboo and prohibited. The decision to participate in or avoid PMS is influenced by moral values, social restrictions, and control (**El Hajj, 2016**). Young women think that PMS is a horrible thing that should be avoided since it puts moral standards at risk in social situations. Furthermore, teenagers subjectively see their experiences with PMS as a bad thing that they wish they had avoided (**Johnson et al., 2003**).

Q¹¹ presents that 28 % (70) somewhat agree; 27.2 % (68) agree; 23.2 % (58) somewhat agree/disagree and 10.8 (27) strongly agree that the rapid societal changes have resulted in growing number and acceptability of PMS. Only 2.8 % (7) strongly disagree; 3.6 % (9) somewhat disagree and 4.4 % (11) disagree. Q¹² and Q¹³ presents the notion that decisions about engaging in premarital sex which are said to be shaped by social pressures and control and moral values. Results show that majority of the respondents answered neither agree/disagree to agreed. For Q¹² the result are as follow neither agree/disagree 25.6 % (64), strongly agreed 25.6 % (64) and 24.8 % (62) agreed.

Q¹³ shows that 84.8 % (181) agreed from neither agree/disagree to strongly agreed. Only 6.4 % (16) for somewhat disagree, 5.2 % (13) for strongly disagreed and only 3.6 % (9) for disagreed. Q¹⁴, Q¹⁵, and Q¹⁶ suggest the importance of virginity until marriage as an important aspect regardless of cultural practices and religion and that men are disappointed when they marry non-virgin women. The study suggest that majority of respondents strongly perceive that virginity is important until marriage. 52.2 % (148) strongly agreed, 12.8 % (32) agreed, 9.2 % (23) somewhat agreed. Only 4.8 % (12) somewhat disagreed, 6 % (15) disagreed and 5.6 % (15) strongly disagreed. Moreover, sex between unmarried individuals is morally unacceptable with 32 % (80) respondents strongly agreed, 26 % (65) agree, 11.6 % (29) somewhat agree and 14 % (35) neither agree/ disagree. Only 12 % (4.8) somewhat disagree, 5.6 % (14) strongly disagree and lastly 6 % (15) disagree. In addition, Q²³, and Q²⁴ The findings indicate that respondents think female virginity is highly valued and that losing it brings humiliation to the family, which is why PMS is severely discouraged for girls. Respectively, Q²³ 25.2 % (63), 14.8 % (37) agreed, 13.2 % (33) somewhat agreed. Interestingly, 10.4 % (25) strongly disagreed, 6 % (15) disagreed and 2.4 % (6) somewhat disagreed. Q²⁴ shows that 32.8 % (82) strongly agreed, 17.6 % (44) somewhat agreed, and 14.4 % (36) agreed.

Interestingly Q²² shows a distributed level of agreement on the belief that once virginity is lost girls are regarded as not marriageable. 18 % (45) neither agree/disagree, 16.8 % (42) agree 16 % (40) disagree, 15.2 % (38) somewhat agree, 12.4 % (31) strongly disagree and 11.6 % (strongly agree). These suggest that respondents have

different views on being marriageable and that virginity may or may not be a basis, that there are other qualities to consider in choosing a partner in life. This perspective on the PMS experience supports these findings by highlighting the young women's adherence to Filipino customs that place a high importance on sanctity before to marriage. This indicates that young people who have grown up in Filipino society have a conservative mindset **(Bocar & Perez, 2013)**.

Responses on Q²⁶ result suggest that 21.2 % (53) somewhat agree, 20 % (50) neither agree/disagreed, 19.6 % (49) agreed and 12.8 % (32) strongly agreed that female adolescents engage in PMS as a proof of their love or willingness to have sex with the partner. Sexual behavior is regarded as an activity that is directly tied to the social phenomena of adolescents today, according to Sarmini and El Rizah's (2018) research, which supports these findings. Adolescents interpreted sexual behavior in four ways, according to the study: (a) engaging in curiosity; (b) demonstrating masculinity; (c) demonstrating courage; (d) demonstrating love; (d) demonstrating a willingness to engage in sexual activity with a partner; and (e) achieving adolescent sexual maturity. In essence, achieving pleasure unites all the connotations of sexual conduct associated with adolescence.

