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Religious Knowledge Mediates between the Knowledge about Reproductive Health and Self-Esteem of Malaysian Adolescents

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Abstract

Knowledge of reproductive health among adolescents is a matter of great concern for both parents and educational institutes in Malaysia; with the development of self-esteem in Malaysian youngsters. Lack of reproductive knowledge may lead to a plethora of issues. Therefore, this study sought to quantify the mediating role of religious knowledge between the knowledge of reproductive health and self-esteem of Malaysian adolescents. The study employed a quantitative research design in which self-administered surveys were used to collect data from 400 high school students belonging to 16 hot spot schools in the Seremban district of Malaysia. Purposive sampling technique was used to select 25 students from each school. Regression analysis revealed that the knowledge of sexuality and reproductive health have a significant impact on the self-esteem of adolescents. Furthermore, mediation analysis also exhibited the intermediary role of religious knowledge between the knowledge of reproductive health and self-esteem of Malaysian adolescents. Suggestions have been given to promote such programs in educational institutes by the ministry of education which would help to promote the reproductive health and self-esteem of Malaysian adolescents keeping in view scientific prospects of religious teachings.

Keywords: adolescents, Malaysia, religious knowledge, reproductive health, self-esteem

Introduction

Adolescence is a stage of development in which physical, cognitive, psychological and socio-cultural changes frequently occur.¹ While considering the physical changes, adolescent's sexuality and knowledge of reproductive health represent an area that

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¹Caludia B. Chaves, Manuela T. Bento, Manuela C. Ferreira, and João C. Duarte, "Knowledge About HIV/AIDS: The Influence of Lifestyles and Self-Regulation in Adolescents," *The European Journal of Counselling Psychology* 2, no. 2 (2013): 102-110. doi:10.5964/ejcop.v2i2.34.

frequently catches the interest of researchers, policy makers, and health practitioners. Adolescents learn and practice their religious teachings and are expected to spend their lives strictly in the light of their religion. On account of being an Islamic country citizens, Malaysian adolescents are facing sexual and reproductive health problems like other young populations of the world. In many Asian countries, reproductive health and related issues are still considered as taboo, therefore, it is difficult for adolescents to acquire proper guidance, appropriate knowledge and services related to sexual and reproductive health - predominantly in the young age.² This triggers curiosity in them, resultantly likelihood of adopting negative behaviors can increase.³ Particularly, sexual fantasies and provocations lead toward frustration, confused identity and deteriorated self-esteem.⁴ It has been observed that individuals with low self-esteem suppress their ability to express sexual needs, but high self-esteem leads to a healthy sexual behavior.⁵

In addition to self-esteem, exposure and experience of religious knowledge would also help prevent adolescents from getting involved in unhealthy sexual activities. Religion is subjectively considered that it will provide the recognition of all duties as the observance of divine command.⁶ Moreover, the presence of religion as mediating factor in various psychosocial issues helps us understand more precisely the ways in which religion actually brings impact on human life.⁷ Religious youth tends to show less interest in risky sexual activities.⁸ Islam is an official religion in Malaysia and premarital sex is forbidden in Islam but despite the fact, a number of young adolescents get involved in sexual activities before marriage— that is alarmingly increasing each year.⁹ This increase is linked to lack of sexual

²Mazlina C. Mustapa, Khaidzir H. Ismail, Mohd S. Mohamad, Fauziah Ibrahim, and Muhammad Saleem, “Knowledge on Sexuality and Reproductive Health of Malaysian Adolescents: A Preliminary Study,” *International Journal of Management and Applied Science* 2, no 7 (2016): 235-239.

³S. Hardy, “Adolescent Religiosity and Sexuality: an Investigation of Reciprocal Influences,” *Journal of Adolescence* 26, no. 6 (2003): 731-739. doi:10.1016/j.adolescence.2003.09.003.

⁴M. Minev, B. Petrova, K. Mineva, M. Petkova, and R. Strebkova, “Self-Esteem in Adolescents,” *Trakia Journal of Science* 16, no. 2 (2018): 114-118. doi:10.15547/tjs.2018.02.007.

⁵Jacek Durmała, Irmira Blicharska, Agnieszka Drosdzol-Cop, and Violetta Skrzypulec-Plinta, “The Level of Self-Esteem and Sexual Functioning in Women with Idiopathic Scoliosis: A Preliminary Study,” *International Journal of Environmental Research and Public Health* 12, no. 8 (2015): 9444-9453.

⁶Travis Dumsday, “Kant on Religion within the Boundaries of Mere Reason (Lawrence R. Pasternack),” *American Catholic Philosophical Quarterly* 90, no. 4 (2016): 761-765.

⁷Timothy W. Jones, “Religion, Gender and Sexuality in Everyday Life,” *Culture, Health and Sexuality* 15, no. 10 (2013): 1253-1255. doi:10.1080/13691058.2013.831526.

