

# **MEMMAS Dissertation in Social Work with Families and Children**



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# **Dissertation**

## **Perceptions of Indonesian Immigrant Mothers of Norwegian Sexuality Education**

**RESTY ARMENIA**

**Master's Program in Social Work with Families and Children**

Supervisor: Richard Piech

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# Abstract

## Perceptions of Indonesian Immigrant Mothers of Norwegian Sexuality Education

Resty Armenia

More than 1,000 Indonesian immigrants are living in Norway. They consist of housewives, professionals work in oil and gas companies, nurses, and students. Some professionals are, at the same time, housewives who work during the day. Many Indonesian immigrant mothers are married to Norwegian men or brought to Norway by their Indonesian husbands. They have children who receive education at Norwegian schools, including sexuality education. Meanwhile, sexuality educations in Norway and Indonesia are significantly different. Norway provides comprehensive sexuality education from elementary school until high school, whereas Indonesia primarily uses an abstinence-based approach. Parents in Indonesia often avoid discussing sexual and reproductive issues with their children. If parents decide to give sexuality education, mothers, as the primary caregivers, traditionally play a more significant role in that task. As a result, many adolescents try to obtain information regarding their sexuality through other channels, such as social media, magazines, books, websites, etc. Those who collect improper or inaccurate information might end up in difficult situations, such as teenage pregnancy and sexually transmitted diseases (STDs). Therefore, sexuality education by parents, especially by mothers, plays an important role for children. As the majority of Indonesian immigrant mothers grew up in their home country, they gained information regarding sexuality education in Indonesia. However, they have been living in Norway long enough to experience the acculturation process with Norwegian beliefs, perspectives, and culture. This process might or might not transform their conceptualisation of what proper sexuality education is and how sexuality education runs in Norway.

This qualitative research aims to gain a fundamental understanding of the perception of Indonesian immigrant mothers living in Norway concerning sexuality education received by their children in Norwegian schools, and how this perception affects the way they teach their children about sexuality. Six Indonesian immigrant mothers were recruited as participants through purposive and snowball sampling. Data were collected using an in-depth, semi-structured interview, and the questions are open-ended. The collected data were analysed using a thematic analytical method.

The research findings reveal that Indonesian immigrant mothers in Norway generally have positive perceptions regarding sexuality education received by their children at Norwegian schools. They also perceive that sexuality educations in Norway and Indonesia are significantly different. The most noticeable dissimilarities are concerning culture and religion, and the sexuality education policies. These perceptions and realisations have affected the way they teach their children about sexuality. Simultaneously, the acculturation process plays pivotal role in shaping or transforming the teaching style of these mothers. Both Norwegian and Indonesian sexuality educations can be improved. Norwegian government could add and emphasise the social aspects of having a sexual engagement, whereas Indonesian government needs to attenuate the stigma of 'sex is taboo' and familiarise sexuality education in society.

**Key words:** Sexuality education, sex education, sexuality education in Indonesia, sexuality education in Norway, acculturation, parenting

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# Chapter One: Introduction

This chapter presents an overview of the research study and the influential key factors in why this particular topic is being researched, so the readers could understand the origin of the idea and the motivation behind the thesis. It will start with the research background, then continue with the main and supporting research questions, the aim and objectives of the research, and the significance of the study.

## 1.1 Background of the Research

European countries have been receiving migrants worldwide as the migration trend has been rising in the past few decades. Norway becomes one of the European Economic Area (EEA) member countries that attract immigrants. Statistics Norway (Statistisk sentralbyrå) states that the net immigration to Norway in 2019 is 25,327, with 52,153 immigrations and 26,826 emigrations. Majority of the immigrants came from Poland (4,958), Lithuania (2,291), India (2,360), Sweden (1,965), Philippines (1,767), Syria (1,484) and Germany (1,285). Currently, there are 790,497 immigrants and 188,757 Norwegian-born to immigrant parents living in Norway. This community makes up 18.2 percent of the total population. Some pull-factors attract migrants to move and stay in Norway, such as better working conditions (higher income and stable contract), access to welfare state's assistance, reunification with partners or children, etc.

Statistics Norway reported that currently there are 1,531 Indonesian immigrants registered in the country per March 2020. However, based on a Statistics Norway representative's explanation, not all of these Indonesian immigrants reside in Norway. It is stated that there are 1,162 of them living in the country presently. From this total, 748 of them are females, and 414 are males. The Performance Report Executive Summary 2017 of the Indonesian Embassy in Oslo stated that most of them reside in big cities, such as Oslo, Bergen, Stavanger, Trondheim, and Kristiansand. They consist of housewives, professionals work in oil and gas companies, nurses, and students. Some professionals are, at the same time, housewives who work during the day.

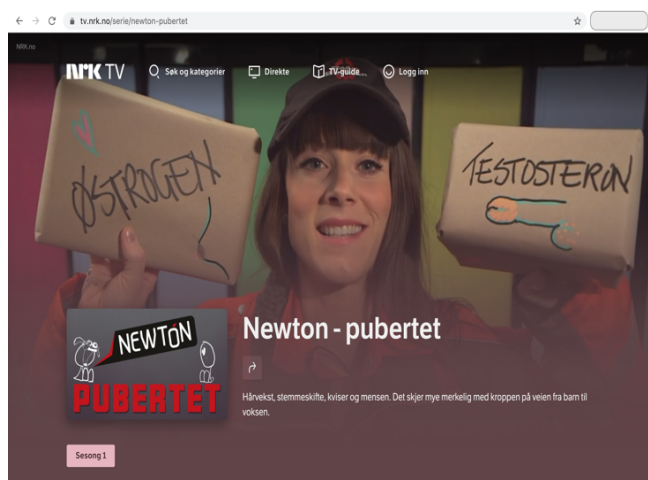
Many of these Indonesian migrant mothers are married to Norwegian men or brought to Norway by their Indonesian husbands who work in oil companies based in Norway. They have either mixed-racial or purely Indonesian children who receive education at Norwegian schools, including sexuality education.

Every child has the rights to receive accurate information concerning sexuality (UNFPA, 2014). This knowledge can be obtained through sexuality education provision both in school and community-based settings. The arrangement of such education can be propitious for children's developmental growth (Goldman and Bradley, 2001).

Sexuality education in Norway and other Scandinavian countries have been comprehensive and open since the 1970s (Olsson, 2016). For example, in 2015, Norway's state-funded educational TV series Newton ran debatable episodes called "*Pubertet*" that cover many things related to puberty and sex, such as penis, vagina, hormones, etc. Not only that basic knowledge, but they also explained about homosexuality, how to kiss, and how to masturbate. In addition, they showed real genitals of a woman and a man on a couple

of episodes. Their target audience is children from 8 to 12 years old. These episodes sparked overwhelming interest and discussions. Managing Editors of NRK Kristie Moe and Cathrine Simonsen (2015) argued that they wanted to convey how human beings make babies because they believe it is a piece of relevant knowledge for their target group. They explained, according to the curriculum of the Norwegian education system, students in Grade 7 should be able to “describe the development of human body from conception to adulthood” and to “explain what happens during puberty and talk about the differences in gender identity and variations in sexual orientation.” NRK still show this program on their official sites, albeit debatable. It is accessible without age or location restriction.

**Picture 1.1 Norwegian TV series Newton “Pubertet”**



(Image retrieved from NRK TV official website, <https://tv.nrk.no/serie/newton-pubertet>)

**Picture 1.2 Anne Fiske’s book “Hvordan Lager Man En Baby?”**



(Image retrieved from Cappelen Damm official website <https://www.cappelendamm.no/hvordan-lager-man-en-baby-anna-fiske-9788202616878>)

Anna Fiske, an award-winning Swedish-born author and cartoonist living in Norway, published a children book titled “*Hvordan Lager Man En Baby?*” or literally translated as “How To Make A Baby?” in 2019. Just like the title, this book demonstrates how to make a baby through playful and colourful illustrations. She explains the topic in a direct yet still humorous way, along with fun and easy language. Moreover, she reveals direct drawings and facts about sex and childbirth processes, such as the illustrations of naked couple having sex, and their genitals. The target audience is four years old and older children. With such materials, some people, including Indonesian immigrant mothers, might think that this book is very direct for children, or it is too early for children to learn about it.

Not only to inform the youth and children regarding what is going on their body, but sexuality education in western countries are also provided to develop their sexual well-being as it is more fragile than that of adults, mainly due to their increased, and earlier sexual activity than previous generations (Myers and Milner, 2007). Additionally, this fragility is worsened by a wide range of risk-taking behaviours.

On the other hand, in Indonesia, the government formally provides sexuality education by inserting it sporadically in several subjects, from junior high school to senior high school level. However, there is almost non-existent for elementary school students, other than, for example, explanation about human body parts in biology class. Some non-profit

organisations occasionally organise non-formal workshops and counselling to spread awareness about sexual health among youth. However, as sex is perceived as taboo, sexuality education has not been taught comprehensively and openly, compared to Western countries. Schools remain to be the main source of information and knowledge about sexuality and health reproduction among youth. Parents often avoid discussing sexual and reproductive issues, hence limited communication between them and their children regarding such topics (Nurachmah et al., 2018). If parents decide to give sexuality education, mothers traditionally play a bigger role in that task because, as the primary caregivers, they have more time with their children than fathers who, as breadwinners, spend more time at work (Goldman and Bradley, 2001). As a result, many adolescents try to obtain information regarding their sexuality through other channels, such as social media, magazines, books, websites, etc. Those who collect improper or inaccurate information might end up in difficult situations, such as teenage pregnancy and sexually transmitted diseases (STDs). Therefore, informal sexuality education by parents, especially by mothers, plays an important role for children.

As Indonesian migrant mothers mostly grew up in their home country, they gained information regarding sexuality education in Indonesia when they were adolescents. However, they have been living in Norway long enough to experience the acculturation process with Norwegian beliefs, perspectives, and culture. This process might or might not transform their conceptualisation of what proper sexuality education is and how sexuality education runs in Norway.

As a demographically huge country in southeast Asia, Indonesia shares cultures and norms with its neighbouring nations, such as Malaysia, Brunei, Singapore, Philippines, Thailand, and Vietnam. As a country with the largest Muslim population in the world, Indonesia also possesses similar religious values with other Muslim nations, namely Middle Eastern countries or dependent territories, in addition to African countries which have a substantial amount of Muslim population, such as Egypt, Morocco, Nigeria, Sudan, and Somalia. There are numerous immigrants from these countries in Norway, as well as in Scandinavia or Europe. They may share indistinguishable experiences or perceptions regarding sexuality education.

## 1.2 Research Question

Based on the explanation elaborated on the research background, the author would like to examine the perception of Indonesian mothers living in Norway about sexuality education received by their children. Therefore, the main research question seeks to figure out: “How do Indonesian immigrant mothers’ perceptions about the Norwegian sexuality education received by their children in Norway affect the way they teach their children about sexuality?”

To get further explanation and findings, this primary research question is supported by these following questions:

- What do Indonesian immigrant mothers think about sexuality education in Norway?
- From the perspective of Indonesian immigrant mothers, what are the differences between sexuality education in Indonesia and Norway?
- How do Indonesian immigrant mothers teach their children about sexuality?

## 1.3 Aims and Objectives

A number of researchers heighten interest in sexuality education in Norway, as well as Scandinavian and European countries (Thorsnes, 2019; Olsson, 2016; Parker et al., 2009; Sherlock, 2012; Turnbull et al., 2008; Svendsen, 2012; Weaver et al., 2005; Kontula, 2010). Nevertheless, studies related to responses on sexuality education, particularly opinions from a specific group, such as Indonesian immigrant mothers whose children receive sexuality education at Norwegian schools, remain rare. Therefore, in response to the knowledge gap, the current research aims to gain a fundamental understanding about the perception of Indonesian immigrant mothers living in Norway concerning sexuality education received by their children in Norwegian schools. Whereas the objectives of the research are as follows:

- To generate knowledge of Indonesian immigrant mothers' perceptions of Norwegian sexuality education
- To get an understanding of the differences between sexuality education in Indonesian and Norway based on Indonesian immigrant mothers' view
- To explore the way Indonesian immigrant mothers teach their children about sexuality

## 1.4 Significance of the Study

Research on Indonesian immigrants' perception of sexuality education in Norway could have direct implications for providing sensitive and debatable information and services for children, especially those from a different cultural background. This particular population may be considered as a very specific and unique set up. However, it is still valuable to understand the comparison of the original culture of a particular group and how it responds to sexuality education in the country they come to. As Indonesia shares cultures, norms, and religious values with some of its neighbouring Asian and Muslim countries, Indonesian immigrant mothers' experience and perceptions regarding sexuality education in Norway may also apply to immigrants from those countries. Additionally, people from these countries may immigrate to Norway, other Scandinavian or Western European countries, or other countries that are more progressive and open than the original countries of these immigrants.

