New Approaches in Studying Young People Sexuality and Reproductive Health Behavior: How can it be measured and tracked? (A Case Study of Indonesia)*

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Abstract. The objective of this paper is to focus on the methodological aspect in studying young people's sexuality. Due to the extreme sensitivity in studying this issue, an eclectic approaches to data gathering which include a survey, in-depth interviews, focus group discussions, media clippings and daily field note is used. Five sexual indices developed from the 1994/95 Sexuality and Marriage Values Survey is elaborated and discussed. The index score produced from the sexual indices for sexual behaviour are categorised into three groups: low, medium and high. Respondents who have a high score are assumed to be more liberal than respondents with a low score. The paper also discussed the advantages, disadvantages and how to make focus group and in-depth interview work in such a conservative cultural setting. Finally, the paper speculate; in trying to understanding sexuality referred to by researchers as 'ego-threatening', 'sensitive', and 'taboo topics' by using the eclectic approaches to data gathering.

Keywords: Sexual behavior; reproductive health knowledge; young people; sexuality; premarital sex; qualitative methods; sexual indices; Indonesia.

1. Introduction

"The society in which we live treats sex and everything related to sex in a most ambiguous and ambivalent fashion. Sex is at once highly fascinating, attractive, and, for many at certain stages in their lives,

Young people in this paper is defined as those aged between 15-24 years old and still single.

preoccupying, but it can also be frightening, disturbing, or guilt inducing. For many sex is considered to be an extremely private matter, to be discussed only with one's closest friends or intimates, if at all. And, certainly for most if not all of us, there are elements of our sexual lives never acknowledged to others, reserved for our own personal fantasies and self-contemplation. It is thus hardly surprising that the proposal to study sex scientifically, or any other way for that matter, elicits confounding and confusing reactions. Mass advertising, for example, unremittingly inundates the public with explicit and implicit sexual messages, eroticizing products and using sex to sell. At the same time, participants in political discourse are incredibly squeamish when handling sexual themes, ...We suspect, in fact, that with respect to discourse on sexuality there is a major discontinuity between the sensibilities of politicians and other self-appointed guardians of the moral order and those of the public at large, who, on the whole, display few hang-ups in discussing sexual issues in appropriately structured circumstances". (Laumann et al., 1994: 36).

In the 'age of commerce' (1450-1680 AD) sexual activity among the people of Southeast Asia was very open. From historical Javanese literatures called Cintini and Arjunawijaya, it is clear that this was the case among Indonesians, and women had more power than men did over their sexual activity. Women initiated sexual intercourse and men sometimes underwent very painful penis surgery to insert tiny balls under their loose penis skin with the aims of pleasing women. This is in contradiction to contemporary Indonesian attitudes on sex. Even though premarital sexual activity is increasingly evident people do not openly talk about sex. Virginity is regarded as crucial for marriage and sex outside marriage is regarded as immoral. State regulation, the political environment, religious beliefs, and traditional norms and values influence sexual activity. Yet double standards exist, as shown by young men having sexual intercourse with prostitutes but wanting to find virgin wives. Despite the availability of literatures regarding historical perspective of sexuality, it is quite difficult to study sexual activity using historical accounts. This is mainly due to their dispersion and because literature dating from the tenth to the eighteenth centuries was written in Javanese.

Scholars around the world agreed that sexuality is biologically and socially constructed. In Indonesia the social and political construct surrounding sexuality is very complex. Many social and religious forces have influenced Indonesia: Hinduism and Buddhism, Islam, and Christianity. These influences were pioneered by international traders from India, Portugal, China, and through the international traders routes of Sumatra, Java, Batavia

(Jakarta), and Maluku. Then the Dutch colonized parts of Indonesia for three hundred years working their way through trade, politics, and the administrative bureaucracy of the Indonesian urban areas. The Dutch made their starting point in Batavia and worked mostly with Indonesians in the urban areas. These social and religious forces have influenced and assimilated with the existing culture of Indonesia and have influenced the notions of sex, marriage, and research on these issues.

Studying young people's sexuality-reproductive health is important as one fifth of the world's population are those aged 10-19 years and more than one forth of world's population are aged 10-24 years old. Most of these young people reside in the developing countries. In Indonesia there were 35.5 million (19.7 percent) young people aged 15-24 years old in 1990 (1990 Population Census). This number is projected to increase to 43.6 million in the year 2000. Rindfuss (1991) noted that the period of young people is characterized by a very 'demographically dense phase', the density of events during the young people years is even more dramatic during periods of rapid social change because 'young people are typically the engines of social change'. Young people are the trendsetters for the next generation. Despite the significant proportion of young people, significant psychological meaning in the life cycle and their potential of reproduction, the sexual and reproductive health of young people remains a neglected area of public health and research in many countries.

How to study young people sexuality and reproductive health behavior in Indonesia is still a challenge. This is due to the political, religious, and socio-cultural environment surrounding sexuality research. In Indonesia, sex is regarded as a private and not a public matter, and in some parts of the society it is still taboo in discussion. Besides the cultural and political environment that makes sexual behavior difficult to be studied, the marginality of literature on sexuality in Indonesia is also still a wide concern. This does not mean that sexuality research is impossible in an Indonesian cultural environment, but the extreme sensitivity has led to the use of eclectic approaches to data gathering in studying this issue that will be addressed in the next section.

Even without the burden of the social and political construct in studying sexuality, the sensitivity of studying this issue even in a Western setting is already causing a lot of methodological problems. Western survey methodology assumes that it is especially difficult to obtain data on certain topics referred to as 'ego-threatening' (Kahn and Cannell, 1987), 'sensitive' (Richardson et al., 1965; Boshier, 1989: 5-6), or 'taboo topics' (Rogers, 1973:

64; Herold, 1989: 30). Topics included in these categories are sexual attitudes and behavior, attitudes towards and the use of various drugs, and criminal behavior (DeLamater and MacCorquodale, 1975: 215), contraceptive use, vasectomy, and abortion (Rogers, 1973: 64).

The objectives of this paper are to examine the research design, methodology, and category used in studying young people sexuality and reproductive health behavior. What have been studied, types of methodology and category used, and how it changed overtime will be analyzed. A diverse array of qualitative and quantitative methods and techniques will be addressed. Minimizing the gap in studying and presenting research result on this issue between policy makers, politician, religious leaders, journalists, and researchers will also be examined. In this regards the focus will be on how to create quality research environment in studying sexuality and reproductive health in Indonesia.

There have been more than 100 small-scale studies and case studies conducted in Indonesia regarding young people sexual attitudes, values, and behavior. The most recent studies also include STDs/HIV/AIDS among youth, child prostitutes, sexuality among street children, sexual abuse and violence, and premarital abortion. Study design, methodology, representativeness, validity, and category used in these studies will be evaluated. New approaches in studying young people sexuality and reproductive health behavior will be explored further in this paper.

Important issues to be addressed in this paper that must be untangled and struggled for its implementation is the research and political environment surrounding sexuality research. This is crucial especially when one wants to evaluate reproductive health behavior among single young people. Most international and national demographic survey only included married women of reproductive age. With the Demographic Health Survey for example, only countries in Latin America and Africa included single young women in their reproductive age. The availability of data on single young people is still very limited because most survey only used married women of reproductive age as a category. More important question on whether someone had ever had sex in the Demographic Health Survey is only asked in Sub-Saharan Africa, Latin America, and the Philippines (Blanc and Way, 1997: Table 1).