⁸Noor A. Muhammad, Khadijah Shamsuddin, Zaharah Sulaiman, Rahmah M. Amin, and Khairani Omar, “Role of Religion in Preventing Youth Sexual Activity in Malaysia: A Mixed Methods Study,” *Journal of Religion and Health* 56, no. 6 (2016): 1916-1929. doi:10.1007/s10943-016-0185-z.

⁹Shahla Soleymani, Hejar Abdul Rahman, Rampal Lekhray, Nor A. Mohd Zulkefli, and Nasrin Matinnia, “A Cross-Sectional Study to Explore Postgraduate Students’ Understanding of and

knowledge and awareness among the Malaysian adolescents. Therefore, several sexual health programs are launched to take care of this issue. It was also reported that sex education programs and the knowledge about sexuality given by religious community contradicts/conflicts.¹⁰ The Malaysian adolescents have extremely less awareness regarding general reproductive health and specially knowledge regarding pregnancy, sexually transmitted infections and disease.¹¹ Healthy sexual and reproductive health increases the level of self-esteem in adolescents.¹² For the purpose, current study has thought-out to quantify the linkages between sexual and reproductive health education and self-esteem of Malaysian adolescents. Particularly, we are interested to see mediating role of religious knowledge between the said variables.

1.1. Research Objectives

This study is intended to achieve the following objectives:

1. To investigate the impact of sexual and reproductive health on self-esteem of Malaysian adolescents.
2. To quantify the mediating role of religious knowledge between sexual and reproductive health and self-esteem of Malaysian adolescents.

1.2. Significance of Research

This study seeks to provide the insight regarding sexual and reproductive health education and self-esteem of Malaysian adolescents. The aspects of religious knowledge among teenagers in Malaysia are also evaluated in our research. As experiences and exposure related to religious and legal knowledge can prevent them from pre-marital sex and unhealthy sexual activities which is a serious offense in the Malaysian law. In this regard, it is expected this study will assist the police in providing detailed information on knowledge of sexuality and reproductive health among students. The study would also look at adolescent psychology related to the level of self-esteem to be studied by researchers in line with previous studies. This study focuses on the relevance of adolescent religious

Beliefs about Sexual and Reproductive Health in a Public University, Malaysia,” *Reproductive Health* 12, no. 1 (2015). doi:10.1186/s12978-015-0070-3.

¹⁰David M. McCarty-Caplan, “Schools, Sex Education, and Support for Sexual Minorities: Exploring Historic Marginalization and Future Potential,” *American Journal of Sexuality Education* 8, no. 4 (2013): 246-273. doi:10.1080/15546128.2013.849563.

¹¹Linda A. Berne, and Barbara K. Huberman, “Lessons Learned: European Approaches to Adolescent Sexual Behavior and Responsibility,” *Journal of Sex Education and Therapy* 25, no. 2-3 (2000): 189-199. doi:10.1080/01614576.2000.11074347.

¹²Charlene Kennedy, and Katherine Covell, “Violating the Rights of the Child through Inadequate Sexual Health Education,” *The International Journal of Children's Rights* 17, no. 1 (2009): 143-154. doi:10.1163/092755608x278939; Kristin A. Haglund, and Richard J. Fehring, “The Association of Religiosity, Sexual Education, and Parental Factors with Risky Sexual Behaviors among Adolescents and Young Adults,” *Journal of Religion and Health* 49, no. 4 (2009): 460-472. doi:10.1007/s10943-009-9267-5.

beliefs. Religious education is also seen as capable of resisting negative behaviors and elements that are contrary to religious teachings. Therefore, this study would establish the role of knowledge on sexuality and reproductive health as an important factor for the psychosocial health of Malaysian adolescents.

1.3. Research Hypotheses

H₁: There is significant impact of sexual and reproductive health on self-esteem of adolescents in Malaysia.

H₂: Religious knowledge plays mediating role between sexual and reproductive health and self-esteem among adolescents in Malaysia.

2. Literature Review

The lack of the presence of sexual and reproductive health has been a serious concern and this health is being studied since many years. It is believed that the curiosity to get adequate knowledge on sexuality affects different areas of individual's psychological health. A study concluded that high self-esteem in students show more knowledge about reproductive health and sexuality. Such individuals tend to demonstrate more responsible and positive attitude towards healthy lifestyles and health promoting educational activities.¹³ Studies of religion and sexuality commonly find that religious beliefs and/or activities are associated with more conservative sexual attitudes, later initiation of sexual behavior, and a narrower range of sexual experiences.¹⁴ The study has also reported a relationship between religion and adolescent sexual activity.¹⁵ Research into the sexual attitudes and behavior of religiously diverse youth found that the religious youth sustain more conservative attitude towards sexual activities, poor level of sexual health knowledge as compared to those who are less religious. Every different religion have different beliefs, for instance study conducted on Christians male students showed that students reported very liberal attitudes towards the sexual activities and they were found to be more sexually active and getting involved in teenage pregnancy, whereas they also reported poor level of sexual health.¹⁶ Moreover, lower level of sexual knowledge could lead towards health hazards and will affect the self-esteem of individual. On the other hand, the relationship

¹³Manuela Ferreira, Manuela Bento, Cláudia Chaves, and João Duarte, "The Impact of self-Concept and Self-esteem in Adolescents' Knowledge about HIV/AIDS," *Procedia - Social and Behavioral Sciences* 112 (2014): 575-582. doi:10.1016/j.sbspro.2014.01.1204.