Knowledge about Indonesian immigrant parents could offer service providers critical information about immigrant family dynamics and their children's environment. This knowledge would enhance understanding of cultural differences, which affect and transform perceptions on sexuality education. Furthermore, the finding of this research may also inform policymakers and social workers to improve the quality and appropriateness of sexuality education to provide better and proper information regarding sensitive issues to the public, especially adolescents and children. The author will send this report to the Presidential Staff Office, the Ministry of Women Empowerment and Child Protection, and the Ministry of Health of the Republic of Indonesia as she has a strong network with high-level officials and staff in these organisations. The author also has contacts with Indonesian immigrant parents community in Stavanger, Norway, and Gothenburg, Sweden. Therefore, the author plans to share this report with them as well.

# Chapter Two: Literature Review

This chapter encompasses extensive knowledge reported and disclosed on the existing literatures, including information, data, and statistics obtained by the officials. This section is subdivided into two part: 1) The Indonesian immigrant mothers in Norway; and 2) Sexuality education in Indonesia and Norway.

## 2.1 The Indonesian Immigrant Mothers in Norway

Statistics Norway reported that there are 1,531 Indonesian immigrants in the country per March 2020. The following figures show further details regarding the number of population by immigrant category.

**Table 2.1 Population by immigrant category and country background**

	Born in Norway to Norwegian-born parents*	Immigrants	Norwegian-born to immigrant parents	Foreign-born with one Norwegian-born parent	Norwegian-born with one foreign-born parent	Foreign-born to Norwegian-born parents
<b>Total</b>	4,033,960	790,497	188,757	38,195	277,085	39,086
<b>Norway</b>	3,837,676	0	0	0	0	0
<b>Indonesia</b>	466	1,531	320	101	732	183

(Statistics Norway/Statistisk sentralbyrå, 2020)

\*The foreign country background is related to grandparents' country of birth. The person can have 1 to 4 grandparents born abroad. Grandmother/grandfather's country of birth is selected first if there are different countries of birth for grandparents.

Based on the Performance Report Executive Summary 2017 of Indonesian Embassy in Oslo, most Indonesians are based in major cities, such as Oslo, Bergen, Stavanger, Trondheim, and Kristiansand. Many of them moved to Norway following the peak of oil industry in Norway couple years ago.

**Table 2.2 Population by sex, citizenship, age, contents and year**

		Persons 2020
Males	0-5 years	56
	6-12 years	49
	13-15 years	13
	16-19 years	9
	20-29 years	60
	30-39 years	123
	40-49 years	86
	50-66 years	16
	67 years or older	2
Females	0-5 years	47
	6-12 years	55
	13-15 years	16
	16-19 years	13
	20-29 years	92
	30-39 years	277
	40-49 years	190
	50-66 years	57

(Statistics Norway/Statistisk sentralbyrå, 2020)

Indonesian immigrant housewives, along with professionals of oil and gas companies, become the majority of the population of Indonesian immigrants in Norway (Indonesian Embassy in Oslo, 2017). Some professionals are, at the same time, housewives who work during the day. These facts are supported by the report from Statistics Norway as seen on Table 2.2 above. It demonstrates that the Indonesian population in Norway is dominated by adult males who are 30-39 years old and 40-49 years old, as well as adult females whose ages are 30-39 years, and 40-49 years. This time span belongs to professionals and parents.

**Table 2.3 Immigrants 16 years and over (numbers, by level of education, country)**

	2017	2018	2019
<b>Total</b>	1242	1299	1296
No completed education	3	3	3
Basic school level	300	311	313
Upper secondary education	255	254	260
Tertiary vocational education	9	12	15
Higher education, short	343	387	371
Higher education, long	332	332	334

(Statistics Norway/Statistisk sentralbyrå, 2020)

Statistics Norway also disclosed the level of education of Indonesian immigrants who are 16 years old and older. Many of them have completed short and long higher education levels. Statistics Norway explained that short higher education is up to 4 years in duration, whereas long higher education is more than 4 years. These Indonesian immigrants' education might be obtained in Indonesia, Norway, or abroad.

For Indonesian immigrant mothers who were born and grew up in their home country before moving to Norway, they might still be embedded with Indonesian beliefs, perspectives, and culture that shape their perceptions and way of life until now. Nevertheless, as they have been living in Norway for a couple of years, they began to learn and integrate with Norwegian culture and system. They experience acculturation process which may transform their way of thinking or perceiving information. Meanwhile, their children who grow up and live in Norway tend to carry on Norwegian point-of-views.

## 2.2 Sexuality Education in Indonesia and Norway

### 2.2.1 Sexuality Education in Indonesia

Despite always being a hot issue globally, sex in some countries is perceived as taboo. Many people avoid talking about this topic in public, as well as in an academic environment. Therefore, sexuality education is not taught properly in these countries, including Indonesia. Liu (2016) mentioned that the Indonesian National Policy and Strategy for Reproductive Health for 2004-2009 states that Adolescent Reproductive Health Education must be provided through both formal and non-formal education system, and goes on to emphasize the specific target groups and strategies. Liu (2016) also indicates that Indonesia pursues a whole-school approach to health. The government assumed that knowledge, skills, attitudes, and values that are essential for young people to make healthy sexual and reproductive decisions can also have positive impacts on other health issues, such as drugs and violence.

However, since sexuality is still perceived as taboo in Indonesia, sexuality education has not been taught comprehensively. International Planned Parenthood Federation (IPPF,



2013) declared that there is no national curricula related to sexuality education in Indonesia. The idea of educating children about sexuality is controversial and has triggered strong criticism among conservative officials. They think it should not be compulsory. Some of them even perceive that sexuality education could promote sex before marriage among youth.

Meanwhile, the Director of Basic and Secondary Education at the Indonesian Ministry of Education and Culture, Hamid Muhammad, said in a press conference (CNN Indonesia, 2016) that they have included sexual education materials at every level of education in the 2013 learning curricula (K-13). He explained that sexual education materials in middle and high school levels are not directly mentioned in the curricula. Rather, it is explicitly included in reproductive health education. However, he admitted that there is no such learning for elementary school students. At this level, pupils only study subtly related materials which are incorporated into thematic subjects, for example body parts at biology class. Nevertheless, students from all levels do not learn about other topics which are also essentials for their life, namely how to put on condom, consent, same-sex relationships, etc. Moreover, the sexual education in Indonesia is still very sporadic.

Normally, in about 6<sup>th</sup> or 7<sup>th</sup> grade, Indonesian students learn a chapter on reproduction in biology class which includes plant and animal reproduction. Based on my experience as an Indonesian person who went to public schools in Indonesia, for plant and animal, teachers usually followed the book and examine them in detail. As soon as the human part begins, teachers would often rush through the topic instead of explaining in detail. Some of them even became very embarrassed to the point they skipped the whole human reproduction part. Although sexuality education begins with parents, children and adolescents find other ways to get information about sexuality because they are too embarrassed to ask their family members. Nowadays, they can easily access information via the internet and printed magazines. Adolescents also tend to discuss this issue with their peers (Ogle et al., 2008). In addition, homosexuality is illegal in Indonesia. Therefore, this affects the way children and youth perceive sexual orientation and its variations.

Furthermore, there is a problematic law in Indonesia which says it is illegal to display or show contraception to children. The current criminal provisions in the Criminal Code are listed in Article 534. The article states, “Anyone who publicly displays any means to prevent pregnancy or openly or without being asked to offer, or openly or by broadcasting writings without being asked, pointing as obtainable, means or mediation which thus, threatened with a maximum imprisonment of two months or a maximum fine of three thousand rupiah.” This article makes it more difficult for anyone who wants to educate children about contraception, for example to explain or demonstrate about how to put on condom.

The abstinence and abstinence-only approach to sexuality in Indonesia is particularly connected to religious values which influence Indonesians’ way of life and thinking. More than 87 percent Indonesians are Muslim (Kementerian Agama Republik Indonesia, 2018), hence the civilisation in most parts of the country is usually linked to Islam values and norms. Muslims do not oppose sex education *per se* (Sarwar, 1992, p. 2). However, the community disagree with the sexuality education methods used in many schools, especially where the approach and materials are perceived as defying Islamic law and principles (Halstead, 1997). For example, showing pictures or mannequins of fully naked bodies—which violates the principle of modesty in Islam; and explaining about explicitly forbidden sexual activity according to Islam, such as pre-marital sex and same-sex



relationships, anal intercourse, oral sex, etc. Most of Indonesian Muslims perceive the same way when it comes to sexuality education.

Personal communications with several officers of relevant governmental institutions and NGOs in Indonesia revealed a plausible insights and explanation concerning why these organisations use term “reproductive health education” instead of “sexuality education” or “sex education” when they want to educate the society about sexuality. This attempt is allegedly to soften the words and avoid resistance from conservative families as many of them believe that sexuality education would make children learn too much or too early about sex, and thus, could promote sex before marriage among youth.

These past few years, besides their primary or formal programs, state institutions also take informal channels to educate children and spread awareness about sexuality. The National Population and Family Planning Board (Badan Kependudukan dan Keluarga Berencana Nasional/BKKBN), for instance, has recently done rebranding and released a jingle with a theme of family planning where famous young celebrities and influencers sing the song. They also developed a program called Generasi Berencana (GenRe) to prepare family life for adolescents through an understanding of the age of marital maturity so that they are able to carry out planned education and career, as well as marriage according to the reproductive health cycle (BKKBN, 2018). They continuously update their social media streams with informative contents regarding family planning in a youth-friendly wordings. This institution also cooperated with John Hopkins Center for Communication Program (JHCCP) to invent a digital initiative to support the government family planning programs, such as releasing a book and online portal titled “1001 Cara Bicara” to help parents communicate about sexuality and reproductive health issues with their children (Skata, 2019).

In addition, social entrepreneurs and NGOs also work together with state institutions to carry on the agenda of spreading awareness about sexuality education. Rutgers WPF Indonesia, for instance, have been promoting the importance of comprehensive sexuality education so that Indonesian youth could perceive sexuality and reproductive health positively and be free from sexual and gender based violence. One of their impressive programs is developing modules for teacher capacity building program (Rutgers WPF Indonesia, 2020). They tailored the materials of the modules according to pupils’ age and maturity, such as “Aku dan Kamu” for elementary students, “Setara” for junior high school students, and “Daku” for senior high school students. Further, they invented SobatASK (<https://sobatask.net/>), the online version of these modules where anyone can read them and find access to youth sexual and reproductive health services around them.

As the number of internet users in Indonesia rapidly increase every year, social entrepreneurs and NGOs also utilise social media as platforms to spread awareness on sexuality education. They cover most of the topics that youth cannot find from school or home. For example, TABU (@tabu.id on Instagram), one of reliable social media accounts dedicated to educating people more about sexuality and family planning.

### **2.2.2 Sexuality Education in Norway**

On the other hand, Nordic countries have been praised in the education department as they always made up the list of countries with the best education system in the world. Bartz

(2007) even claimed that Scandinavian sexuality education is admired by many liberal countries, including America.