This paper strongly argued that to include single young female and questions related sexual behavior in the Demographic Health Survey is a must as there are very limited data available on this issues. The availability of data on single young people in their reproductive age is crucial for policy

recommendation. How can the issues of premarital sex, abortion, and premarital birth be addressed if there is no data base on these issues? Furthermore how can adolescent reproductive health program, IEC on reproductive health, services, and counseling on reproductive health related problems be addressed if we do not have the basic data on this issue, not to mentioned the mapping of this condition national wide. Ideally both male and female regardless of their marital status must be included in survey related to demography, fertility, and reproductive health. Decision on reproductive health matters, fertility, and sexual act involve both male and female.

2. Idealized Morality, The State and Westernization: Conceptual Framework in Studying Young People's Sexuality

A conceptual framework of idealized morality, the state and Westernization can be used to explain how young Indonesians develop new values towards mixing between the sexes on a conservatism-liberalism scale. Idealized morality, which can be defined as belief structures that have developed over a long time in a society's history (McDonald, 1994: 22) include traditional values, norms and religious teachings. New values coming from the Western world or those developed through the modernization process can run counter to the idealized morality. The extent to which the new values are accepted or accommodated depends upon the level at which the idealized morality is policed by the strong, formal institutions of the society and the state. A powerful alliance of state and religious institutions can prevent the adoption of new attitudes and behaviors as has been the case, for example, in some Middle East countries, Iran being the clearest example.

In Indonesia, the relation between state and religious institutions is dialectic, at once supporting and conflicting but in total trying to form an uneasy alliance in support of 'traditional Indonesian' values. Needing the support of young people and recognizing a change is often in its own interest, the state on occasions does not stand in the way of social change or, indeed, promotes it. An example of this phenomenon in the Indonesian setting is the value attached to an arranged marriage. In the past, Indonesian families married their daughters off as young as nine or ten years of age (Geertz, 1961: 56, McDonald and Abdurachman, 1974: 3) to save parents from the embarrassment of having an old maid in the family or worse, the embarrassment of an ex-nuptial pregnancy. Religious and state organizations combined with parents to enforce this value orientation. Nowadays arranged

marriages have become uncommon and parents encourage their daughters as well as sons to obtain higher education and develop a career. In order to promote economic development, the state has an interest in advancing education and, hence, later marriage and has changed the law accordingly.

Young Indonesians have developed a specific 'national identity and ideology' that has become a frame of reference in addition to their community, family, and ethnicity (McDonald, 1984:8). This frame of reference is based on the nation state, education, media exposure, and 'westernization' and serves to legitimate new behavior. The role of the family for many young Indonesians is not as powerful as it was in the past because the values of other reference groups provide alternatives to the values of or decisions made by parents. Hence the younger generations are starting to have more control over their own lives and have the opportunity to make more independent decisions on relationships prior to marriage, mate selection, and sexuality. As a result, love-marriage is more common and there is greater freedom in engaging with the opposite sex prior to marriage. Hence young Indonesians are acting toward the more liberal end of the liberalism-conservatism scale in regard to attitudes and behaviors related to sexual intimacy with the opposite sex.

3. Measuring Young People's Sexual Behavior: From the West to The Rest of the World

Political policies and social reactions to research on sexuality have hampered efforts to obtain (and in some cases to disseminate) knowledge about human sexuality (Allgeier, 1989: 127).

Given the taboos surrounding sexuality, the taboos about doing research on sexuality are not too surprising, and they have inhibited some academics who feared negative effects on their career advancement (Herold, 1989: 30).

3.1 Research on Western Young People's Sexual Behavior

Pioneer studies on sexuality in the United States started in the early 1940s when Kinsey and his associates started to bring respondents to the Institute for Sex Research at Indiana University and studied their sexual

behavior (Kinsey et al., 1948; Kinsey et al., 1953). Kinsey and his associates studied a variety of individuals, interviewed them face-to-face, and statistically analyzed the data on 'what people did sexually' (Pomeroy, 1972: 4).

Before Kinsey, Sigmund Freud began to study sex in 1896 through psychoanalysis that began as a method to treat neurotic patients by investigating their minds but then developed to a method of studying the mind in general in both sick and healthy people. By examining and analyzing dreams, Freud developed his theory on development of the sexual instinct in childhood (Richards, 1977: 27-30).

Other earlier studies are presented in Table 1. All of these studies are American except the last one, which compared Danish students with others from two American universities, the study by Slater and Woodside and Dr. Chesser (Schofield, 1965: 15). From the 32 studies, only 10 (ten) studies included male and female respondents and most studies concentrated on college students or graduates (19). Studying sexual behavior of both sexes is more reliable as in heterosexual relationships, both sexes have to be considered. Throughout the history of sex studies it can be concluded that the method of interviewing was first introduced without any attempt to use a sampling frame. As it developed, surveys on sex using a structured questionnaire were more common among a limited range of respondents and specifically among either sex in college or school-based settings.

During the 1960s through early 1990s, the United States sexuality surveys only focus on premarital sex, contraception, fertility (both planned and unplanned), and vaginal intercourse. These studies were conducted among limited sample mostly college students and younger women (Gagnon and Simon, 1974; Jessor and Jessor, 1975; Bell and Weinberg 1978; Zelnik and Kantner, 1982, 1980; Zelnik, Kantner and Ford, 1981; Blumstein and Schwartz, 1983; Tanfer and Horn, 1985; Forrest and Singh, 1990; Mosher 1990; Mosher and McNally, 1991). In 1991; Laumann et al., (1994) conducted a National Health and Social Life Survey (NHSLS) in the United States covering socio-economic aspects, sexuality, masturbation, lifetime sexual experiences, and AIDS-risk behavior.

Table 1
EARLY RESEARCH ON SEX BEHAVIOR IN THE UNITED STATES

Author	Date	Source of sample	Size of sample		Total
			Male	Female	
Exner	1915	College students	948	-	948
Merril	1918	Juvenile delinquents	100	-	100
Archilles	1923	High school and college student	1,449	483	1,932
Peck and Wells	1923	College graduates	550	-	550
Pearl	1925	Hospital patients	257	-	257
Hughes	1926	Mill workers	1,029		1,029
Davis	1929	College alumni	-	2,200	2,200
Hamilton	1929	Psychiatric patients	100	100	200
Dickenson and Beam	1931	Hospital patients	-	1,448	1,448
Taylor	1933	College students	40	-	40
Strakosch	1934	Psychiatric patients	-	700	700
Bromley and Britten	1938	College students	592	772	1,364
Terman	1938	College tevel	1,242	1,242	2,484
Peterson	1938	College students	419	-	419
Landis et al.	1940	Psychiatric patients	-	295	295
Landis and Bolles	1942	Psychiatric patients	-	100	100
Ramsey	1943	High school, boys' club an	291	-	291
Gardner	1944	College students	221	-	221
Finger	1947	College students	111	-	111
Hohman and schaffner	1947	Army Conscript	4,600		4,600
Kinsey	1948 1953	Volunteers all social classes	6,200	5,800	12,000
Ross	1950	College students	95	/ 47	95
Slater and Woolside	1951	Hospital patients	200	- 1	200
Burgess and Wallin	1953	College and high school level	580	604	1,184
Landis and Landis	1953	College students	600	1,000	1,600
Chesser	1956	Patients of general practitioners		6,034	6,034
Kanin	1958	College level	N 1-7	190	190
Ehrmann	1959	College students	734	423	1,157
Kronhausen	1960	College students	200	/ A	200
Kirjendall	1961	College students	600		600
Christensen and Carpent	1962		456	302	758
Greene	1964	College students	76	538	614

Source: Schofield, 1965 (Table 2.1: 16).