Lastly, in terms of social norms, Q³² suggest that respondents have difficulty in discussing teenage pregnancy, HIV AIDS, PMS with parents because this causes them feeling of discomfort and anxiety due to parents' disapproval. Respectively, 24.4 % (61) neutrally agree/disagree, 22 % (55) agree, 16.8 % (42) somewhat agree, and 10.8 % (27) strongly agree. Only, 11.2 % (28), 8.4 % (21) disagree, and 6.4 % (16) strongly disagree. **Krugu, Mevissen, Munkel, and Ruitter (2017)** assert that open discussions about sexuality are still largely considered taboo. Their study investigates and corroborates the various ways in which young individuals confront and maneuver through sexual concepts that are influenced by familial expectations, religious convictions, peer pressure and demands, societal standards, and sex education curricula. The research indicates a need for more open dialogues about sexuality among young people, as well as the introduction of more thorough sex education programs in schools to address the problem of teenage pregnancies.

Table 3

Perception according to Social Norms, Moral Values, and Beliefs

Qno.	Statements	Strongly Disagree		Disagree		Somewhat Disagree		Neither Agree or Disagree		Somewhat Agree		Agree		Strongly Agree	
		f	%	f	%	f	%	f	%	f	%	f	%	f	%
Q2.	Engaging in premarital sex as Filipino adolescent will jeopardize someone's reputation and respect from other people.	15	6	20	8	13	5.2	51	20.4	57	22.8	63	25.2	31	12.4
Q5.	Adolescents perceived premarital sex as a wrong act and a regrettable experiences.	12	4.8	24	9.6	11	4.4	55	22	49	19.6	50	20	49	19.6
Q11.	Swift social transformations across various regions have led to an increase in both the prevalence and acceptance of sexual relationships before marriage.	7	2.8	9	3.6	11	4.4	58	23.2	70	28	68	27.2	27	10.8
Q12	Decisions about engaging in premarital sex are shaped by social pressures and control.	10	4	19	7.6	11	4.4	64	25.6	64	25.6	62	24.8	20	8

Q13.	Moral principles and social conventions govern whether or not to engage in premarital sex.	13	5.2	9	3.6	16	6.4	50	20	68	27.2	63	25.2	31	12.4
Q14.	Maintenance of virginity until marriage is important regardless of religion or cultural practices.	12	4.8	8	3.2	7	2.8	20	8	23	9.2	32	12.8	148	59.2
Q15.	Sex between unmarried individuals is generally viewed as morally unacceptable.	14	5.6	15	6	12	4.8	35	14	29	11.6	65	26	80	32
Q16	Men are disappointed when they marry non-virgin girls.	16	6.4	13	5.2	12	4.8	63	25.2	45	18	56	22.4	45	18
Q17.	Male adolescents engage in premarital sex as a proof of their masculinity.	27	10.8	18	7.2	18	7.2	69	27.6	45	18	41	16.4	32	12.8
Q19.	Male virginity loss brings shame to his family.	34	13.6	58	23.2	31	12.4	61	24.4	23	9.2	26	10.4	17	6.8
Q22.	Once virginity has been lost, the unfortunate young girl is regarded not "marriageable".	31	12.4	40	16	25	10	45	18	38	15.2	42	16.8	29	11.6
Q23.	Young women are strongly urged to abstain from sexual activity before marriage, as female chastity is highly valued in society.	26	10.4	15	6	6	2.4	37	14.8	33	13.2	63	25.2	70	28
Q24.	The female virginity loss brings shame to her family.	14	5.6	20	8	22	8.8	32	12.8	44	17.8	36	14.4	82	32.8
Q26.	Premarital sex is a sign of love and eagerness to have sex with a partner for female teens.	28	11.2	26	10.4	12	4.8	50	20	53	21.2	49	19.6	32	12.8
Q32.	Discussing teenage pregnancy, HIV AIDS, premarital sex with parents will cause discomfort or anxiety due to fear of parental disapproval.	16	6.4	28	11.2	21	8.4	61	24.4	42	16.8	55	22	27	10.8