“Scandinavia has long been admired by American liberals and sex education advocates who cite comparable rates of adolescent sexuality, yet lower rates of teenage pregnancy, sexually transmitted diseases and abortion in Scandinavia.” (Bartz, 2007, p. 17)

Norwegian government provide compulsory comprehensive sexuality education to students. Pupils start to receive the sex and sexuality education from elementary schools, and they continue to learn them until high school (Egeland, 1978). Conversing about sexuality is normalised among children and youth in Norway. Public also perceive the sexuality of young people positively (Parker et al., 2009). The government even issued the national curricula where they inserted topics related to sexuality in various subjects, such as contraception, intimacy, consent, etc. (Thorsnes, 2019). Egeland (1978, p.4) asserted that sex education in Norwegian schools aim to provide students a basis on which they can shape ideas and make a decision about how to live and how to judge what is right or wrong in this subject.

Thorsnes (2019, p. 407) explained that, based on the national curricula stated on the Directorate of Education, Norwegian students in grade 7 should be able to talk about differences in gender identity and variations in sexual orientation in natural science class. Furthermore, after grade 10, students must be able to discuss about sexuality, sexual orientation, and gender identity issues. Meanwhile in social studies, students should be able to talk about love and respect, variation in sexual orientation and relationships and family. They also must able to exchange views on consequences of lack of respect for differences. Additionally, students should converse about ethics regarding to different ways of being a family, the relationship between genders and different gender identities.

Similarly, Olsson (2016) highlights that the Scandinavian countries are examples of holistic (comprehensive) education that has been running since the 1970s. Further, Olsson (2016, p. 327) explained that the sexuality education was expected to promote a gender equality perspective, challenge conceptualisation that men and women are judged differently for similar behaviours (sexual double standards), and even tackle discrimination against homosexuals. Therefore, sexuality education does not only cover and focus on puberty, STDs, and reproduction health topics, but also social issues related to them, such as identity, gender, and sexuality itself. As Olsson (2016) indicates, in Sweden and Norway, education is integrated into several different subjects, mainly Social Science, Biology, History, and Religion. Not only those primary subjects, sexuality education is also integrated into “soft” subjects such as Art, Music, Physical Education and Health, and Home and Consumer Studies/Home Economics.

Olsson (2016) then elaborated some examples of stipulations on sexuality in the curricula:

- Religion, Grade 10: “Reflect on ethical questions related to interpersonal relationships, family and friends, forms of cohabitation, heterosexuality and homosexuality, youth culture and body culture.” (Olsson, 2016, p. 328)
- Biology/Science studies, Grade 7: “Explain what happens during puberty and talk about gender identities and variations in sexual orientation.” (Olsson, 2016, p. 328)

### **2.2.3 Indonesian Mother-Children Communication About Sexuality**

Parents are primary sexuality educators and the majority of communication on this topic has been found to come from mothers (Turnbull et al., 2008). Besides sexual subjects, parents can also teach their children about values and norms within the family. Meanwhile, children need their parents' support in emotional and physical aspects, as well as guidance in preparing adult life.

As sexuality is seen taboo in Indonesia, majority of Indonesian mothers do not talk about this topic with their children. A study conducted by Nurachmah et al. (2018) in Singkawang, West Kalimantan, Indonesia, reveals that communication regarding sexual and reproductive issues between parents and female adolescents is limited in the country. Girls prefer to initiate discussion regarding sexuality with their mothers more than fathers, whereas boys is equally as likely to talk to their mothers as fathers (Ogle et al., 2008). The absence of fathers could be the reason for this situation, since in the majority of families they are breadwinners and invest more time and energy at work (Goldman and Bradley, 2001). In Indonesia and many countries in Asia, mothers are primary caregivers who spend more time with their children compared to fathers as main earners. Previous study also demonstrated that mothers tend to discuss sexual issues more with their daughters than with their sons (Lefkowitz et al., 2002). However, parents—both mothers and fathers—are not the main source of advice for girls as they tend to talk about sexuality only with their friends (Ogle et al., 2008). The case in Indonesia reveals that both boys and girls feel embarrassed and think that it is impolite, in Indonesian culture, to talk about sexuality with their parents (Nurachmah et al., 2018). On the other hand, Indonesian parents feel burdened to start conversations about sexuality, and think that it is shameful and culturally unacceptable to discuss about sexual matters with their children.

# Chapter Three: Theoretical Framework

This chapter examines the interrelated concepts and theories which support this research study. As a natural extension of literature reviews, this section introduces and thoroughly explains two relevant concepts used on this particular study: sexuality education and acculturation model. The interdisciplinary discussion obtained through available sources and literatures.

## 3.1 Sexuality Education

To understand about sexuality education, Haffner (1993, p.2) described it as a lifelong process of acquiring information and forming attitudes, beliefs, and values about identity, relationships, and intimacy. Ultimately:

“It encompasses sexual development, reproductive health, interpersonal relationships, affection, intimacy, body image, and gender roles. Sexuality education addresses the biological, sociocultural, psychological, and spiritual dimensions of sexuality from 1) the cognitive domain, 2) the affective domain, 3) the behavioural domain, including the skills to communicate effectively and make responsible decisions.” (Haffner, 1993, p.2)

Ponzetti (2016, p.25) noted that sexuality education is “subject to various social trends, public health concerns, cultural norms, and sundry controversies at different times and in incongruous ways.” He explained that sexuality education is an integration result of three descriptors emerged from the variety of sexuality learning methods, namely sex education, sex and relationship education (SRE), and sexual health education (SHE).

“It is a multidimensional experience that involves what women and men, boys and girls consider sexual, how they comprehend it, the degree of control and agency they feel over it, and the import and value ascribed to it. Sexuality is experienced in thoughts, fantasies, desires, beliefs, attitudes, values, behaviours, practices, roles, and relationships. Thus, ‘sexuality education’ is an inclusive descriptor that recognizes the interaction of historical, social, political, cultural, psychological, legal, ethical, religious, and moral factors.” (Ponzetti, 2016, p.26)

United Nations Educational, Scientific, and Cultural Organization (UNESCO, 2009) stated that there are four objectives of sexuality education provision: 1) To enhance knowledge and understanding about sexuality; 2) To explain and clarify feelings, values, and attitudes regarding sexuality; 3) To develop or strengthen skills related to sexuality; and 4) To encourage behaviours that reduce sexuality risks and problems.

There are two different approaches to sexuality education: comprehensive sexuality education and abstinence-based education. Comprehensive sexuality education is honest, straight-forward, age-appropriate and wide-ranging (Bartz, 2007), whereas abstinence-based programs concentrate on self-restrain and prevention (Ponzetti, 2016). Nevertheless, Ponzetti (2016) mentioned that majority of sexuality education programs offered combine both models.

UNESCO (2019) suggested that comprehensive sexuality education is essential as it carries out several points of Sustainable Development Goals (SDGs), such as improving health and contributing to gender equality. This organisation defines comprehensive sexuality education as:

“A curriculum-based process of teaching and learning about the cognitive, emotional, physical and social aspects of sexuality. It aims to equip children and young people with knowledge, skills, attitudes and values that will empower them to: realise their health, well-being and dignity; develop respectful social and sexual relationships; consider how their choices affect their own well-being and that of others; and, understand and ensure the protection of their rights throughout their lives.” (UNESCO, 2018, p.16)

UNESCO (2015) also emphasises that comprehensive sexuality education should provide information regarding sexuality and relationships which are age-appropriate, culturally relevant, scientifically accurate, realistic, and non-judgemental.

Comprehensive sexuality education programs should be evidence-based. Moreover, UNFPA (2014, p.10) suggested that the programs cover nine essential components: 1) A basis in the core universal values of human rights; 2) An integrated focus on gender; 3) Thorough and scientifically accurate information; 4) A safe and healthy learning environment; 5) Linking to sexual and reproductive health services and other initiatives that address gender, equality, empowerment, and access to education, social and economic assets for young people; 6) Participatory teaching methods for personalization of information and strengthened skills in communication, decision-making and critical thinking; 7) Strengthening youth advocacy and civic engagement; 8) Cultural relevance in tackling human rights violations and gender inequality; and 9) Reaching across formal and informal sectors and across age groupings.

Sexuality education can be provided both in school and community-based settings. Some families are comfortable to discuss about issues related to sexual expression and behaviour. However, some others find it awkward or embarrassing. Many parents also feel unprepared to educate their children about this topic and decide to leave their teaching responsibility to schools (European Expert Group on Sexuality Education, 2016). The learning materials and techniques differ significantly depending on sexual taboos, religious values, social perspectives towards sexuality, and sexual understanding (Ponzetti, 2016).

Safitri (2017) cited Hurlock (1991) regarding children’s developmental psychology where he concluded that children in late childhood generally have high curiosity. In connection with sexuality topic, 6-9 years old children normally begin to show a desire to learn about the body of the opposite sex and question the basic nature of sex. Meanwhile, 10–12 years old kids start to develop a romantic interest towards the opposite sex, possess more profound comprehension of sexuality, and fancy to know more about it by themselves.

Everyone has the rights to obtain good quality sexuality education as it is grounded in universal human rights, particularly in the rights to education and health. The rights have been established in many international agreements, namely the Convention on the Rights of the Child; the International Covenant on Economic, Social and Cultural Rights; the

International Covenant on Civil and Political Rights; the Convention on the Elimination of All Forms of Discrimination against Women; and the Convention on the Rights of Persons with Disabilities (UNFPA, 2014, p.7). Further, sexuality education is advised in the 1994 International Conference on Population and Development (ICPD) Programme of Action. Additionally, the European Expert Group on Sexuality Education (2016) noted that the importance of sexuality education has been accentuated by the United Nations Special Rapporteur on the Right to Education in a 2010 report to the United Nations General Assembly and by the European Court of Human Rights in 2011.

## **3.2 Acculturation Model**

Ozer (2017, p.1) referred that acculturation has been understood as “a process happening within various domains, with changes in behaviour, such as use of language, food preference, peer group interaction, and media consumption, as well as changes in attitude, such as preferences for the involved cultural elements.” Acculturation strategies involve two elements: attitudes and behaviours which are demonstrated daily intercultural encounters (Berry, 2017, p.10). Ozer (2017) also mentioned that international immigrants carry cultural traditions, languages and values with them, which are dissimilar with what they find their new social and cultural settings. He then argued that in terms of psychology, the concentration of the individual has been linked to adaptation during these cultural processes and the acceptance that not all people engage to the same level and attune similarly to the general assimilation process.

Redfield, Linton, & Herskovits (1936, p.146) defined acculturation as “the process of cultural change that occurs when an individual from different cultural backgrounds come into prolonged, continuous, first-hand contact with each other.” This direct contact results in transformations at both individual (i.e., values, attitudes, beliefs, and identities) and also group level (i.e., social and cultural systems) (Berry, 2003). Berry (1997) also mentioned that personal features existing prior to acculturation should be considered, including age, gender, educational background, migration reason, cultural distance (language and religion), etc., although there is limited knowledge regarding the direct association between some of the above individual characteristics, and the acculturation process.

As Arends-Tóth and Van de Vijver (2006) suggests, prominent forms of the acculturation process are shaped by acculturation conditions, acculturation orientations, and acculturation outcomes. In this case, the acculturation conditions are the antecedent factors and characteristic of Indonesian migrant mothers, their children, and Norwegian society. The acculturation orientations involved the way Indonesian migrant mothers prefer or their strategy to relate the society of settlement (cultural adoption) and country of origin (cultural maintenance). Celenk and Van de Vijver (2011) cited Van Oudenhoven et al. (2008) and Ward et al. (2004) about the distinction between psychological outcomes (internal adjustment) and behavioural adaptation (social, external adjustment). Internal adjustment is made of emotional and psychological aspects of acculturation results, which include physical and mental wellness, and satisfaction with life in the new cultural and social setting (Celenk and Van de Vijver, 2011, p.5). Whereas external adjustment is obtaining culturally fitting knowledge and skills, which brings about interaction with the mainstream culture and overcoming obstacles. The outcomes can be in the sociocultural domain, for example, Norwegian language proficiency and social networks.

# Chapter Four: Methodology

This chapter discusses about the research technique and research design. The research design contains of explanation concerning how to determine the participants, data collection method, and data analysis. This section also examines the ethical considerations.