Basic measures of premarital sexual intimacy behavior started to be developed by Ehrmann (1960) who used an eight-stage scale ranging from no contact or holding hands, through intercourse (stage 7) to female fondling male's genitals. Some of Ehrmann's stages consist of the same behavior (for example genital fondling) but vary according to whether the male or female is

active. In 1965, Schofield in his study added genital apposition, but did not differentiate whether the male or female is active in the genital stimulation (Schofield, 1965). Later, a study from Gagnon and Simon (1967; cited in DeLamater and MacCorquodale, 1975: 221) was the first study to ask about oral-genital contact and also included whether the male or female is active. Further, DeLamater and MacCorquodale (1975: 221) developed a composite scale including all of the behavior identified in the past scales, and distinguished whether the male or female is active in a certain part. All of these studies included only physical aspects of premarital sexual behavior without reference to emotional attachments. Reiss (1967) studied premarital sexual intimacy behavior and related it to the emotional aspect of a relationship, which he called 'partner's ideology'. In this case, ideology is defined as an understanding of what point in a relationship the partner felt that a particular behavior was acceptable for each sex. Five categories of relationships were included: before marriage, engaged, in love but not engaged, feel affection but not love, and if both want it and three types of sexual behavior were employed: fondling of breasts, fondling of partner's genitals, and intercourse.

Another measure of sexuality developed by Reiss (1967) is the 'attributes of the relationship'. The measure is concerned with the emotional intimacy of the relationship categorized as: paid sexual partner, dated only once or twice, dated often but not emotionally attached, emotionally attached but not in love, in love and expect to marry, and engaged. Reiss's emotional aspect of relationship theory 'partner's ideology' and 'attributes of the relationship' seem to be overlapping. For example 'before marriage' can include 'dated only once or twice', 'date often but not emotionally attached', 'emotionally attached but not in love', 'in love and expect to marry'. It is also very difficult to differentiate between 'feel affection but not in love' and 'emotionally attached but not in love'.

3.2 Research on Indonesian Young People's Sexual Behavior

In Asia, sexuality research often is restricted because of barriers hindering studies in this field. These barriers evolved through the political conditions, socio-cultural, and religious institutions evident throughout Asia. Even though researchers in this region are aware of the work done in other countries, sexuality studies are mostly situated within the context of public health rather than behavioral science as they have only been

conducted for the last 20 years (Sittitrai and Barry, 1989: 174). In Asia, as in most developing countries, the worldwide AIDS pandemic has stimulated new interest and research into sexuality (Sittitrai and Barry, 1989; Utomo, 1995; Knodel et al., 1996a). The most notable studies of sexuality in Southeast Asia have been conducted in the Philippines (Anigan, 1979; Raymundo, 1995; Lee, 1995, 1997; East-West Center, 1997), Thailand (Chompootaweep et al., 1988; Knodel and Pramualratana, 1995; Knodel et al., 1995; VanLandingham et al., 1996; Knodel et al., 1996a, 1996b; Im-Em, 1996), in Sri Lanka (Silva, 1998) and in India (Ramasubban, 1996: 185).

In Indonesia sexuality as a field of study can be regarded as not yet established unlike the progress of sex studies in Western countries (Suryakusuma, 1991: 3). Even though an increasing incidence of premarital sex and pregnancy has been evident from studies and records conducted and collected in Indonesia, the Indonesian Government's attitude towards sexuality research is very strict, in accordance with the conservative cultural setting. There are signs that the Indonesian adolescents and young adults are moving towards a more permissive attitude towards premarital sex, and that premarital sex and pregnancy are increasing, but the government seems to deny this trend. The Indonesian government's attitude is understandable because even in more liberal and democratic countries like America stigma associated to sexuality research also still exists (Allgeier, 1989: 127; Herold, 1989: 30).

In Indonesia, there have been numerous small-scale studies on adolescent sexual behavior since 1970. Most studies were done by the Indonesian Planned Parenthood Association (IPPA), social researchers, popular magazines and tabloids, gynecologists, psychologists, and high school and university students. Influenced by a study on attitudes towards premarital sex (Sadli and Biran, 1976) and a need assessment study of sex education (Warnaen, 1976), a professional research body, the Faculty of Psychology, University of Indonesia, began research on sexual activity. In the 1970s, the main focus of sexual research in Indonesia was on attitudes and values. In the 1980s, Sarwono (1981) started to move beyond the attitudinal aspects of premarital sex by extending his research to sexual behavior as well. His study revealed that of 417 respondents aged 15-21 years old, who lived in Jakarta, 4.1 percent had experienced premarital sex.

Since 1980, several IPPA clinics, in Jakarta, Semarang, D.I. Yogyakarta, Medan, and Manado, have kept unsystematic records of the incidence of premarital pregnancies (Hadi, 1991; Djuarsa and Tirtahusada, 1991; Saleh, 1991; Suparman and Loho, 1991). IPPA clinics, Wisma Keluarga Berencana Terpadu (WKBT), were developed in urban centers in

North Sumatra, DKI Jakarta, West Java (three clinics), Central Java, D.I. Yogyakarta, East Java, East Kalimantan, South Kalimantan, South Sulawesi, North Sulawesi, D.I. Aceh, Nusa Tenggara Barat and Bali. The primary aim of these clinics is to provide comprehensive and reliable family planning services for the middle and lower income class and also clients that cannot The clinics also provide reproductive health services, laboratory services, consultation, communication, and education services and training for medical professionals (Kabar, 1985). Some of these clinics, however, also provided abortions for unwanted pregnancy due to contraceptive failure or premarital pregnancy consultations. Cases recorded are only patients who came to the clinic to seek advice or abortion because of unwanted pregnancy. Nevertheless, to get these records for scientific reasons is not easy, because of the conservative research environment and political attitude that still sees sex research as taboo. The IPPA has conducted numerous studies on attitudes and knowledge of sex and family life education rather than sex research per se. Psychologists and gynecologists have also kept records on clients who came to seek advice because of premarital pregnancy and abortion-related problems (Rachimhadhi, 1981; Waluyo, 1981: 123; Widyantoro, 1981: 113; Warouw cited in Manado Post, 1989; Personal communication with a psychologist, case no. y89fy, Yogyakarta 2/2/1995).

In the early 1990s, the Population Studies Center, University of Gajah Mada, started a survey on adolescent reproductive health in Yogyakarta, Bali, and Manado. In the first two provinces the study covered both urban and rural areas and the results revealed that incidence of premarital intercourse is higher in the urban areas than rural areas and among males than females (Dwiyanto et al., 1991/1992; Faturochman, 1992). In the mid-1990s, the Demographic Institute, University of Indonesia, conducted the first national survey on adolescent sexuality covering 13 provinces of Indonesia. The survey was funded by the USAID through the Rand Corporation, but because of official Indonesian Government restrictions, several significant questions were dropped from the questionnaire in the first week of field work. As a result the survey only covered knowledge and attitudes on premarital sex and not sexual behavior. Result in 1993, the Yayasan Kusuma Buana, a non-government organization specializing in health, sexuality, and prostitution research, conducted a study on reproductive behavior in 12 urban areas of Indonesia. The study revealed that eight percent of males and two and a half percent of females aged 15-19 and 24 percent of males and four percent of females aged 20-24 have experienced premarital intercourse (Yayasan Kusuma Buana/State Ministry of Population 1993, Table 19: 36).

