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TURKISH

## RISKY SEXUAL BEHAVIORS AMONG UNIVERSITY STUDENTS

Türk Üniversite Öğrencilerinde Riskli Cinsel Davranışlar

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## ABSTRACT

This a cross-sectional and descriptive study aims to determine the risky sexual behavior of university students studying at a State University in Turkey and their views on factors affecting sexuality. The sample of the study consisted of a total of 367 students studying in the undergraduate departments of nursing and midwifery. The data were collected using the Personal Information Form, the Sexual Risk Taking Scale (SRTS), and the Sexual Sensation Seeking Scale (SSSS). 7.1% of the students in the study showed that they sometimes consumed alcohol before sexual intercourse, 94.8% did not use condoms during the last sexual intercourse, 42% had no clear idea about masturbation, and 90.2% expressed an opinion about negative premarital sex. Having sexual intercourse before, being a man, masturbation and positive attitude towards polygamy increase the tendency of the students to take sexual risks. Our findings revealed the presence of risky sexual behaviors, taboos and sexual myths in nursing and midwifery students.

Key Words: Risky sexual behaviors, adolescent, university students, sexuality,

## ÖZET

Bu kesitsel ve tanımlayıcı bir araştırma, Türkiye'de bir Devlet Üniversitesinde öğrenim gören üniversite öğrencilerinin riskli cinsel davranışlarını ve cinselliği etkileyen faktörlere ilişkin görüşlerini belirlemeyi amaçlamaktadır. Araştırmanın örneklemini hemşirelik ve ebelik lisans bölümlerinde öğrenim gören toplam 367 öğrenci oluşturmuştur. Veriler Kişisel Bilgi Formu, Cinsel Risk Alma Ölçeği (SRTS) ve Cinsel Duygu Arayıcı Ölçeği (SSSS) kullanılarak toplanmıştır. Araştırmaya katılan öğrencilerin %7,1'i cinsel ilişkiden önce bazen alkol kullandığını, %94,8'i son cinsel ilişkide kondom kullanmadığını, %42'si mastürbasyon hakkında net bir fikre sahip olmadığını ve %90,2'si evlilik öncesi olumsuz cinsel ilişkiye ilişkin görüş bildirmiştir. Daha önce cinsel ilişkiye girmek, erkek olmak, mastürbasyon yapmak ve çok eşliliğe karşı olumlu tutum öğrencilerin cinsel risk alma eğilimlerini artırmaktadır. Bulgularımız hemşirelik ve ebelik öğrencilerinde riskli cinsel davranışların, tabuların ve cinsel mitlerin varlığını ortaya koymaktadır.

Anahtar Kelimeler: Riskli cinsel davranışlar, ergen, üniversite öğrencileri, cinsellik

## 1. INTRODUCTION

The World Health Organization (WHO) defines the period between ages 10-19 as the adolescence period, while the period between the ages 15-25 is defined as youth. The latter period is a developmental stage in which the individual experiences psychological and physiological changes between adolescence and adulthood. In addition to the physical growth and development, sexual maturation is also completed in this period (WHO, 2006). During their youth, which covers the most beautiful and fertile years of life, young people face many risks in terms of sexual and reproductive health (Taşkın, 2012). The change in social life and the way of life of young people who start university education also affects their perspective on sexuality and the way they perceive it. Therefore, university students have experience adjustment problems, tend to take more risks, and increase their risky health and sexual behaviors (Kaya et al. 2007). The most important problems that threaten the health and future of adolescents are sexual and reproductive health (Akalpler & Eroglu, 2015).

Risky sexual behaviors can lead to negative health outcomes and public health problems like sexually transmitted diseases (STDs) and unwanted pregnancies (Adhikari et al. 2009; Kıylıoglu & Donmez 2016; Stulhofer et al. 2009). Risky sexual behavior (RSB) refers to any behavior that increases the likelihood of negative outcomes about sexual contact, including AIDS (Acquired Immune Deficiency Syndrome), STDs, and unwanted and unplanned pregnancies (Cooper, 2002).