## 4.1 Research Technique

This study is a qualitative research as interpretation is mainly used. Willig and Stainton-Roger (2007) explained that the purpose of the interpretation process is to explore and amplify the different stands of meaning that research participants have derived out of their lived experience. The author chose qualitative methodical approach in order to interpret the perceptions of Indonesian migrant mothers in Norway on sexuality education received by their children in Norwegian schools, based on their life experience and acculturation process.

## 4.2 Research Design

### 4.2.1 Participants

In determining the participants, the author recruited them through two sampling techniques: purposive sampling and snowball sampling. Purposive sampling was employed to obtain participants whose criteria is relevant to the research question (Bryman, 2012), such as Indonesian immigrants, females, have children who go to and receive sexuality education at school. With this approach, the author managed to get two participants. Through these two mothers, the author then had opportunities to use snowball sampling method. This approach was used as the primary participants knew influential acquaintances who have competency in giving similar or even further relevant information. Four more mothers were recruited using this method. Thus, the research participants of this study are six Indonesian immigrant mothers in Stavanger, Norway who have a child or children receiving sexuality education at Norwegian schools. Each participant was given as much needed information as possible before they could firmly decide to participate or not participate in a study (Bryman, 2012).

The recruited participants have one to three children, and the age of the children are varied, from 3 months old up to 18 years old. Four of these Indonesian immigrant mothers are married to Indonesian men and migrated to Norway with their spouses and children, whereas two others are the wives to Norwegian men and mothers to their mixed-racial children. Most of these women identified themselves as religious mothers, regardless their religion. Therefore, despite living in a free, western country, they still strive to educate their children according to the values and principles of their respective religion.

### 4.2.2 Data Collection Method

Data for this research was collected using in-depth, semi-structured interview in order to gather respondents' explanation and description in detail regarding their perception of sexuality education received by their children in Norwegian schools. This method was used so that the concepts and theories could emerge out of the data (Bryman, 2012). There is an

interview protocol and guide to support the interview process. The questions are open-ended with the aim of collecting detailed and varied answers from the respondents. Each participant was given explanation and information again regarding the study and asked to sign informed consent forms.

The author initially planned to conduct face-to-face interviews to be able to observe the participants' gestures and facial expressions. However, due to the Covid-19 pandemic situation, five out of six interviews organised through Skype and phone calls. One interview was done in person while still practicing required social distancing protocol. The language spoken in the interviews is mainly Indonesian national language, Bahasa, as these immigrant mothers come from various provinces in Indonesia. Nevertheless, mothers whose spouses are Norwegians sometimes mixed their languages between Indonesian, Norwegian, and English. The author understands these three languages, and therefore faced no problem in the translation process.

### **4.2.3 Data Analysis**

The interview results were transcribed and then translated into formal English. This process used denaturalised transcription method to focus on the content of the conversation during interviews, instead of the accents and linguistic traits (Oliver, Serovich and Mason, 2005). The transcription results were analysed using a thematic analytical method to figure out the main topics or ideas presented in the interview (Braun and Clarke, 2012).

The analysis process began by examining all available data from various sources, namely literatures, observations, and interviews. Themes found were discovered by reading the transcription results numerous times to identify patterns (Bryman, 2012). Meanwhile, the coding was processed with NVivo software. From this whole process, the most critical findings started to emerge, which were subsequently summarised under the following themes: 1) Indonesian immigrant mothers' perception regarding sexuality education in Norway; 2) The differences between sexuality education in Indonesia and Norway according to Indonesian immigrant mothers; and 3) The way Indonesian immigrant mothers educate their children about sexuality.

### **4.2.4 Ethical Considerations**

Diener and Crandall (1978) elaborated four areas of ethical principles in social research which are critical to be examined: whether there is harm to participants; whether there is a lack of informed consent; whether there is an invasion of privacy; and whether deception is involved. As mentioned earlier, the author recruited six participants which include Indonesian migrant mothers in Norway who have children receiving education at Norwegian schools. They are not considered as vulnerable group, because they are not exposed to bad nor traumatic experience. Interviewing and conducting research about this group of participants did not cause any harm, whether it is emotional, mental or physical. Furthermore, there was also no harm done to the author, especially because both the author and participants have the same cultural background.

To circumvent the lack of informed consent as it could bring more problems in the future, the author has asked participants to sign informed consent forms. This form can give them the chance to be fully informed of the process and essence of my research, also the



consequences and contributions of their participation for the study. Furthermore, the author also used covert methods and raised issues about ensuring anonymity and confidentiality regarding information gathered or recorded during the research process. Bryman (2012) suggested the use of pseudonyms, although he realized that it may not eliminate entirely the possibility of identification. All names mentioned in the interviews are anonymous. The author only writes initials on the research findings section. Every time the mothers revealed their children's names on the interview, the author directly changed it into "my daughter" or "my son" on the transcription and translation processes to keep the anonymity.

Another dilemma is concerning the issue of translation. As both the author and the participants are Indonesian, the interviews were conducted in the mother tongue (Bahasa Indonesia). The transcription is, therefore, mostly in the same language, before it was translated into English. This process was quite challenging in a way because Indonesian language have some expressions, phrases or words which are tricky to be properly translated into English.

This study was approved by the Faculty of Social Sciences, University of Stavanger. Permission for the research was issued by the Norwegian Centre for Research Data (NSD).

# Chapter Five: Research Findings

This chapter presents the explanation on perceptions of Indonesian mothers about Norwegian sex education received by their children in Norway, and how those perceptions affect the way they teach their children. The perceptions are divided in three parts, which also answer the research questions.

## 5.1 Sexuality Education in Norway

Indonesian mothers in Norway have generally positive perception regarding sexuality education received by their children at Norwegian schools. They believe that Norwegian government have created the curricula very precisely, so it becomes informative and educative knowledge which is needed in their children's life. Not only about the materials, they also believe that it is appropriately made according to the age of the students. These are in line with UNESCO's technical guidance on sexuality education (UNESCO, 2009).

“From what they teach and explain, it is very informative and not vulgar. The timing is also very precise, starting from grade 5, because with the assumption that during that period, female hormones start to change, even though males start later.” (Mother A)

Even though most of these Indonesian mothers claimed themselves as religious and came from conservative families in Indonesia, apparently it does not automatically make them think that Norwegian sexuality education is too vulgar. Instead, they appreciate the idea of having straightforward yet comprehensive sexuality education. Acculturation process has resulted in the change of their views and preference on sexuality education, from abstinent-based to comprehensive and open approach. According to Arends-Tóth and van de Vijver (2006) suggestions, the acculturation process here is shaped by acculturation orientations which involved the way Indonesian migrant mothers prefer or their strategy to relate the society of settlement (cultural adoption) and country of origin (cultural maintenance).

“It is excellent, because it is important to tell children about human's organs blatantly since they are very young. They inform them openly too, to the point how to make babies. This will not necessarily make them curious. I actually think young people here are taught to be responsible, so it is better. Because it makes them know that if sperm and egg meet, that means you will have a baby. And you must keep that. Not only about the sex, but they also learn about the danger of STDs. It is very good, so they can be careful and vigilant.” (Mother W)

The participants also reflect that, because their children receive sexuality education from school, it is easier for Asian parents, who tend to perceive sex as taboo, to start having conversation with their children at home about sexuality issues. Before they knew that Norwegian schools provide sex education, they had trouble or found it awkward and embarrassing to talk about this topic with their children. This is similar to the statement mentioned on the study conducted by Nurachmah et al. (2018) which says that Indonesian parents feel burdened to start conversations about sexuality and think that it is shameful

and culturally unacceptable to discuss about sexual matters with their children. Especially those parents who never talked about sexuality education with their parents back in Indonesia when they were young. Therefore, these Indonesian mothers in Norway feel really grateful for sexuality education received by their children from Norwegian schools. Mother J and Mother P have described this particular situation in details.

“In general it is alright. They indeed are more open, compared to Indonesia. Because the kids get sexuality education at school, they automatically receive the proper one. It helps to make easier for us parents. We know that they receive it, so we can discuss about it. And we can discuss and understand about various things, not only the sex, but also their perspective about LGBT, and other issues. At school, they also discuss about it openly. Sometimes there are topics they bring for debate. So it is not only about how to put on condoms, but more broad.” (Mother J)

“So far I think it is very great. It helps us, especially Asian parents, who do not know how to explain about this to our children. ‘Taboo parents’. I am one of them. But I am not too conservative. I wondered how to start to teach them about sexuality. But because the school started it, then I could follow up.” (Mother P)

Nevertheless, these mothers also proposed negative sides of Norwegian sexuality education received by their children at school. Mother A, for example, cogitates on how schools do not explain about social effects and consequences of having sex. She thinks that sex education in Norway focuses too much on the natural science perspective, and does not explore the social sides of it.

“If they do (having sex), they already understand—especially those who are in junior and senior high school—they may get pregnant, have a baby, and have more responsibilities. What are the responsibilities? They do not explain that. Perhaps because they (schools) think the timing is not right yet. But then they (students) will never understand... Will that come in senior or junior high school? I do not think so, because it has already passed, as sex education is given earlier, in grade 5. So I think that is what has been missing.” (Mother A)

In addition, some mothers think that their children learned about sexuality from informal channels too early. As information regarding sexuality is just one click away on the internet, some children can access them easily without paying attention on the age restriction. For example, Norway's state-funded educational TV series Newton “*Pubertet*” can be watched on NRK’s official website and Youtube channel. Although their target audience is 8-12 years old children, anyone can accessed those videos from anywhere for free. Problematically, children under that age bracket can also watch them.

“I think my daughter learns too fast. We have no idea about it, but suddenly she has watched (*Pubertet*) about having sex. One day, she was caught red handed by me... From there I was panic, because she was still underage, she was six years old. *Pubertet* is for 8 to 12 years old kids, so she was still very far (from that age bracket). Meanwhile,

she is now 10... I think learning about sexuality is no problem, but in this case, our daughter learned from the internet first, so I think it is wrong.” (Mother R)

## **5.2 Sexuality Education in Norway and Indonesia**

As explained on the literature review, sexuality education in Norway and Indonesia are significantly different. All of participants acknowledge this and they have observed the differences. They spotted two prominent factors that lead to the differences on sexuality education between two countries. First, they believe that sexuality education in Indonesia is heavily influenced by eastern or Asian culture and various religions, predominantly Islam. Furthermore, these mothers notice that, unlike in Norway, there is no national curricula related to sexuality education in Indonesia. It is corresponding with what IPPF has declared in 2013 (IPPF, 2013). Meanwhile, they have learned that Norwegian government provide compulsory comprehensive sexuality education to students, including their children. The participants’ complete elaboration regarding the differences between sexuality education in Norway and Indonesia can be seen below.

### **5.2.1 Cultural and religious differences**

Indonesian mothers believe that the most noticeable difference between Norwegian and Indonesian sexuality education is concerning culture and religion. As they grew up in Indonesia, they have only experienced how limited sexuality education given by the government in their home country. Indonesia, in fact, is characterised by Asian or eastern culture where people do not openly have a conversation about sex and sexuality. Additionally, as more than 87 percent Indonesians are Muslim (Kementerian Agama Republik Indonesia, 2018), majority of people believe that it is sinful to have sex before marriage. Other religions, like Protestant Christian and Catholic Christian, also suggest the same approach when it comes to sex. Mother R, Mother W, and Mother H described how these two factors made it difficult to insert sexuality education at the curricula without having resistance by the society.