There have been more than 100 recorded researches on young people's sexual behavior including risky sexual behavior related to HIV/AIDS in Indonesia from the 1960s until recently. Most of these studies were done in big cities in Java such as Jakarta, Yogyakarta, Surabaya, and some in other cities outside Java such as Medan, Denpasar, Ujung Pandang, and Manado. Most studies involved both male and female respondents selected either by household survey, school-based survey, reproductive health clinics or popular magazines. Apart from the household surveys, most of the surveys obtained their respondents on the basis of purposive sampling and convenience, for example, the surveys of readers of popular magazines, people seeking abortions at family planning clinics or participants in family life training. The incidence of premarital sex is apparently higher for males than females and the total incidence of premarital sex in those studies ranges from two percent to 26 percent. The wide range of reported premarital sex incidence can have several meanings. First, it can be assumed that in most studies premarital sex is under-reported for a variety of reasons, for example cultural barriers, the way the question was formulated in the questionnaire or the way confidentiality was addressed in the survey. Second, clinic-based studies are likely to be biased to those who have high rates of premarital sex. With the limited analysis reported by these studies, it cannot be concluded whether the incidence of premarital sex is higher in the outer islands or in Java. Across Indonesia, there will be cultural differences in the meaning of premarital sex. For example in his study Singarimbun (1991) stated that Balinese were more permissive than the Javanese. This also seems to have been the case among young people in Manado (Dwiyanto et al., 1991/1992).

Despite the various rates of premarital incidence reported, the 1987 National Indonesian Contraceptive Prevalence Survey (NICPS) estimated that between 13 and 28 percent of first babies born to women marrying for the first time from 1983 to 1987 were conceived before marriage. Moreover the study shows quite clearly that the trend in premarital sexual intercourse has risen since the late 1950s, but it has risen most sharply since the 1970s (Sly et al. n.d., 13). The ESCAP had also estimated that one in every five Indonesian married women aged 20-24 gave birth to a first child that was conceived by premarital intercourse (UN ESCAP, 1992; 7). In his study, Jones (1994; 60-61) also stated that from some unpublished studies in Indonesia it was reported that about 30 percent of married young people have experienced premarital sexual intercourse.

Unlike previous studies that mainly concentrated on urban young people and used the survey as the method, Hidayana et al. (1997) conducted a study in Pakis village and Medan (North Sumatra) and Saifuddin et al. (1997)

in Mandiangin village and Banjarmasin (South Kalimantan) using an ethnographic approach. These studies revealed that in regard to premarital sex, what young people in these villages are experiencing is the same as urban young people. These studies concluded that permissiveness towards premarital sexual behavior is apparent in both urban and rural areas, even though the forces of sexual stimulation through the media and the entertaining industries are much greater in urban areas.

- 4. Data, Method and Analysis
- 4.1 The 1994/1995 Jakarta Marriage Values and Sexuality Survey: A Combined Study Using Ouantitative and Oualitative Methods

In this paper the 1994/1995 Jakarta Marriage Values and Sexuality Survey that have been designed and developed by Utomo (1997b) for her PhD thesis will be used as a model in studying young people's sexuality. This model is expected to be visible for replication in similar cultural, religious, political, and socio-economic setting.

The 1994/1995 Jakarta Marriage Values and Sexuality Survey is the first comprehensive study in Indonesia with data on marriage values, mate selection, stages of relationships experienced before marriage, and premarital sexual behavior among young urban Indonesians. A total of 639 respondents from the middle-class, living or going to school in the southern part of Jakarta, were selected in this case study. The southern part of Jakarta is chosen as the study area because the majority of the middle-class resides in this area. The number of respondents is stratified by age and sex in Table 2.

Table 2 NUMBER OF RESPONDENTS BY AGE AND SEX, JAKARTA, 1995

Age	S	Total	
	Male	Female	
15-19	149	210	359
20-24	87	73	160
30+	57	63	120
Total	193	346	639

Note: Data are from the 1994/1995 Jakarta Marriage Values and Sexuality Survey.

Respondents in the age group 15-19 years were selected through public schools, Islamic, and Protestant Senior High schools. The university students (20-24 years old) were selected through universities located in the southern part of Jakarta. Whereas the 30 years-older and ever married respondents were selected through household.

Besides the structured survey, 12 focus-group discussions and 93 indepth interviews were also conducted. The subjects of focus-group discussions conducted in each locality were: male and female adolescents (15-19 years old); male and female young adults living with their parents (20-24 years old); female young adults living in boarding houses; and male young adults living in boarding houses.

Justification of the choice of groups for the focus-group discussions is that in analyzing the data, norms and values can be compared by contrasting the ideas of adolescents and young adults, of young adult respondents living with parents and living on their own (in boarding houses), and of young adult male and young adult females. Each focus-group contained eight to ten respondents and the discussion took about two hours. For the male university students living in boarding houses, a male moderator was used to eliminate barriers that could have occurred if discussion was conducted by a female moderator.

In-depth interviews covered historians, government employees, non government organization (NGO) employees, teachers, counselors, a psychologist, a psychiatrist, young people with premarital sexual experiences or premarital pregnancy, single females in their late twenties and over, young single women wearing the veil, housewives, a famous writer in his eighties, an ex-concubine in her late seventies, mothers of the bride-to-be, a fashion designer, a film producer who has produced several Indonesian films on teenagers and their lives, and taxi drivers (all males). Field notes written on a daily basis, newspaper articles and magazine clippings on the topic of premarital relationships have also been used. The clippings were done on a daily basis for newspapers and weekly for magazines. Recent issues on the behavior and activities of young people, sexual behavior and recent trends in the way they date, the kind of places where they like to gather, the popular youth culture they have developed, and young people's criminal behavior including sexual violation can be understood through these clippings, although care must be taken to discount the deliberately sensational nature of some accounts. Furthermore, how the state reacts to sexuality and how the government handles issues related to sexuality can also be understood from recent articles written in newspapers and magazines.

Even though the mix of quantitative and qualitative methods is derived from different theoretical approaches, the combination can compensate for the limitations of each method. The data from the survey give overall levels, rates, and differentials between groups, and have been analyzed statistically. The qualitative approaches give a deeper understanding of the causes of the social phenomena being analyzed, better insight on how individuals deal with their problems and explain causes of a certain phenomenon that cannot be answered by the survey data (Wolf et al., 1991; 1). As Axinn, Fricke, and Thornton (1991: 189-90) stated, both quantitative and qualitative methods have advantages and disadvantages, and when both methods are combined they will complement one another. Another advantage of the combined methods is that if one approach meets bureaucratic difficulty. the other can ensures successful completion of the project. In the past ten years, the combination of ethnographic and survey methods have become increasingly popular among social sciences (Yoddumnern-Attig et al., 1993: 2-3). The combined data collection technique has been referred to by many demographers as the micro-demographic community-study approach (Axinn et al., 1991: 187; Caldwell, 1988; Hull et al., 1988).

In designing studies on sexuality the most important issue that has to be addressed is the ethical aspect of the study. The participants in the study should also participate on a voluntary basis and well informed of the objective of the study, the researcher's name, and the purpose of the respondent participation in answering the questions. To secure the respondents' confidentiality, the survey respondents should not be asked to put their names on the questionnaire and confidentiality of the respondents' answer should be strongly emphasized. In this regards, photograph should not be taken during the questionnaire administration interviews, in-depth interviews, and focus-group discussions.

