

An Overview of Sexual Activity Perception Activities in Pregnant Women in Sleman Hospital

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Abstract

Pregnant women and their partners' perceptions of pregnancy will greatly determine their behavior in sexual intercourse. There're some people who consider the sexual relations of husband and wife during pregnancy as taboo, even though sexual life is a necessity. This study aims to describe about pregnant womens' sexual activity perception in Sleman Hospital. This study is descriptive research. Data analysis used univariate analysis. The statistical tests results showed that most pregnant women had sufficient perceptions of 68 (70.83%), 14 (14.58%) of good perceptions, and 14 (14.58%) of less perceptions. The descriptive test results for pregnant women were dominated by ages 21 to 25 years with sufficient perceptions. Pregnant women are dominated by housewives with sufficient perceptions. Parity is predominantly in 1st time pregnancy with sufficient perception. The suggestion is that the research results can be used as a reference and learning material as well as science in midwifery development.

Keywords: *Sexual Activity, Pregnant Women, Perception*

INTRODUCTION

Pregnancy provides physiological and psychological changes for pregnant women, so pregnant women are at complications risk that can threaten her life. Therefore, pregnant women also need regular consultation to midwives (Setyorini, 2013). A pregnant woman also needs knowledge about health education for pregnant women themselves and the baby they are carrying. Therefore, health education for pregnant women is also very important to implement early (Istichomah, 2009).

Pregnant women and their partners' perceptions of pregnancy will greatly determine the partner's behavior in sexual intercourse. This perception of pregnancy is formed based on the beliefs held by the community. Perception is the experience of objects, events, or relationships that are obtained by inferring information and interpreting messages (Rakhmat, 2005).

Sexual activity knowledge's needed at pregnancy time to reduce pregnant women ignorance in their pregnancy. Someone education level can support or influence the knowledge level, i.e. higher education level, the higher of person's knowledge cause high education makes it easier for mothers to receive new information so they gonna care to health information, while the lower the education, the knowledge's very limited so that it's indifferent to existing health programs. Knowledge is an information



collection and obtained through a long life process and is used for adapting itself also the environment (Nugraha, 2003).

The Sleman Regional General Hospital (RSUD in Indonesia language) is a Regional Apparatus Organization Work Unit (SKPD) within the Sleman Regency Government, which is located on the strategic route on the main road between Jogjakarta and Magelang or Jalan Bhayangkara 48, Murang, Triharjo, Sleman. As the first hospital owned by Sleman Regency Government, and has a long history from the Dutch colonial era, Japan to the independence era. The vision of the Sleman Regional Public Hospital is to become the mainstay hospital for the community towards the realization of Sleman Smart Regency in 2021 (<https://rsudsleman.slemankab.go.id>)

According to a preliminary study conducted at Sleman Regional Hospital, out of 10 pregnant women, it was found that 5 pregnant women didn't have sex, 3 pregnant women still did it but rarely and 2 had sex as before she was pregnant. From the data above, it can be concluded that there're intercourse disorders during pregnancy. It happen because there are a lot of mothers who do not figure out how to have safe sex during pregnancy, so they feel anxious when having sex. Doing and not having sex during pregnancy is due to safe sex guidellines during pregnancy. So that health workers should provide counseling to pregnant women that sex during pregnancy has no restrictions and restrictions as long as it's done safely and correctly (Suririnah, 2008).

RESEARCH METHODS

This research uses descriptive quantitative research. These study populations were all pregnant women patients in Sleman hospital. The sample used was 96 pregnant women. Sampling technique in this study is quota sampling technique. The data collection tool used was a questionnaire or questionnaire. Then data analysis used univariate analysis to describe patient characteristics include age and education. The data analysis technique used in this research is descriptive and percentage analysis (Sugiyono, 2014).