Respondents’ Perception According to Curiosity, Pleasure, Sexual Development and Sex

Table 4 presents how PMS is perceived and practiced according to sexual curiosity. Q³ shows that 24.8 % (62) out of 250 somewhat agree and 23.6% (59) agree and 11.6% (29) strongly agree. This finding is backed up by the findings of **Sarmini and El Rizah’s (2018)** studies that indicate sexual behavior is regarded as an activity that is intimately associated with today’s teenage social problems. Teenagers defined sexual behavior in four ways: (a) to satisfy curiosity (sexual behavior to reach adolescent sexual maturity); (b) to demonstrate masculinity (sexual behavior to demonstrate courage); (c) to demonstrate love (willingness to have sex with a partner); and (d) as a component of a youthful pleasure. Adolescents’ interpretations of sexual conduct all essentially go toward the same objective: pleasure. Strong interactions with the environment help to build an understanding of respondents’ perceptions of enjoyment. In addition, 14.36% were neither in agreement nor disagreement.

In contrast, only 6.8 % (17) strongly disagree, 13.6% (34) disagree and 5.2 % (13) somewhat disagree. Q⁴ suggests that 19.6% (49) somewhat agree and agree, 13.2 % (33) strongly agree that adolescents engaged in PMS as part of youthful pleasure. Curiosity coupled with suitable conditions, such as being alone together, worked to make some of the adolescents who engage PMS urged them to give in to their natural instincts. **Hurissa, et al., (2014)** implies that the adolescent’s sexual conduct involves engaging in curiosity-based activities in order to reach sexual maturity, as well as for pleasure-seeking and personal desire. However, interestingly there were adolescents who did not agreed with this statement 18 % (45) neither disagreed or agreed, 13.2 % (33) disagreed, 9.2 % (23) somewhat agreed, and 7.2 % (18) strongly disagreed.



Q²⁰ reveals that male adolescents may experience high self-esteem, low psychological stress right after engaging in premarital sex. There were 26.8% (67) neither disagreed or agreed; 23.6 % (59) somewhat agreed; 23.2% (58) and 11. 2% (28) strongly agreed. Only 4.8% (12) strongly agreed and somewhat disagreed; and lastly 5.6% (14) disagreed.

Table 4

Perception According to Curiosity, Pleasure, Sexual Development and Sex

Q No.	Statements	Strongly Disagree		Disagree		Somewhat Disagree		Neither Agree or Disagree		Somewhat Agree		Agree		Strongly Agree	
		f	%	f	%	f	%	f	%	f	%	f	%	f	%
Q3.	Adolescents engage in premarital sex because they practice sexual curiosity.	17	6.8	34	13.6	13	5.2	36	14.4	62	24.8	59	23.6	29	11.6
Q4.	Adolescents engaged in premarital as part of a youthful pleasure.	18	7.2	33	13.2	23	9.2	45	18	49	19.6	49	19.6	33	13.2
Q20.	Male adolescents may experience high self-esteem, low psychological stress right after engaging in premarital sex.	12	4.8	14	5.6	12	4.8	67	26.8	59	23.6	58	23.3	28	11.2

Adolescents PMS Perception according to Communication and Information

Table 5 presents how adolescents communicate and acquire information regarding PMS and other topics on sexuality. It has been acknowledged as a fundamental human right is the availability of comprehensive and accurate sexual health information (Santelli & Kantor, 2008). It was suggested by the WHO that institutions/schools should promote sexual responsibility. Sexual responsibility teaches a person to make an informed decision and choose safer choices. Doing so allows the youth to practice respecting their partners, show an open communication about sexual activity, and actively protect against sexually transmitted infections (STIs), Human Immunodeficiency Virus (HIV), and unplanned pregnancy (WHO, 2017). In this study Q⁶ presents that majority of the respondents finds it easy to open up or discuss sexuality among their groups or peers with 31.2 percent (78) 18.8 % (47) strongly agreed, 18% (45) somewhat agreed and 12.8 (32) neither. Only 7.6 % (19) disagree, 6.4 % somewhat disagree and lastly 5.2 % (13) strongly disagree.