“From my own experience, my family is extremely conservative. So when I asked, ‘where does a child come from?’ they would answer, ‘From flour,’ or ‘You cannot ask like that. Not at your age.’ So I wondered why, and wanted to figure out the answers myself. I became even more curious. That is why many premarital pregnancy cases, free sex. It is because of lack of (sexuality) education from parents. Parents are too conservative. That conservative way of educating children about sexuality has been inherited throughout generations. That is what I want to change for my children... Indonesia is still too far from (proper) sex education.” (Mother R)

“Firstly, in Indonesia it is still taboo to talk about sex. Indonesia is not open about sex. Second, the eastern culture is still strong, which makes it difficult to talk about sex. Third, Indonesian boys are tawdry. They cannot stay still when they see girls, because their curiosity is not channelled.” (Mother W)

“Everything is linked to religion in our country. The problem is, everything is linked to religion, but the people do not behave like religious ones. Here (in Norway) the people do not have religion, but they are more civil. So if we have this kind of (sexuality education) in Indonesia, there would be a mess. Parents will protest... It will be difficult to develop our country, because everything is linked to religion.” (Mother H)

At the same time, Indonesian mothers understand that their children, since young age, have been receiving comprehensive sexuality education at schools in Norway. Bartz (2017) described Norway as a professedly Lutheran country known for its progressive sexuality education. Norwegians perceive that religion is a private matter, hence, if they have it, they would not show it off. People in this country also value the sexuality of young people positively (Parker, Wellings, and Lazarus, 2009) and they normalise discussing about sex in public, including schools. All participants are aware of this cultural and religious differences. They respond these dissimilarities with two particular attitudes. Firstly, they are faithful to their respective religion, and yet, at the same time, still supportive towards Norwegians’ approach on sexuality education although they know it is not in line with their religious values. Secondly, they prefer to follow Norwegian people who think positively towards sexuality of adolescents. Mother W and Mother A voiced their opinion regarding this matter.

“In Norway it is too open, to the point—if my child graduates from high school, there will be *russ* (Norwegian high school final semester celebration) period—during that period, he will receive one package, and there will be condom on that package. Because people here are informed that you better use that condom to avoid getting pregnant or STDs. Norwegians are so open about condom, not for abomination, but they anticipate to not get STDs and unwanted pregnancy. Indonesia is not ready with such thing... Proper sex ed makes people understand. Besides human’s organs, they also understand about STDs. That is why sexuality education is given early. This is what Indonesians do not think about. Our family give sexuality education since kindergarten. That was why my child already knew about it when we moved to Norway.” (Mother W)

“In Norway, it is part of education, so it has nothing to do with being taboo. In Indonesia, it is restricted by culture and religion, so it is not delivered.” (Mother A)

### **5.2.2 National program vs Independent program**

Indonesian mothers realise that Norway emphasises the importance of sexuality education, as Egeland (1978) stated, to the extent that the state has issued the national curricula where they inserted topics related to sexuality in various subjects, such as contraception, intimacy, consent, etc. Mother A, for instance, understood that in Norway sexuality education is treated as information which should be spread and delivered to everyone, including children and adolescent. She also addressed that, contrarily, in Indonesia not every school provides such education for students. Some schools only teach limitedly, for example about reproduction and human organs in biology class.

“There is nothing explained outside your biology book. It was just about reproduction and human organs. There are no difference between male and female, other than their hormones and genitals. But it is not sexuality education, it is just biology.” (Mother A)

“Sexuality education in Norway is a formal education which is included in curricula... In Indonesia, it is not included in curricula, and it depends on each school’s program instead. So it is different. In Norway, it is a national program, in Indonesia it is each school’s program. It depends on each school, maybe private schools have that, and not all of them. Just developed private schools. Sometimes, it depends on the teachers. So it is not included in the curricula, but they will include in some subjects. In *barnehage* (kindergarten), they (kids) receive general knowledge, in elementary school as well. Meanwhile, teachers will still guide them too. They have teachers or health nurses whom they can ask or talk about various issues if they (students) are not comfortable talking with their parents. Similar to UKS (*Usaha Kesehatan Sekolah*/School Health Business) in Indonesia. But the difference is, they have programs. For example, they give vaccines to young children. At elementary schools, from such and such age, they would calls kids and ask about lots of things.” (Mother J)

## 5.3 Educating Children about Sexuality

Indonesian mothers use various methods to educate their children about sexuality. They have different styles, from how they build the atmosphere, how intense they conduct it, how they find and utilise supplementary materials, what language they use, how they collaborate with their spouse, until how they decide which important topics to be delivered to their children. Acculturation process plays big part in the variety of approaches as these mothers have different life trajectories and, as Berry (1997) asserted, personal features prior to acculturation, including age, gender, educational background, migration reason, cultural distance (language and religion), etc.

### 5.3.1 Various Ways of Educating Children about Sexuality

#### 5.3.1.1 The Atmosphere and Frequency

Most of these Indonesian mothers talk about sexuality with their children in a casual or relaxed setting. They use that technique because the schools also implement the same attitude. Since some topics are complex or sensitive, mothers support the idea of educating children about sex and sexuality casually in order to deliver the information and knowledge easily. Dinner table and family room are places where these conversations normally happen.

“It should be relaxing, and we should see our children’s mood. So far we never have special time, because he receives that knowledge from school.” (Mother J)

“We usually talk about sexuality when we eat dinner. We talk about what she learns at school... Or maybe before she goes to sleep, she would ask. And if she wants to talk only with her father, then they would sit together in this sofa. For topics she wants to discuss only with me, she would sit with me. But mostly in dinner table.” (Mother R)

Many of them wait until their children ask first to avoid awkwardness and embarrassment between them. They would then explain thoroughly once their children ask or initiate the discussion. Sometimes they also start to have light conversation if they happen to watch or hear news about sexuality or sensitive topics on TV or the internet.

“He knows that he can just ask us if he wants to know anything. I am sure he wants to understand something sensitive sometimes—I have experienced that young phase too—there are things he does not ask, but we let it slide because it is his process to be adult. It does not mean we always openly ask, because sometimes it makes them embarrassed and not want to talk at all. So we tend to wait him to ask first.” (Mother J)

“I never start first. But my daughter is very curious, she likes to find answers. We never begin first. But she asks us first, and then that is when we explain.” (Mother R)

However, not all of them use this passive approach, some mother prefer to be more active by initiating conversation about sexuality first. These mothers usually have very close bonding with their children. They take advantages of their closer and more connected relationship with their children to allow them to communicate about sex and sexuality more comfortably (Turnbull et al., 2008). They often insert jokes to shy away the awkwardness and to make their children more comfortable.

“First of all, I always make it casual. And then I talk about it jokingly, not too serious. It depends also on how we deliver it. Everyone is different. For me, I do not joke about it so much, I just deliver it in a non-formal way, not too serious, so it is nice. It is tiring already to be serious at work for 7.5 hours. I do not want to meet my kids at home and be serious and stiff.” (Mother P)

“I have one child. We are always open to talk about sex, even though he is male. So we have nothing to hide... I talk about it jokingly.” (Mother W)

Contrarily, Mother A admitted that she teaches sexuality education to her children in a serious way. She thinks that this topic should be delivered and be taken seriously. She usually makes special time to discuss about this with her children, instead of waiting for her children to start first or to let it flow like how other participants do. In addition, conservative approach is implemented by some mothers. For example, Mother H trusts the school and the mosque to teach her son about sexuality. She barely discusses about it with her child at home, because she is a busy single mother who works in one of the biggest oil companies in Norway, but also she does not feel very comfortable to talk about sexuality with her teenage son. She also thinks that she does not have adequate knowledge about male body and sexual behaviour.

Since Indonesian mothers have learned about how open and progressive sexuality education provided at schools are, most of them tend to follow this method. Some of them even admitted to be as vulgar in order to make it effective and balanced between what their children learn at school and at home. They treat sexuality education just like general subjects taught, such as social sciences or health.

“I am open, and I even tend to be vulgar. Because I have to balance with information they receive from school. If they receive Z, then I need to explain about Z a little bit further. So they are also prepared. As I said before, school explains about science part, so I explain also the social part. The causes and consequences.” (Mother A)

“Making him getting used to it since he was very young, so when he grew up he was not shocked. Whenever he received sex education, he was never shocked.” (Mother W)

“I do not see sex as a topic that I need to talk about seriously with my son, but casual talks... Me and my son are very open. I asked him, ‘Do you feel any difference with your body?’ He is now in puberty. He answered, ‘Yes, Mom. I feel I have lots of hair on this part.’ I always say this to my son, ‘You came out of my vagina, so if you want to know anything, just ask me. How to have sex with your wife later, what is going on, you can ask me. Because there is no one who can answer your questions as honest as me or your father. Especially your father, as he has similar genital like yours. So if you want to know anything about it, you better ask him. If he does not understand and cannot answer, we go to a doctor.’” (Mother P)

Most mothers describe the frequency of discussion or talk about sexuality with their children as “not too often, not too seldom”. They claimed that it also varies according to the age of their children. For example, when children are in grade 5 or 6—since Norwegian schools begin the sexuality education at these grades—they usually ask more questions and more intense because they are still new in this particular knowledge and curious with lots of things. However, as they grow older and become sexually mature—especially after they reach puberty—they receive more information from school and other channels. Therefore, they become less interested in asking or discussing with parents regarding this topic. They are more comfortable to talk about this with their friends, or nurse at school. This finding is consistent with Hurlock (1991) explanation about children’s developmental psychology in terms of sexuality.

“That time, when we first (talked about sex education), especially when he received that subject, it was quite often, in grade 5. And because he is a male, his hormones (changed) later than girls, so we even talked often until he was in grade 6 and 7. But once he went through puberty, we did not really do it anymore. For my first son, we began (to discuss about sexuality) when he first receive sex education at school, until puberty hit him. For my second child, she is still in grade 4, we have been discussing about it sometimes, but not much. Because she has been starting to get hormonal changes, for example her breasts. But (we do)



not (discuss) as often as what I did to her older brother when he was in grade 5. I actually am waiting until she receives sexuality education (at school) in grade 5.” (Mother A)

Furthermore, daughters normally ask and discuss more with their mothers. This is similar to the previous research by Ogle et al., (2008). The participants think that, besides having similar genital, their daughters have more questions because they believe mothers would know the answers better than fathers. These Indonesian mothers also admitted that their sons are normally shy to talk about sex and sexuality, and if they really need to discuss about it, then they do it with the fathers instead.

“My first child, because he is a boy, he rarely asks. I am the one who reminds him often. But my girls, they do ask often. Nowadays, especially. Because they see me having menstruation, so they ask me a lot about it.” (Mother A)

“My son talks about sexuality more with his dad, so man to man. But we often talk about it together, three of us. When he was at elementary school, he was a really curious child, he wanted to know a lot of things... During junior high school, maybe he already knew a lot, so he was not as curious as before. As a senior high school student now, he does not ask such things anymore. He asked intensely when he was young. Now not too often, just when he needs to ask.” (Mother W)

### **5.3.1.2 Materials and Supplementary Teaching**

Materials from school are utilised by Indonesian mothers. They check on what their children have learned from school and what are the references. Norwegian schools let each student to bring pedagogical device to home to enhance the learning experience (Valstad, 2010). This device usually carries out curricula and books digitally, thus students and parents can always check what they learn along with the materials at home. Additionally, they make use of other medium that can support them, such as books, pictures, movies and related websites. Mother J, for instance, is generally open to utilise any media to help her educate their children about sexuality, even though, as a doctor, she has more than adequate knowledge to do that.

“It depends on the questions. I always strive to bring them facts, and because I am a doctor, I have memorised them all. But if it is easier to explain with pictures, for instance, I would do that. Generally, I am open to use any media, through pictures or videos, if it helps to explain easier or better... From various channels. For topics related to sexuality, I have the knowledge, so it flows from my head. If there is anything I need to explain thoroughly and properly, I would open medical sites. I tend to access from there.” (Mother J)

“When my son was very young, I gave him encyclopaedia books that show human body. We gave (sexuality education) with the help of media. That was why when he first received (sexuality education) in Norwegian elementary school, he was not shocked. He already saw it... We actually have several books. Indonesia actually has great books for

learning about sexuality, it is just the people are not ready. Because we are not open, so we do not use those books properly. I know about sexuality since I was young, I like to read books. I know the differences between male and female from those books, I read them myself.” (Mother W)

Despite developing increasingly westernised attitudes, every weekend some Muslim mothers also send their children to Islamic Sunday School in the designated mosque, because they believe that, other than learning and reading Al-Quran, their children also receive sexuality education which is compliance with Islamic teaching. They think that it is critical that their children still learn Islamic principles through supplementary sessions at the mosque, besides the parents’ teaching at home and formal education from school.