Early sexual intercourse, polygamy, special sexual preferences, having a one-night stand, using alcohol and drugs before sexual intercourse, sexual intercourse in exchange for money, and not using condom during sexual intercourse are the risky sexual behaviors (Bulut, 1999).

Individual differences such as cultural values, having difficulty in accessing condoms, the presence of drugs and alcohol in the environment, personality characteristics of the individual, and lack of knowledge about STDs also cause the individual to show risky sexual behavior (Fulton et al. 2010). Some of the risky sexual behaviors arise from the desire to seek sexual excitement and is associated with risk taking behavior (Kıylıoglu & Donmez 2016).

In Turkey, studies have been conducted to investigate adolescents' and university students' risky health behaviors such as substance abuse, violence, suicide, smoking, use of dangerous vehicles, and risky sexual behaviors (Coskun, 2018; Aldemir et al. 2018; Akgun &Sahin, 2018; Erel & Golge, 2015; Kurtuncu et al. 2015; Simsek et al. 2007; Camur et al. 2007). Some studies have investigated young people's knowledge, attitudes and behaviors about reproductive health and STDs, and their risky sexual behaviors (Simsek et al. 2007; Ozdemir et al. 2003; Kaymak et al. 2006; Siyez & Siyez, 2009; Yazganoglu et al. 2012; Pinar et al. 2009; Karabulutlu & Kilic, 2011; Ozalp et al. 2012; Aslan et al. 2014, Akalpler & Eroglu, 2015). Our literature review revealed that the number of studies that only address risky sexual behaviors is insufficient in Turkey. As in Turkey, the decrease in the first sexual intercourse age throughout the world, postponement of marriages to advanced ages, the increase in polygamy, and the risk of STDs reveal the need for more studies to understand the degree of risky sexual behaviors of young people (Leigh et al. 1994).

As the rate of young population in Turkey is high and the socio-cultural structure is changing rapidly, the moral and cultural norms of the society are also changing. In the literature, there are study results that examine the level of knowledge about sexually transmitted diseases, contraceptive methods, where university students' sexual experience, sexual myths and views about sexuality are questioned. Unlike these studies, the sample group consisted of midwifery and nursing students who received vocational training related to health, and who deal with many problems in women's health, reproductive health and sexual health in the curriculum. It is thought that it is important to determine the views of professional members who will take part in the provision of reproductive health and sexual health services, and to deal with risky sexual disorders. It is thought that the risky sexual behaviors of young adults should be examined in order to predict the possible sexual and reproductive health problems of young people and to take the necessary measures. Thus, the aim of this study is to determine risky sexual behaviors and affecting factors among university students and their views on sexuality in Turkey.

#### 2.METHOD

#### 2.1. Study Design

The study was carried out between September 2016 and January 2017 with the cross-sectional and descriptive method.

#### 2.2.Participants

The sample of the study included single female and male university students studying in the nursing and midwifery departments of a public university. The universe of the study consists of 107 midwives, 461 nursing students (146 male, 315 female) in total 548 university students. Criteria for inclusion in the research; Being a registered student of the relevant public university in the 2016-2017 academic year, being single, not being a foreign national and volunteering to participate in the study. 367 students selected through simple random sampling method were included in the study.

#### **2.3.Procedure and Data Colection**



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The data were collected by the researchers during the break times of lectur. Ethics committee approval and institution permission were obtained before initiating the study. IRB approval status: Reviewed and approved by Yozgat Bozok University Independent Ethic Committee (approval No. 2015/26/03- 605.99-231). Information about the research was given to the students before the application. Then, written informed consent was obtained from the participants. It took about 15 minutes for a student to complete the questionnaire.

A total of 390 students agreed to complete the questionnaire. However, 23 of them were left out of evaluation because of not answering more than half of the questionnaire. In addition, 30 students did not want to participate in the study after being informed about the study. Data were evaluated over 367 students.

#### **2.4.Data Collection Tools**

The data were collected using the Personal Information Form, the Sexual Risk Taking Scale (SRTS), and the Sexual Sensation Seeking Scale (SSSS).

