

***Attitudes of Thai families towards sexual behaviours in Thai teenage:  
A qualitative study.***

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**ABSTRACT:**

**Background:** The number of adolescent abortions is now at an annual 4 million worldwide (World Health Organisation, 2007). Although Thai social and cultural norms have traditionally not accepted premarital sex, Thai teenagers are embarking on sexual relationships. Only 6.3% of teenagers report condom use every time they have sex and 24% of sexually active girls have experienced unplanned pregnancies (Thato et al., 2003). Half of induced abortion cases were young people, and 29% of cases had serious complications: septicemia (21.6%); uterine perforation (0.4%); and maternal death (0.11%) (Warakamin et al., 2004).

**Aim:** This qualitative study explored the attitudes of Thai parents concerning the sexual behaviours in Thai teenagers.

**Methods:** Five focus groups were conducted with 30 parents, 3 villages, in north-eastern Thailand and were analysed by using thematic analysis.

**Results:** The influence of Thai traditional values is still very strong in rural north-eastern Thailand. Parents often avoid talking about sex with their teenagers. Their fear of losing face in the community and rigorously upholding of the status quo persuades teenagers to conceal their problems, attempting to solve it on their own. The inequality of gender which emerged from the data is presented under four themes: double standard as the social norms; enforcing the rules; sex happens; and parents as problem solvers.

**Conclusions:** Being aware of unsafe abortion will enable health and education services to optimise the public health campaigns, particularly in relation to increasing contraceptive use and to focus promoting parent-child communication about sex related issues protecting teenagers from pregnancy and STIs. Education also needs to focus on discouraging the use of unsafe abortion practices.

**Key words:** Attitudes, Thai families, Sexual behaviours, Thai teenagers, Qualitative study

## INTRODUCTION

As in many other countries, sexual risk behaviours in Thai teenagers have increased and they have sexual intercourse at an earlier age. Although in Thai traditional culture premarital sex is not accepted, today's teenagers in Thailand are embarking on sexual relationships outside the boundaries of marriage (Rasamimari *et al.*, 2007). The proportion of teenage mothers in Thailand has increased from 10.4% to 12.4% between 2000 and 2003 (Thato *et al.*, 2007). A study by Isaranurung *et al.* (2006) found that 13.3% of all Thai pregnancies occurred in women under 20 years of age and the highest percentage pregnancies was found in North-Eastern region of the country (18%). Based on a study of 832 Thai female vocational students Allen *et al.* (2003) indicated that the average age of first coitus was 17.6 years and that 48% of male students and 43% of female students who had experienced sexual intercourse reported not using contraceptives. Unprotected intercourse among teenagers is one of the neglected healthcare problems in Thailand. The main limitation of the studies outlined above is their focus on urban youth, mainly in Bangkok and it is unclear how far it is possible to generalize these studies to all teenagers across Thailand. Therefore, a study of sexual risk behaviours in teenagers in rural Thai society is required.

## AIM

This qualitative study explored the attitudes of Thai parents concerning the sexual behaviours in Thai teenagers.

## METHOD

### Data collection and instruments

Five focus groups were conducted with 30 parents, 3 villages, in north-eastern Thailand between December 2008 and February 2009. Parents were asked to either give their consent by writing or thumb print (if they were illiterate). Each focus group included six participants and lasted up to 90 minutes. One of five focus groups was a mixed sex group. This was to enable them to share their perspectives on fathers' or mothers' role related to sexual issues concerning their adolescent children.

The focus groups were a useful method to address the research questions because they provided an opportunity to ask participants in more detail about topics of

interest, and allowed the researcher to interact directly with participants (Stewart *et al.*, 2007). Furthermore, focus group techniques allowed participants to react and built upon the responses of other group members. This was made possible by using vignettes. The vignette story was told in short sections, stopping frequently, with the initiation of group discussion and sharing of ideas at each point. The vignettes allowed the participants protection from self disclosure in that they were able to disclose their own opinions by considering issues in the lives of others without having to disclose personal details (Kitzinger, 1990).

### **Ethical issues and trustworthiness**

Ethical approval was sought from the Faculty of Health Research Ethics Committee, University of East Anglia, and also the relevant provincial health offices of the Thai Ministry of Public Health. Sex and sexuality are sensitive issues in Thai society. Therefore all data produced for this study was anonymised and kept strictly confidential (Polit and Beck, 2006). All participants had opportunities to decline or agree to take part in the study and they were free to refuse to participate with this research without giving reasons at any time if they disagreed or were unsatisfied during the process.