“They learn Al-Quran in the mosque, they also discuss about it (sexuality). But their father also teaches them. Because in the mosque maybe the teachers discuss more globally and broad, but at home they can ask more details... They are supposed to be taught (sexuality education in the mosque), because my first son told us that and he also said, ‘Dad has taught us about them all.’ So he thinks his father’s explanation is more interesting. Maybe because they can discuss about more things, or the topics are more actual. Maybe he can just ask whatever is on his mind, right away. We also like to find interesting and actual (topics), and then we discuss. There are different madhhab (a school of thought within *fiqh* or Islamic jurisprudence) in the mosque, so at home we still explain that there are different madhhab in Islam, in order to not confuse him with the differences. Because we also teach him (Islam) at home, so he would not get shocked if his friends do the prayer differently. We also thrive to make him open-minded, and he always asks, and understands the *dalil* (proof or inference), why he does this and that, not merely follow people. That is also when it comes to sexuality. I ask him not to Google about it. If he does not understand something, he should ask.” (Mother J)

Nonetheless, there are also mothers who do not use any material when they educate their children about sexuality. They emphasise the information and context verbally and, sometimes, with body gestures.

### 5.3.1.3 Language Used

Out of six mothers, five said that they use Indonesian language or Bahasa Indonesia, meanwhile another said that she uses only Norwegian. However, those who use Bahasa also confessed that sometimes they have to insert or purposely mix it with Norwegian due to the limitation of Bahasa skill possessed by their children. Mother J, who is married to an Indonesian man and has two sons, addressed this specific situation.

“We always use Bahasa Indonesia at home. Maybe he would answer us with mixed languages. Since we moved here, we have already decided to use Bahasa Indonesia, even though we know their Bahasa skill is like that (not perfect). But for kids who have been living abroad for so long, I think my children have smooth Bahasa, although it is in casual

conversation level, not proper native or official level. More like daily, casual conversation level, they understand. For example, reading (in Bahasa), they can read but not necessarily understand everything on the text, because it is textual, official language. They can speak daily conversation level, but it does not mean they would always answer or respond with Bahasa. Sometimes they answer in Bahasa, and mix it with Norwegian or English in the middle.” (Mother J)

For that one mother who uses only Norwegian, she does that because her husband is Norwegian and her family members have been communicating only with Norwegian at home. She thinks it is easier to explain and discuss about sexuality in Norwegian with her son and daughter, as both children only speak fluent Norwegian.

#### **5.3.1.4 Collaboration with Spouse**

Indonesian mothers discuss and collaborate with their spouses when it comes to sexuality education provision for their children. Some of them have talked about, planned and prepared for it even before they got married. When their children enter the proper age for sexuality education and become more sexually mature, for example when they hit puberty, these parents would start to divide and arrange tasks according to the most related topics. Mothers, for instance, cover most issues related to woman reproduction, vagina, menstruation, sanitary products, etc. Meanwhile, fathers educate about penis, masturbation, Islamic shower ritual performed after sexual intercourse or seminal discharge (*ghusl* and *janaba* bath), etc.

“From the start, before me and my husband we married, we prepared for it. We thought that if we have a child, we would be open about sexuality. Sexuality is a knowledge, so it should be given properly so it would not clash with our norms and customs, it is very strict. But we are open. We want our child to understand that if he knows nothing about sexuality, he would crash a lot of norms. Not only religion norms, but also health. You know, plenty STDs... From the beginning, we agreed to teach our child openly to avoid him trying to figure out himself through other sources which we do not know if it is true or not. Better to ask his parents directly.” (Mother W)

“Me and my husband always discuss together. If our children receive sexuality education from school, we have planning, for example, my husband discusses about these topics, and I do those topics. So we have arranged our tasks.” (Mother J)

For mothers whose spouses are Norwegian, they usually ask their children to talk with their fathers concerning puberty and sexual engagement in Norwegian context as they live in Norway. Their Norwegian spouses explain topics such as common contraception used by youth in Norway and what is the proper age to use that. The Indonesian mothers believe that their Norwegian spouses have more profound, actual and contextual knowledge regarding to these issues. Nonetheless, they often still crosscheck their spouses’ answers and opinions received by their children, and then relate them with Indonesian context, so their children could learn from both perspectives.

“(My husband covers) mostly about Norwegian culture. Sometimes I still think it is taboo to talk about sex. I am afraid I will have wrong or extremely different opinion from my husband, and it could clash at my daughter’s head. So sometimes I suggest her to ask her father. ‘Ask your father first, what does he think (about it).’ So she would ask her father and then I asked her what answers she got from her father. And then I responded. If I agreed with my husband and I thought it makes sense, then I supported that answer. But if I had different opinion, I would also share it to her. ‘Mommy thinks differently. Because I come from Indonesia, I think like this. Daddy is from Norway, so he thinks like that. But because you study and live in Norway, you learn about this and your culture is like this. I can also teach you about knowledge that I got from Indonesia.’” (Mother R)

### 5.3.1.5 Important Topics

Indonesian mothers educate their children about sexuality based on their children’s age and sex. They tailor the topics according to appropriate age of their children. For example, before the hormones changed, they teach about organs and genitals. However, not only about the science part about them, they also emphasise that nobody can touch the genital, including parents, once their children know how to wipe themselves. When children hit puberty, mothers start to educate about the importance of hygiene as there are changes on the body parts, such as breasts, pubic hair, body odour, etc. Further, when children reach their peak in puberty, mothers teach more about sex and sexuality, especially more complex and sensitive topics.

“I think it should be different between girls and boys, because they are different. Also, we should consider about their age. When the kids are 7-8 years old, we discuss especially about how they protect their body. Because there are lots of paedophiles. So about how to protect their body, how to keep their body clean. More into that direction. When the kids are 10 years old, that is when we discuss about what is sexuality. Maybe they start to take interest in the opposite sex, it is normal. Maybe we discuss about puberty, why I have menstruation every month, etc.” (Mother J)

In addition, Indonesian mothers also strive to explain properly about having sexual engagement although they wait until they think that their children are mature enough to learn about it. This topic including sexual intercourse, contraception, and religion values and norms related to sex.

“I focus about (sexual engagement) the most. Maybe not for now, but really, I will teach him about how to have sex with women, the cause and consequences, when he could do it. I like to tell him that if he wants to have children, he should wait until he turns 30s. If he is able to make money, then that’s when he could do it. And if he could—this is the most taboo talk I have ever told my son—he should not have sex with lots of people. And for his first time, it should be with the right person, and if he could, wait until he gets married. That is what I always tell my son, firmly. Well, back to religion factor, right?” (Mother P)

“Be careful with making babies. It is really important. We still guard him with religion norms, so we give him sex ed by opening books with human’s organ pictures, but we also teach him that ‘the use of them’ is guarded by religion norms and values. Therefore, we always say, ‘You are a high schooler, you can now impregnant somebody’s child. Be careful with your penis. You can impregnant someone. You already know how a girl can get pregnant, right? So be careful. Later when you are a university student, you will live by your own. Do not use your penis carelessly.’” (Mother W)

### 5.3.2 Children’s Feelings and Reaction

Children have different feelings and reactions when they hear or have conversation regarding sexuality. They vary depend on several factors, for example the family dynamics, their age, and their own personalities. Children who have close bonding and get used to discussing about various things with their parents, for instance, might react indifferently or casually just like when they have general conversation. Other children are excited because sexuality is a new knowledge for them. They want to know more, especially if they are very interested in particular topics, such as surrogate mothers or LGBTQ issues. Some children would get even more enthusiastic if their parents know how to explain or talk about it, and create relaxed atmosphere. In this case, children usually are confident and comfortable to ask questions or open discussion first.

“My son asks questions, so he is usually very excited. It has been very fun. He responds very good. He is never shy. ‘Mom, what is that?’ or ‘Dad, why is that?’ That makes me and my husband excited as well. ‘Ask more, son!’ Sometimes we watch movies together, and if there is vulgar scenes suddenly, me and my husband would smirk at each other as we notice that our son is around. My son would put on poker face. And I would go, ‘Son, it looks like you are enjoying what you are watching. Is it that fun? Close your eyes, you are not adult yet.’ And he would answer, ‘Ah mom, I understand that already.’ Hahaha... Well, it would be weird if I turn off the TV in the middle of enjoying a movie just because there is a vulgar scene. Me and my husband would look uncharismatic in front of our son if we do that. It is not how we raise our child... (He is) free, super confident 100 percent.” (Mother W)

“(My son) is very confident. Because it is what I have taught him since he was young. ‘If you need to know about anything, do not be shy, just ask your mother. I am your mother, but I can also be your friend and your sister, if you’d like.’ So me and my son are like friends. We do not have limit, like parents should be respected... We have to teach our children to be confident. Self-confident and confident with us, parents. Because later on if he has a problem, he would not go to other people.” (Mother P)

Nevertheless, some children are often shy or not confident to talk about sexuality with their parents, or at least to start a conversation about it first. These children may have no idea how to begin the talk or they how their parents would react upon their questions,

especially on sensitive topics. Older children, as Hurlock (1991) highlighted, normally fancy to know more about it by themselves, so they could access different types of media to educate themselves.

“(My daughter) is not too confident, still embarrassed. She asks often, but still embarrassed. Not that she is timid. Sometimes when she has already been asking too intense, she is not embarrassed anymore. But when she suddenly asks, ‘Mommy, sorry, I want to ask...’ Then she gets embarrassed again. But if she has been talking long enough, she becomes confident again. She is embarrassed only at the beginning. Because she knows, sometimes I still get awkward to talk about sexuality.” (Mother R)

“He is basically a shy boy, so he will ask if he thinks he really needs to ask, for any question. If he does not think he needs to ask, then he will not ask. That is just how he is. He does not speak a lot too. He is very calm. If he wants to ask, he will ask in details, until he is satisfied with the answers. But if he does not feel like asking, then he will not ask. We have said multiple times, if he needs to find out something related to sexuality, he does not need to Google it, it is better to ask, because Google does not always give you correct answers. So we have always reminded him that.” (Mother J)

### 5.3.3 Challenges

Majority of Indonesian mothers admitted that they face some challenges concerning the provision of sexuality education to their children. Out of six mothers, only one said that she finds no problem about educating their children about sexuality so far as she has been very open to her children about it and the schools has helped her a lot. Meanwhile, for those who happen to face obstacles, they are mostly related to cultural and religion clashes. These mothers reflected that the cultural differences between western and eastern countries has made them think couple times to find the most decent and appropriate way to teach their children about sexuality.

Mother A, for instance, revealed that her worry has nothing to do with the sexuality education received by her children at school itself. Rather, the ‘real world’ faced by her children in Norway where locals have their own norms, uphold freedom of expression and human rights. These matters have different values in Indonesia. Other mothers apparently addressed the same worry and have similar perception with Mother A.

“Their (Norwegian locals) norms are different with our norms. Because I slip Asian culture and (Islam) religious norms in sexuality education I give to my children. Meanwhile, locals here do not even believe in God. Their education has no restriction. ‘Here I give you knowledge. It is up to you on how to use this knowledge.’ Yes, right. I think it is related to human rights. Parents cannot intervene (with their children’s business), even though they (children) are not yet adult. That is what is missing for me. They do not educate that matter.” (Mother A)

“About sexuality part, (the challenge) is the freedom itself. Freedom to think, to express opinion. Sometimes we have different opinions, she learns that, I know this. That is the challenge. She said, ‘No, Mommy. What I learned from school is like this.’ I said, ‘But again, because you are half Indonesian, Mommy should also teach you my culture as well.’ And she answered, ‘Okay, Mommy.’ For now she understands it. But in the future, we never know. There are lots of challenges in the future. Now she is still okay, she can accept it, but once she moves up to grade 5 or 6, it will be more difficult. Moreover if she becomes a teenager, I am sure I will be in a frenzy. If she does not want to accept it, like, “No, Mommy, you cannot mix your culture anymore.” I would die.” (Mother R)

Mother W exemplified cultural difference with a case faced by her family couple years ago. She told a story when her husband had to meet the head master in her son’s elementary school. Her son could not accept the rule where he should take a shower, fully naked, together with his classmates every time after physical education (PE) class in grade 7. Since her son always refused to take a shower together, he was mocked and bullied by his friends. Because of that, her son showed violent attitudes towards his friends several times. Her husband then tried to solve the problem by explaining about the cultural difference to the school. Apparently, when this case happened, the school had very few Asian students and none protested about the regulation before.

