

Article

# The Relationship of Family Communication Level With The Sexual Behavior of Adolescent With Disability In The Umbrella Disability Project (UDP) Bukittinggi City

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## A B S T R A C T

According to Survey Demografi Kesehatan Indonesia (SDKI) at 2018, it is said that adolescents who have knowledge about reproductive health are still lacking with a percentage of 35.3% of female adolescents and 31.2% of male adolescents aged 12-19 years. Individuals have reached a developmental transition that is closer to adulthood. This growth and development is not only experienced by normal adolescents but also experienced by adolescents with disabilities. The purpose of this study was to determine the relationship between the level of family communication and adolescent sexual behavior in the UDP community in Bukittinggi City. This type of research is descriptive analytic with a cross sectional design. The population of this study were all youth with disabilities (deaf) who were in the Umbrella Disability Project (UDP) community as many as 30 respondents. The sampling technique was carried out by total sampling. The results of this study were almost half (43.3%) of respondents had poor family communication levels and less than half (33.3%) of respondents had poor sexual behavior. After carrying out the Chi-square analysis test, it was found that there was a significant relationship between the level of family communication and the sexual behavior of adolescents with disabilities in the UDP community in Bukittinggi City ( $p < 0.05$ ). Based on this research, it is concluded that adolescents with disabilities during their growth and development need special attention, especially parents and families to prevent risky sexual behavior so that it is not difficult for them to discuss efforts to prevent negative sexual behavior in society.

## I. INTRODUCTION

Reproductive health is one of the important indicators in the success of public health development in a country. Reproductive health is said to be healthy not only because it is free from disease or disability related to the reproductive system, function and process, but reproductive health is said to be healthy when a person is in good health physically, mentally and socially as a whole (Government Regulation No. 61 of 2016 concerning Reproductive Health, 2016). Not only that, the International Planned Parenthood Federation (IPPF) has also formulated 12 reproductive rights, one of which is the right to obtain information and education related to reproductive health, especially during adolescence.<sup>1</sup>

Adolescence is a period of transition from children to adults. At this time, adolescents will experience puberty, which is a period of physical changes and physiological functions. At this stage, teenagers usually go through it with their peers who have the same commitment in a group. According to data from the Indonesian Demographic Health Survey (SDKI) in 2018, it is said that adolescents who have knowledge about reproductive health are said to be still lacking with a percentage of 35.3% of girls and 31.2% of boys aged 12-19 years only knowing that women with only one sexual intercourse can result in pregnancy.<sup>2</sup> Individuals who have reached a developmental transition that is closer to adulthood, this growth and development is not only experienced by normal adolescents but also experienced by adolescents with disabilities.<sup>3</sup>

This growth and development is also experienced by adolescents with disabilities, growth and development is the same as what happens with other children, although the difference is only visual. Early adolescence with ages between 12-17 years and late adolescence between 17-19 years. According to WHO (2018), adolescents are residents in the age range of 12-19 years, according to the results of the 2018 inter-census population survey, which shows that the population aged 12-19 years has reached 1.2 billion or 18% of the world's population.<sup>4</sup> 12-18 years old and according to the Population and Family Planning Agency (BKKBN) the adolescent age is 10-24 years old and unmarried. The results of the 2015 inter-census population survey showed that the population aged 15-24 years reached 42,061.2 million or 16.5%.

The number of youth with disabilities in Indonesia is 2.75% of the 280 million population, or around 7.7 million. Research results from the Indonesian Association of Women with Disabilities (HWDI) on 102 female respondents with disabilities, with respondents in their teens (12-18 years and 19-24 years). (Stanford Binne, 2017). According to data from West Sumatra, the population aged 10-24 years is 14.93% of the total population of West Sumatra and the number of adolescents with disabilities in West Sumatra is recorded at 25,000 people, and the number of adolescents with disabilities in the city of Bukittinggi is recorded, there are 55 people with disabilities. Adolescents in the city of Bukittinggi.<sup>5</sup>

Adolescents with mental disabilities are vulnerable to being victims of sexual harassment. The development of adolescent sexual behavior is often not properly understood by family, teachers, friends, and other social circles. Vulnerability in adolescents with mental disabilities is not only due to the condition or limitations of the teenager, but also because the social environment is not able to provide adequate protection guarantees. The combination of individual and environmental conditions is a factor that is often encountered, which causes adolescents with mental disabilities to be more vulnerable.<sup>6</sup>