Personal Information Form: The personal information form was prepared by the researchers searching the literature. The form includes demographic information such as age, gender, class, long-term place of residence, accommodation, and the number of siblings. The form also includes questions as to whether the students have had sexual intercourse before, the age of first sexual intercourse, the number of partners so far and opinions about masturbation, pre-marital sex, virginity, polygamy and different sexual orientation. With this form, we aimed to examine both students' sexual experience and their views on sexuality.

Sexual Risk Taking Scale (SRTS): The scale was developed by Stulhofer et al. in 2009 and it aims to reveal the risky sexual experiences of an individual within the last 12 months and whole life. The scale consists of a total of 10 items and the total score that can be obtained from the scale ranges between 0 and 10. Five items in the scale are yes-no and two items are fill in the blanks type of questions. Also, the scale has two Likert-type questions, one item is scored three-point Likert-type and one item is scored four-point Likert-type. An increasing total score that can be received from the scale is interpreted as individual's taking more sexual risks. The average score of the original scale was found to be 3.45, and the alpha internal consistency coefficient of the scale was found to be 0.71, and the mean score of the scale was 3.31 (Kıylıoglu, 2015).

Sexual Sensation Seeking Scale (SSSS): The scale, developed in 1995 by Kalichman and Rompa, investigates an individual's sexual sensation seeking behaviors. The scale consists of a total of 11 items, and the total score that can be obtained from the scale is between 11 and 44. All the items in the scale are scored on a four-point Likert scale. The increase in the total score shows that the individual is in search of more sexual excitement. In the Turkish adaptation study conducted by Kıylıoglu (2015), the alpha internal consistency coefficient of the scale was found to be 0.77 (Kıylıoglu, 2015).

The form used to question risky sexual behavior in previous studies on the subject is not a standard form. In many studies on the subject, the questionnaires developed by the researchers were used in line with the literature (Kaya et al. 2007; Erel & Golge, 2015; Simsek et al. 2007; Siyez & Siyez, 2009; Yazganoglu et al. 2012; Pinar et al. 2009; Karabulutlu & Kilic, 2011; Ozalp et al. 2012; Aslan et al. 2014, Akalpler & Eroglu, 2015). An important difference of our study compared to other studies is the use of a scale to question risky sexual behaviors.

#### **2.5.Data Analysis**

Frequency (n) and percentage (%) values were calculated for the descriptive statistics of the students. SPSS 22.0 software program was used to analyze the data. One Sample Kolmogorov Smirnov Test result was used to decide whether to use the parametric or nonparametric test methods in the analysis of the data. t test, ANOVA, Krukall Wallis test were used for analysis. The statistical significance was taken as p < 0.05.

#### **2.6.Ethical Considerations**

Ethics committee approval and institutional permission were obtained before starting the study. Before data collection, ethical approval from the Noninvasive Clinical Research Ethics Board of Bozok University. Before the implementation, the objective of the study was explained in detail to the participants, and the



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necessary information was provided. The participants then signed the "Informed Voluntary Consent Form" that was prepared in line with the Declaration of Helsinki, and their written consent was obtained this way.

#### **3.RESULTS**

Demographic characteristics of university students are given in Table 1. In Table 1 the sex, age (year), grade, place of residence (the place where the majority of their lives are spent), accomidations (accommodation of students) of all university students participating in the study were questioned.

When the socio-demographic characteristics of the study sample were examined, it was found that the students were between the ages of 18-27 and the mean age was  $20.60 \pm 1.64$ . Of the sample, 74.4% were female, and 25.6% were male, and the mean age of female students was  $20.42 \pm 1.53$  (n = 273), while the mean age of male students was  $21.13 \pm 1.81$  (n = 94). 90.7% of the students were in the 18-22 age group. 41.1% of the students were in the first year of university education, and 67.8% stayed in the dormitory. It was found that 67.6% of the students lived in the city center most of their lives (Table 1).