¹⁴Beth A. Visser, "Psychopathy and Sexuality," *Routledge International Handbook of Psychopathy and Crime* (2018), 371-381. doi:10.4324/9781315111476-24.

¹⁵Jas Jaafar, Istiqomah Wibowo, and Tina Afiatin, "The Relationship between Religiosity, Youth Culture, and Premarital Sex among Malaysian and Indonesian Adolescents," *Asia Pacific Journal of Social Work and Development* 16, no. 2 (2006): 5-18. doi:10.1080/21650993.2006.9755999.

¹⁶Lester M. Coleman, and Adrienne Testa, "Sexual Health Knowledge, Attitudes and Behaviours: Variations among a Religiously Diverse Sample of Young People in London, UK," *Ethnicity and Health* 13, no. 1 (2008): 55-72. doi:10.1080/13557850701803163.

between self-esteem and religiosity with reference to young adults revealed the positive association between both.¹⁷ However, religious youth report more difficulty in discussing sexuality issues with parents or their family members. Therefore, some religious youth may be at risk of experiencing sexual shame and low self-esteem around what is safe and what is permitted within their religions' beliefs. Owing to lack of comprehensive school-based programs, parental poor knowledge and discomfort in providing sexual health education, problems are arising. Another study exploring the strength of religious belief and health risk factors found that strong religious belief (high religiosity) was a protective factor against risky behaviors specifically early sexual and risky sexual behavior in adolescents.¹⁸

It is believed that parents are arguably the most capable of providing the cultural and religious balance regarding sexual health education without harming the self-esteem of adolescents.¹⁹ Although many parents may feel uncomfortable discussing sexual health issues.²⁰ Since Malaysia is an Islamic country, it follows several cultural and religious restrictions. It has been reported that there is dire need to address the increasing concerns regarding the reproductive health of adolescents. Besides, the studies of sexual knowledge and reproductive health among students attending school are few in Malaysia.²¹ There have been studies showing that lack of exposure to aspects of education or sexual knowledge and reproductive health in society causes social problems but the effectiveness of comprehensive sex education has been found to reduce risk of sexual behavior.²² So, it is expected that our study would significantly contribute towards the existing body of

¹⁷Jochen E. Gebauer, Constantine Sedikides, and Wiebke Neberich, "Religiosity, Social Self-Esteem, and Psychological Adjustment," *Psychological Science* 23, no. 2 (2012): 158-160. doi:10.1177/0956797611427045.

¹⁸Donna H. McCree, Gina M. Wingood, Ralph Di Clemente, Susan Davies, and Katherine F. Harrington, "Religiosity and Risky Sexual Behavior in African-American Adolescent Females," *Journal of Adolescent Health* 33, no. 1 (2003): 2-8. doi:10.1016/s1054-139x(02)00460-3.

¹⁹Juliette D Goldman, "Responding to Parental Objections to School Sexuality Education: a Selection of 12 Objections," *Sex Education* 8, no. 4 (2008): 415-438. doi:10.1080/14681810802433952.

²⁰Meda V. Pop, and Alina S. Rusu, "The Role of Parents in Shaping and Improving the Sexual Health of Children – Lines of Developing Parental Sexuality Education Programmes," *Procedia - Social and Behavioral Sciences* 209 (2015): 395-401. doi:10.1016/j.sbspro.2015.11.210.

²¹Azriani A. Rahman, Razlina A. Rahman, Shaiful B. Ismail, Mohd I. Ibrahim, Siti H. Ali, Halim Salleh, and Wan A. Wan Muda, "Factors Associated With Attitude Toward Premarital Sexual Activities Among School-Going Adolescents in Kelantan, Malaysia," *Asia Pacific Journal of Public Health* 27, no. 2 (2012): NP1549-NP1556. doi:10.1177/1010539512449856.

²²Noor A. Muhammad, Khadijah Shamsuddin, Zaharah Sulaiman, Rahmah M. Amin, and Khairani Omar, "Role of Religion in Preventing Youth Sexual Activity in Malaysia: A Mixed Methods Study," *Journal of Religion and Health* 56, no. 6 (2016): 1916-1929. doi:10.1007/s10943-016-0185-z; Low W.Y, "Malaysian Youth Sexuality: Issues and Challenges," *Journal of Health and Translational Medicine* 12, no. 1 (2009): 3-14. doi:10.22452/jummec.vol12no1.2.

knowledge related to the effects of sexuality and reproductive health on several factors among Malaysian adolescents.