4.2 Questionnaire Design: The 1994/1995 Jakarta Marriage Values and Sexuality Survey

The questionnaire developed for the 1994/1995 Jakarta Marriage Values and Sexuality Survey consisted of eleven sections as follows:

Section

Topic

Questionnaire identity

Respondent and parent characteristics

Respondent activities and exposure to mass media

Mixing between the sexes before marriage

Knowledge on reproductive health

Knowledge on family planning

Dating status

Premarital sexual experience (if any)

First premarital intercourse (if any)

Other experiences of premarital intercourse (if any)

Stages of relationships prior to marriage and marriage values

Only respondents who had experienced sexual intercourse would fill in section 9 (first premarital intercourse) and section 10 (other experiences of premarital intercourse).

Questions developed for the 1994/1995 Jakarta Marriage Values and Sexuality Survey were adopted and modified from various questionnaires such as the 1978 Indonesian Marriage Survey and the Youth Reproductive Health Survey. Questions addressed were planned to fit with the theoretical framework of idealized morality, the state, modernity, and mixing between the sexes with liberal-conservative dimensions. In this case, questions related to religion, exposure to media and Western culture, and marriage values were created with their relation to the liberal-conservative dimensions in mind. Questions designed for religion were aimed to measure obligation and voluntary religious performance. Questions on exposure to media and Western culture were designed to measure media used by the respondent and types of programs they preferred to watch or listen to which can be categorized into Indonesian-type programs or Western-type programs. It was assumed that respondents who tend to watch or listen to, Western types of programs are more liberal than respondents who prefer to choose Indonesian types of programs. Marriage values questions were designed in two categories, traditional and modern. Here again it is assumed that respondents

who have modern values on marriage are more liberal than respondents who have traditional values.

In relation to premarital sexual behavior, questions were designed to measure attitudes of respondents towards appropriateness of sexual behavior when someone is dating and when someone is already engaged. Questions regarding experience of premarital sexual behavior were also asked. In order to develop the sexuality indices, the sexual behavior questions were designed to measure a range of sexual behavior from the least to the most intense: holding hands, hugging, embracing, kissing on cheeks, lips kissing, breast fondling, genital fondling, masturbation, petting, and petting with intercourse. In this case the sexuality indices are designed to measure the hypothesis: the more committed a heterosexual relationship is towards marriage, the more likely that there is stronger premarital sexual intimacy involved. On the other hand, besides measuring the above hypothesis, the sexuality indices were also designed to measure liberal-conservative dimensions of premarital sexual attitudes and behavior.

Questions related to sources and usefulness of knowledge about reproductive health and family planning were designed to measure different sources that respondents used and to what degree these sources were useful for complementing their knowledge on these issues. Therefore again it was assumed that if respondents had more access to sources of knowledge on reproductive health and family planning and these sources were useful to them, it was more likely that they were more liberal than respondents with few sources of information. Respondents with the least knowledge on reproductive health and family planning were assumed to be more conservative than respondents with more knowledge on these issues.

4.3 Method of Analysis

The conceptual framework of idealized morality, the state, and Westernization is operationalized in the following ways. First, from interview data, factor scales are developed within three, broad liberal-conservative dimensions. The three dimensions are religiosity, exposure to media and Western culture, and marriage values. Second, the scales are validated by examining whether or not they display expected relationships with characteristics of the respondents. Then, using both bivariate and multivariate approaches, the study examined the extent to which sexual

behavior and attitudes to sexual behavior are related to the scales considered to be valid (see diagram 1).

If the analyses aim to incorporate numerous variables, then factor analysis can be used. Factor analysis is a type of data reduction method. In this model, factor analysis is used to select a number of variables that can be grouped into 'factors' such as religious dimension, exposure to media and Western culture dimension, and marriage value dimension. Factors derived from the analysis are further used to analyze whether the respondents fall into conservative or liberal categories. By using the factor scores of religion, exposure to media and Western culture, and marriage values, demographic variables such as age, sex, religion, types of school, parents' religion, parents' education, parents' jobs, and having experienced living in other provinces or abroad can be analyzed using bivariate analysis. The results demonstrate whether the respondents are more liberal or conservative.

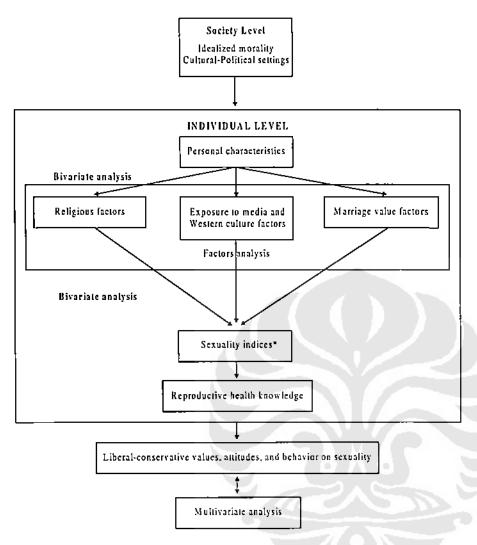
The basic assumption of factor analysis is that the underlying dimensions, or factors, can be used to explain complex phenomena. The goal of factor analysis is to identify the not-directly-observable factors based on a set of observable variables. Usually, the factors useful for characterizing a set of variables are not known in advance, but are determined by factor analysis (Norusis, 1993: 48). A set of factors derived from factor analysis is a set of uncorrelated variables that would be ideal for further analysis when the use of highly interrelated variables may yield misleading results in multiple regression analysis (Kim and Muller, 1977: 5). Factor analysis assumes that the observed variables are linear combinations of some underlying (hypothetical or unobservable) factors. Some of these factors are assumed to be common to two or more variables and some are assumed to be unique to each variable. The unique factors are assumed to be orthogonal to each other and do not contribute to the covariation between variables. Only common factors (which are assumed to be much smaller in number than the number of observed variables) contribute to the covariation among the observed variables (Kim and Muller, 1977: 8).

Variables used in the religious dimension are: ever experienced neglecting prayers owing to tight work schedule or studying, ever experienced listening to religious preaching at school or faculty, ever experienced listening to religious preaching at the mosque or church, ever experienced listening to religious preaching over the radio, ever experienced listening to religious preaching elsewhere, ever experienced reading religious materials or religious books, and how important is religion in one's life. In the exposure to media and Western values dimension, the variables focus on what kind of

radio programs are preferred: Indonesian popular music, Western popular music, religious songs, religious preaching, news, and reports on science. Variables for preferred television programs included: programs on Indonesian sports, programs on Western sports, programs on Indonesian popular music, programs on Western popular music, programs on religious songs, programs on religious preaching, Indonesian news programs, English news programs, programs on scientific reports, and programs on health and reproductive health. Other variables included in this model are the types of movies most frequently watched by the following categories: Indonesian films; Western films; and Chinese, Indian or martial art films (Diagram I).

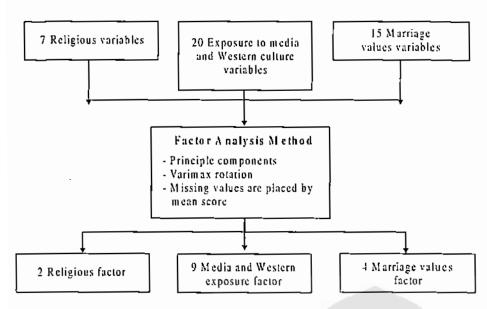
Frequencies on going to discotheques are also included. In the marriage value dimension the variables used are statements such as: if a woman is already married, then she cannot work outside the family circle; if a woman decides that she wants to work, her husband has the right to stop her; the attained education level between husband and wife has to be equal; the husband is the head of the household who has the power; as the head of the household, the husband has power like a king; family income should totally come from the husband; husband and wife have the same power in family decisions; marriage can give economic security; marriage can bring lots of responsibility; in a successful marriage each couple can actualize themselves; marriage as an institution is not important; and marriage should be terminated if each partner cannot actualize themselves (Diagram 2).