Rigour was ensured by establishing trustworthiness of Lincoln and Guba (1985). In this study informal member checking took place at the end of each focus group. Transferability can be achieved by providing the thick description necessary to enable someone interested in this study to decide and apply the findings to their own area of practice. Logical, traceable, and clear documents displayed the fairness of representation to increase dependability. Confirmability provided the provision of a clear audit trail throughout the study, and showing that findings were derived directly from the data.

### **Data analysis**

Thematic analysis was used to establish key themes from the data in six steps. These were preparing and exploring the data for analysis; translation and verifying translation; coding; data display;

themes and categories; and representing the data analysis.

1. Preparing and exploring the data for analysis: In this study preparing data was carried out in transcribing data that involved the spoken words from focus groups being transformed into a written form.
2. Translation and verifying translation: The process of translation included the researcher (CS) reading through the Thai transcripts line-by-line translating them word-for-word into English. To ensure the accuracy of the translated data, translation checks were carried out by three English and Thai speaking academics. Following discussion a few English words were revised and changed.
3. Coding: The process of coding included that CS, the first author, read through data line-by-line several times to search for meaning and patterns. Two coders independently coded the same transcript and then they met to compare and discuss differences in their coding and problems with coding structure.
4. Data display: Thematic map was used to display data to understanding the flow, location and connection of events and identifying emerging themes.
5. Themes and categories: Based on thematic analysis, a manual technique was used to establish key themes. Themes were clarified by all authors in relation to the coded extracts.
6. Representing the data analysis: Verbatim quotes, figures, and tables were used to present the findings for the themes in order to show a clear link to the original data.

## **RESULTS**

The inequality of gender which emerged from the data is presented under four themes: double standard as the social norms; enforcing the rules; sex happens; and parents as problem solvers.

### *Theme 1: Double standard as the social norms*

Traditional values still hold sway and parents in particular place a great deal of emphasis on expectations that girls will conform to very high standards of moral

behaviours while a blind eye is shown to boys. This double standard is acknowledged and accepted across the generations as a social norm. The reputation of a girl and her family within the village society is depended on her remaining a virgin until marriage. Parents do, to a large extent, collude to ensure that this tradition is maintained.

*'It is harder to look after a daughter than a son. Neighbours will gossip and look down to her, if she has premarital sex. 'Me Look Saw Muan Me Suam Yoo Na Ban มีลูกสาวก็เหมือนมีส้วมอยู่หน้าบ้าน' literally means, 'Having a daughter takes as much care as having a public toilet in the front yard.'* (P3N father)

Parents and teenagers made it clear that gossip is quite common in a village. They agreed that if a girl has had sexual relations she would feel fearful that villagers would know about her situation and show disapproval by looking down upon her and her family. This was associated, particularly in the parental view as depreciation of personal worth.

*'It is very hard for me and villagers to accept premarital sex for a girl. A girl knows well that her neighbours will gossip, criticise, and look down upon her, if she has sex with her boyfriend before marriage. This is a reason that I have to forbid my daughter having premarital sex.'* (P2N father)

Boys, however, are not put under the same degree of pressure. Commonly, when a male teenager is involved in sexual activity with a female teenager, society is accepting of them, considering it a normal experience for a young man.

*'Somchai is the one who is less affected and had lost nothing. Therefore, he felt he did not need to say or do anything. Mali will be heavy hearted and more worried about her situation than Somchai because she is the one who has to endure the effects the problem.'* (P1N father)

### *Theme 2: Enforcing the rules*

Parents affirmed the point that being strict was an appropriate response as their moral duty to their daughters, and parental control is modelled by setting rules. According to Thai ideals, Thai parents teach their children, especially girls that they need to be abstinent until marriage.

*'Mali (a girl's name in the scenario) would not go to meet Somchai (a boy's name in the scenario), because she would respect her parents' wishes for her not to have a boyfriend.'* (P6D mother)

The data showed that female teenagers often respond to parents who are overly strict by arguing with them and displaying their rebellion against the authority of their parents.

*'Mali has become rebellious against her parents, and would respond to her parents' comments with sarcastic remarks, and when they have tried to restrict her freedom even more, she would find ways to disobey the wishes of her parents. She will continually secretly meet Somchai.'* (P3N father)

Parents also discussed how much harder it is to supervise their teenagers. They stated that teenager's today value being independent and self-confident and are also sometimes irresponsible, unlike their parents who had to obtain permission from their elders before they could do anything.

