

## ORIGINAL ARTICLE

# Permissive Attitude towards Premarital Sex Among University Students in Malaysia - Does Childhood Abuse Play A Role?

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## ABSTRACT

**Introduction:** Despite it being culturally forbidden, youth are voluntarily engaging in premarital sex which could lead to poor sexual behaviour in adult life. This nationwide study aimed to determine the prevalence of permissive attitude towards premarital sex among young university students and its associated factors. **Methods:** A cross-sectional study was conducted from June 2021 to December 2021 among students attending higher education institutions in Malaysia using stratified random sampling. A self-administered online questionnaire was used that captured participants' sociodemographic characteristics, knowledge of sexual health, childhood abuse, and attitudes toward premarital sex. Data were analysed using SPSS 27. **Results:** Out of 1171 respondents, 42.4% have demonstrated permissive attitude towards premarital sex. Half had adequate knowledge on sexual health (50.2%). Among the four types of childhood abuse, only emotional abuse ( $p=0.02$ ) was found more likely (AOR: 2.01; 95% CI: 1.30-3.12,  $p=0.02$ ) to have permissive attitude towards premarital sex. Being a Muslim ( $p<.001$ ) and living in urban area ( $p=0.03$ ) were protective factors against having permissive attitude towards premarital sex. Participants who have and adequate knowledge on sexual health ( $p<.001$ ), smoke or vape ( $p=0.05$ ) and consume alcohol ( $p<0.001$ ) were more likely to have permissive attitude towards premarital sex. **Conclusion:** Childhood abuse, especially emotional abuse, should not be underestimated. Permissiveness regarding premarital sex is of great concern. Permissiveness can lead to risky sexual behaviour. Preventive measures should be taken to promote positive attitudes toward premarital sex and to raise awareness about childhood abuse.

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## INTRODUCTION

Premarital sex among youth is rising despite it being prohibited by some religions. Premarital sex is sexual activity practised before marriage. Malaysia is a multiracial and multicultural country where the majority are Islam believers in which premarital sexual activity is strictly forbidden (1). It is considered a taboo to discuss this issue publicly (2). Despite this prohibition, however, the prevalence of premarital sexual activity in Malaysia has been increasing over the years. A study done in 2006 reported that out of 4500 school-goers, 5.4% of

the adolescents have had sexual intercourse (3). This prevalence seems to increase in later studies in 2012 and 2018 that reported the prevalence of adolescents who already engaged with premarital sexual activity were 8.3%(4) and 7.4%(5) respectively. National Health and Morbidity Survey (NHMS) 2017 reported that 7.3% of adolescents aged from 13 to 17 have already engaged in sexual activity and 21% of them had multiple sexual partners (6). This is worrying because premarital sexual activity is now becoming more accepted and a norm among them. This trend is also seen in other countries too, even though at a much higher rate (7). Premarital sexual practice among youths is higher in Ethiopia (47.6%) (8), China (22.4%) and Taiwan (22%) (9).

Sexual activity among this youth has becoming more common because of significant biophysical and societal

changes over years. Youth is defined as a group of individuals aged 15-24 year (10), an age where their biological, physical, and psychological aspects are developing rapidly. They would be curious about their surroundings which could lead them in experimenting various of new activities including risky sexual activity and substance abuse (6). They are also exposed to a lot more stimulants from peers and social media. Consequently, this normalises the activity and results in permissive attitudes towards high-risk behaviours. Permissive attitude means portraying a habitually accepting or tolerant towards a social behaviour or verbally; which is not agreed by others (11). Adolescents in welfare institutions (29%) (12) and school-goers reported high percentage of permissiveness towards the (48.5%) premarital sex (13).