3. Research Methodology

3.1. Sample Characteristics

The study involved 400 high school students in from Seremban district of Malaysia selected based on several criteria. All the selected schools were under Seremban District Education Office, Negeri Sembilan. The selected hot spot schools consisted of twelve (12) schools from urban areas and four (4) rural schools. The position of urban and rural schools was determined by the Negeri Sembilan Education Department. Each school provided 25 students on the basis of criteria mentioned below;

- i) Respondents were aged 14 and 16.
- ii) Respondents were in hotspot schools around Seremban area. The list of schools is given below in Table 1.
- iii) Respondents are problematic students whose selection is determined by the school after the researcher has provided guidelines to the School Relation Officer (SRO).

Table 1. List of names of Seremban district hot spot schools

Names of Seremban District Hot Spot Schools

1. Seremban National Secondary School 3, Seremban (B)
2. Seremban Jaya National Secondary School, Seremban (B)
3. Regional National High School, Seremban (LB)
4. Ampang Vocational College, Seremban (B)
5. Seri Morning High School, Seremban (B)
6. Dato Klana Prince National Serving School, Seremban (LB)
7. Senawang National Secondary School 3, Seremban (B)
8. Dato 'Hj Mohd Reza National Secondary School, Seremban (B)
9. KLIA Complex National High School, Seremban (LB)
10. Seri Ampangan Secondary School, Seremban (B)
11. Dato 'Shamsudin Naim National High School, Seremban (LB)
12. Pastor Za'ba National Serving School, Seremban (B)
13. Bukit Merah National High School, Seremban (B)
14. Mambau National Secondary School, Seremban (B)
15. Chan Wa National Secondary School, Seremban (B)
16. ACS Methodist Secondary School, Seremban (B)

B- Urban; LB- Rural

3.2. Sample Size Determination

In this study, the researcher has referred to the formula for determining the number of samples presented by Krecjie and Morgan²³ table using 5% sampling error and 95% confidence level. A sample size of 384 is sufficient to represent a population of 100,000. The sample selection in this study was 400 adolescents that represent the population. The calculated sampling error was 4.9%.

3.3. Data Collection

Prior to conducting the study, the researcher first sought permission from the Ministry of Education Malaysia (MOE), as the respondents were secondary school students in Seremban district. Through school relation officer, 16 hot spot schools around Seremban district were selected to include in this study. Hot spot schools were identified by the Ministry of Education as schools that were at risk from crime, involvement of sexual activities and discipline related problems. A mutual agreement was signed for maintaining the confidentiality of information provided by the participants between researcher and school relation officer. A total of 25 sets of questionnaires were provided for each school relation officer to distribute among second and fourth grade students. After obtaining the number of respondents of the study with mutual consent, the study began with all the procedures fulfilled.

3.4. Measurement Instruments

3.4.1. General Knowledge of Reproductive and Sexual Health of Teenagers

Researchers used a questionnaire developed in collaboration with the National Population and Family Development Board and Consultants (LPPKN)²⁴ aimed at measuring the level of general knowledge of adolescents on reproductive and sexual health. In total, the questionnaire consisted of 16 items which contained knowledge and understanding on sexual relationships (3 items), how to avoid pregnancy (4 items), switching partners (1 item), infection (4 items), abortion (1 item), probability of pregnancy (1 item), maturity (puberty) (1 item), and underage sex (1 item). This questionnaire assesses the extent to which adolescents' knowledge of sexual relationships and reproductive health are general.

3.4.2. Religious Knowledge Questionnaire

Researchers used the Religious Appreciation Questionnaire developed by Department

²³Robert V Krejcie, and Daryle W. Morgan, "Determining Sample Size for Research Activities," *Educational and Psychological Measurement* 30, no. 3 (1970): 607-610. doi:10.1177/001316447003000308.

²⁴National Population and Family Development Board, "Risk Factors and Protocols Study on Reproductive and Sexual Health of Adolescents in Peninsular Malaysia," (2012), UKM Consultant. SMB Bangi.

of Islamic Development Malaysia²⁵ to measure the extent to which the study subjects viewed religion as a factor contributing to positive change and a hindrance from doing things prohibited by religion. It consisted of 11 questions with a four-point Likert scale ranging from strongly agree to strongly disagree. In addition, the researcher also used the second questionnaire, which is the Religious Tradition which has been adapted from Santa Clara Strength of Religious Faith Questionnaire.²⁶ In total, this questionnaire also contained 10 items. For scoring of responses, the likert scale was used ranging from “strongly disagree” = 1 to “strongly agree” = 4.

3.4.3. Rosenberg Self-esteem Scale

The Rosenberg Self-Esteem Scale²⁷ was used by the researchers to measure the self-esteem of the study subjects. A total of 10 items measure individuals’ positive and negative attitude about themselves. Each feedback provided by the study subjects was in a 4-point Likert scale, ranging from strongly agree (4) to strongly disagree (1).

4. Analyses

In this study, inferential statistics were used to analyze the data through Statistical Package for Social Sciences (SPSS.23.0) for psychometric properties of constructs and regression analysis for direct effect of knowledge of sexuality and reproductive health on self-esteem. Whereas, the intermediary role of religious knowledge was analyzed for mediation analysis through Process Model 4 (SPSS) by following the guidelines Hayes.²⁸ The reliability of measurement instruments for current study has been established through Cronbach’s alpha value given in Table 2.