”My husband went to the head master office, and explained, ‘Genital in Indonesian language is called *‘kemaluan’* which means shame. So it is not something to be shown. It is our culture, so my son cannot accept that. Maybe he can accept shower with pants on, but the rule here is ‘to be completely naked.’ My son cannot accept that.’ They eventually understood. Since then my son got a special bathroom, or sometimes he showered the last. It was when he was at grade 7.” (Mother W)

Furthermore, the religion norms and values that they have been teaching their children about are not in line with Norwegian way of life. Although seemingly Lutheran, Norwegians are known to be irreligious. Anyone who believes in any religion must keep it to themselves as a private matter. Therefore, Indonesian mothers often tell their children about this dissimilarities, yet at the same time, ask them to be more open-minded and respectful to others. Mother J and Mother W illustrated this situation immaculately.

”Maybe because we live in a non-Muslim country, the difference is that in Islam we are taught like this, meanwhile here everything is very open, so we are allowed to do lots of things. Maybe that is the challenge: how we explain (about the differences). For me, I still want to teach him Islamic way, but without making him a narrow-minded person. Still open-minded, but at the same time he still realises that he is a Muslim. That is the challenge for me. Even though I am a doctor, if other people are different, I would be alright, but if that happens to my children, I would react. I never force him, I only listen to his thoughts. (The challenge) is about how to teach him, because I still want to teach him in Islamic way. At home (they learn) like this, but in reality they see various things, so we only say, we teach him that he needs to respect

people, whatever their choice. He can never force his perspective to anyone. We always remind him that. Because it can be—either him or he follows his friends or something—committing bullying or such thing. He should avoid that. I will never want my children stuck in that kind of situation. Respect is needed, because in Islam we are taught to respect others too, so do not force people to do things our way. Let other people do their business. In this country, let others choose their choice, the only thing that matters is that we stay like this because Islam is like this.” (Mother J)

“I told him, that this is a free country, so we should understand and know our own boundaries. “If you go to university later, you will live at dorm and be free. You are the one who controls yourself and set your own boundaries. That is what I told you about ‘fences.’ That is where those fences function, if you do not live with me anymore... We are religious family. We set our fences. So maybe we are religious to.... People here dislike to link anything with religion, because most people here are atheists. So they think religion is myth. We are the ones who need to be flexible and know where to put yourself.” (Mother W)



# Chapter Six: Discussion

This chapter discusses on how the research findings shed lights on the essential research questions, how the research implicates in policy and social work, limitation of the research, recommendations for related organisations and further research, and, finally, the conclusion of the study.

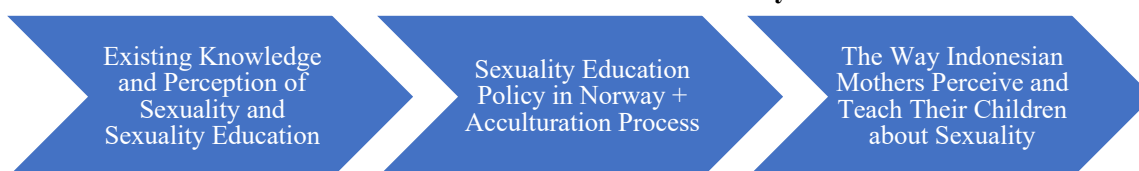
## 6.1 Discussion

The aim of this study is to gain a fundamental understanding about the perception of Indonesian mothers living in Norway in relation to sexuality education received by their children. Whereas the objectives are to generate knowledge of Indonesian immigrant mothers' perceptions of Norwegian sexuality education, to get an understanding of the differences between sexuality education in Indonesian and Norway based on Indonesian immigrant mothers' view, and to explore the way Indonesian immigrant mothers teach their children about sexuality. Through thematic analysis of six Indonesian immigrant mothers, the findings suggest that Indonesian immigrant mothers in Norway have generally positive perception regarding sexuality education received by their children at Norwegian schools. They also believe that the sexuality education in Norway and Indonesia are significantly different, and acknowledge these major differences: 1) Sexuality education in Indonesia is heavily driven by eastern or Asian culture and various religions—predominantly Islam, meanwhile Norway is an ostensibly Lutheran country and influenced by western culture; 2) There is no national curricula related to sexuality education in Indonesia, while on the contrary, the Norwegian government provide compulsory comprehensive sexuality education to students and has issued the national curricula where they inserted topics related to sexuality in various subject. These perceptions and realisations have affected the way they teach their children about sexuality, from how they build the atmosphere, how intense they conduct it, how they find and utilise supplementary materials, what language they use, how they collaborate with their spouse, to how they decide which important topics to be delivered to their children.

Acculturation process plays pivotal role in shaping or transforming the teaching style of these mothers. This is consistent with what has been found in previous study conducted by Berry (1997) in which he argued that personal features prior to acculturation, including age, gender, educational background, migration reason, cultural distance (language and religion), etc. In this case, Indonesian mothers have had existing knowledge and perception of sexuality and sexuality education which they have learned and shaped in Indonesia. They then moved to Norway due to various reasons, for example getting married to Norwegians or working in oil and gas companies. Once their family settled down in Norway, they started to send their children to Norwegian schools where the kids receive sexuality education since elementary school until high school. They learned that the sexuality education in the country is significantly different with what they have had in Indonesia. However, they have been exposed to cultural and religious differences and acknowledged them, also experiencing acculturation process. Some mothers who came from conservative families in Indonesia, for instance, began to open their mind and accept the blatant, progressive, and comprehensive sexuality education in Norway. They have generally positive perception of it and support related policies, because they believe that children should learn about sexuality comprehensively and properly to be able to differentiate what

is right and wrong in their life, especially in terms of their body, the authority related to it, and sexual engagement. Nevertheless, they still insist on trying to include Indonesian culture and respective religious values in their sexuality education teaching. The sexuality education policy in Norway, combined with the acculturation process experienced by these Indonesian mothers, generated diverse styles in educating their children about sexuality.

**Figure 6.1 Process on how Indonesian immigrant mothers perceive sexuality education received by their children in Norway and how it shapes the way they teach their children about sexuality**



(created by the author)

One of the critical findings is these Indonesian mothers feel that schools help them to start having conversation with their children at home about sexuality issues. They admitted that, before they knew how Norwegian schools teach sexuality, it was tricky and challenging to talk about this topic with their children, particularly for mothers who have had conservative family back in Indonesia. They appreciate the existence of such system and find it beneficial.

Of every surprise I found during my research, the most serendipitous was uncovering how receptive Indonesian immigrant mothers are. Before this research, I predicted that they would resist having their children learn about sexuality in a progressive way like what their children have at school, mainly because most of them claimed that their family still uphold religious principles. Their answers have demonstrated that they are tolerant and willing to consider new ideas and change as long as it is beneficial to the development of their children. Most of them answered the questions and told stories, including the seemingly private ones, in a very relaxed tone. Only one mother, who is the most conservative among all, sounded a bit shy when she answered certain inquiries, but she still managed to answer most of them clearly. It was also unexpected that only one out of six mothers has ever eschewed open discussion about sexuality with their children. Most of them still carry on having conversation regarding this issue, albeit different approaches. They strive to bring factual and accurate information related to sexuality to their children, even though some of them admitted to face difficulties or become embarrassed in the beginning.

The way these Indonesian immigrant mothers pointed out, and then managed to elaborate, the differences between sexuality education in Norway and Indonesia also explains that they adequately comprehend the situation in both countries. With such level of comprehension, they can also decide which style is the most suitable and effective for their children, despite having various options.

Personally, I am also astonished by the finding about the language used. Five out of six mothers apparently still use Bahasa Indonesia frequently at home, as well as when they teach sexuality to their children. They show a remarkable effort to insist on inserting Indonesian culture, although their children use Norwegian more extensively outside their house.

## **6.2 Implication for Policy and Recommendation**

### **6.2.1 Recommendation for Indonesia**

There is no national curricula related to sexuality education in Indonesia (IPPF, 2013). Rather, sexual education in Indonesia is still very sporadic. Moreover, according to the current criminal provisions in the Criminal Code listed in Article 534, it is illegal to display or show contraception to children. These policy and regulation are rather detrimental for sexuality education in Indonesia. Meanwhile, UNFPA (2014) has suggested that sexuality education programs should be evidence-based, and one of the essential components is to be thorough and scientifically accurate information.

First of all, it would be beneficial if the government could attenuate the stigma of ‘sex is taboo’ and familiarise sexuality education. To achieve this end, the state could begin to spread awareness and conduct capacity building on comprehensive sexual education for state officials from all levels, as well as regular or private workers, particularly those who work in education, health, children and family welfare, and population sectors. The government could utilise data, statistics, relevant studies, and employ experts to remove negative stigma about sexuality education.

If the government and public officials are familiarised with sexuality education, they might have better understanding and notice the importance of this learning for Indonesian children, as well as Indonesian people in general. They could then create policies which could transform the Indonesian sexuality education into the better, more comprehensive and evidence-based version of it. The transformation is not necessarily copying Norwegian or Scandinavian progressive and comprehensive style directly. Rather, the state could still insert and ‘mix-and-match’ it with Indonesian culture, norms and values.

Related institutions, whether governmental or nongovernmental, could cooperate to organise a program related to sexuality education. For example, sexuality clinics widely spread in various regions where youth and children could consult, talk, and learn more about sexuality in person with experts. The service provision should be free of charge, also adolescent and child-friendly. This will be advantageous for young people who are embarrassed to talk about sexuality matters with their parents and friends, or afraid of their conservative parents and family members.

The finding about sexuality education at school helps parents to open discussion about sexuality is particularly important because it verifies that some parents actually need assist from school to do that. Materials from school or school-parents meeting to coordinate that is needed in Indonesia.

### **6.2.2 Recommendation for Norway**

Based on the research findings, the participants voiced their concern regarding the lack of social aspects in Norwegian comprehensive sexuality education. Therefore, it would be auspicious if Norwegian government could add and emphasise the social sides of having sexual engagement, for example, the responsibilities and struggles teenage mothers have. This would complement the currently existing comprehensive materials. Nevertheless, this view still needs to be evaluated more, perhaps with other groups or population. It is also feasible to explore this insights quantitatively.

### 6.2.3 Recommendation for further research

This research will have more comprehensive results if children's voice was involved. For example, on this research, there are questions regarding children's feelings and reaction upon their parents, in this case mothers, teaching on sexuality education at home. The answers we have here is only from the mothers' perspective. It might be different on the children's views. Even one of the participants asked me why I did not ask her daughter as well because she was sure that her daughter has her own answers concerning those questions.

"Why don't you try to ask my daughter? She is downstairs. I am sure she has her own answers, and her perspective is usually on point. She is very mature for a 10 years old." (Mother R)

The research question would, for instance, revolve around: 1) How children perceive sexuality education they receive from their parents at home; 2) How important, informative, or relevant is that knowledge for their life; 3) What are the challenges they face when they talk about sexuality with their parents; and 4) What do they think should be improved regarding the sexuality education they receive from their parents. This research could be conducted both qualitatively and quantitatively, in big cities in order to gain richer and broader results.

Additionally, the opinions of fathers would also complement the current result findings. One of mothers was accompanied by her husband during interview for this study. Her husband did not participate to the interview, but he listened to it and seemed to be very interested with the topic. It will also be more interesting to conduct focus group discussion (FGD) where mothers, fathers, and children present. With this method, researchers could have extensive answers from all sides.