There are many complex and diverse reasons for youth engagement in sexual activities. Poor knowledge on sexual health has been significantly influenced the sexual risk behaviour, which make the youth vulnerable to unwanted pregnancy, illegal abortion, HIV and other sexual transmitted infections (2). On the contrary, having adequate sexual health knowledge is a protective factor against permissive attitudes toward premarital sexual activity (9). This is consistent with the theory of knowledge, attitude, and practice, which shows that these three components influence each other (14). Adverse childhood history also plays a role. NHMS 2017 reported about 10% of adolescent in Malaysia has had physical abuse at home and about 40% has had verbal abuse (6). According to the Child Act 2001, a child is considered abused when the child has been or is at substantial risk of being emotionally or physically injured, sexually abused or neglected of basic life needs such as food, care, shelter, clothing, medical attention and safety), or being abandoned (being on the street or used for begging by the parents or persons in charge of the child at any one time)(15). There are four main types of child maltreatment (CM): neglect, physical abuse, emotional abuse, and sexual abuse (16). A systematic meta-analysis highlighted the significant effect of CM with sexual risk behaviour such as early sexual debut, multiple sexual partners, transactional sex and unprotected sex (17). Similarly in Malaysia, sexual abuse during childhood also seem to be the determinant of initiation of sexual intercourse among adolescent (12). The increasing prevalence of premarital sexual activity among adolescents in Malaysia is a major health concern as those who engage in these activities also appear to engage in sexual risk behaviours. They not only indulge in high-risk sexual behavior, but also more likely to become the sexual victim when they enter their youth (18).

Although many studies have been conducted to determine the factors that influence the attitude and practise of premarital sexual behaviour, most studies focused on school-goers and uni-center population. Our

study targeted university students nationwide, aged 18 to 24 years. This study aimed to associate the history of childhood abuse and permissive attitudes toward premarital sex. In addition, this study examined all components of childhood abuse, not just sexual abuse, as has been the case in previous studies. Thus, the aim of the present study was conducted to 1) explore the permissiveness of premarital sex among university students in Malaysia, 2) determine the prevalence of childhood abuse, and 3) determine the association between childhood abuse, sociodemographic factors, and permissiveness of premarital sex among university students in Malaysia.

## MATERIALS AND METHODS

This was a nationwide cross-sectional study involving Malaysian youths attending local higher education institutions. The data collection was conducted from June 2021 to December 2021. We recruited participants registered as students at local higher education institutions. The inclusion criteria include Malaysian citizens, aged between 18- to 24-year-old and understand either the Malay or English language. The sample size was calculated using the one-proportion formula, precision of 5%, design effect of 2.0 and 20% non-response rate. Based on past prevalence of permissive attitude towards premarital sex of 48% (13), the calculated minimum sample size was 922 respondents.

Two-stage stratified random sampling was employed at the regional and institutional level where all the university and university college across Malaysia were included. Initially, researchers planned to carry out systematic sampling at the student level. However, unforeseen challenges posed by the Movement Control Order (MCO) made it difficult to reach out to students. As a result, researchers opted for convenience sampling, where participants were approached by gatekeepers (student representative council) from each of the selected universities. Malaysia was divided into five regions. The number of respondents in each region was calculated in proportion to the region's distribution of higher education institution students. A total of 32 institutions were chosen and approached, but only 25 universities agreed to participate in this study; six public universities from each region, four private university/university college from the northern region, two private university/university college from the southern region, three private university/university college from the eastern region, three private university/university college from the central 1 region, four private university/university college from the central 2 region and three private university/university college from the Sabah/Sarawak region. A link to the respondent's information sheet and informed consent was given via email and WhatsApp™ where participants were required to self-assess their eligibility by reviewing the study's criteria as outlined in the form. Participants who fulfilled the inclusion criteria

were then given the access to the questionnaire.

### Study Instruments

A bilingual self-administered online questionnaire was used. There were five sections: 1) socio-demographic characteristics 2) knowledge of sexual health 3) peer pressure 4) childhood abuse and 5) attitude towards premarital sex. Sociodemographic characteristics include age, gender, locality, race, religion, household income, parents' marital status, and substance abuse (smoking/ vaping, alcohol, and illicit drug use).

### Knowledge of sexual health

To assess the respondents' knowledge of sexual health, participants were required to answer six questions which was adopted from previous study (12). The questionnaire has been locally validated and has a good reliability with Cronbach's Alpha value of 0.75 (12). The questions were 1) Does a person can get pregnant after having sexual intercourse once? 2) Have you ever heard of contraception? 3) Which of the following are types of contraception? (Contraceptive pills, condom, forceps, etc) 4) Do you know about sexually transmitted infections? 5) Which of the following are sexually transmitted infections? (gonorrhoea, syphilis, HIV, etc) 6) From the list below, which of the following are symptoms of sexually transmitted infections? (None, genital discharge, genital ulcer, etc). The total score ranging between 0 to 17 (12). By using the mean value, the cut-off point was set as 10, whereby those who scored 0–10 categorised as having an inadequate knowledge of sexual health, and those who scored 11 and above had an adequate knowledge of sexual health (12).