Q⁷ connotes that most of the respondents get information about their sexuality from their friends. The study reveals that 28.8% (72) agreed, 24 % (60) somewhat agreed, 18.8 (47) strongly agreed and 12.8 (32) were neither. Only 6.4 % (16) disagree, 5.2 % (13) and 3.6% (9) strongly agree. Q⁸ reveals the desire of the respondents to have a better communication with their own parents about their sexuality. 20.8 % (52) strongly agreed, 16% (40) agreed, 13. 6 (34) neither. Interestingly, there were 9.6 % (24) strongly disagreed and somewhat disagreed and 8.4 % (21) disagreed. Q⁹ suggests that respondents perceived that discussing sexuality with parents would help them better understand their sexuality. 24% (60) agreed, 22% (55) strongly agreed, 19.2 % (48) somewhat agreed and 14.8 % (37) neither. In contrast, 8.4% (21) strong disagreed, 7.2% (18) disagreed, 6.4% (16) somewhat disagreed.

Furthermore, Q¹⁸ result shows that majority of the respondents, 27.6% (69), strongly agree that male adolescents have information about sex from mass and social media. In addition, 26.4 % (66), 18.4 % (46) somewhat

agreed, and 14.4 % (36). In contrast, only 4.8% (12) disagreed, 4.4% (11) strongly disagreed, and 4% (10) somewhat disagreed. On the other hand, female adolescents had information about sex from sex education class in school. As the result reveals that 24% (60) agree, 21.2 % (53) somewhat agreed, 25.2% (63) neither . Only 9.2% (23) agreed, 5.6 % (14) disagreed and strongly disagreed. Due to cultural differences and practice even parents have difficulty discuss and teaching sexual matter to their children. Q³¹ As the result shows, 23. 2% (58) agreed, 20.4% (51), 18.8% (47) somewhat agreed and neither. Just, 7.6 % (19) somewhat disagree, 6.8% (17) disagree and 4.4 % (11) strongly disagree. These results are consistent with a PopCom research that found Filipino parents do not talk to or teach their teenage children about sexuality. On the other hand, adolescents struggle to disclose information regarding STIs, HIV/AIDS, teen pregnancy, and PMS to parental authority (**Jaymalin, 2019**). According to a different study, this pain would probably lead to anxiety because of the worry over parental rejection (**Salvador, Sauce, Alvarez & Rosario, 2016**).

Table 5

PMS Perception according to Communication and Information

Q.No	Statements	Strongly Disagree		Disagree		Somewhat Disagree		Neither Agree or Disagree		Somewhat Agree		Agree		Strongly Agree	
		f	%	f	%	f	%	f	%	f	%	f	%	f	%
Q6.	Adolescents nowadays, finds it easy to open up or discuss sexuality among their peers.	13	5.2	19	7.6	16	6.4	32	12.8	45	18	78	31.2	47	18.8
Q7.	Adolescents acquired information about sexuality from friends/ peers.	9	3.6	16	6.4	13	5.2	32	12.8	60	24	72	28.8	48	19.2
Q8.	Adolescents wish to have better communication with their parents about sexuality.	24	9.6	21	8.4	24	9.6	55	22	34	13.6	40	16	52	20.8
Q9.	Discussing sexuality with parents help adolescents make a better sexual choices.	21	8.4	18	7.2	11	4.4	37	14.8	48	19.2	60	24	55	22
Q18.	Male adolescents had lot of information about sex from mass and social media.	11	4.4	12	4.8	10	4	36	14.4	46	18.4	66	26.4	69	27.6
Q27.	Teenage girls have learned about sex in school sex education classes.	14	5.6	14	5.6	23	9.2	63	25.2	53	21.2	60	24	23	9.2
Q31.	Filipino parents don't want to talk about or teach their kids about sexuality.	11	4.4	17	6.8	19	7.6	47	18.8	47	18.8	58	23.2	51	20.4

Respondents’ Perception according to Physical, Academic and Psychological Risks.