Table 2. The reliability of measurement instruments for study (N= 400)

Measurement Instruments	No of items	Cronbach’s Alpha
Knowledge of Sexual and Reproductive Health	16	0.78
Religious Knowledge		
i) Religious Appreciations	11	0.71
ii) Religious Traditions	10	0.85
Self-esteem	10	0.72

²⁵Department of Islamic Development Malaysia, *Religious Appreciation Questionnaire* (2012). JAKIM. Kuala Lumpur.

²⁶Thomas G. Plante, and Marcus T. Boccaccini, “Santa Clara Strength of Religious Faith Questionnaire,” *PsycTESTS Dataset*, 1997. doi:10.1037/t67691-000.

²⁷M. Rosenberg, “Rosenberg Self-Esteem Scale,” *PsycTESTS Dataset*, 1965. doi:10.1037/t01038-000.

²⁸Andrew F Hayes, and Kristopher J. Preacher, “Statistical Mediation Analysis with a Multicategorical Independent Variable,” *British Journal of Mathematical and Statistical Psychology* 67, no. 3 (2013): 451-470. doi:10.1111/bmsp.12028.

The Table shows that reliability estimates for all constructs are in good and acceptable range of Cronbach's alpha.

4.1 Hypotheses Testing

4.1.1. Hypothesis 1

The results of table 3 shows the regression analysis for the impact of knowledge of sexuality and reproductive health on self-esteem of adolescents. Knowledge of sexuality and reproductive health significantly predicts the self-esteem of adolescents as the t-value (2.561) is significant at the 1% probability level. The R square vale 0.33 showed that 33% variance is caused in self-esteem with change in knowledge of sexuality and reproductive health. Whereas the F value=6.558 suggested that overall model is significant. The result further demonstrated that there is significant positive relationship between knowledge on sexuality and reproductive health and self-esteem among adolescents of Malaysia.

Table 3. Regression analysis results from the direct influence of knowledge of sexuality and reproductive health on self-esteem (N=400)

Model Variations	Constant	F	R ²	B	t	Sig.
	28.080	6.558*	.33		28.189	.000
Knowledge of sexuality and reproductive health				.16	2.561	.011

Significance at 1%

4.1.2. Hypothesis 2

It was also hypothesized that religious knowledge would play a moderating role between knowledge of sexuality and reproductive health and self-esteem among adolescents. The findings in Table 4 exhibited the significant mediating role of religious knowledge (-0.0768) with self-esteem of adolescents

Table 4. The indirect effect of knowledge of sexuality and reproductive health on self-esteem when religious knowledge role as intermediary (N=400)

Predictors	Religious Knowledge			Self-Esteem			<i>Bias-Corrected Bootstrap 95%</i>	
	<i>Coeff.</i>	<i>SE</i>	<i>Sig</i>	<i>Coeff.</i>	<i>SE</i>	<i>Sig</i>	<i>Lower</i>	<i>Upper</i>
Constant								
Knowledge of Sexuality and Reproductive Health	.356	.0302	0.00	-.768	-0.385	0.00	0.05	0.11
Religious Knowledge	-	-	-	-.572	.0398	0.02	0.59	0.83

Coeff. = -0.768, p>0.01

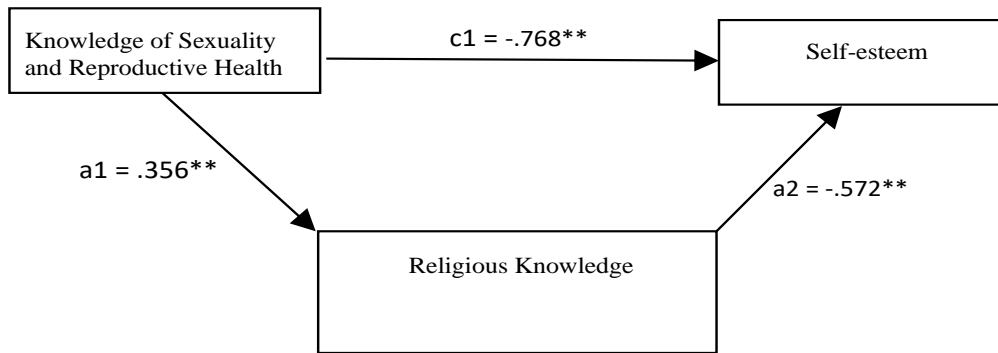


Figure 1. Mediation model of religious knowledge between knowledge of sexuality and reproductive health and self-esteem