| Characteristics    | Groups                          | n   | %    |
|--------------------|---------------------------------|-----|------|
| Sor                | Females                         | 273 | 74.4 |
| Sex                | Males                           | 94  | 25.6 |
|                    | 18-22                           | 333 | 90.7 |
| Age (year)         | 23-27                           | 31  | 8.4  |
|                    | 28-32                           | 3   | 0.8  |
|                    | Grade 1.                        | 151 | 41.1 |
| Grade              | Grade 2.                        | 102 | 27.8 |
| Graue              | Grade 3.                        | 96  | 26.2 |
|                    | Grade 4.                        | 18  | 4.9  |
|                    | Village                         | 47  | 12.8 |
| Place of residence | Town                            | 72  | 19.6 |
|                    | City                            | 248 | 67.6 |
|                    | In a student dorm               | 249 | 67.8 |
| Accomodation       | In a student house with friends | 54  | 14.7 |
|                    | With my family                  | 64  | 17.4 |

Also It was found that 3% of the students consumed alcohol and 12% were smoking. It was revealed that 91.6% of the students did not have sexual intercourse before, and 42% of them did not have a clear idea about masturbation. 90.2% of the students had a negative opinion about premarital sexual intercourse, and 72.5% of the students stated that they expect their prospective husbands or wives not to have had premarital sexual intercourse. 94% and 71.7% of the students had a negative opinions about polygamy and different sexual identities, respectively (Table 2).

**Table 2:** Features of the participants regarding their perspectives on sexual life

| Characteristics                                   | Groups             | Frequency<br>(n=367) | Percentage<br>(%) |
|---|--------------------|----------------------|-------------------|
| Having convolintercourse hefere                   | Yes                | 31                   | 8.4               |
| Having sexual intercourse before                  | No                 | 336                  | 91.6              |
|   | Positive           | 91                   | 24.8              |
| Opinions about masturbation                       | Negative           | 122                  | 33.2              |
|   | Undecided          | 154                  | 42.0              |
| Dogular gay portnor                               | Yes                | 31                   | 8.4               |
| Regular sex partner                               | No                 | 336                  | 91.6              |
|   | Positive           | 34                   | 9.3               |
| Opinions about sexual intercourse before marriage | Negative           | 331                  | 90.2              |
|   | Undecided          | 2                    | 0.5               |
|   | Very important     | 266                  | 72.5              |
| Caring about virginity                            | Not very important | 28                   | 7.6               |
|   | Undecided          | 73                   | 19.9              |
|   | Positive           | 16                   | 4.4               |
| Opinions about polygamy                           | Negative           | 345                  | 94.0              |
|   | Undecided          | 6                    | 1.6               |
|   | Positive           | 27                   | 7.4               |
| Opinions about different sexual identity          | Negative           | 263                  | 71.7              |
|   | Undecided          | 77                   | 21.0              |



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In our study, the mean SRTS score of the university students was found to be  $2.8 \pm 1.55$  (min: 0-max: 9) and the Cronbach's alpha for the scale was 0.79. The mean score for the SSSS was  $15.62 \pm 7.02$  (min: 11max: 40), and the Cronbach's alpha of the scale was calculated as 0.927.

Table 3 shows factors affecting female and male university students' SSSS and SRTS scores. The difference between female and male students SSSS and SRTS scores was statistically significant. According to gender, SSSS and SRTS scores of male students were found higher than female students (p>0.05). As a result of the correlation analysis, no statistically significant difference was found between SRTS and SSSS scores according to age (r = -0.026, p < 0.05).

Students between the ages of 18-22 have higher SSSS scores than in the 23-27 age group. As far as the place of accommodation is concerned, it can be said that the students who had the highest SRTS and SSSS scores are those who stay in student homes with their friends (p > 0.05). The SSSS and SRTS scores of the students who previously had sexual intercourse were higher than those who had no sexual intercourse (p> 0.05). The SRTS and SSSS scores of the students who reported positive opinions about masturbation were higher than those who had negative opinions or who did not give any opinion about masturbation. (p> 0.05).

