

## Health Belief Model on Sexual Behavior Issues among Prisoners at Prison in Pekalongan, Central Java

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### ABSTRACT

**Background:** One of the basic human needs to be fulfilled is sexual need. Prisoners face problem in their sexual need fulfillment and freedom, due to the prison's disciplinary system, including supervision, strict disciplinary mechanism, and enactment of spatial division between men and women. As a consequence, there often occur perverted sexual behaviors, including homosexuality. This study aimed to analyze the sexual behavior issues among prisoners at prison using Health Belief Model.

**Subjects and Method:** This was a qualitative descriptive study with phenomenological approach. The main key informants in this study were prisoners having imprisoned for one year or more and officers at Class IIA prison, in Pekalongan, Central Java. The supporting informants included health personnel (doctors and nurses) at Class IIA prison clinic.

**Results:** All informants reported that they were susceptible to engage in risky sexual behaviors in order to fulfil their sexual need, such as masturbation and homosexuality. The psychological adverse effects they had experienced included fear and feeling of embarrassment their perverted sexual behaviors were recognized by others. The informants reported that they did not have self-efficacy in coping with sexual need issues while in prison.

**Conclusion:** The imprisonment system has an impact on the way inmates meet their sexual needs through masturbation. The role of prison officials is urgently needed to enable prisoners to address the problems of their biological needs through beneficial activities while in prison.

**Keywords:** prisoners, sexual behaviors, Health Belief Model

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### BACKGROUND

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Human being has various needs that should be fulfilled in their life. A psychologist from US, Abraham Maslow (1943) who were well known with the theory of Hierarchy of Needs stated that human as a creature will never be at a condition of absolutely satisfied, for human satisfaction is temporary in nature, if one certain need has been fulfilled then the other needs will emerge to demand for satisfaction. Physiological need is the basis of every human need.

One of human physiological needs is sexual need. A prisoner as someone who is

convicted to serve prison sentence surely cannot fulfill his own sexual need. It is important for prisoners who are married because before serving the prison sentence, they may conduct sexual intercourse with their wives to fulfill their sexual need.

Prison as an institution which mandated by the Law to organized correctional program toward the prisoners, has an obligation to fulfill the rights of the prisoners. The Law of the Republic of Indonesia No. 12/ 1995 On the subject of Correctional article no 14 verse 1, states that the prisoners have the right to conduct religious

activities in accordance with their religion and belief; to obtain treatment, both physically and psychologically; to obtain education and instruction; to obtain decent healthcare and food; to deliver complaints; to obtain unprohibited reading materials and follow other mass media broadcasts; to obtain wage or premium for conducting job; to receive visits from family, attorney of law, or other particular person; to obtain remission of sentence duration; to obtain the opportunity to assimilate including take a leave to visit family; to obtain parole; to obtain pre-release treatment; and to obtain other rights in accordance with the regulations apply.

In reality, the right of the prisoners to fulfill their physical and psychological needs, in this term is their sexual need, is still difficult to accomplish, the only way for the prisoners to fulfill their sexual need is by using the Right to Take a Leave of Absence to visit Family in accordance with the Regulation of Minister of Law and Human Rights of the Republic of Indonesia No. 21/2013 on the subject of Requirements and Procedure of Remission, assimilation, leave of absence to visit family, Parole, pre-release treatment, and conditional leave of absence, article 35 in which the requirements extremely rigorous.

According to Abrar and Tamtari (2001), the implementation of institutional disciplinary generates extremely dense interaction among prisoners, therefore resulting distinguished interaction pattern and forming particular customs among them. Consequently, in the prison setting, there emerge often sexual behaviors that are considered unsuitable with ideology of heterosexuality

Wilson (2005) stated that the occurrence of the term “ade-adean” (play brothers) that is used to address the relationship between stronger prisoners and the

weaker ones. Furthermore, there is a term “bini-binian” (play wife) in which the poor prisoners become the wife of the stronger or richer prisoners (MacDougall, 2014).

According to Donaldson (1990) prisoners have the tendency to release their sexual need by conducting sexual intercourse with same-sex friends by means of oral sex, anal sex, and masturbation. Wooden dan Porker (1982) stated 50% of heterosexual prisoners involved in homosexual activities during imprisonment.

Prison is considered as one of the place with highest risk for HIV transmission because of the dense condition, sexual intercourse without condom, sexual violence, risky sexual practices, injection drug use, insufficient HIV prevention, insufficient and unsupporting medication (Saliu dan Akintunde, 2014).

Estimating report conducted by Ministry of Health in 2009 estimated there were 140,000 prisoners in Indonesia in which around 5,000 prisoners or 3.6% are infected by (Kementerian Kesehatan Republik Indonesia, 2009). The estimated HIV prevalence on the prisoners is 24 times higher than estimation on general adult population in Indonesia.