## 6.3 Limitation

This study was limited to Stavanger area, located in southwest Norway; therefore, results may not be indicative of all Norway. As Stavanger is the fourth biggest city in Norway and quite international, these mothers and their family are more likely to be exposed and get used to diversity and openness. There is possibility of difference perception by other Indonesian immigrant mothers who live in other parts of Norway.

This research would have more comprehensive results if children's voice was involved. The opinions of fathers would be valuable as well. However, these were beyond the scope of this study.

Furthermore, in the beginning, I also tried to include mothers, whose children are in the early years of elementary schools, to be my participants in order to have variations on the answers. However, these mothers seemed to have no idea about the sexuality education and admitted that they never know that their children have such learning so far. From them I know that in Stavanger, students only start to learn about it in grade 6. Since then, I realised that I should have done more research about the starting point of formal sexuality education in Norwegian schools, especially some regions have different policy regarding this. For example, three mothers moved from Trondheim to Stavanger couple years ago. They

figured out that Trondheim and Stavanger have different starting points. Trondheim is in grade 5, whereas Stavanger in grade 6.

In addition, coronavirus pandemic situation have made it difficult to conduct face-to-face meetings, therefore interviews were organised through video and phone calls where technical problems occurred several times.

## **6.4 Conclusion**

In conclusion, the evidence from participants' testimonies and observations indicate that Indonesian immigrant mothers in Norway have generally positive perception regarding sexuality education received by their children at Norwegian schools. They also perceive that the sexuality educations in Norway and Indonesia are significantly different. The most noticeable dissimilarities are concerning culture and religion, and the sexuality education policies. These perceptions and realisations have affected the way they teach their children about sexuality. At the same time, acculturation process plays pivotal role in shaping or transforming the teaching style of these mothers.

There are rooms to improve for both Norwegian and Indonesian sexuality education. To achieve them, Norwegian government could add and emphasise the social aspects of a having sexual engagement, for example the responsibilities and struggles teenage mothers have. Whereas Indonesian government needs to attenuate the stigma of 'sex is taboo' and familiarise sexuality education.

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# Appendix


## Appendix A : Non-plagiarism declaration

I hereby declare that the Dissertation titled: *Perceptions of Indonesian Immigrant Mothers of Norwegian Sexuality Education*, submitted to the Erasmus Mundus Master's Program in Social Work with Families and Children:

- Has not been submitted to any other Institute/University/College
- Contains proper references and citations for other scholarly work
- Contains proper citation and references from my own prior scholarly work
- Has listed all citations in a list of references.

I am aware that violation of this code of conduct is regarded as an attempt to plagiarize, and will result in a failing grade (F) in the program.

Date : 15<sup>th</sup> of July 2020

Signature :  .....

Name (in block letters): **RESTY ARMENIA**

## **Appendix B: Interview Guide**

Background information

Origin:

Age:

Period of living in Norway:

Number of child(ren):

Age of child(ren):

Nationality of partner:

### **Sexuality Education in Norway**

1. Does your child get formal streams of information regarding sexuality education? For example: sex or sexuality education classes, books, and public library
2. Does the school inform you about what they teach regarding sexuality to your child?
3. Does the school coordinate with you regarding sexuality education your child should have at school and home?
4. How do you think about sexuality education your child receive at school?
5. How do you think about sexuality education your child receive from other channels? For example: television programs and official websites
6. How do you think about sexuality education in Norway?

### **The Differences between Sexuality Education in Indonesia and Norway**

1. How do you think about sexuality education in Indonesia?
2. How do you think sexuality education in Indonesia, compared to sexuality education in Norway?
3. Do you think sexuality education in Indonesia and Norway are different?
4. If different, what are the differences?
5. If indifferent, what are the similarities?

### **Educating Children about Sexuality**

1. How do you talk about sexuality with your child?
2. How often do you talk about sexuality with your child?
3. In what language do you educate your child about sexuality?
4. How do you educate your child about sexuality?
5. What are the important topics in teaching about sexuality?
6. How do you talk about sensitive topics?
7. Do you use material when you talk about sexuality with your child?
8. How do you find, assess, look for information about sex education that supplements what your child is already receiving in the formal streams?
9. How does your child react when they talk and learn about sexuality with you?
10. How often your child ask about sexuality to you?
11. How do you and your spouse collaborate and coordinate the way you teach about sexuality to your children?
12. How confident do you think your child feel about asking you questions related to sexuality?
13. What are the challenges in teaching about sexuality?

## **Appendix C: Consent Form & NSD Notification**

### **Are you interested in taking part in the research project “Perceptions of Indonesian Immigrant Mothers of Norwegian Sexuality Education”?**

This is an inquiry about participation in a research project where the main purpose is to gain a fundamental understanding about the perception of Indonesian mothers living in Norway in relation to sexuality education received by their children. In this letter we will give you information about the purpose of the project and what your participation will involve.

#### **Purpose of the project**

The purpose of the project are to generate knowledge of Indonesian immigrant mothers' perceptions of Norwegian sexuality education, to get an understanding of the differences between sexuality education in Indonesian and Norway based on Indonesian immigrant mothers' view, and to explore the way Indonesian immigrant mothers teach their children about sexuality.

This is a master's thesis research and the collected personal data will not be used for other purposes after the end of the project.

#### **Who is responsible for the research project?**

University of Stavanger is the institution responsible for the project.

#### **Why are you being asked to participate?**

You have been selected as you are matched with selection criteria, such as being Indonesian immigrant mother living in Stavanger, Norway and have child(ren) who receives Norwegian sexuality education. Seven other participants are selected with the same criteria.

#### **What does participation involve for you?**

If you chose to take part in the project, this will involve that you answer an interview. It will take approximately 60 minutes. The interview includes questions about sexuality education in Indonesia and Norway, also how you teach your child(ren) about sexuality. Your answers will be voice-recorded.

#### **Participation is voluntary**

Participation in the project is voluntary. If you chose to participate, you can withdraw your consent at any time without giving a reason. All information about you will then be made anonymous. There will be no negative consequences for you if you chose not to participate or later decide to withdraw.

#### **Your personal privacy – how we will store and use your personal data**

We will only use your personal data for the purpose(s) specified in this information letter. We will process your personal data confidentially and in accordance with data protection legislation (the General Data Protection Regulation and Personal Data Act).

- The student and supervisor will have access to the personal data
- I will replace your name and contact details with a code. The list of names, contact details and respective codes will be stored separately from the rest of the collected data. I will store the data on my personal laptop and lock it.

### **What will happen to your personal data at the end of the research project?**

The project is scheduled to end on 3 June 2020. The personal data, including any digital recordings, will be completely erased at the end of the project.

### **Your rights**

So long as you can be identified in the collected data, you have the right to:

- access the personal data that is being processed about you
- request that your personal data is deleted
- request that incorrect personal data about you is corrected/rectified
- receive a copy of your personal data (data portability), and
- send a complaint to the Data Protection Officer or The Norwegian Data Protection Authority regarding the processing of your personal data

### **What gives us the right to process your personal data?**

We will process your personal data based on your consent.

Based on an agreement with the University of Stavanger, NSD – The Norwegian Centre for Research Data AS has assessed that the processing of personal data in this project is in accordance with data protection legislation.

### **Where can I find out more?**

If you have questions about the project, or want to exercise your rights, contact:

- *University of Stavanger* via Richard Piech, by email: ([richard.piech@uis.no](mailto:richard.piech@uis.no))
- Our Data Protection Officer: Rolf Jegervatn, by email: ([rolf.jegervatn@uis.no](mailto:rolf.jegervatn@uis.no)) or by telephone: +47 51 83 30 81.
- NSD – The Norwegian Centre for Research Data AS, by email: ([personverntjenester@nsd.no](mailto:personverntjenester@nsd.no)) or by telephone: +47 55 58 21 17.

Yours sincerely,

Project Leader  
(Richard Piech)

Student  
(Resty Armenia)

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## **Consent form**

I have received and understood information about the project “Perceptions of Indonesian Immigrant Mothers of Norwegian Sexuality Education” and have been given the opportunity to ask questions. I give consent:

- ☐ to participate in an interview

I give consent for my personal data to be processed until the end date of the project, approx. 3 June 2020.

-----  
(Signed by participant, date)

# NSD NORSK SENTER FOR FORSKNINGSDATA

## NSD sin vurdering

### Prosjekttittel

Perceptions of Indonesian Immigrant Mothers of Norwegian Sexuality Education

### Referansenummer

324862

### Registrert

08.03.2020 av Resty Armenia - r.armenia@stud.uis.no

### Behandlingsansvarlig institusjon

Universitetet i Stavanger / Det samfunnsvitenskapelige fakultet / Institutt for sosialfag

### Prosjektansvarlig (vitenskapelig ansatt/veileder eller stipendiat)

Rolf Jegervatn, rolf.jegervatn@uis.no, tlf: 51833081

### Type prosjekt

Studentprosjekt, masterstudium

### Kontaktinformasjon, student

Resty Armenia, restyarmenia@gmail.com, tlf: 41384840

### Prosjektperiode

01.02.2020 - 03.06.2020

### Status

16.04.2020 - Vurdert

## Vurdering (1)

---

### 16.04.2020 - Vurdert

Our assessment is that the processing of personal data in this project will comply with data protection legislation, so long as it is carried out in accordance with what is documented in the Notification Form and attachments, dated 16.04.2020, as well as in correspondence with NSD. Everything is in place for the processing to begin.

### NOTIFY CHANGES

If you intend to make changes to the processing of personal data in this project it may be necessary to notify NSD. This is done by updating the Notification Form. On our website we explain which changes must be notified. Wait until you receive an answer from us before you carry out the changes.



## TYPE OF DATA AND DURATION

The project will be processing special categories of personal data about ethnicity, religious and philosophical beliefs and sexual orientation, and general categories of personal data, until 03.06.2020.

## LEGAL BASIS

The project will gain consent from data subjects to process their personal data. We find that consent will meet the necessary requirements under art. 4 (11) and 7, in that it will be a freely given, specific, informed and unambiguous statement or action, which will be documented and can be withdrawn.

The legal basis for processing special categories of personal data is therefore explicit consent given by the data subject, cf. the General Data Protection Regulation art. 6.1 a), cf. art. 9.2 a), cf. the Personal Data Act § 10, cf. § 9 (2).

## PRINCIPLES RELATING TO PROCESSING PERSONAL DATA

NSD finds that the planned processing of personal data will be in accordance with the principles under the General Data Protection Regulation regarding:

- lawfulness, fairness and transparency (art. 5.1 a), in that data subjects will receive sufficient information about the processing and will give their consent
- purpose limitation (art. 5.1 b), in that personal data will be collected for specified, explicit and legitimate purposes, and will not be processed for new, incompatible purposes
- data minimisation (art. 5.1 c), in that only personal data which are adequate, relevant and necessary for the purpose of the project will be processed
- storage limitation (art. 5.1 e), in that personal data will not be stored for longer than is necessary to fulfil the project's purpose

## THE RIGHTS OF DATA SUBJECTS

Data subjects will have the following rights in this project: transparency (art. 12), information (art. 13), access (art. 15), rectification (art. 16), erasure (art. 17), restriction of processing (art. 18), notification (art. 19), data portability (art. 20). These rights apply so long as the data subject can be identified in the collected data.

NSD finds that the information that will be given to data subjects about the processing of their personal data will meet the legal requirements for form and content, cf. art. 12.1 and art. 13.

We remind you that if a data subject contacts you about their rights, the data controller has a duty to reply within a month.

## FOLLOW YOUR INSTITUTION'S GUIDELINES

NSD presupposes that the project will meet the requirements of accuracy (art. 5.1 d), integrity and confidentiality (art. 5.1 f) and security (art. 32) when processing personal data.

To ensure that these requirements are met you must follow your institution's internal guidelines and/or consult with your institution (i.e. the institution responsible for the project).

## FOLLOW-UP OF THE PROJECT

NSD will follow up the progress of the project at the planned end date in order to determine whether the processing of personal data has been concluded.

Good luck with the project!

Contact person at NSD: Kajsa Amundsen  
Data Protection Services for Research: +47 55 58 21 17 (press 1)