Table 6 presents the different risks young adolescent may experience when engaging in PMS. Q¹⁰ reveals that 42% (105) strongly agreed and perceive that those engaged in premarital is at risk of getting an abortion, contracting HIV and other sexuality-transmitted infections. 24.4 % (64) agreed,12.4 (31) somewhat agreed and 8.8% (22) responded neither. Only 5.6 % (14) strongly disagreed, 4% (10) disagreed and 2.8% (7) somewhat disagreed. Q²¹ reveals that male adolescents could have the consequence of dropping out or being absent from class when stepped into fatherhood at a young age as they are challenged to balance their time between schooling and child care. 25.6 %

(64) agreed, 19.6% (49) strongly agreed , 20.8 % (52) neutral and 8.4 % (46) somewhat agree. On the other hand, 6.4 % (16), somewhat disagree, 5.6 % (14) strongly disagree, and 3.6% (9) disagree. Q²⁵ result shows that female adolescents could experience the consequence of dropping out or being absent from class when stepped into motherhood at a young age as They struggle to manage their time between childcare and education. 34% (85) strongly agree, 23.6 % (59) agree, 12.4% (31) somewhat agree and 13.6% (34). Only 6.8% (17) strongly disagreed, 4% (10) disagree and 5.6% (14) somewhat disagreed.

According to the result on Q²⁸, respondents perceive many adolescents seek abortion due to unplanned pregnancies, as the result presents that there were 24.4% (61) strongly agreed, 27.2% (68) agreed, 20% (50) somewhat agreed and 16% (40) neither. Only 4.8% (12) somewhat disagree, 4% (10) strongly disagree and 3.6 % (9) disagree. In connection with that, Q²⁹ Young women seek unsafe abortion procedure due to shame/fear from individual religious prohibition. This study reveals that 25.6% (64) agreed, 22.8% (57) strongly agreed, 22% (55) somewhat agreed and 18.8% neither. Only 5.6% (14) somewhat disagreed, 2.8%(7) strongly disagreed and 3.6%(9) disagreed. Q³⁰ shows how female adolescents may experience low self-esteem, increase psychological stress and feeling of helplessness upon discovering that they are pregnant or after engaging in premarital sex. Majority or 26.4% (66) agreed, 25.6% (64) strongly agreed, 19.2% (48) somewhat agreed. Only 5.25 (13) somewhat disagreed, 3.2% (8) disagreed, 3.6% (9) strongly disagreed. As for mental health, a common theme shown in many studies involving PMS in the Philippines show that young girls experience low self-esteem, increased psycho-social stress and feelings of helplessness upon discovering that they are pregnant or right after engaging in unplanned sex (Bersamin, et al. 2013).

Table 6

Perception according to Physical, Academic and Psychological risks.

Q No.	Statements	Strongly Disagree		Disagree		Somewhat Disagree		Neither Agree or Disagree		Somewhat Agree		Agree		Strongly Agree	
		f	%	f	%	f	%	f	%	f	%	f	%	f	%
Q10	Adolescents who engaged in premarital is at risks of getting an abortion, contracting HIV and other sexuality-transmitted infections.	14	5.6	10	4	7	2.8	22	8.8	31	12.4	61	24.4	105	42
Q21.	As they struggle to manage their time between education and child care, male adolescents who become fathers early may experience the consequences of dropping out or missing school.	14	5.6	9	3.6	16	6.4	52	20.8	46	18.4	64	25.6	49	19.6
Q25.	Adolescent girls who become mothers too soon may experience the consequences of dropping out or missing school because they find it difficult to manage their time between education and childcare.	17	6.8	10	4	14	5.6	34	13.6	31	12.4	59	23.6	85	34
Q28.	Many adolescents seek abortion due to unplanned pregnancies.	10	4	9	3.6	12	4.8	40	16	50	20	68	27.2	61	24.4
Q29.	Young women seek unsafe abortion procedure due to shame / fear from individual religious prohibition.	7	2.8	6	2.4	14	5.6	47	18.8	55	22	64	25.6	57	22.8
Q30.	Female adolescents may experience low self-esteem, increased psychological stress and feeling of helplessness upon discovering that they are pregnant or after engaging in premarital sex.	9	3.6	8	3.2	13	5.2	42	16.8	48	19.2	66	26.4	64	25.6