HIV prevalence in prisoner population was 3% and syphilis was 4.8%. As many as 4% of prisoners testified that they have had sex in prison (Kementerian Kesehatan Republik Indonesia, 2011). Health condition of the prisoners is closely related to public health. Without appropriate public health interventions, prisons may become a potential place for HIV transmission.

Based on the data in Correctional Database System of Central Java Province on 26 January 2017 there were 10,670 inmates in Regional Office of Ministry of Law and Human Rights, Central Java Province including 3,126 arrestees and

7,544 prisoners. Meanwhile there were 465 prisoners in Class IIA Correctional Institution Pekalongan with the capacity of 800 people. There were 35 prisoners of molestation and children protection cases and 7 prisoners with HIV positive.

Sexual behavior that emerge among the prisoners life is a social reality which is interesting to observe, since in reality the prison with confinement system is able to encourage the creativity power of the prisoners to overcome their sexual problem, moreover, sexual behavior among prisoners is followed by patterns, based on their knowledge and understanding on sexuality.

The researcher used *Health Belief Model* (HBM) to identify factors that affect sexual behavior. The purpose of the study was to identify sexual behavior. The purpose if the study was to analyze Health Belief Model on the subject of sexual behavior of the prisoners in Class IIA Correctional Institution Pekalongan.

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## SUBJECTS AND METHOD

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### 1. Design of the Study

This study was a qualitative descriptive study by using phenomenology study approach for disclosing the information about the determinants of sexual behavior among prisoners by using Health Belief Model.

The study was conducted in April up to July 2017 in Class IIA Prison in Pekalongan with a consideration that the characteristics of Class IIA Prison in Pekalongan are related to prisoners' sexual behavior.

The study used purposive sampling technique, in which researcher selected informants who were likely to know and reliable to be data resource and understand the problem deeply.

The sampling technique used was criterion sampling. It is determining sample by using certain considerations which

are considered able to give data maximally fits with the needs of the researcher.

The researcher does not need to seek for any information and the process of data collection is considered finished whenever there is no more variation found during the data collection process.

### 2. Informants of the Study

The key informant of the study was an officer of Class IIA Prison in Pekalongan. The main informants were male prisoners in Class IIA Prison in Pekalongan, with more than 1 year sentence. While supporting informants were male prisoners who shared the same cell with the main informant and officer of health clinic of Class IIA Prison Pekalongan that was the nurse.

### 3. Instruments of the Study

Data collection was conducted by using in – depth interview, observation and documentation study. The data collection instruments were voice recorder, interview guidelines, observation guidelines and camera.

Data sources among others were primary and secondary data. Primary data were obtained directly from the informants by using question lists and direct interview to obtain the needed data. Meanwhile secondary data were obtained by means of document searching and studying.

### 4. Analisis Data

The collected and obtained data were analyzed by using interactive model (Miles dan Huberman, 1994) which consisted of data collection, data reduction, data presentation/ display, and conclusion making/ verification

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## RESULTS

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### 1. Sexual behavior of prisoners in Class IIA Prison in Pekalongan

The researcher indentified informants' perceptions on the prisoners' sexual behavior. One of the informants stated that what

caused the sexual behavior during in prison was the condition that they were separated from their spouses. The following was a piece of the result of interview with the informant:

*"It is because we are far from our wives, we used to have sex with our wives at anytime, in here we're like this, it's difficult. When they visit us, we can only talk and stare at each other."* (MI1)

Result of the interview on 4 April 2017

It was different from supporting informant (SI4) who had not married, he stated that the cause of sexual behavior during in prison was sexual desire which arose each time they saw aerobics instructor who wore sexy clothes during aerobics session every Friday. The following was a piece of the result of interview with the informant:

*"Well, sometimes when I see the aerobics instructors with their revealing clothes, make me imagine things, but after that it's just gone."* (SI4) Result of the interview on 8 May 2017

The researcher also identified types of sexual behaviors conducted by the prisoners :

*"If I want to do it, I do it myself in the bathroom."* (SI2) Result of the interview on 3 May 2017

The main informant (MI1) stated that he preferred performing religious activities or working in the prison's farm when sexual desire arose. The following was a piece of the result of interview with the informant:

*"I usually do religious activities, Ms, or I make myself busy in the vocational guidance, planting some vegetables there, then the desire will disappear by itself."* (MI1) Result of the interview on 4 April 2017.

## **2. Health Belief Model on the determinants of prisoners' sexual behaviors in Class IIA Prison in Pekalongan.**

The study used six components in Health Belief Model to identify prisoners' sexual behaviors in Class IIA Prison Pekalongan.