*'Adolescents today are quicker in exploring sexual situations and experimentation and also they do not respect parents' suggestions.'* (P4MIX father)

### *Theme 3: Sex happens*

Most parents indicated that a girl could not possibly draw upon personal experience in making a decision about how to handle the situation of being alone with a young man.

*'No matter what her response is, Mali has already decided to break her parent's restrictions so he could not miss taking advantage of her as according to a Thai proverb which says, 'Mai Ploy Hai Loy Nuan' ไม่ปล่อยให้ลอยนวล, literally means the man do not ignore all restrictions.'* (P6D mother)

Parents highlighted that teenagers often embark on sexual relationships without considering the use of contraceptives.

*'Somchai is pressuring Mali for sex without giving any thought to the importance of using a condom because for him she is a virgin and he has no fear of being infected by her.'* (P5N father)

Participants discussed the consequences of unprotected sex in relation to the scenario. They were concerned that both the girl and the boy would be worried about consequences. The scenario presents the dilemma when the girl misses a period.

*'Mali probably feels depressed when she thinking about the negative effects of unprotected intercourse. She feels fearful of abandonment by the boy as well as the fear of pregnancy, sexual transmitted diseases, and AIDS.'* (P2D mother)

#### *Theme 4: Parents as problem solvers*

Eleven parents reported that a sexually active girl may try to hint about her experience of sex, telling her parents only some parts of the whole situation to test the response of her parents. A father said (referring to the girl in the scenario who finds herself pregnant). Teenagers would keep their concerns to themselves initially because of fears about parental reactions.

*'Mali wants to test the reaction of her parents before she tells them the whole story. In Thai they have the expression โยนหินถามทาง 'Yon Hin Tham Tang', literally means she is testing the water before jumping in.'* (P5D father)

The discussion about whether parents could be approached if children were concerned about the consequences of sexual behaviour showed mixed feelings among the participant groups. Mothers stated these views.

*'Parents have different approaches to the same situation. Some parents find that they are unable to speak with their children in positive ways about problems, so they rather often start cursing their children instead. On the other hand, some parents often give advice for their children and make them feel comfortable to ask them for help.'* (P1MIX mother)

Mothers expressed feeling that a female teenager would not be able to keep the secret of a pregnancy by herself. Her mother would recognise early signs and ask what is happening.

*'Mali's parents have observed the behaviour changes of their daughter and found that she has changed from before. She might also have morning sickness when she becomes pregnant and her parents will force her to tell the truth to them.'* (P2MIX mother)

Most participants noted that teenagers, especially girls, would feel uncomfortable to tell their parents that they have become pregnant because they feel fearful of the

disapproval of parents. The data showed that parents are usually the last ones to learn that their daughter has become pregnant.

*'Mali will tell her parents only if she got pregnant. If she is not pregnant, her parents will never know anything about her. She would consult her parents because parents will be able to help resolve the problem.'* (P2N mother)

Given the social stigma, the lack of support and the power imbalance between the sexes it was not surprising that six parents expressed their fear that if a girl became pregnant, the boy would take her to have an illegal abortion. Abortion is illegal in Thailand so the teenagers were displaying even more risk taking behaviour in considering this option.

*'Mali may buy liquid oral abortion medicine first and if that does not succeed for an abortion, she may then consult her parents about what to do.'* (P4D father)

The data showed that if the abortion is successfully done, the parents might never know that anything had happened with their children. However, if they were not successful in resolving the pregnancy alone, the parents would be called upon to help their children.

*'Somchai would take Mali to have an abortion performed and he will not tell his parents about Mali if abortion is done.'* (P4MIX father)

Where adolescents did not perceive that they will get the support they need, they would turn to more sympathetic peers for advice.

*'Mali would get advice from female friends whom she can trust because youth often share their problems with close friends and rarely consult with parents first.'* (P2D father)

Parents expressed a general belief that a boy's family does not have to be too worried about their son having sexual intercourse with a young woman because the reputation of the man's family will not suffer. They only have to wait for a female teenager's family to request any assistance

*'Somchai would be proud of himself that he is the first man of Mali's experience with sex. The boy's family has nothing lose. I had seen many families of boys had nothing to do for girls.'* (P1MIX mother)

A strong theme among parents highlighted that a female teenager's parents would approach a boy's parents to 'take responsibility' traditionally meaning marriage, if the pregnancy continued.



*'Mali's parents may feel embarrassed to meet directly with the boy's family and feel losing face in their community where they live. They will ask for help from their relatives to approach the boy's family to take responsibility.'* (P4N mother)

The one-sidedness becomes even clearer when considering in common practice that if the young man does not intend to get married, his family can instead take responsibility symbolically by paying a lump sum of money as a punishment for the offence, terminating the relationship.