### Peer pressure

In order to assess whether individuals experienced any peer pressure, the validated nine-item Peer Pressure Scale (PPS) was adopted. It demonstrated good reliability with correlation coefficient of 0.75 (19). The total score ranges from 9 to 36 and based on the median score of 21, participants were classified either they experienced high peer pressure (>21) or low peer pressure (9-20) influence.

### Childhood abuse

There were four questions, based on the common types of child abuse namely childhood sexual abuse, physical abuse, emotional abuse and neglect (20). The operational definition of each type was defined according to the Centres for Disease Control and prevention (CDC).

- Physical abuse is the intentional use of physical force that can result in physical injury.
- Sexual abuse involves pressuring or forcing a child to engage in sexual acts.
- Emotional abuse refers to behaviours that harm a child's self-worth or emotional well-being.
- Neglect is the failure to meet a child's basic physical and emotional needs.

The answer was either yes or no. This 4-items question were piloted prior to the study and has shown to have an acceptable level of reliability with Cronbach's  $\alpha$  value of 0.62 and construct validity value of 0.63.

### Attitude towards Premarital Sex

To assess respondents' permissiveness towards premarital sex, 4-items questionnaire from previous study was adopted (12). It used 4-point Likert scale ranging from strongly agree to strongly disagree and the total score range was between 4 to 16. Item 4 was reverse coded. This questionnaire has been validated and has good reliability with Cronbach Alpha of 0.85. The cut off point for permissive attitude was based on the previous study where it used the median score of 13. The respondents were grouped into either 1) having permissible attitude (1-13) or 2) non-permissible attitude (>13) towards premarital sex.

### Data analysis

Data was analysed using SPSS version 27. Data were cleaned to detect missing values, coding errors or illogical data values. Descriptive statistics were computed for all variables. Categorical data were reported as frequencies and percentages, whereas continuous data were reported as means and standard deviations if the data is normally distributed or as median and interquartile range if the data is not normally distributed. The association between variables and attitudes towards premarital sex were measured using simple logistic regression. The variables with p-value of <0.25 were then further analysed using multiple logistic regression to determine the independent factors associated with permissive attitude towards premarital sex.  $p < 0.25$  was considered to reduce Type II error thus, minimizing the risk of failing to reject a false null hypothesis. The level of significance was set at  $p < 0.05$  for multiple logistic regression.

### Ethical Approval

Ethical approval was obtained from the Medical Research and Ethics Committee for Research Involving Human Subject Universiti Putra Malaysia (JKEUPM-2021-141).

## RESULTS

A total of 1211 students from public and private university and university college across the country responded. Forty (3%) respondents were excluded from the study because they refused to participate, attended a college/college not on the list, or received incomplete data. This resulted in 1171 final usable data.

### Characteristics of participants

Majority of the respondents aged between 18 to 20 years old (60.3%,  $n=706$ ) with a mean age of  $20.16 \pm 1.66$  years. Most respondents were female (70%,  $n=820$ ), Malays (62.3%,  $n=730$ ), and Muslims (66.5%,  $n=779$ ), lived in urban areas (65.8%,  $n=770$ ), from

a household income of less than RM 4, 849 (58.5%, n=685) and have married parents (84.5%, n=989). For substance abuse, the respondents reported smoking cigarettes/vaping (15.5%, N=181), drinking alcohol (17.8%, n=209), using illicit drugs, (0.9%, n=10). The respondents reported having adequate knowledge on sexuality (50.7%, n=594) and experiencing low peer pressure (55.4%, n=594) (see Table I).

### Child Abuse

The respondents reported having experienced childhood sexual (2.7%, n=31), physical (3.8%, n=44), emotional abuse (11.4%, n=133), and being neglected (4.3%, n=50) (see Table II).