RESULTS AND DISCUSSION

a.Characteristics of Pregnant Women in Sleman Hospital

Table 1. Characteristics of Respondents for Pregnant Women in Sleman Hospital

Characteristic Age	Frequency	%
a. <21 years	2	2.1
b. 21-25 years	31	32.3
c. 26-30 years	37	38.5
d. > 30 years	26	27.1
Total	96	100
Education		
Elementary School	0	0
Junior High School	1	1
Senior High school	84	87.5
Diploma 1,2,3	5	5,2
bachelor, magister, and doctoral	6	6.3
Total	96	100
Gender		
Housewife	80	83.3
Government employees	3	3,1

General employees	13	13.5
Total	96	100
Pregnant Into		
1 st	54	56.3
2 nd	35	36.5
3 rd	7	7.3
> 3	0	0
Total	96	100
Length of Married		
<1 year	12	12.5
≥ 1 year	84	87.5
Total	96	100

Source: Primary Data Processed in 2020

Based on the table it can be seen that from 96 respondents were dominated by 26 to 30 years old, i.e. 37 (38.5%), 21 to 25 years old as many as 31 people (32.3%), 2 people (2,1%) and over 30 years were 26 people (27.1%). Education is dominated by high school education as much as 84 people (87.5%), junior high school education as much as 1 person (1%), Diploma education 1,2,3 as much as 5 people (5.2%) and bachelor, magister, and doctoral education as much as 6 people (6.3 %). Occupations were dominated by housewives, i.e. 80 (83.3%), civil servants as much as 3 people (3.1%) and private employees as much as 13 people (13.5%). Pregnancy was dominated by the 1st pregnancy as much as 54 people (56.3%), the 2nd pregnancy as much as 35 people (36.5%), and the 3rd pregnancy as much as 7 people (7.3%). Length of marriage was dominated by they with more than 1 year about 84 people (87.5%), and length of marriage less than 1 year as many as 12 people (12.5%).

b. Sexual Activity Perceptions of Pregnant Women in Sleman Hospital

Table 2. Description of Sexual Activity Perceptions

Statement	Right	Wrong	Percentage
The process of sexual intercourse occurs until the sperm fluid (semen) comes out	67 (69.8%)	29 (30.2%)	96 (100%)
Sexual intercourse during pregnancy can increase intimacy and evidence of affection between husband and wife	78 (81.3%)	18 (18.8%)	96 (100%)
Sexual intercourse during pregnancy is not restricted	47 (49%)	49 (51%)	96 (100%)
At the beginning of pregnancy you should not have sexual intercourse at all	56 (58.3%)	40 (41.7%)	96 (100%)
When entering the second trimester (gestational age 4-6 months) there is no increase in the frequency of sexual intercourse	45 (46.9%)	51 (53.1%)	96 (100%)
At 7 months of gestation and over, husband and wife continue to have sexual intercourse	71 (74%)	25 (26%)	96 (100%)
Sexual activity between husband and wife have increased until the age of 6 months of pregnancy	47 (49%)	49 (51%)	96 (100%)
Husband's desire to have sex increases when the wife becomes pregnant	70 (72.9%)	26 (27.1%)	96 (100%)
The husband's desire to have sexual intercourse has decreased because the wife's condition is different from before	59 (61.5%)	37 (38.5%)	96 (100%)
During pregnancy, the position during sexual intercourse does not change	68 (70.8%)	28 (29.2%)	96 (100%)
Having sexual intercourse during pregnancy is not influenced by mood / emotions	60 (62.5%)	36 (37.5%)	96 (100%)

The condition of nausea and vomiting in the first 3 months of pregnancy causes pregnant women to be lazy to have sexual intercourse	65 (67.7%)	31 (32.3%)	96 (100%)
In the second trimester (gestational age 4-6 months) have begun to adapt to changes in pregnancy	57 (59.4%)	39 (40.6%)	96 (100%)
In the third trimester (7-9 months of gestation) discomfort occurs because the stomach begins to enlarge and shortness of breath	56 (58.3%)	40 (41.7%)	96 (100%)
The wife has sexual intercourse as a form of obligation	57 (59.4%)	39 (40.6%)	96 (100%)
Sex during pregnancy can cause bleeding and miscarriage	60 (62.5%)	36 (37.5%)	96 (100%)
Changes in vaginal fluid occur at gestational age 7 months and over which affect sexual intercourse	60 (62.5%)	36 (37.5%)	96 (100%)
The peak of pleasure in sexual intercourse during pregnancy does not change	59 (61.5%)	37 (38.5%)	96 (100%)
The husband's desire to have sexual activity is unobliged to be fulfilled	65 (67.7%)	31 (32.3%)	96 (100%)
Having sexual intercourse during pregnancy can lead to premature birth	60 (62.5%)	36 (37.5%)	96 (100%)
Babies can get infections at birth as a result of mother having sexual intercourse during pregnancy	60 (62.5%)	36 (37.5%)	96 (100%)
Physical and psychological changes affect comfort when having sex	56 (58.3%)	40 (41.7%)	96 (100%)
Sitting position is not allowed during sexual intercourse	78 (81.3%)	18 (18.8%)	96 (100%)
Sexual intercourse is influenced by a comfortable position	66 (68.8%)	30 (31.3%)	96 (100%)