### **a. Perceived Susceptibility**

The researcher identified informants' perception on the level of susceptibility felt toward prisoners' sexual behaviors. All informants stated that all prisoners were susceptible to perform sexual behaviors during in prison one of the causes was because they could not have sexual intercourse with their spouses. The following was a piece of the result of interview with the informant:

*"Definitely, Ms. I'm pretty sure there is, cause for them who are inside, excuse me, if outside they used to have sex with whoever it was, wives or somebody else, here, after they are in, the chance is cut off. It means they can't release their psychological needs. Commonly, they think it will make them dizzy if it is not released."* (IK1) Result of the interview on 9 June 2017.

The statement had something in common with the statement from supporting informant (SI4) that every prisoner inside the prison was susceptible to sexual behaviors. The following was a piece of the result of interview with the informant:

*"Well, I believe so, but it depends on the person. One of my cellmates was hugged by another cell mate in the sleep, then he freed himself directly. I don't whether it was by accident or not."* (SI4) Result of the interview on 8 May 2017.

Researcher also identified what type of sexual behaviors which is susceptibly performed by the prisoners. The following

was a piece of the result of interview with the informant:

*“Usually they do it themselves in the bathroom, only when they want to, like once a week.”* (SI4) Result of the interview on 8 May 2017.

However there was a prisoner who admitted never perform it in the prison. The following was a piece of the result of interview with the informant:

*“I never do that. It is released by itself through dreams.”* (SI4) Result of the interview on 3 May 2017.

#### **b. Perceived Severity**

The researcher identified the informants' perception on the level of severity felt toward prisoners' sexual behaviors. The following was a piece of the result of interview with the informant:

*“It depends on the inmates, Ms, I don't think it is a compulsory, since it will give no difference to get it released or not. I think it is better if it is possible to hold, however if it has to be released, we only can suggest something with the lowest price and risk, it means it will not carry diseases such as masturbation. However we neither suggest that it must be done for those who were overwhelmed.”* (KI1) Result of the interview on 3 May 2017

Supporting informant (SI1) thought that every prisoner could fulfill their sexual need in prison however it should be strictly controlled. Yet it was still controversial since if it was legalized there would be abuse. The following was a piece of the result of interview with the informant:

*“In my opinion, since sexual need is a biological need just like eating, it can be fulfilled whatsoever, what important is the regulation should be clear. If it is legalized. Probably with their formal spouses, only it will be at risk for*

*abuse.”* (SI1) Result of the interview on 23 May 2017.

#### **c. Perceived Benefit**

The researcher identified informants' perception on the benefit felt toward prisoners' sexual behavior. The following was a piece of the result of interview with the informant:

*“I think it is because seeing the aerobics instructors whose pants are so short, it make us aroused, instantly, but it will be gone soon also. Sometimes it will be released through dream. After that, it feels relieved, and no more dizziness, no more arousal.”* (MI1) Result of the interview on 4 April 2017.

Supporting Informant (SI4) stated that he conducted masturbation on purpose when he felt aroused, after that he would feel dozy and then he would sleep :

*“Sometimes I do it on purpose, after that I feel dozy and then sleep.”* (4) Result of the interview on 8 May 2017.

#### **d. Perceived Barrier**

The researcher identified the informants' perception on the severity felt toward prisoners' sexual behaviors. The following was a piece of the result of interview with the informant:

*“I don't know about risky behavior. They say HIV is syphilis.”* (SI4) Result of the interview on 8 May 2017.

It also had something in common with the main informant (MI1) who did not actually know about risky sexual behavior:

*“That is for naughty people, I've heard about risky behavior such as syphilis, but I've never do that at all. I know it from the story they told me about diseases.”* (MI1) Result of the interview on 4 May 2017.

#### **Cues to action**

In this aspect the researcher identified the informants' motivation in doing sexual be-

haviors. The following was a piece of the result of interview with the informant:

*“Usually it is because of the aerobics instructors who wear short pants, sometimes it arouse me, but it’s just gone by itself.”* (IP2) Result of the interview on 3 May 2017.

Informant (SP4) stated different thing that (MI1) suffered from sexual disorders, therefore he acted defiantly both inside and outside the prison. The following was a piece of the result of interview with the informant:

*“There it is, Mr. T (MI1) looks like suffer from some kind of disorder, once he told me that he likes men, he then married to a woman rather than being mocked all the time, by the time he got here, he doesn’t change. Once while K(SI2) was sleeping, suddenly Mr. T hugged him from behind.”* (SI4) Result of the interview on 8 May 2017.

### ***Self Efficacy***

In this aspect, the researcher identified informants’ self efficacy in doing sexual behavior. Supporting Informant (SI3) stated that during in the prison he was not confident to be able to do sexual behavior. The following was a piece of the result of interview with the informant

*“For me myself, I feel okay, I don’t about the other, whether they can do it or not.”* (SI3) Result of the interview on 8 May 2017.