Respondents’ PMS Perception according to possible Interventions to be implemented in the school campus

Table 7 presents the different school interventions believed to be helpful in managing healthy sexual responsibility among the youth according to respondents. For Q³³, schools should conduct activities in the form of seminar to provide information on sex education/sexual health information. Out of 250 respondents, 48.4% (121) strongly agreed, 26.8% (67) agree, 11.6% (29) somewhat agree. Only 2.8% (7) strongly disagree, 1.6% (4) disagreed and 2% (5) somewhat disagreed. In relation and support to different seminars respondents also wished to have. Q³⁴ shows that school Health Service shall conduct activity/seminar/ symposia related to Premarital sex risks or healthy sexual expression, family planning and the like. 52.4% (131) strongly agreed, 26.4% (66) agreed, 10.4% (26) somewhat agreed and 7.6 % (19) neither. Only 1.6% (4) somewhat disagree, 0.8% (2) disagree and strongly disagreed. Q³⁵, in classroom setting teachers shall integrate complete and accurate sexual health information that will promote sexual responsibility. Most of the respondents concurred, with 44% (110) strongly agreed, 25.6% (64) agreed, 13.6% (34) somewhat agreed, 10.4 % (26) neither. Only 3.2% (8) somewhat disagreed, 2% (5) disagreed and 1.2% (3) strongly disagree. In addition, the respondents also recognize that there should be an open discussion and open communication about sexuality. As the result shows, 34.4 % (84) agree to strongly agree, 12.8%(32) somewhat agree and 13.2%(32) neutral. Only 2%(5) disagree, 1.2%(3) strongly disagree, and 3.2% (8) somewhat disagree. Further, teachers should integrate sexual information and provide more comprehensive sex education in class (Q³⁷) to address teenage pregnancies and other risks of engaging premarital sex. Adolescents perceive that teacher can address the risks of engaging PMS. As the result shows 39.2% (98) strongly agreed, 26% (65) agreed, 16.4% (41) somewhat agreed, and 11.6% (29) neither. Only 2.8% (7) disagreed, 2% (5) somewhat disagreed and strongly disagreed.

One best intervention to promote responsible and healthy sexuality school guidance counselors/ psychologists should generate an action plan or capacity building for students’ sexual self for. Result shows that 40.8% (102) strongly agreed, 26% (65) agreed, 14.8% (37) somewhat agreed and 11.2% (28) neither. Only 4.4% (11) somewhat disagreed, 0.8% (2) strongly disagreed, and 2% (5) somewhat disagreed. In addition, Q³⁹ teachers shall incorporate in their teaching how adolescents will improve their control over impulsive urges and actions such as premarital sex (Q³⁹). 40% (100) strongly agree, 30% (75) agree, 12% (30) somewhat agreed and 11.2% (28) were neither. Only 4.4 % (11) disagreed, 2% (5) somewhat disagreed and 1.6% (4) strongly agreed. For the last item, the study presents that 21.2% (128) strongly agreed, 24.8% (62) agreed, 12.8 % (32) somewhat agree and 6.4% (16) neutral. Only 1.3% (3) strongly disagree, 1.6 % (4) agreed and 2%(5) somewhat disagreed that sex education should be taught as part of gender and development program (Q⁴⁰).