5. Discussion

The present study examined the effect of knowledge of sexuality and reproductive health on the self-esteem of adolescents residing in Malaysia. The findings of our study depicted that among Malaysian adolescents, the knowledge of sexual and reproductive health have significant positive effect on their self-esteem. Adolescents are usually unaware of several risks related to sexually transmitted infections because apart from basic biological and science education, the sexual knowledge is not given to them. Teaching about sex and intimate relationships is an important development for adolescents because it has long-term implications and attains maturity in relationships as they grow older.²⁹ This also helps in enhancing the self-esteem and sense of identity within the adolescents. However, some adults block information that should be given to adolescents because they think this might cause adolescents to get involve in sexual activity, but it does indeed guide teens on how to promote safe sex and avoid sexually transmitted infections.³⁰ Through the findings of our study, we can get adequate evidence regarding the importance of sexual and reproductive knowledge and its benefits for our young generation. Although, there are several religious factors in the Muslim countries like Malaysia, which abides by their followers for discussing about such matters. Our findings also revealed that religious knowledge serves as a mediator between knowledge on sexuality and self-esteem of Malaysian adolescents. This could be the reason as religious knowledge is one of the measuring tools for testing the level of religious awareness in preventing adolescents from engaging in illegitimate relationships prior to marriage. It has been proposed that strong religious knowledge can be a stronghold for adolescents. The society and culture believe that religious person is less prone to unhealthy and unlawful activities and is less likely to

²⁹John De Lamater, and William N. Friedrich, "Human Sexual Development," *Journal of Sex Research* 39, no. 1 (2002): 10-14. doi:10.1080/00224490209552113.

³⁰Uwemedimo Kunnuji, "Predictors and Reproductive Health Implications of Knowledge of HIV/AIDS among Female Out-of-School Adolescents in Iwaya Community, Lagos State," *Journal of Women's Health Issues and Care* 02, no. 03 (2013). doi:10.4172/2325-9795.1000109.

engage any deviant behavior such as illegal sexual activities.³¹ The findings of our study is supported by research conducted in the past, which exhibited significant difference between the level of sexual knowledge and reproductive health and the level of religious knowledge.³² It is also evident that with strong religious knowledge, sexual knowledge, serves as catalyst for positive self-identity and can help in avoiding the pre-marital sex.³³ Hence, promoting religious education will ensure that adolescents become more aware and develop a positive attitude, improved self-esteem and better cognitive abilities. In the same vein, a study concluded that among all other factors, religious knowledge is one of the factor which play a significant role in controlling sexual behavior of adolescents.³⁴ They can defend themselves against violation of community life with the help of participating in educational program on sexuality and reproductive health and religious knowledge.

6. Conclusion

A good understanding of reproductive health capacitates the adolescents to develop better mental health and they remain self-esteemed or confident that may shield them from developing negative and risky behaviors. On the one hand, Malaysian adolescents are involved in negative and health compromising behaviors and on the other hand, they are practicing Muslims. This study is specialized to find these missing links.

Current study explored that the youth with better religious knowledge have a good level of self-esteem in them. That means religious knowledge significantly intervenes between knowledge of sexuality and reproductive health and self-esteem among adolescents of Malaysia. So, we concluded that, the adolescents who had better understanding of sexual and reproductive health also had higher level of self-esteem and their religious knowledge also worked as the protective shield against any misconduct or pre-marital sexual activities.

³¹Kamarulzaman Kamaruddin, Rahim Razalli, and Azli Ariffin, "Prevalence of Premarital Sexual Intercourse and its Associated Factors: a Cross-sectional study among Adolescents in Malaysian Secondary School," *International Journal of Academic Research in Business and Social Sciences* 8, no. 6 (2018). doi:10.6007/ijarbss/v8-i6/4513.

³²Li P. Wong, "An Exploration of Knowledge, Attitudes and Behaviours of Young Multiethnic Muslim-Majority Society in Malaysia in Relation to Reproductive and Premarital Sexual Practices," *BMC Public Health* 12, no. 1 (2012). doi:10.1186/1471-2458-12-865.

³³Siti N. Zulkifli, and Wah-Yun Low, "Sexual Practices in Malaysia: Determinants of Sexual Intercourse among Unmarried Youths," *Journal of Adolescent Health* 27, no. 4 (2000): 276-280. doi:10.1016/s1054-139x(00)00099-9.

³⁴Noor Aliza Lodz, Mohd H. Abd Mutalip, Mohd A. Fikri Mahmud, Maria Awaluddin S, Norzawati Yoep, Faizah Paiwai, Mohd Hazrin Hashim, Maisarah Omar, Noraida Mohamad Kasim, and Noor Ani Ahmad, "Risky Sexual Behaviours among School-going Adolescent in Malaysia-Findings from National Health and Morbidity Survey 2017," *Journal of Environmental Science and Public Health* 03, no. 02 (2019). doi:10.26502/jesph.96120059.

7. Recommendation

There is a need to establish accurate information systems for adolescents regarding sexuality and reproductive health so that they can understand their physical needs well. Parents can give better education and knowledge regarding sexuality and reproductive health to their young ones in friendly environment. The religious scholar can also hold responsibility to educate their followers in scientific manner. This could help to reduce the level of curiosity and harm to reproductive health of adolescents. Further, educational institutions can arrange such programs which provide adequate information and knowledge for the adolescents regarding the cultural, moral and religious factors associated with sexual behavior. Furthermore, we also believe that the best way for the country to avoid major problems like teenage pregnancy and HIV/AIDS and mental health problems among the youth, is to provide access to friendly and reliable reproductive health information.