Diagram 1
ANALYSIS OF SOCIO-DEMOGRAPHIC VARIABLES, FACTOR SCORES, SEXUALITY INDICES SCORES AND KNOWLEDGE ON REPRODUCTIVE HEALTH



Note: * Sexuality indices consist of: (1) sexual behavior index and (2) attitudinal sexual indices, which consist of index on the level of acceptance of sexual behavior if a couple were dating and engaged.

Diagram 2 FACTOR ANALYSIS DIAGRAM



Notes: 1. Religious factors

Factor 1 Obligatory to religious performances *
Factor 2 Voluntary religious performances *

2. Exposure to Media and Western culture factors

- Factor 1 Media influence on broader knowledge
- Factor 2 Exposure to religious preaching and songs on television and radio *
- Factor 3 Exposure to Western music and movies *
- Factor 4 Media influence on reproductive health knowledge *
- Factor 5 Exposure to Indonesian popular music on television and radio *
- Factor 6 Exposure to radio program news and science reports
- Factor 7 Exposure to science and health programs on television
- Factor 8 Exposure to sport activities programs *
- Factor 9 Exposure to Western influences *

Marriage value factors

- Factor I Traditional view on marriage
- Factor 2 Importance of marriage
- Factor 3 Power-authority in marriage *
- Factor 4 Equality status between husband and wife in marriage *

Factors with (*) are factors that are good predictors of liberal-conservative values, attitudes, and behavior.

4.3.1 Indices of Sexual Behavior and Knowledge on Reproductive Health

Three summary indices of sexual behavior and one on sources and usefulness of knowledge on sex education and family planning have been developed for this study: attitude towards sexual behavior perceived as normal when a couple is dating, attitude towards sexual behavior perceived as normal when a couple is already engaged, experience of sexual behavior with the opposite sex, and sources and usefulness of knowledge on sex education and family planning. The three sexual behavior indices are calculated as the sum of a series of weights. The weight used for each variable is the reciprocal of the proportion of respondents who had practiced that form of behavior. For each form of behavior that the respondent has experienced, he or she scores this weight. The sum of the weights describes the intensity of sexual behavior. If a respondent is engaged in more intense sexual behavior (for example sexual intercourse), then the score will be high, while respondents who have only engaged in holding hands receive a lower score. To simplify the analysis, the sexual behavior index score is categorized into three groups: low, medium, and high. The formula for the sexual behavior index score is as follows:

Sexual behavior index score = var1*x1+var2*x2+var3*x3+...+var10*x10

Where:

Var 1 Holding hands (Yes=1, No=0) Var 2 Hugging (Yes=1, No=0) Var 3 Intense hugging (Yes=1, No=0) Var 4 = Kissing on cheeks (Yes=1, No=0) Var 5 = Lips kissing (Yes=1, No=0) Var 6 = Breast fondling (Yes=1, No=0) Genital fondling (Yes=1, No=0) Var 7 = Masturbation (Yes=1, No=0) Var 8 = Var 9 Petting (Yes=1, No=0) Petting with intercourse (Yes=1, No=0) Varl0 = reciprocal of proportion of respondents that answered yes to хI holding hands reciprocal of proportion of respondents that answered yes to x2 hugging reciprocal of proportion of respondents that answered yes to х3 intense hugging reciprocal of proportion of respondents that answered yes to x10