Reinforced by the Global Early Adolescent Study (GEAS) (2018) research, one of which focuses on adolescent reproductive health, states that adolescents' understanding of reproductive health and sexuality is still very lacking. This is evidenced by the 5000 students who were involved in this study, the results showed that as many as 20% of teenage boys stated that they had friends who had kissed their girlfriends, 14% knew that their friends had been petting, 7% knew their friends had had vaginal sex with their girlfriends and 6% of his friends have had child sex. These

data indicate that adolescent behavior leads to premarital sex and will result in reproductive health problems in adolescents. The efforts for reproductive health are a state of complete physical, mental and social well-being, not merely freedom from disease or disability in all matters relating to the reproductive system, as well as its functions and processes.<sup>7</sup>

Based on the initial survey with interview conducted on June 6, 2021 to three youth with disabilities in the Umbrella Disability Project (UDP) community, it was found that 1 respondent had good communication with family and 2 other people had poor communication with family regarding reproductive development in adolescents and their influence on sexual behavior. This is due to the limitations of the respondent's language with family so that it becomes an obstacle for them in discussing deviant sexual behavior in society. The community administrator also stated that in order to establish good communication between the respondent and his family, it is usually necessary to be accompanied by the administrator so that the intentions conveyed can be accepted and can be understood by each other. Even some family members also have to learn and practice communication with youth with disabilities.

Based on the problems above, the researcher is interested in conducting a study entitled "The Relationship between Family Communication Levels and Sexual Behavior in Adolescents with Disabilities in the Umbrella Disability Project (UDP) Community Bukittinggi".

## II. METHODS

This type of research is descriptive analytic by using a cross sectional design that is looking at the relationship between the level of family communication and the sexual behavior of adolescents with disabilities in the Umbrella Disability Project (UDP) Community of Bukittinggi City. Data collection was carried out in October 2021. The population in this study were all youth with disabilities in the UDP community of Bukittinggi City, namely 30 people. While the sampling technique is by means of a total sampling of 30 respondents. The inclusion criteria in this study were willingness to become respondents and all youth with disabilities in the Umbrella Disability Project (UDP) community. Meanwhile, the exclusion criteria in this study were adolescents with disabilities > 19 years of age. The instrument used was a questionnaire for the variables of the level of family communication and sexual behavior among adolescents with disabilities in the Umbrella Disability Project (UDP) community.

The research procedures carried out were all youth with disabilities in the Umbrella Disability Project (UDP) community of Bukittinggi city based on the sample, according to the inclusion criteria, namely 1) an explanation of the research carried out; 2) respondents who agree will be asked to sign an informed consent form; 3) conducting interviews with a questionnaire; 4) collect the data obtained.

Data collection consists of primary data, namely data collection is done by interview using a questionnaire to all youth with disabilities in the umbrella disability project (UDP) community accompanied by community administrators and secondary data, namely data collection is carried out based on data obtained from the umbrella disability project (UDP) community. ) Bukittinggi city. Data processing steps include editing, coding, tabulating and cleaning. The data analysis method used in this research is univariate and bivariate analysis.<sup>8</sup>

## III. RESULT

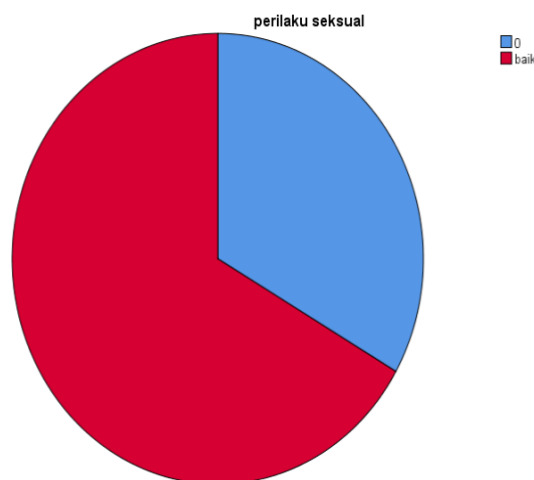
The data of the research were obtained by interviewing 30 teenager with disability at Umbrella Disability Project (UDP) Community. After the data were analyzed univariate and bivariate then obtained result as follows:

## A. Univariat Analysis

**Tabel 1. Respondents Frequency Distribution Based on Communication Level and Sexual Behaviour**

Characteristic	f	%
<b>Communication level</b>		
- Not good	13	43.3
- Good	17	56.7
<b>Sexual behaviour</b>		
- Not good	10	33,3
- Good	20	66,7

Based on table 1 shows that less than half (43.3%) of respondents have poor communication levels within the family and less than half (33.3%) of respondents have poor sexual behavior.