But, above all, without good understanding of religious knowledge and practice one cannot encompass her/his doings.

Bibliography

Berne, Linda A., and Barbara K. Huberman. "Lessons Learned: European Approaches to Adolescent Sexual Behavior and Responsibility." *Journal of Sex Education and Therapy* 25, no. 2-3 (2000): 189-199. doi:10.1080/01614576.2000.11074347.

Chaves, Claudia B., Manuela T. Bento, Manuela C. Ferreira, and João C. Duarte. "Knowledge About HIV/AIDS: The Influence of Lifestyles and Self-Regulation in Adolescents." *The European Journal of Counselling Psychology* 2, no. 2 (2013): 102-110. doi:10.5964/ejcop.v2i2.34.

Coleman, Lester M., and Adrienne Testa. "Sexual Health Knowledge, Attitudes and Behaviours: Variations among a Religiously Diverse Sample of Young People in London, UK." *Ethnicity and Health* 13, no. 1 (2008): 55-72. doi:10.1080/13557850701803163.

DeLamater, John., and William N. Friedrich. "Human Sexual Development." *Journal of Sex Research* 39, no. 1 (2002): 10-14. doi:10.1080/00224490209552113.

Dumsday, Travis. "Kant on Religion within the Boundaries of Mere Reason (Lawrence R. Pasternack)." *American Catholic Philosophical Quarterly* 90, no. 4 (2016): 761-765. doi:10.5840/acpq2016904102.

Durmała, Jacek., Irmina Blicharska, Agnieszka Drosdzol-Cop, and Violetta Skrzypulec-Plinta. "The Level of Self-Esteem and Sexual Functioning in Women with Idiopathic Scoliosis: A Preliminary Study." *International Journal of Environmental Research and Public Health* 12, no. 8 (2015): 9444-9453. doi:10.3390/ijerph120809444.

Ferreira, Manuela., Manuela Bento, Cláudia Chaves, and João Duarte. "The Impact of Self-Concept and Self-esteem in Adolescents' Knowledge about HIV/AIDS."

- Procedia - Social and Behavioral Sciences* 112 (2014): 575-582.
doi:10.1016/j.sbspro.2014.01.1204.
- Gebauer, Jochen E., Constantine Sedikides, and Wiebke Neberich. "Religiosity, Social Self-Esteem, and Psychological Adjustment." *Psychological Science* 23, no. 2 (2012): 158-160. doi:10.1177/0956797611427045.
- Goldman, Juliette D. "Responding to Parental Objections to School Sexuality Education: a Selection of 12 Objections." *Sex Education* 8, no. 4 (2008): 415-438. doi:10.1080/14681810802433952.
- Haglund, Kristin A., and Richard J. Fehring. "The Association of Religiosity, Sexual Education, and Parental Factors with Risky Sexual Behaviors among Adolescents and Young Adults." *Journal of Religion and Health* 49, no. 4 (2009): 460-472. doi:10.1007/s10943-009-9267-5.
- Hardy, S. "Adolescent Religiosity and Sexuality: an Investigation of Reciprocal Influences." *Journal of Adolescence* 26, no. 6 (2003): 731-739. doi:10.1016/j.adolescence.2003.09.003.
- Hayes, Andrew F., and Kristopher J. Preacher. "Statistical Mediation Analysis with a Multicategorical Independent Variable." *British Journal of Mathematical and Statistical Psychology* 67, no. 3 (2013): 451-470. doi:10.1111/bmsp.12028.
- Jaafar, Jas., Istiqomah Wibowo, and Tina Afiatin. "The Relationship between Religiosity, Youth Culture, and Premarital Sex among Malaysian and Indonesian Adolescents." *Asia Pacific Journal of Social Work and Development* 16, no. 2 (2006): 5-18. doi:10.1080/21650993.2006.9755999.
- Jones, Timothy W. "Religion, Gender and Sexuality in everyday Life." *Culture, Health and Sexuality* 15, no. 10 (2013): 1253-1255. doi:10.1080/13691058.2013.831526.
- Kamaruddin, Kamarulzaman., Rahim Razalli, and Azli Ariffin. "Prevalence of Premarital Sexual Intercourse and its Associated Factors: a Cross-sectional Study among Adolescents in Malaysian Secondary School." *International Journal of Academic Research in Business and Social Sciences* 8, no. 6 (2018). doi:10.6007/ijarbss/v8-i6/4513.
- Kennedy, Charlene., and Katherine Covell. "Violating the Rights of the Child through Inadequate Sexual Health Education." *The International Journal of Children's Rights* 17, no. 1 (2009): 143-154. doi:10.1163/092755608x278939.
- Krejcie, Robert V., and Daryle W. Morgan. "Determining Sample Size for Research Activities." *Educational and Psychological Measurement* 30, no. 3 (1970): 607-610. doi:10.1177/001316447003000308.
- Kunnuji, Uwemedimo. "Predictors and Reproductive Health Implications of Knowledge of HIV/AIDS among Female Out-of-School Adolescents in Iwaya Community, Lagos