Based on the statement table about the process of sexual intercourse occurs until the semen comes out, it is dominated by respondents who answered correctly as many as 67 (69.8%), and wrong as many as 29 (30.2%). Statements about sexual activity during pregnancy can increase intimacy and evidence of affection between husband and wife, dominated by respondents who answered correctly as many as 78 (81.3%), and wrong as many as 18 (18.8%). Statements about sexual activity during pregnancy were not restricted, dominated by respondents who answered incorrectly as many as 49 (51%), and correct as many as 47 (49%). Statements about early pregnancy not having sexual intercourse at all were dominated by respondents who answered correctly as many as 56 (58.3%), and wrong as many as 40 (41.7%). Statements About When entering the second trimester (gestational age 4-6 months) there was no increase in the frequency of sexual intercourse, dominated by respondents who answered incorrectly as much as 51 (53.1%), and correct as many as 45 (46.9%). Statements about gestational age 7 months and over, husband and wife continue to have sexual activity, dominated by respondents who answered correctly as much as 71 (74%), and wrong by 25 (26%). Statements about sexual activity between husband and wife have increased until the age of 6 months of pregnancy, dominated by respondents who answered incorrectly as much as 49 (51%), and true by 47 (51%). Statements About the husband's desire to have sex increases when pregnant wives are dominated by respondents who answered correctly as many as 70 (72.9%), and wrong by 26 (27.1%). Statements About the husband's desire to have sexual activity has decreased because the wife's condition is different from the previous one dominated by respondents who answered correctly as much as 59 (61.5%), and wrong by 37 (38.5%). Statements About During pregnancy, the position during sexual intercourse did not change, dominated by respondents who answered correctly as many as 68 (70.8%), and wrong as many as 28 (29.2%). Statements about

having sexual intercourse during pregnancy are not influenced by mood / emotions, dominated by 60 respondents (62.5%) who answered correctly, and 36 (37.5%) incorrectly. Statements about the condition of nausea and vomiting in the first 3 months of pregnancy, causing pregnant women to be lazy to have sexual intercourse was dominated by respondents who answered correctly as many as 65 (67.6%), and wrong as many as 31 (32.3%). Statements About In the second trimester (gestational age 4-6 months), 57 (59.4%) have started to adapt to changes in pregnancy, dominated by respondents who answered correctly as many as 57 (59.4%), and wrong as many as 39 (40.6%). Statements About In the third trimester (7-9 months of gestation) discomfort occurs because the stomach begins to enlarge and shortness of breath is dominated by respondents who answered correctly as many as 56 (58.3%), and wrong as many as 40 (41.7%). Statements about wives having sexual intercourse as a form of obligation were dominated by respondents who answered correctly as many as 57 (59.4%), and wrong as many as 39 (40.6%). Statements about sexual activity during pregnancy that can cause bleeding and miscarriage were dominated by respondents who answered correctly as many as 60 (62.5%), and wrong as many as 36 (37.5%). Statements About Changes in vaginal fluid occurred at gestational age 7 months and over which affected sexual activity , dominated by respondents who answered correctly as many as 60 (62.5%), and wrong as many as 36 (37.5%). Statements about the peak of sexual pleasure during pregnancy did not change, dominated by respondents who answered correctly as many as 59 (61.5%), and wrong as many as 37 (38.5%). The statement regarding the husband's desire to have sexual intercourse is not obliged to be fulfilled, dominated by respondents who answered correctly as many as 65 (67.6%), and wrong as many as 31 (32.3%). Statements about having sexual intercourse during pregnancy can cause premature birth to be dominated by respondents who answered correctly as many as 60 (62.5%), and wrong by 36 (37.5%). Statements about babies who can experience infection at birth due to mothers having sexual intercourse during pregnancy were dominated by respondents who answered correctly as many as 60 (62.5%), and wrong as many as 36 (37.5%). Statements about physical and psychological changes affecting comfort when having sex were dominated by respondents who answered correctly as many as 56 (58.3%), and wrong as many as 40 (41.7%). Statements about Sitting position not allowed during sexual intercourse were dominated by respondents who answered correctly as many as 78 (81.3%), and wrong as many as 18 (18.8%). Statements about sexual activity are influenced by a comfortable position, dominated by respondents who answered correctly as many as 66 (68.8%), and wrong by 30 (31.3%).