petting with intercourse

The notion of sex education is questioned thus: have you ever received information on sex education from the following sources? How do you categorize these sources? Are they useful or not? Respondents who answered yes for a certain source would then have to give a value to the usefulness of this source: 1 useless, 2 not useful, 3 don't know, 4 useful, and 5 very useful. In short, the question on sources and usefulness of information on sex is divided into several groups as follows:

```
Variable 1 = Boyfriend/girlfriend (Yes=1, No=0)

Variable 2 = Mother (Yes=1, No=0)

Variable 3 = Father (Yes=1, No=0)

Variable 4 = Other family members (Yes=1, No=0)

Variable 5 = Friends (Yes=1, No=0)

Variable 6 = Counselor/teacher (Yes=1, No=0)

Variable 7 = Newspaper/magazine/novel/scientific book (Yes=1, No=0)

Variable 8 = Radio (Yes=1, No=0)

Variable 9 = Television/film (Yes=1, No=0)

Variable 10 = School (Yes=1, No=0)
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Based on these questions, the index on sources and usefulness of information on sex education knowledge can be categorized into five groups:

- 1. respondents who had no source of information on sex, meaning that they never received any information on sex.
- respondents who have received some kind of sex education but have not received useful information from any of the sources.
- respondents who have received sex education from various sources and found that these sources are useful, which can be categorized into four sub-groups as follows:
 - (a) received useful information from any family members (mother, father or other family members);
 - (b) received useful information from any media (newspaper/ magazine/novel/scientific book, radio, television, and films);
 - (c) received useful information from counselor or school (counselor/ teacher or school);
 - (d) received useful information from peers (boyfriend/girlfriend or friends).

On further analysis, to evaluate respondents' level of knowledge on sex, respondents were categorized into two groups, respondents with high level of knowledge and respondents with low level of knowledge. Respondents who have received useful information from one or various grouped sources are categorized into a group of respondents with high level of knowledge. Respondents who have never received or have received some kind of sex education but have not received useful information from any of the sources are categorized as respondents with low level of knowledge.

4.3.2 Multiple Regression

In the multivariate analysis all factors of religion, exposure to media and Western culture, marriage values and the demographic variables were included in the model as potential explanatory variables, whereas the three sexual behavior indices (ungrouped) were included as the dependent variables. The demographic characteristic variables were made into dummy variables before they were used in the multivariate models, while the other two types of variables, factor scores and sexual behavior scores, were already in the form of continuous variables. Demographic characteristics that were included in the analysis are age, sex, religion, type of school, parents' religion, parents' education, parents' jobs, and having experience of living in other provinces or abroad. Several multivariate stepwise regression models were examined and the best models based on theory, variance explained, and being parsimonious are used (see Diagram 1).

4.3.3 Analysis of Qualitative Data

In this research, I have manually developed an 'indexing system' that makes it easier to textually find the data. I transcribed all of the focus-group discussions and 80 out of 93 in-depth interviews. The other 13 indepth interviews were transcribed by my research assistants. It is worthy to mention that after conducting an in-depth interview or a focus-group discussion, the rule was transcribing it in full detail and would not start any interview or focus-group discussion until the previous one has been transcribed. Besides writing the full transcription, I also tried to write my observations and impressions of each of the interviews and focus-groups, and this helped later in analyzing the quantitative data. During the process of

writing notes, in-depth interviews and focus-group discussions, I tried to differentiate between facts, impressions, and interpretation.

In this research, I developed an indexing and a coding system (Table 3 and Table 4), thus textual data could easily to be located. Table 3 is an example of how the cassette tapes location is indexed by number, date, settings, contents, and person being moderator or note taker-observer. The same information is also recorded in the cassette tapes. In cases where one cassette tape contained more than one interview, then the word count is also recorded (in Table 3, numbers 4b, 5a, and 5b). Table 4 is also an example of how the in-depth interviews are indexed. For confidential reasons, all the names of respondents, high schools, and universities have been changed; but the real names are still recorded and placed in a secure master file. The number of each case (T12mj, S15fj, etc.) is essential for identifying cases and to make sure that the cases do not get mixed up.

With 17 pages of summary indexing, it was easy to find the location of about 1772 pages of transcriptions and field notes for my analysis. In order to capture the new trends in behavior among young people in Jakarta, the study also took into account the news from the media which related on young people's behavior and activities. Among others of the media considered are the newspapers, young people's magazines and women's magazines: Gadis, HAI, Aneka, Matra, Femina and Popular, and other Indonesian magazines: Tempo, Gatra, Sinar, and Prisma. I also kept notes in a journal especially about what had been said in the news. By this way I could trace all important events related to the study.

Organizing and assembling the notes and data were very crucial activity. Information had to be documented and filed daily or at the latest weekly. If this was not done, much valuable information might be lost. It should be noted that every person in the field might be a resource person. It was not realized earlier until I arrived in Jakarta and for the first four weeks had to ride in taxis. I started interviewing taxi drivers who gave me enormous amounts of information. With this experience, I took opportunities to talk to as many people as I could about topics related to my study: I did not specify that they had to be young people, I talked to both young people and older people. Therefore I did not concentrate my respondents only towards the target group but also talked to people related to my target group, for example parents and teachers and experts dealing with problems related to my target group, such as counselors, a psychologist, a psychiatrist, NGO personnel, and policy makers. The wide range of people that I interviewed gave a diversity of views on sexuality and marriage values. This way it is possible to understand

why, when, and how premarital sexual behavior is increasing from the perspective of the target group as well as from other perspectives. I am grateful for the openness and frankness of my respondents in talking about sex and marriage, topics that I thought would be difficult to study.

Some lessons can be learned from focus groups. Earlier there was a lot of debate during the proposal presentation on whether the study should conduct focus-groups combining both sexes or separately for each sex. In this study, both types of focus-groups were conducted. Another question arising was: Can sexuality which is regarded as a sensitive topic be discussed openly in a group? Another was: Can a focus group which is designed for a Western culture work with Indonesians?

The study revealed that combining male and female participants in a focus-group is rewarding because we could understand the issues being discussed from both perspectives. It was found that a group of males would talk more openly about sex than a group of females. Moreover, the Indonesian young people who participated in the focus-group discussions were quite comfortable and open in discussing sex. Even though Indonesian culture emphasized that people should not speak out, the focus-group discussions went well as long as the moderator encouraged, probed and asked participants to speak out at least for the first ten minutes of the discussion. Then after this time, usually participants were more comfortable and active in participating in the discussion.

Table 3
CASSETTES LOCATION OF IN-DEPTH INTERVIEWS AND FOCUS-GROUP DISCUSSIONS
THE 1994/1995 JAKARTA MARRIAGE VALUES AND SEXUALITY SURVEY, JAKARTA

No.1	Date	Setting ²	Cassette contents	Moderator/Observer Interviewer ³
1.	12/7/94	Jakarta, public high school I, Student association room	Focus-group discussion, male and female high school students	M Iwu O Novai
2.	1 <i>7/7/</i> 94	Jakarta-University I	Focus group discussion, male and female university students	M Iwu O Novai
3.	29/7/94	Jakarta, boarding room	Ani, premarital pregnancy, ran away from home	M Iwu
4a.	6/8/94	Jakarta, NGO 1	Side A (0-279A) Focus- group discussion with teachers that have received AIDS training	M Teguh O Iwu
4Ь.	6/8/94	Jakarta, NGO 1	Side B (279A-074B) FGD with 3 students (Andri, Meiz, and Menik) that have been trained on AIDS	M Iwu
5a.	13/8/94	Jakarta, public high school II, spontaneous FGD with 8 female high school students after they finished the questionnaire	Side A (0-120A) Sex education, being a teenager, dating problems	M Iwu
5b.	15/8/94	Jakarta, public high school II.	Side B (120A-144B) Mr. Budi is a counselor with a bachelor degree in Moslem religion	I Iwu

Notes: 1. Cassette number.

- 2. Where the event took place, NGO 1 is a pseudonym,
- 3. M means Moderator, O means Observer and Note taker, and I means Interviewer.

Table 4
INDEX OF IN-DEPTH INTERVIEWS, THE 1994/1995 JAKARTA MARRIAGE VALUES
AND SEXUALITY SURVEY

No.1	Date	Setting ²	Respondent	_I ₃	Location4
Mllfj	20/7/94	Pondok Indah, Jakarta	Mrs. Hendrik 'Modern women- traditional values	Iwu	p.7 Journal
T12mj	21/7/94	Pasar Minggu- Bacang street, Jakarta	Roto 'Self choice marriage, parents disagreement'	Iwu	p.39 Journal
S15fj	25/7/94	University I	Yana 'Concept of an arranged marriage'	Iwu	p.45 Journal
S16fj	26/7/94	Mother's house, Bacang street Jakarta	Bianti 'Dating experiences and sexual harassment'	Iwu	p.47 and p.161 Journal
P17fj	29/7/94	Ani's boarding room, Jakarta	Ani 'Premarital pregnancy, runs away home'	lwu	p.51 Journal
N18mj	31 <i>/7/9</i> 4	NGO 1. Jakarta	Gafur 'NGO I's programs and activities'	lwu	p.65 and p.82 Journal
C26Ij	6/8/94	Public high school III	Mrs. Aminah-Counselor 'Sex education should be given through school'	Iwu	p.96 Journal

Notes: 1. Case number: M11fj means married (M), case number 11, female (f), Jakarta (j); P17fj means premarital sex-pregnancy (P), case number 17, female (f), Jakarta (j).

- 2. Location where the interview was conducted. NGO 1 is a pseudonym.