The SRTS and SSSS scores of the students who stated that virginity was not important was the highest (p> 0.05). TheSRTS and SSSS scores of the students who stated positive opinions about polygamy were higher than those of the students who stated that they were undecided about polygamy. The students who had negative opinions about polygamy had the lowest scores from the SRTS and SSSS (p > 0.05).

|                                  | the Factors Affecting Students' Risk<br>SSSS | SRTS             |
|----------------------------------|--|------------------|
| Demographics                     | Mean ±SD                                     | Mean ±SD         |
| Sex                              |  |                  |
| Females                          | $2.64 \pm 1.28$                              | $13.57 \pm 5.06$ |
| Males                            | $3.52\pm2.03$                                | $21.61 \pm 8.42$ |
| p value                          | p=0.000                                      | p=0.000          |
| Test statistics                  | t = -11.030                                  | t = -4.900       |
| Age                              |  |                  |
| 18-22                            | $15.31 \pm 6.75$                             | $2.83 \pm 1.54$  |
| 23-27                            | $18.79\pm8.76$                               | $3.18 \pm 1.70$  |
| p value                          | p=0.006                                      | p=0.219          |
| Test statistics                  | t = -2.782                                   | t = -1.232       |
| Place of residence               |  |                  |
| Village                          | $14.40\pm 6.82$                              | $2.60\pm1.60$    |
| Town                             | $14.85\pm6.49$                               | $2.74 \pm 1.27$  |
| City                             | $16.09 \pm 7.19$                             | $2.95 \pm 1.62$  |
| p value                          | p=0.035                                      | p=0.173          |
| Test statistics                  | KW: 6.725                                    | KW: 3.506        |
| Accomodation                     |  |                  |
| In a student dorm                | $14.89\pm6.47$                               | $2.67 \pm 1.50$  |
| In a student house with friends  | $19.20\pm8.86$                               | $3.52 \pm 1.79$  |
| With my family                   | $15.48 \pm 6.54$                             | 3.06±1.39        |
| p value                          | p=0.000                                      | p=0.001          |
| Test statistics                  | F: 8.733                                     | F: 7.484         |
| Having sexual intercourse before |  |                  |
| Yes                              | $26.68 \pm 7.31$                             | $5.16 \pm 1.70$  |
| No                               | $14.61 \pm 6.06$                             | $2.65 \pm 1.36$  |
| p value                          | p=0.000                                      | p=0.000          |
| Test statistics                  | t=10.408                                     | t=9.610          |
| Regular sex partner              |  |                  |
| Yes                              | $19.00\pm8.88$                               | $3.10 \pm 1.81$  |
| No                               | $15.32 \pm 6.76$                             | $2.84 \pm 1.53$  |
| p value                          | p=0.005                                      | p=0.384          |
| Test statistics                  | t=2.819                                      | t=0.872          |
| Opinions about masturbation      |  |                  |
| Positive                         | $21.30 \pm 7.40$                             | $3.27 \pm 2.09$  |
| Negative                         | $15.08\pm6.99$                               | $2.94 \pm 1.37$  |
| Undecided                        | $12.71 \pm 4.38$                             | $2.56 \pm 1.24$  |



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3054

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|  |                   |                             |
| p value                                  | p=0.000           | p=0.002                     |
| Test statistics                          | F: 6.491          | F: 56.331                   |
| Caring about virginity                   |                   |                             |
| Very important                           | $14.76 \pm 6.46$  | $2.75 \pm 1.38$             |
| Not very important                       | $20.82\pm9.71$    | $3.71 \pm 1.88$             |
| Undecided                                | $16.79\pm6.86$    | $2.96 \pm 1.90$             |
| p value                                  | p=0.000           | p=0.006                     |
| Test statistics                          | F: 11.276         | F:5.175                     |
| Opinions about sexual intercourse before | marriage          |                             |
| Positive                                 | $24.24\pm8.78$    | $4.24\pm1.60$               |
| Negative                                 | $14.70\pm6.15$    | $2.71 \pm 1.46$             |
| Undecided                                | $23.00 \pm 11.31$ | $5.50\pm3.54$               |
| p value                                  | p=0.000           | p=0.000                     |
| Test statistics                          | F: 34.994         | F:19.584                    |
| Opinions about polygamy                  |                   |                             |
| Positive                                 | $26.5\pm8.79$     | $4.63\pm1.78$               |
| Negative                                 | $15.06\pm6.46$    | $2.77 \pm 1.46$             |
| Undecided                                | $19.17\pm9.60$    | $3.33 \pm 3.20$             |
| p value                                  | p=0.000           | p=0.000                     |
| Test statistics                          | F: 23.644         | F:11.763                    |
| Opinions about different sexual identity |                   |                             |
| Positive                                 | $16.74\pm8.43$    | $3.15 \pm 1.29$             |
| Negative                                 | $15.75 \pm 7.27$  | $2.86 \pm 1.60$             |
| Undecided                                | $14.82\pm5.46$    | $2.78 \pm 1.50$             |
| p value                                  | p=0.411           | p=0.569                     |
| Test statistics                          | F: 0.892          | F: 0.565                    |