a. Analysis of Sexual Activity Perceptions Activities in Pregnant Women in Sleman Hospital

Table 3. Descriptive Results of Respondents' Perception Data on Sexual Activities among Pregnant Women at Sleman Regional Hospital

Amount of data	Mean	Std. Deviation	Min	Max
96	152,813	429,371	0	24

Based on table 3, it conclude that the total amount of data obtained is 96, with an average score of 15.28, a standard deviation value of 4.29371, the minimum score is 0 and the maximum is 24.

The following are the category results of sexual activity perceptions in pregnant women at Sleman Hospital.

Table 4. Perceived Levels of Sexual Activity among Pregnant Women at Sleman Regional Hospital

Perception	Score Interval		Result		
			Frequency	Percent	
Good	X	>	19,575	14	14.58
Enough	109,876	-	19,575	68	70.83
Less	X	<	109,876	14	14.58
Total				96	100

Based on the table above, the perception of sexual intercourse activity among pregnant women in RSUD Sleman is dominated by moderate categories as much as 68 (70.83%), good as much as 14 (14.58%), and less as much as 14 (14.58%).

Table 5. Cross Tabulation Results of Respondent Age Characteristics with Sexual Activity Perceptions among Pregnant Women

Age	Perception Level		
	Good	Enough	Less
<21 years	0	2	0
21-25 years	3	25	3
26 - 30 years	6	24	7
> 30 years	4	17	5
Total	13	68	15

Based on the table above, the cross-tabulation results for those under 21 years of age with less perception as many as 0 respondents, sufficient perception as many as 2 respondents, good perception as many as 0 respondents. There were 3 respondents aged 21 to 25 years of lack of perception, 25 respondents had sufficient perception, 3 respondents had good perception. Ages 26 to 30 years of poor perception were 7 respondents, sufficient perception was 24 respondents, and good perception was 6 respondents. Over 30 years of age, there were 5 respondents who had less perception, 17 respondents had sufficient perception, then 4 respondents had good perception.

Table 6. Cross Tabulation Results of Respondents' Last Educational Characteristics with Sexual Activity Perception among Pregnant Women

Last education	Perception Level		
	Good	Enough	Less
Elementary School	0	0	0
Junior High School	1	0	0
High school	8	63	13
Diploma 1-3	2	2	1
Bachelor, magister, and doctoral	2	3	1
Total	13	68	15

Based on the table above, cross tabulation results in junior high school level were less than 0 respondents, there was enough perception as many as 0 respondents, good perception was 1 respondent. In high school education level, there are 13 respondents who are less, 63 respondents have enough perception, 8 respondents have good perception. 1 respondent lacks in diploma 1/2/3 education level, 2 respondents sufficient perception, 2 respondents good perception. Perception in bachelor, magister,

and doctoral education is not enough as many as 1 respondent, enough perception by 3 respondents, good perception by 2 respondents.

Table 7. Cross Tabulation Result of Respondents' Occupational Characteristics with Sexual Activity Perceptions among Pregnant Women

Profession	Perception Level		
	Good	Enough	Less
Housewife	12	54	14
Government employees	0	3	0
General employees	1	11	1
Total	13	68	15

Based on the table above, the result are in housewives' occupation with insufficient perceptions were 14 respondents, there were 54 respondents who had sufficient perception, 12 respondents had good perceptions. Perception of governments employess is less than 0 respondents, perception is sufficient as many as 3 respondents, good perception is 0 respondents. Perception of private employee jobs is less than 1 respondent, perception is sufficient as many as 11 respondents, good perception is 1 respondent.