Table 7
PMS Perception according to possible Interventions to be implemented

Q No.	Statements	Strongly Disagree		Disagree		Somewhat Disagree		Neither Agree or Disagree		Somewhat Agree		Agree		Strongly Agree	
		f	%	f	%	f	%	f	%	f	%	f	%	f	%
Q33.	Schools shall conduct activities in the form of seminar to provide information on sex education/sexual health information.	7	2.8	4	1.6	5	2	17	6.8	29	11.6	67	26.8	121	48.4
Q34.	School Health Service shall conduct	2	0.8	2	0.8	4	1.6	19	7.6	26	10.4	66	26.4	131	52.4

	activity/seminar/ symposia related to Premarital sex risks or healthy sexual expression, family planning and the like.															
Q35.	In classroom setting teachers shall integrate complete and accurate sexual health information that will promote sexual responsibility.	3	1.2	5	2	8	3.2	26	10.4	34	13.6	64	25.6	110	44	
Q36.	In classroom instruction/discussion teachers shall facilitate an open communication on sexuality.	4	1.6	5	2	4	1.6	33	13.2	32	12.8	86	34.4	86	34.4	
Q37.	In order to address teenage pregnancies and other risks associated with premarital sex, teachers will incorporate sexual material and offer more thorough sex education in the classroom.	5	2	7	2.8	5	2	29	11.6	41	16.4	65	26	98	39.2	
Q38.	Psychologists and school guidance counselors are responsible for creating a plan of action or developing students' sexual self-esteem.	2	0.8	11	4.4	5	2	28	11.2	37	14.8	65	26	102	40.8	
Q39.	Teachers shall incorporate in their teaching how adolescents will improve their control over impulsive urges and actions such as premarital sex.	4	1.6	7	2.8	6	2.4	28	11.2	30	12	75	30	100	40	
Q40.	Sex education shall be taught as part of gender and development program.	3	1.3	4	1.6	5	2	16	6.4	32	12.8	62	24.8	128	21.2	

CONCLUSION

The majority of respondents were Muslims, with over half being female and between the ages of 20 and 21. According to the results, teenagers agreed that PMS is widespread these days. In terms of social norms, moral values and beliefs, majority perceived that engaging PMS will risks one’s reputation and respect since refraining and engaging PMS are shaped by social pressures and control and moral values. Also, this study reveals that PMS is a regrettable experience, is prohibited and taboo. Hence, adolescents still view virginity as one important aspect in any religion and the cultural practices the respondents have. In addition, PMS is practiced because of adolescents’ sexual curiosity and sexual pleasure. Also, males experience high self-esteem and low psychological stress after having or engaging PMS.

In the study, there is an interesting distribution of level of agreement that once virginity is lost girls are regarded as not marriageable. This suggests that respondents have different or consider other factors before they can conclude that a certain individual is marriageable or not.

Majority of respondents found it easy to discuss mostly sexual growth and development, as well as experiences among their peers. And most of the sexual information were taken from their friends, too. Moreover, it is revealed that adolescents desire to have better and open discussion with the parents/ caregivers so they can further understand themselves. Furthermore, males gain information from social and mass media. While females learn sexual information/sex education related topic discussed inside the classroom.

It is evident in the study that according to adolescents once PMS is being practiced, they may physically be at risk due to abortion and unplanned pregnancies and that they may acquire HIV AIDs virus. Likewise, another risk is in terms of academics, wherein adolescents could drop-out/may absent because he or she is into early parenthood. Female adolescents experience low self-esteem and increased psychological stress and feel helpless once they discover they are pregnant or after engaging premarital sex. In terms of interventions to be implemented, adolescents believe that it will help them manage their sexual growth development. They added that seminars, symposium and classroom



discussion and curriculum integration of topics regarding sexuality will help them better understand their raging sexual changes. They also believed that helping professionals and teachers have the capacity to help them understand their sexual self.

In conclusion, PMS as a global issue is also a primary concern in the context of areas populated by mostly diverse ethnolinguistic community. It is highly suggested that administrators and curriculum planners consider the implementation of programs and activities that would be responsive to the demands of the students' sexual growth and development. In order to solve and help prevent the issue on PMS, this study should be explored to identify the factors and create programs that will enhance and reinforce adolescents healthy responsible sexual understanding.

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