### Permissiveness towards premarital sex

Permissiveness towards premarital sex is noted in 42.4% (n=497) of the respondents. More than half of the students strongly disagree that ‘it is alright for people my age to have sex before marriage if both people want to’, ‘it is okay for people my age to have sexual intercourse as long as they have fallen in love’ and ‘having sexual

**Table I: Characteristics of respondents (N=1171)**

Variables	n (%)
<b>Age (years)</b>	20.16 (1.66) *
18 to 20 years old	706 (60.3)
21 to 24 years old	465 (39.7)
<b>Gender</b>	
Male	351 (30.0)
Female	820 (70.0)
<b>Race</b>	
Malay	730 (62.3)
Non-Malay	441 (37.7)
<b>Religion</b>	
Muslim	779 (66.5)
Non-Muslim	392 (33.5)
<b>Locality</b>	
Rural	401 (34.2)
Urban	770 (65.8)
<b>Parents’ marital status</b>	
Married	989 (84.5)
Separated	20 (1.7)
Divorced	85 (7.3)
Widowed	77 (6.6)
<b>Household income</b>	
<RM4,849	685 (58.5)
RM4,850 – RM10,959	357 (30.5)
>RM10,960	129 (11.0)
<b>Substance Abuse</b>	
Smoking History	
Yes	181 (15.5)
No	990 (84.5)
Alcohol intake	
Yes	209 (17.8)
No	962 (82.2)
Drugs	
Yes	10 (0.9)
No	1161 (99.1)
<b>Knowledge on sexual health</b>	
Adequate knowledge	594 (50.7)
Inadequate knowledge	577 (49.3)
<b>Peer pressure</b>	21.0 (4.0)
Low peer pressure	715 (61.2)
High peer pressure	456 (38.9)

\*Mean (SD)

**Table II: Frequencies and percentage on respondents’ childhood sexual, physical, emotional abuse and child neglect (N=1171)**

Variables	n (%)	
	Yes	No
Sexual abuse	32 (2.7)	1139 (97.3)
Physical abuse	44 (3.8)	1127 (96.2)
Emotional abuse	133 (11.4)	1038 (88.6)
Child neglect	50 (4.3)	1121 (95.7)

intercourse before marriage is not a good choice, but I can understand it’. However, only about a quarter of the respondents strongly disagree that ‘young people who have premarital sex should be punished’ (see Table III).

### Factors Associated with Permissiveness towards Premarital Sex

To reduce Type II error, all significant independent variables (p<0.25) from simple logistic regression (see Table IV) were further analysed using multiple logistic regression (backward elimination) to identify the factors associated with permissiveness towards premarital sex among the youths. Backward elimination was used to improve the model performance and focus on the most important predictors that contribute to the outcome being studied; permissiveness towards premarital sex. Table V shows that being a Muslim (AOR: 0.18; 95% CI: 0.10-0.32, p<.001), and living in an urban area (AOR: 0.72; 95% CI: 0.53-0.97, p=0.03) were the protective factors against premarital sex. Students who have adequate knowledge on sexuality (AOR: 1.72; 95% CI: 1.30-2.30, p<.001) were found to be more permissive towards premarital sex. Those with history of substance abuse such as smoking cigarettes/vaping (AOR: 1.75; 95% CI: 1.18-2.60, p=0.05), consuming alcohol (AOR:2.87; 95% CI: 1.82-4.54; p<0.001), and had been emotionally abused during their childhood years (AOR: 2.01; 95% CI: 1.30-3.12, p=0.02) were found to be more permissive towards premarital sex. However, there were no association found between childhood sexual abuse, childhood physical abuse, child neglect and, permissiveness towards premarital sex.

## DISCUSSION

### Permissive Attitudes Towards Premarital Sex

Globally, premarital sexual activity has become common, and this is a great concern as it increases the sexual risky behaviour that may contribute to negative impacts not only to physical health but also social life. Our study found that more than 40% of Malaysian youth have permissive attitudes toward premarital sexual activity and that indulging in substance abuse and being emotionally abused during childhood are associated with permissiveness attitude of these adolescent-young adults towards premarital sex. This finding is almost identical to a study conducted among secondary school students aged 13 to 17 years (13). This may imply that the attitudes toward premarital sexual activity during adolescents may

**Table III: Respondents' permissive attitude towards premarital sex and the responses by items (N=1171)**

Variables	n (%)			
<b>Permissiveness towards premarital sex</b>				
Non-permissive attitude towards premarital sex	674 (57.6)			
Permissive attitude towards premarital sex	497 (42.4)			
Items	n (%)			
	Strongly agree	Agree	Disagree	Strongly disagree
It is alright for people my age to have sex before marriage if both people want to.	94 (8.0)	200 (17.1)	221 (18.9)	656 (56.0)
It is okay for people my age to have sexual intercourse as long as they have fallen in love.	59 (5.0)	161 (13.7)	275 (23.5)	676 (57.7)
Having sexual intercourse before marriage is not a good choice, but I can understand it.	99 (8.5)	265 (22.6)	207 (17.7)	600 (51.2)
Young people who have premarital sex should be punished.	226 (19.3)	280 (23.9)	247 (21.2)	418 (35.7)