**Figure 1. Sexual Behaviour of Disability Teenager**

## B. Bivariate Analysis

**Table.2 Relationship between Communication Level with Sexual Behaviour of Disability Teenager in Umbrella Disability Project of Bukittinggi**

Variable s	Sexual Behaviour				Total		p
	Not good		Good		f	%	
	f	%	f	%			
Commu nication level							
- Not goo d	5	38 ,5	8	61 ,5	13	10	0,0 17
- Goo d	5	29 ,4	12	70 ,6	17	10	
Total	10	33 ,3	20	66 ,7	30	10	

Based on table 2, it is found that respondents who have bad sexual behavior are more respondents who have poor communication levels (38.5%) compared to respondents who have good communication levels (29.4%). After conducting the chi-square test, it was found that there was a significant relationship between the level of family communication and the sexual behavior of adolescents with disabilities in the Umbrella Disability Project (UDP) community in Bukittinggi.

## IV. DISCUSSION

Based on the research conducted, it was found that less than half (43.3%) of respondents had poor family communication levels and less than half (33.3) of respondents had poor sexual behavior. After the chi-square test was carried out, it was found that there was a significant relationship between the level of family communication and the sexual behavior of adolescents with disabilities in the Umbrella Disability Project (UDP) community in Bukittinggi.

This is the same with research conducted by Livia Dwi Ramadhani, (2019), which found that family communication patterns are related to risky sexual behavior in adolescents with disabilities, adolescents with disabilities during their growth and development require special attention, especially parents and families to prevent risky sexual behavior. Risky sexual behavior among adolescents with disabilities is related to the role of parents or family, meaning that family communication can reduce sexual behavior in adolescents with disabilities. the relationship between parents and deaf adolescents tends to be complicated by communication. Adolescents with disabilities have difficulty discussing with their parents due to the context regarding sexuality issues. Adolescents with disabilities consider it taboo to discuss sexuality with their parents.

Parents assume that discussing sexuality will encourage adolescents to engage in sexual activity. Parents assume that their teenagers have received information about reproductive health from schools. i.e. In fact, very little information is available. Reproductive health education in Indonesia for deaf adolescents has not received special attention from the government and educators. This can be seen from the lack of literature on reproductive health problems for deaf adolescents as a whole or comprehensively, even though there is information about reproductive health.

This is in line with the research, Tantut Susanto (2018). The role and parenting patterns of parents are related to risky sexual behavior. High-risk sexual behavior when parent-adolescent communication is negative and family communication patterns are dysfunctional. Functional communication patterns can be applied by parents in caring for adolescents with disabilities to avoid risky sexual behavior. Furthermore, considering the importance of fulfilling reproductive needs for adolescents with disabilities, it is necessary to identify family communication patterns with sexual behavior of adolescents with disabilities.

Family communication is an organization that uses words, gestures, voice intonation, actions to create image expectations, express feelings and share understanding. contains the intent to teach, influence and provide understanding. While the main purpose of this communication is to initiate and maintain interaction between one member with another member so as to create effective communication. Communication in the family can also be interpreted as a readiness to talk openly about everything in the family, both pleasant and unpleasant, also ready to solve problems in the family with conversations carried out in patience and honesty and openness.<sup>11</sup>

Based on the research I did in the Umbrella Disability Project (UDP) community, it was found that 13 (43.3%) respondents had poor communication in their families, this happened due to the respondent's lack of self-confidence and lack of acceptance in the family due to a lack of self-confidence. owned by the respondent and I as a researcher, we hope that especially in the umbrella disability project community, it can improve communication in the family and we can help respondents to restore their confidence by communicating with each other or providing motivation to respondents.

Based on the researcher's assumptions, respondents have a good perception of the level of communication and sexual behavior in adolescents with disabilities in the Umbrella Disability Project community. They are taught a lot about communicating and associating with the same sex or the opposite sex in this community as well as the support or teachings provided by the community. family, such as associations that are limited by the family to prevent promiscuity or sexual behavior in their children with disabilities. Meanwhile, youth with disabilities who do not understand how to communicate well and good relationships in this community are caused by having bad perceptions about communicating with their families. Respondents who are less accepted in their families and less considered in the family environment are caused because they feel less confident to communicate with their families because of the shortcomings they have. In carrying out their activities, respondents also do not have social rules given by their parents so that this also has an effect on sexual behavior experienced in their environment.

## **V. CONCLUSION**

Based on research conducted on the relationship between the level of family communication and the sexual behavior of adolescents with disabilities in the Umbrella Disability Project (UDP) community in Bukittinggi, it can be concluded that less than half (43.3%) of respondents have a poor level of family communication and less than half (33,3%) respondents have bad sexual behavior. After the Chi-Square test was carried out, the results showed that there was a significant relationship between the level of family communication and the sexual behavior of adolescents with disabilities in the UDP community in Bukittinggi City.

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