- 3. I stands for interviewer.
- 4. File location of the written transcription. For my field notes and some of my interviews I wrote them in a journal from loose-leaf papers that I combined. Some of the interviews are written separately-not in the journal. All of the focus-group transcriptions are written in a report format.

Table 5 presents focus groups that were conducted in Jakarta, DI Yogyakarta, and Palembang. Even though the 1994/95 Marriage Values and Sexuality Survey only concentrates on Jakarta, focus-group discussions in the other two provinces were also conducted to evaluate differences that may have occurred. Identification numbers of the focus groups were assigned so it would be easy to identify them in later analysis.

When writing the journal daily and transcribing in-depth interviews and focus-group discussions, and collecting and filing media articles, it was

attempted to distinguish between facts, impressions, and interpretations. This is very useful in writing up the findings of the study. The process of analyzing qualitative data started in the field while the data were collected, transcribing, and filing. All of these processes inspired me on themes for topics that could include in the analysis. With the qualitative data and analysis, I learned a lot about the research issue questions. For example after interviewing government officials and NGO personnel I could understand why it is so difficult to include sex education in the school curriculum. I also could instantly understand various types of programs that were being developed by the government and NGOs related to young people's sexuality and HIV/AIDS. I could not get this kind of information by simply reading the literature or existing articles in the media because some of the issues that were brought up were incompletely covered in published material.

While conducting and transcribing the focus-group discussions, I was able to gain an understanding of why young males and females have certain values related to sexuality. I could also understand how both sexes can tolerate some of the existing cultural values. If a certain issue was raised in a focus-group discussion and this issue was not included in my guidelines then I would explore and develop this issue in the next focus-group. Thus the process of moulding and finding answers to my research questions was dynamic. It started with the research questions that I developed before going to the field, which guided me in looking for information and analyzing my information. This developed as I collected and analyzed my data. As my qualitative research progressed, the themes for my research became more focused. Therefore with the qualitative data I cannot really separate the processes of collecting and analyzing because they happened continuously and simultaneously.

With the survey data, I did not get the results until almost the end of my field work. It is very time-consuming to train interviewers, pretest, revise the questionnaire, develop techniques of asking-questions so the respondents will feel more secure in reporting their sexual activities, administer the questionnaires, check the answers, enter, and clean the data, even though I was helped by a team of research assistants. Thus it was not until almost the end of my field work that I was able to have a description and tabulation of my survey data. After arriving in Canberra it took almost three months to explore my survey data and make simple cross-tabulations of variables by age, sex and religion. After this analysis, it took another four months to organize and analyze the survey data with factor analysis and regression.

Table 5 FOCUS-GROUP DISCUSSIONS IN JAKARTA, DI YOGYAKARTA, AND PALEMBANG 1994/ 1995

No.1	N	Date	Setting ²	Type of Focus group	Moderator (M) Observer (O)
FGD 1J	10	17/9/94	Male boarding	Male university students	Novai (M).
			house	living in boarding house	Jin (O)
FGD 2J	6	17/8/94	Female boarding	Female university students	Iwu (M),
			house	living in boarding house	Titin (O)
FGD 3J	8	12/7/94	Jakarta high school	Male and female high school	Iwu (M),
				students living with parents	Novai (O)
FGD 4J	7	10/7/94	Jakarta university	Male and female university	lwu (M),
				students living with parents	Novai (O)
FGD 5J	8	15/7/94	Jakarta high school	Female high school students	Iwu (M)
FGD 6J	9	6/8/94	Jakarta NGO I	Female and male high school	Teguh (M),
		- 10 10 -		students	lwu (O)
FGDIY	10	5/2/95	Male boarding	Male university students	Made (M),
			house	living in boarding house	Tanto (O)
FGD2Y	8	3/2/95	PSC UGM	Female university students	Ambar (M),
				living in boarding house	lwu and
	_				Sukamti (O)
FGD3Y	8	2/2/95	PSC UGM	Male and female high school	lwu (M),
	_			students living with parents	Sukamti (O)
FGD4Y	9	4/2/95	PSC UGM	Male and female university	lwu (M),
	_			students living with parents	Sukamti (O)
FGD 1P	7	22/12/9	Research	Male university students	Eddy (M),
		4	assistant's house	living in boarding house	Irdianto (O)
FGD 2P	6	15/12/9	Research	Female university students in	Iwu (M),
		4	assistant's house	boarding house	Kartini (O)
FGD 3P	8	18/12/9	Palembang high	Male and female high school	Eddy (M),
		4	school	students living parents	Irdianto (O)
FGD 4P	7	19/12/9	Research	Male and female university	Iwu (M),
		4	assistant's house	students living with parents	Kartini (O)

Note: 1. FGD stands for focus-group discussions. J, Y, and P stand for provinces: J for Jakarta, Y for DI. Yogyakarta, and P for Palembang.

2. Location where the focus group discussion was conducted, NGO 1 is a pseudonym. PSC UGM stands for the Population Studies Center of the University of Gadjah Mada,

5. Conclusion and Discussion

Ideally both male and female regardless of their marital status must be included in survey related to demography, fertility, and reproductive health. Decision on reproductive health matters, fertility, and sexual act involve both male and female. Unfortunately in most surveys, even the Demographic and Health Survey only include married women with the exception of countries in Latin America and Africa. How can policy and program be designed if there are limited data on young people reproductive behavior?

To overcome the limitation of quantitative and qualitative methods, this study combined the survey data and qualitative data-materials to have a more holistic understanding of sexual values, attitudes, and behavior of middle-class young people in Jakarta than might be obtained through a simple sample survey. The greatest advantage in collecting the qualitative data was that we could understand the phenomena that was studied in context while collecting the data without waiting for further analysis. The other advantage was that issues that had not been explored in-depth or still needed more information can be detected and corrected while still in the field.

Before developing a strong analytical model and linking it to the theory, it took months to explore and try various analyses with the survey data. But by finding the right method of analysis (factor analysis), numerous variables can be simplified into several factors. Variables that are similar are grouped together into a factor and the factor can be labeled. In this paper the variables are grouped into three factor dimensions: religion, exposure to media and Western culture, and marriage values. There are 42 variables in the three models, which by using factor analysis were reduced to 15 factors. Factors produced by the analysis can be linked to the conceptual framework of a liberal-conservative dimension.

A total of five indices of sexual behavior and sources and usefulness of information on sex education and family planning knowledge were produced: attitude towards sexual behavior perceived as normal when a couple is dating, attitude towards sexual behavior perceived as normal when a couple is already engaged, ever experienced sexual behavior with the opposite sex, sources and usefulness of sex education and family planning knowledge. These five indices can also be linked to the theoretical framework of idealized morality, the state, modernity and mixing between the sexes with a liberal-

conservative dimension. The index scores for sexual behavior are categorized into three groups: low, medium and high. Respondents who have a high score are assumed to be more liberal than respondents with a low score. On the other hand, sources and usefulness of information on sex are grouped into five categories: respondents who have not received information from any sources, respondents who have received information on sex education but none of the information was useful, respondents who have received useful information on sex from one grouped source, respondents who have received useful information on sex from two grouped sources and three grouped sources.

Lessons learned from the field that are important to note are as follows:

- Focus-group discussions are very culture-oriented. In Indonesia, due
 to the cultural value that people are not supposed to speak up or show
 that they are knowledgeable, in the first ten minutes of discussions the
 moderator usually had to guide the discussion in such a way that
 people wanted to speak and give their opinions. The moderator had to
 use his or her experiences to read the facial or bodily gestures of the
 participants and call their name to speak up.
- It is very important to state and elaborate what a focus group is, what
 is expected from the participants, and the rules that apply. This is
 important as many respondents do not understand what a focus group
 is.
- 3. Echoing, where the moderator repeats the respondent's name before and after a respondent has given a comment is important to aid identification in the process of transcription.
- 4. To transcribe a focus group discussion will take seven times the actual time used in the focus group discussion for the first draft, and twice the actual time for listening to the tape again and correcting the first draft.
- 5. Even though sexuality is a sensitive topic, it can be discussed and claborated upon in focus-group discussions. Having both sexes in the focus group does not limit the discussion as assumed, but the dynamic of the discussion can be very interesting, as it gives the opinion of both sexes and how they resolve conflicting gender specific values and attitudes.
- 6. Male focus-group discussions were more open in talking about sexuality compared to female focus groups or both sexes focus groups. For male focus groups, a male moderator and observer was required in order to stimulate the openness of the discussion.

- Data assembling and organization while in the field is a crucial issue. Indexing textual data can be very useful if one is not using a computer package for textual analysis.
- 8. Field notes can help develop a thorough understanding of the phenomenon that one is studying.

6. Acknowledgment

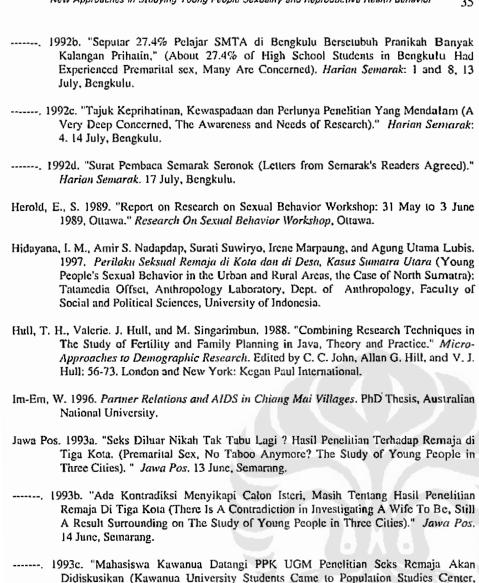
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