**Table IV: Factors Associated with Permissiveness towards Premarital Sex using Simple Binary Logistic Regression (N=1171)**

Variables	Permissive Attitude n (%)	Non-permissive Attitude n (%)	Crude OR (95% CI)	p- value
<b>Age (years)</b>				
18 to 20 years old	418 (59.2)	288 (40.8)	Ref	
21 to 24 years old	256 (55.1)	209 (44.9)	1.07 (1.00-1.15)	<b>0.047*</b>
<b>Gender</b>				
Male	166 (47.3)	185 (52.7)	1.32 (1.03-1.70)	<b>0.028*</b>
Female	331 (40.4)	489 (59.6)	Ref	
<b>Race</b>				
Malay	173 (23.7)	557 (76.3)	0.11 (0.86-0.15)	<b>&lt;0.001*</b>
Non-Malay	324 (73.5)	117 (26.5)	Ref	
<b>Religion</b>				
Muslim	190 (24.4)	589 (75.6)	0.09 (0.07-0.12)	<b>&lt;0.001*</b>
Non-Muslim	307 (78.3)	85 (21.7)	Ref	
<b>Locality</b>				
Rural	134 (33.3)	268 (66.7)	Ref	
Urban	363 (47.2)	406 (52.8)	0.56 (0.44-0.72)	<b>&lt;0.001*</b>
<b>Household income</b>				
<RM4,849 (ref)	259 (37.8)	426 (62.2)	Ref	
RM4,850 – RM10,959	177 (49.7)	179 (50.3)	1.63 (1.26-2.11)	<b>&lt;0.001*</b>
>RM10,960	61 (46.9)	69 (53.1)	1.45 (0.10-2.12)	<b>0.052*</b>
<b>Smoking</b>				
No	398 (40.2)	592 (59.8)	Ref	
Yes	99 (54.7)	82 (45.3)	1.80 (1.31-2.47)	<b>&lt;0.001*</b>
<b>Alcohol</b>				
No	321 (33.4)	641 (66.6)	Ref	
Yes	176 (84.2)	33 (15.8)	10.65 (7.17-15.81)	<b>&lt;0.001*</b>
<b>Illicit drug</b>				
No	487 (41.9)	674 (58.1)	Ref	
Yes	10 (100.0)	0 (0.0)	2.24 (<0.001 -)	0.999
<b>Parents' marital status</b>				
Married	416 (42.1)	573 (57.9)	Ref	
Separated	15 (75.0)	5 (25.0)	4.13 (1.49-11.46)	<b>0.006*</b>
Divorced	39 (45.9)	46 (54.1)	1.167 (0.75-1.82)	0.494
Widowed	27 (35.1)	50 (64.9)	0.74 (0.46 – 1.21)	<b>0.231*</b>
<b>Peer pressure</b>				
Low	284 (39.7)	431 (60.3)	Ref	
High	213 (46.7)	243 (53.3)	1.33 (1.05-1.69)	<b>0.018*</b>
<b>Knowledge on sexual health</b>				
Adequate knowledge	285 (48.0)	309 (52.0)	1.59 (1.26-2.01)	
Inadequate knowledge	212 (36.7)	365 (63.3)	Ref	
<b>Childhood abuse</b>				
<b>Sexual abuse</b>				
No	485 (42.6)	654 (57.4)	Ref	
Yes	12 (37.5)	20 (62.5)	0.82 (0.39-1.67)	0.567
<b>Physical abuse</b>				
No	476 (42.2)	651 (57.8)	Ref	
Yes	21 (47.7)	23 (52.3)	1.25 (0.68-2.28)	0.471
<b>Emotional abuse</b>				
No	422 (40.7)	616 (59.3)	Ref	
Yes	75 (56.4)	58 (43.6)	1.89 (1.21-2.71)	<b>0.001*</b>
<b>Child neglect</b>				
No	471 (42.0)	650 (58.0)	Ref	
Yes	26 (52.0)	24 (48.0)	1.50 (0.85-2.64)	<b>0.165*</b>

\*p<0.25 significant association; CI = Confidence Interval. All assumptions were met. No extreme outliers. No multicollinearity. Model Goodness of Fit was checked with Omnibus Tests of Model Coefficients.