- State.” *Journal of Women’s Health Issues and Care* 02, no. 03 (2013). doi:10.4172/2325-9795.1000109.
- Lodz, Noor Aliza., Mohd H. Abd Mutalip, Mohd. A. Fikri Mahmud, Maria Awaluddin S, Norzawati Yoep, Faizah Paiwai, Mohd Hazrin Hashim, Maisarah Omar, Noraida Mohamad Kasim, and Noor Ani Ahmad. “Risky Sexual Behaviours among School-going Adolescent in Malaysia-Findings from National Health and Morbidity Survey 2017.” *Journal of Environmental Science and Public Health* 03, no. 02 (2019): 226-235. doi:10.26502/jesph.96120059.
- McCarty-Caplan, David M. “Schools, Sex Education, and Support for Sexual Minorities: Exploring Historic Marginalization and Future Potential.” *American Journal of Sexuality Education* 8, no. 4 (2013): 246-273. doi:10.1080/15546128.2013.849563.
- McCree, Donna H., Gina M. Wingood, Ralph DiClemente, Susan Davies, and Katherine F. Harrington. “Religiosity and Risky Sexual Behavior in African-American Adolescent Females.” *Journal of Adolescent Health* 33, no. 1 (2003): 2-8. doi:10.1016/s1054-139x(02)00460-3.
- Minev, M., B. Petrova, K. Mineva, M. Petkova, and R. Strebkova. “Self-esteem in Adolescents.” *Trakia Journal of Science* 16, no. 2 (2018): 114-118. doi:10.15547/tjs.2018.02.007.
- Muhammad, Noor A., Khadijah Shamsuddin, Zaharah Sulaiman, Rahmah M. Amin, and Khairani Omar. “Role of Religion in Preventing Youth Sexual Activity in Malaysia: A Mixed Methods Study.” *Journal of Religion and Health* 56, no. 6 (2016): 1916-1929. doi:10.1007/s10943-016-0185-z.
- National Population and Family Development Board. *Risk Factors and Protocols Study on Reproductive and Sexual Health of Adolescents in Peninsular Malaysia*. (2012). UKM Consultant. SMB Bangi.
- Plante, Thomas G., and Marcus T. Boccaccini. “Santa Clara Strength of Religious Faith Questionnaire.” *PsycTESTS Dataset*, 1997. doi:10.1037/t67691-000.
- Pop, Meda V., and Alina S. Rusu. “The Role of Parents in Shaping and Improving the Sexual Health of Children – Lines of Developing Parental Sexuality Education Programmes.” *Procedia - Social and Behavioral Sciences* 209 (2015): 395-401. doi:10.1016/j.sbspro.2015.11.210.
- Rahman, Azriani A., Razlina A. Rahman, Shaiful B. Ismail, Mohd I. Ibrahim, Siti H. Ali, Halim Salleh, and Wan A. Wan Muda. “Factors Associated with Attitude toward Premarital Sexual Activities Among School-Going Adolescents in Kelantan, Malaysia.” *Asia Pacific Journal of Public Health* 27, no. 2 (2012): NP1549-NP1556. doi:10.1177/1010539512449856.

- Rosenberg, M. "Rosenberg Self-Esteem Scale." *PsycTESTS Dataset*, 1965. doi:10.1037/t01038-000.
- Soleymani, Shahla., Hejar Abdul Rahman, Rampal Lekhraj, Nor A. Mohd Zulkefli, and Nasrin Matinnia. "A Cross-sectional Study to Explore Postgraduate Students' Understanding of and Beliefs about Sexual and Reproductive Health in a Public University, Malaysia." *Reproductive Health* 12, no. 1 (2015). doi:10.1186/s12978-015-0070-3.
- Visser, Beth A. "Psychopathy and Sexuality." *Routledge International Handbook of Psychopathy and Crime* (2018): 371-381. doi:10.4324/9781315111476-24.
- Wong, Li P. "An Exploration of Knowledge, Attitudes and Behaviours of Young Multiethnic Muslim-Majority Society in Malaysia in Relation to Reproductive and Premarital Sexual Practices." *BMC Public Health* 12, no. 1 (2012). doi:10.1186/1471-2458-12-865.
- W.Y., Low. "Malaysian Youth Sexuality: Issues and Challenges." *Journal of Health and Translational Medicine* 12, no. 1 (2009): 3-14. doi:10.22452/jummec.vol12no1.2.
- Zulkifli, Siti N., and Wah-Yun Low. "Sexual Practices in Malaysia: Determinants of Sexual Intercourse among Unmarried Youths." *Journal of Adolescent Health* 27, no. 4 (2000): 276-280. doi:10.1016/s1054-139x(00)00099-9.