## 4.DISCUSSION

This cross-sectional and descriptive study, which determined risky sexual behaviors and factors affecting risky sexual behaviors, was completed with 367 university students. As university students are physically in the most active and productive period, as they constitute the most variable and dynamic part of the society, as they are open to interaction and willing to experience life, and as most of them are away from their families for the first time in their lives, they are open to risks more than other segments of society (Pinar et al. 2009; Akalpler & Eroglu, 2015).

In our study, the majority of students did not have a sexual intercourse. Studies conducted in other countries with university students revealed a higher rate of sexual intercourse (Virtala et al. 2007; Rohde et al. 2018; Coronado et al. 2017; Mavhandu-Mudzusi & Tesfay Asgedom, 2016; Atlam et al. 2017; Oluwaseunfunmi & Ademola, 2020; Moster et al. 2020; Oharume et al. 2020). On the other hand, the studies conducted in Turkey and other countries revealed that the rate of sexual intercourse of university students varies between 8.6-65.3% (Simsek et al. 2007; Yazganoglu et al. 2012; Ozalp et al. 2012; Aslan et al. 2014, Akalpler & Eroglu, 2015; Atlam et al. 2017; Oluwaseunfunmi & Ademola, 2020; Moster et al. 2020; Oharume et al. 2020; Ogur et al. 2016; Kirmizitoprak & Simsek, 2011; Sanlı & Ozsoy, 2012; Unsal et al. 2012). It is stated that sexual behaviors are affected by the sociocultural characteristics of the environment where the individual lives (Golbasi & Kelleci, 2011). The most prominent feature shaped by Islam is that it is a patriarchal society in Turkish society, which has different cultures and beliefs with different languages under one roof. In Turkish society, while young girls are expected not to have sexual intercourse until they get married, that is, to maintain their virginity, polygamy is regarded as a sin for men and is not morally correct. The sample is thought to reflect the social and cultural characteristics of the Turkish society, since the province where the study is carried out is not a metropolitan city, the students studying at the university are children of narrow and middle-income families from the provinces whose population is not crowded. It is believed that this proportional difference may have been caused by the cultural and social characteristics of Turkey. The proportional differences within the same country may be attributed to the fact that some of the studies have been carried out in metropolitan cities, whereas we conducted our study in a rural area with a low population density. When the status of having a sexual intercourse before is examined based on the gender of the students, it was found that 2.6% of female students and 25.5% of male students had a sexual intercourse before. The studies conducted with Turkish university students revealed that the number of female students who reported having sexual intercourse is lower than that of male students (Simsek et al. 2007; Yazganoglu et al. 2012; Pinar et al. 2012 Aslan et al.



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2014, Akalpler & Eroglu, 2015; Atlam et al. 2017; Oluwaseunfunmi & Ademola, 2020; Moster et al. 2020; Oharume et al. 2020; Ogur et al. 2016; Kirmizitoprak & Simsek, 2011; Sanlı & Ozsoy, 2012; Unsal et al. 2012). This may be related to the fact that in Turkey having premarital sexual intercourse is not approved for women and the protection of virginity in women is important. In our sample group, female students who had previously had sexual intercourse may not have wanted to mention this situation because of fear of social pressure and disapproval, which may have affected the low rate of female sexual intercourse experience. The higher rate of sexual intercourse among males shows that males are more open to risks.