**Table V: Predictive model for permissiveness towards premarital sex (N=1171)**

Factor	B	S.E	Wald	AOR	95% CI		p-value
					Lower	Upper	
<b>Race</b>							
Malay	-0.51	0.30	2.90	0.60	0.33	1.08	0.088
Non-Malay				Ref			
<b>Religion</b>							
Muslim	-1.75	0.31	31.15	0.18	0.10	0.32	<0.001*
Non-Muslim				Ref			
<b>Locality</b>							
Urban	-0.33	0.15	4.56	0.72	0.53	0.97	0.033*
Rural				Ref			
<b>Smoking/ vaping history</b>							
No				Ref			
Yes	0.56	0.20	7.73	1.75	1.18	2.60	0.005*
<b>Alcohol</b>							
No				Ref			
Yes	1.06	0.23	20.38	2.87	1.82	4.54	<0.001*
<b>Peer pressure</b>							
Low peer pressure				Ref			
High peer pressure	0.27	0.15	3.43	1.31	0.98	1.76	0.064
<b>Knowledge on sexual health</b>							
Adequate knowledge	0.54	0.15	13.63	1.72	1.30	2.30	<0.001*
Inadequate knowledge				Ref			
<b>Emotional abuse</b>							
No				Ref			
Yes	0.70	0.22	9.81	2.01	1.30	3.12	0.002*

\*p<0.05 significant association; CI = Confidence Interval. All assumptions were met. No extreme outliers. No multicollinearity. Model Goodness of Fit was checked with Omnibus Tests of Model Coefficients.

persist and influence their sexual behaviour patterns in adulthood (21). Compared with neighbouring countries like Vietnam, China, Taiwan, and Nepal, the prevalence of permissiveness toward premarital sexual activity was much lower among Malaysians (9,22). Although most of these countries also do not accept premarital sexual activity, the difference can be explained by their liberal attitudes toward sexual behaviour (22). Furthermore, population in Malaysia has a dominant of Muslim (64%) that prohibit premarital sex (23). Furthermore, the law prohibits activities such as sex work and pornography (24). This law can help prevent and reduce sexual risk behaviours among Malaysian citizens.

### Childhood emotional abuse and permissiveness toward premarital sex

According to our research, childhood emotional abuse (CEA) is associated with higher levels of permissiveness to premarital sex (p=0.001). Currently, there are many reliable and well-established data on childhood sexual abuse and its association with sexual risk behaviours (SRB). Childhood maltreatment (CM), which includes CEA as well as child neglect, sexual abuse, and physical abuse, is a growing issue for public, social, and welfare worldwide (25,26). Attachment theory has been thought to influence the association between CM and SRB (27), where premarital sex could be presumed as a type of SRB. Past evidence shows that CM may lead to an insecure attachment that later manifests in SRB (27). Nonetheless, literature lacks detailed information on CEA and premarital sex or SRB. Only one meta-analysis identified a relationship between CEA and early sexual

debut with an OR of 1.72 (17). This study adds to the existing literature; we found that person with childhood emotional abuse (CEA) is twice likely to employ permissiveness towards premarital sex, merits new consideration. In practice, emotional abuse is not always apparent or transparent. Hence, educators should play a bigger role to be more astute in identifying children with such predicament and extend readily support.

### Other childhood abuses

Unfortunately, no significant association was found between childhood sexual abuse (CSA), childhood physical abuse (CPA), and child neglect (CN) and permissive attitudes toward premarital sex. These findings contrast with previous studies that found a significant association between these child maltreatment behaviours and permissive attitudes toward premarital sex (21,28). The possible reason for this could be attributed to variable that could influence attitudes, such as the severity and frequency of maltreatment, which were not investigated in this study. Therefore, future researchers should consider these factors in their studies of permissive attitudes toward premarital sex.