Table 8. Cross Tabulation Results of Respondents' Pregnant Characteristics with Sexual Activity Perceptions among Pregnant Women

Pregnant to	Perception Level		
	Good	Enough	Less
1 st	9	35	10
2 nd	4	28	3
3 rd	0	5	2
> 3	0	0	0
Total	15	68	13

Based on the table above, the cross tabulation results of pregnant respondents to one perception are less than 10 respondents, sufficient perception is 35 respondents, good perception is 9 respondents. The second pregnant respondent had a poor perception of 3 respondents, 28 respondents had sufficient perception, 4 respondents had good perception. The 3rd pregnant respondent had less perceptions of 2 respondents, 5 respondents had sufficient perception, 0 respondents had good perceptions.

Table 9. Cross Tabulation Results of Respondents' Length of Marriage Characteristics and Sexual Activity Perceptions among Pregnant Women

Long Married	Perception Level		
	Good	Enough	Less
<1 year	3	8	1
≥ 1 year	10	60	14
Total	15	68	13

Based on the table above, the results are women with less than 1 year marriage, it perception less than 1 respondent, enough perception by 8 respondents, good perception by 3 respondents. Pregnant women with a long marriage of more than 1 year with a lack of perception were 14 respondents, sufficient perception were 60 respondents, good perception were 10 respondents.

Respondents' age characteristics with of sexual intercourse activity perceptions in pregnant women were dominated by ages 21 to 25 years with sufficient perceptions of 25 respondents. Age range category 17 - 34 years is included in young age, having optimal physical and mental abilities in accepting new things. According to internet user's category, among 17 – 34 years are included in the digital native category. Digital natives are internet users who are under 34 years and the generation who are born and live in the digitalized and connected internet era. So that at that age pregnant women often access the internet to seek knowledge about sexuality during pregnancy and influence perceptions (Tuti, 2017).

Respondents' latest education characteristics with sexual intercourse activity perceptions in pregnant women are dominated by senior high school education level with sufficient perceptions of 63 respondents. This research is in line with (Ryandini, 2019) which explains that the study results indicate about a relationship between education and pregnant women perception. His research shows there is a relationship between knowledge level and pregnant women perceptions about sexual activity during pregnancy (Permatasari, 2019).

Respondents' occupation characteristics with sexual activity perceptions in pregnant women dominated by housewives with sufficient perceptions as many as 54 respondents. This study is in accordance with (Purwatiningsih, 2009) that work doesn't affect perception.

Pregnant respondents' characteristic with sexual activity perceptions, predominantly pregnant with perceptions enough as many as 35 respondents. This study in accordance with (Purwatiningsih, 2009) which shows the result that parity is unrelated to perception. The assumption is that primigravidas have less knowledge than multigravidas.

Respondents' length married characteristics with sexual activity perceptions in pregnant women dominated by them in marriage life more than 1 year with sufficient perceptions of 60 respondents, good perceptions of 10 respondents. Based on the research results about on t sexual activity perceptions in pregnant women in Sleman Hospital, it was dominated by a moderate category that's 68 people (70.83%). The results showed that most respondents had sufficient perceptions. This research in line with research (Ryandini, 2019) which explains that sexual activity perception's obtained by pregnant women with sufficient perceptions.

CONCLUSION

The conclusion in this study based on respondents' age characteristics results with sexual activity perceptions in pregnant women, dominated by ages 21 to 25 years with sufficient perceptions of 25 respondents. Respondents' latest education characteristics results with sexual activity perceptions in pregnant women are dominated by high school education with sufficient perceptions of 63 respondents. Respondents' occupation characteristics results with sexual activity perceptions in pregnant women dominated by housewives with sufficient perceptions as many as 54 respondents. Pregnant respondents characteristics results with sexual activity perceptions in pregnant women, predominantly pregnant with a sufficient perception of 35 respondents.

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