*'Somchai's parents will give many options to Somchai. If Somchai needs to take responsibility, his parents will ask Mali to get married. On the other hand, if Somchai wants continue to study, Somchai's parents will pay a fine to the girl's family.'* (P3N mother)

## **DISCUSSIONS**

The findings also confirmed a deeply held acceptance of and adherence to double standards concerning sexual behaviour (Rasamimari *et al.*, 2007). The findings suggested that female teenagers might have little control over sexual decision-making. They may be unable to negotiate condom use due to unequal power relations between boys and girls. Thai social and cultural norms, social expectations, and imbalance of power between men and women when related to sexual matters are behind problems, such as unintended pregnancy, abortions, and STIs. The parents' fear of losing face in the community and the resulting strictness in upholding the status quo persuades teenagers to conceal their problem, attempting to solve it on their own. If the boys fail to live up to the trust that is placed in them then the girls will finally turn to their parents to solve the problem of an unplanned pregnancy after the problem has developed beyond their ability to cope.

There was a sense that there is an inequality that restricts girls much more than boys. Within these rural Thai families, parents generally believed that they had a responsibility to control their daughters particularly, to ensure they behaved within the bounds of the expectation of Thai customs. Parents commented strongly that they would set rules and exert control in order to protect their female teenagers from the perceived harms associated with premarital sex, the amount of room for negotiation by teenagers varied. Some existing research evidence shows adolescents



who perceived their parents to be disrespectful of their individuality demonstrate more frequent risky sexual behaviour, while balanced levels of parental monitoring have been shown to reduce the risk-taking behaviours of teenagers (Aunola & Nurmi, 2005). Imposition of many rules or conversely the lack of imposition of rules has been related to a greater likelihood of sexually risky behaviours among teenagers (Meschke *et al.*, 2002). The process of identity development makes teenage children likely to challenge adult authority, which may cause conflict and frustration between two generations (Eisenstadt, 1963).

### **Limitations of the study**

This study was conducted in only three rural villages in the north-eastern region of Thailand. Its sample was narrow in its limitation to one province but provided good representation of the parents in those areas and a good platform for the participants to outline their views. Applying these findings uncritically across all parts of Thai society may not be possible, because of even stronger Western influence apparent within large cities. It could not fully encompass the cultural diversity of the country.

The structured use of a case-vignette enabled participants to relax and actively share their views without having to disclose personal information. Nevertheless, not all focus group participants may have felt able to contribute equally and some may have been influenced by peer pressure, feeling unable to voice opinions that countered the views of others. This highlights the importance of using individual interviews as well to capture more personal views that may otherwise have been missed.

### **Implications for practice and research**

This rural society values seniority as the core position of power in relationships in the family structure. Families continuously affirm the traditional wisdom that children should be respectful and obedient towards their senior adults. Perhaps, the process of identity formation of teenagers might have tensions and conflicts due to the fact

that they are traditionally expected to ideally emulate their elders, yet they are struggling to shape their own identities influenced by outside values.

Parents should be able to create dialogue, facilitate an open and receptive interactive environment in which a variety of sexual topics could be discussed with their children securely founded in a good basis for mutual understanding of each other. As a result, the connection and respect for individuality between parents and teenagers would be created.

Strategies which aim to encourage gender equality should be addressed such as encouraging female students to share and discuss gender equality issues in the classroom and teachers could give suggestions of their views in positive ways. Perhaps, it is the first step to promote the empowerment of female teenagers.

The findings in this study demonstrated that the parents and teenagers had different views on sexual issues. Developing a policy, which provides guidance for health and education practitioners at community and provincial levels to promote good relationships in families should be appropriately funded.

## **CONCLUSIONS**

This research, the first to be conducted in a rural context in Thailand, explored the opinions and perceptions of parents towards sexual behaviours of their teenagers.

This village society expects girls to keep their virginity until marriage as moral behaviour while premarital sex is accepted for a young man. Losing virginity of the unmarried girl is acknowledged by villagers as losing the family's reputation. Poor reproductive health outcomes are a likely consequence resulting from premarital sex among teenagers, especially girls, who would hesitate to seek advice from their parents or health professionals because of the identified double standards. Parents are usually the last ones to know if their daughters have become pregnant and only if their teenagers were not successful in resolving the pregnancy alone. There was less fear about undergoing dangerous illegal procedures than about facing their parents and bringing disgrace upon their families.

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