In the study, almost half of the students were undecided when their opinions about masturbation were asked, and three out of every ten students had a negative attitude towards masturbation, while one out of every four students had a positive attitude towards masturbation. Also, when examined according to gender, the rate of male students with a positive opinion about masturbation (51.1%) was found to be higher than that of female students (15.8%). Masturbation is natural and harmless if it does not have a negative effect on a person's social life and normal sexual relationships (Kaya et al. 2007). Similar to our findings, Ejder Apay et al. (2013) found that almost half of the students (46.3%) found masturbation wrong during sexual intercourse and 33% stated that masturbation was harmful (Apay et al. 2013). In Ogur et al.'s (2016) study, 17.8% of the students stated that masturbation is bad and harmful, while 36.8% of the students found masturbation during sexual intercourse harmful and 23.8% of the students believed that masturbation may have a detrimental effect on sexual power (Ogur et al. 2016). In another study, university students' views on masturbation were found to be positive and students stated that masturbation is a natural need (Ergun & Cakir, 2015).

Turkish culture and religious belief prohibits pre-marriage sexual intercourse and masturbation. Masturbation is a shame and sin. Turkish culture, which prohibits both methods of sexual satisfaction, creates confusion for young people. However, the concept of gender prohibits any sexual satisfaction for women. Male students are left more comfortable in this regard. For all these reasons, sexually women have more negative attitudes. Our study revealed that there is lack of knowledge about sexuality and students believe in sexual myths. Sexual education and peer education for university students may correct the inaccurate and imprecise information young adults have about sexuality.

In our study, seven out of ten students stated that virginity is important or very important. Tokuç et al.'s (2011) findings coincide with our results (Tokuc et al. 2011). The rate of female students who think that virginity is important is higher than that of male students with the same opinion. Our finding was found to be compatible with the study of Ünsal Atan et al. (2012) and Mostert et al. (2020). This shows that the concept of virginity is still important among young people in Turkey. The desire to protect virginity suggests that young people do not have sexual intercourse before marriage as a sign of honor. 4.1% of the students stated that they had anal intercourse before. This result suggests that the students who want to protect their virginity due to social pressure try different methods of sexual intercourse. Family pressure is seen as the most important reason for the desire to maintain virginity in Turkish society. As a matter of fact, even if sexual intercourse takes place, young girls keep it, and if it is understood that sexual intercourse is realized, social problems such as honor killings and domestic violence are experienced.

The majority of the students (90.2%) were negative about having sexual intercourse before marriage. Although this finding is consistent with other studies conducted in Turkey, the rate of students who do not approve sexual intercourse before marriage is lower compared to the rates in our study (Pinar et al. 2009; Aslan et al. 2014; Ogur et al. 2016; Tokuc et al. 2011; Sut et al. 2015). Our study further revealed that the rate of male students who are positive about pre-marital sexual intercourse is higher than female students. Other studies conducted with university students in Turkey also found that the rate of male students (Pinar et al. 2009; Aslan et al. 2014; Unsal et al. 2012; Kaya et al. 2007, Ergun & Cakır, 2015). The reasons for students' disapproval of pre-marital sexual experience may vary according to individual, cultural and social characteristics. It is reported that students do not approve of pre-marital sexual intercourse because of their religious beliefs, the desire to protect virginity, familial causes, fear of being pregnant, and fear of contracting STDs (Kaya et al. 2007, Ergun & Cakır, 2015; Can et al. 2013) In the Turkish community, which is a majority of a Muslim, the religious belief of students, the desire to maintain virginity before marriage, social pressure, fear of becoming pregnant, and fear of becoming a STD may have affected the students' point of view before sexual marriage.



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The majority (94%) of the students in our sample had a negative opinion about polygamy. Siyez & Siyez (2009), Yazganoglu et al. (2012), Özalp et al. (2012), and Golbasi and Kelleci (2011) reported respectively that 55%, 31.6%, 56.1%, and 59.3% of the students have more than one sex partner. Studies conducted in different countries reported higher rates of students with more than one sexual partner compared to our study (Santelli et al. 1998; Herbenick et al. 2018).