### Substance abuse

Another important finding was that substance abuse, such as cigarette and alcohol use, contributed significantly to permissiveness toward premarital sex. These findings echo a study conducted among college students in Ethiopia (29,30). It is likely that these adolescents perceived themselves as rebellious and had more opportunity to socialize with other at-

risk individuals, which ultimately contributed to their permissiveness toward premarital sex. In addition, this study supports the existing literatures that those who drink alcohol had high likelihood (up to 5 times greater) of permissiveness of premarital sex (31). Alcohol could lower one's inhibition and lead to poor judgment and decision-making (30). However, the discussion of alcohol use and premarital sex varies across cultures, as in some cultures alcohol use and premarital sex are socially tolerated, whereas in others they are not.

### Religion

This study found that Muslim adolescents are less permissive about premarital sex than their non-Muslim peers. Although most religions prohibit premarital and extramarital sex, Muslim society places more emphasis on maintaining virginity before marriage (32). By prohibiting Muslim teenagers from communicating privately with each other, the likelihood that they will have premarital sex can be greatly restricted and reduced (33). To discourage premarital sex, religiously motivated rules regulate how Muslims interact with other Muslims of different sexes. This may also discourage and limit the younger generation's desire to have sex before marriage (33). It is considered "haram" (sin) for a couple to engage in an illicit sexual relationship. Thus, since many Muslims are Malay, this prohibition is also seen as culturally unacceptable among the Malays.

### Locality

Regarding location, premarital sex is more acceptable for youth from rural areas. This may be due to the fact that rural youth have limited access to relevant reproductive health information as some may still face social and cultural barrier and still rely on traditional values and beliefs which refrain them from having an adequate reproductive health information. Likewise, youth of urban background in southern Ethiopia are twice as likely as those of rural origin to be knowledgeable about reproductive health (34). This study informs similarly; lack of knowledge regarding sexuality is seen to have better attitude of permissiveness in premarital sex. In addition, research shows that girls from rural areas were far more likely to have several recent relationships than girls in cities or large towns, according to a Chinese study (35). In the United States of America, there were racial, age, and urban/rural differences in sexual initiation and sexual behaviour (36–38).

### Knowledge on Sexual Health

The present study found that respondents showed a significantly lower willingness to engage in premarital sex when they had inadequate information about sexual health ( $p < 0.001$ ). On the other hand, premarital intercourse is associated with better levels of sexual education among school goers in China (39). Similarly, one study among adolescents in Indonesia found that those with "good" knowledge were more likely to engage in premarital sexual behaviour (40). This

could be because young people are more likely to experiment and put what they learn into practise when they have better access to information. In contrast, other researchers believe that understanding sexuality and reproductive health can protect against sexual risk behaviours and argue that young people can make better informed decisions with their knowledge to avoid complications (41). The disparate results in these studies may be due to the multicultural, multi-ethnic, and religious backgrounds of the participants, which may have influenced their attitudes toward premarital sex (14). Discrepancies in the type of sexual health knowledge studied also cannot be ignored.

### Strengths of the study

This study has high sample size and response rate. It involves targeted Malaysian youths from all states in Malaysia. Thus, using stratified random sampling at institution, the generalisability of the study is achieved and may represent the true population of older adolescents and young adults in Malaysia. In addition, this study adds to the existing limited literature that support the relationship of childhood emotional abuse and their attitude being permissive towards premarital sex in early adult life.

### Limitations of the study

This study was conducted during the movement control order, that made online data collection the only method that can be employed. However, the researchers had difficulty drawing systematic samples at the student level because some of the institutions were difficult to reach. Communication between researchers and respondents to clarify issues is also limited with online surveys. Nevertheless, this process was rectified when the contact person was made available for the respondent to contact should any clarity is needed. Since this study used self-administered questionnaires, the veracity of the responses depended solely on the respondents, which may result in less accurate measurement of the variables. This can be further improved in the future with adding qualitative component in the future.

### CONCLUSION

The prevalence of permissive premarital sex among university students in Malaysia was 42.4%, while childhood emotional abuse was the highest among all other forms of childhood abuse (sexual, physical, and child neglect). Race, religion, locality, smoking, alcohol use, knowledge of sexuality, and childhood emotional abuse were significantly related to permissive attitudes toward premarital sex. It is critical to have an early intervention plan in place to protect this young generation according to the needs of our local youth. Educators must take responsibility in identifying and supporting youths with a history of childhood abuse, particularly emotional abuse, to prevent the escalation of premarital sexual activity among them. As part of the

early intervention plan, educators may want to establish a trauma-informed care centre in schools where they can recognize and provide support for students who have experienced abuse, particularly childhood emotional abuse.

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