This situation may be attributed to the religious, cultural and social characteristics of the students. In our study, seven out of ten students had a negative attitude towards different sexual identities. This may be due to the cultural and religious characteristics of Turkish society. Ünsal Atan et al. (2012) reported that 4.2% of female students and 5.4% of male students perceive bisexuality as normal. Negative attitudes towards gay and lesbians are still common in many societies (Herek, 1998; 1993). The lack of knowledge of young people about sexuality may have increased their negative perceptions of different sexual orientations and homosexual relationships

It is seen that the age of first sexual intercourse of the students constituting the sample group is 12. Other studies conducted in Turkey and other countries revealed a higher first sexual intercourse age in young people than the age reported in our study (Yazganoglu et al. 2012; Pinar et al. 2009; Ozalp et al. 2012; Akalpler & Eroglu, 2015, Moster et al. 2020; Kirmizitoprak & Simsek, 2011; Golbasi & Kelleci, 2011; Ergun & Cakır, 2015; Saracoglu et al. 2014; Dinc et al. 2018). In this sense, the low age of starting sexual intercourse shows that the sample group is at risk in terms of sexual behaviors. Young people should be informed about the negative consequences of starting sexual intercourse at an early age and the contraceptive methods to prevent unwanted pregnancies. Considering that the age of starting sexual intercourse has decreased, it is necessary to start sexual education at an earlier age and to add these topics to the primary school curriculum.

In our study, the rate of students who stated that they did not use condoms in their last sexual intercourse was 94.8%. The rate of students who do not use contraceptive methods was found to be lower in other studies conducted in Turkey and other countries compared to the results of our study (Erel & Golge, 2015; Simsek et al. 2007; Siyez & Siyez, 2009; Pinar et al. 2009; Atlam et al. 2017; Oluwaseunfunmi & Ademola 2020; Moster et al. 2020; Oharume, 2020, Unsal et al. 2012; Golbasi & Kelleci, 2011; Kaya et al. 2007; Saracoglu et al. 2014; Dinc et al. 2018). In addition, students' inability to buy condoms due to financial deficiencies, shame and not knowing how to obtain condoms from health institutions, students not knowing about the negative consequences of unprotected sexual intercourse may be the reason for the high rate of students who stated that they did not use condoms in their last sexual relationship. It is necessary to establish health centers in higher education institutions where health personnel adopt education and consultancy roles, young people can easily access contraceptive methods, sexual information and sexual health services, ensure their personal information and protect their privacy.

Especially in this age group, it is necessary to emphasize the importance of condom use in sexual intercourse in order to prevent STDs and unwanted pregnancies. 7.1% of the students stated that they sometimes consume alcohol before sexual intercourse, while 2.2% of the students stated that they often consume alcohol. The study conducted by Golbasi and Kelleci (2011) in Turkey reported that 64.2% of the students had sexual intercourse when they were drunk. Oluwaseunfunmi & Ademola (2020) determined that 33.6% adolescents tok sachets alcohol before sex and risky sexual behavior increased with alcohol use, this is similar to our findings.

#### **5.CONCLUSIONS**

Our findings revealed that university students in our study had a lower rates of sexual intercourse compared to their peers. It was determined that the vast majority of students did not have sexual intercourse (vaginal penetration) before and did not approve pre-marriage sexual intercourse. Male students were found to have a higher rate of sexual intercourse than female students. It was also found that male students approach masturbation more positively than female students.

It was determined that the students who stayed in a student house with their friends, having sexual intercourse before, who is male gender, regular sex partners, had higher SSSS and SRTS scores. Our results further revealed that especially university students continue to have some taboos related to sexuality and that the sexual myths and the misinformation about sexuality are more common among female students. It is recommended to conduct multi-center, large-sample studies to determine the causes and consequences of



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risky sexual behaviors of young people such as alcohol use, early sexual intercourse, polygamy, and contraceptive use.

## 6.LIMITATIONS

Our study results are limited only to the sample of this study. One of the limitations of our study is the inclusion of young people who study only in the nursing and midwifery departments of a university located in a rural city with low population density.

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