It was similar with the statement of Key Informant (KI1) that self efficacy to conduct sexual behavior inside the prison depends on their own respective personal condition of each prisoner. The following was a piece of the result of interview with the informant:

*“Self efficacy depends on their own personal condition. For those who have been addicted, at least they do it once a day. But if it is only in imagination, once a week”* (KI1) Result of the interview on 9 June 2017.

**Table 1. Health Belief Model on the Determinants of Sexual Behavior among Prisoners in Class IIA Prison Pekalongan**

<b>Components</b>	<b>Result</b>
Perceived susceptibility	The informants stated that all prisoners were susceptible to sexual behaviors during in prison.
Perceived Severity	The informants stated that prisoners did not need to fulfill their sexual needs during in prison, prisoners knew that if they conducted risky sexual behavior they would infected by transmitted diseases such as HIV/AIDS, some informants stated that they masturbated, since if it was not released they would feel anxious and dizzy.
Perceived benefit	The informants stated that after masturbating they would feel relieved and able to sleep tightly.
Perceived Barrier	The informants stated that they knew risky sexual behaviors and the feeling of shame if they got caught by Prison officers and their cellmates.
Cues to action	The informants stated that sexual drive came when they had aerobic session inside the prison and listened to porn stories from their friends
Self efficacy	Informants stated that they did not have self efficacy to conduct sexual behaviors during in prison

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## DISCUSSION

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Sexuality is an important part that is needed in the fulfillment of a prisoner's biological needs. The condition and situation of a prison which is limited in all aspects, the concept of spatial division between male and female prisoners and the closed interaction space between the two generates the compensation toward sexual needs fulfillment is conducted in different ways. It is the prisoners' strategy to overcome sexuality problems as well as sexuality reality among the life of the prisoners.

The process of sexual behavior formation among the prisoners is started by the lost of rights to fulfill their sexual needs during in prison. For prisoners who are married, it is considered important since when they were outside they can fulfill their sexual needs with their spouses, however by the time they entered the prison then they lost all the freedom.

Health Belief Model is a determinant model of health behavior that is commonly used in health promotion. Health Belief Model concept explains that one's health behavior is affected by the individual's own belief and perception toward a disease (Rawlett, 2011).

The first component of Health Belief Model is perceived susceptibility that is felt toward the prisoners' sexual behavior. Perceived susceptibility may encourage someone to adopt health behavior. The bigger risk felt, the bigger possibility to involve in the behavior. All informants believed that prisoners were susceptible to conduct sexual behavior during in prison. The condition of the prisoners who were away from their spouses made them susceptible to sexual behavior that was by conducting masturbation (susceptibility) Listyanti (2009) in her study stated that 57% of the prisoners prefer to conduct masturbation to fulfill their sexual needs.

The second component is perceived severity. Perceived severity is an individual belief on the seriousness or severity of a disease. In addition, it is also the certainty toward the difficulties they will endure as the result of the disease. Perceived severity is the thought of HIV severity that is possibly may endanger their well being. The prisoners' level of knowledge on types of risky sexual behaviors is still low, however they know that the biggest risk of sexual behavior is infected by HIV/ AIDS, several informants stated that when they had sexual drive they released it by conducting masturbation, since if they did not release it they would feel anxious and dizzy. Matthews (2000) stated that the symptoms of psychological problem as the result of sexual drive for stress problem, such as mind disorder, confusion, anxiety, and depression.

The benefits that they felt from sexual behaviors were the feeling of relieved and be able to sleep well. The benefits are derived from their psychological aspect. To be familiar with the behavior one should consider the barrier that may emerge when they want to implement a behavior.

Barriers that they faced were the fear of the impacts of risky sexual behaviors as well as the feeling of shame if they got caught by their cellmates while doing sexual behavior. In addition they were afraid if they got caught by prison officers they would get punished. Health Belief Model's previous findings consistently show that susceptibility and barrier are the most significant predictors (Lux and Petosa, 1994; Wilson et al., 1990).

According to Smet (1994), *cues to action* is the aspects which are estimated to be appropriate to start the behavioral process. In the study the drive of the subjects to conduct sexual behavior was because they were aroused when they had

entertainment inside the prison, such as aerobics instructors who wore sexy clothes and female singers when they had music performance in the prison. Moreover they also heard porn stories from their cell-mates. However they managed to divert their desire by doing positive activities such as development program and autonomy activities, for example farming, Islamic education program, and library. Negrao (2015) in his study stated that in prison there were various development programs, besides to build character, mental and to prepare the prisoners due to their return to the society, it also to fill their leisure time so that it able to divert their sexual desire to more productive things.

Self efficacy is one's belief to conduct certain behavior. The prisoners did not have any belief that they could do sexual behavior in the prison, since the condition of the cells that accommodated numerous prisoners, so that they could not do sexual behavior freely. Moreover, the condition that they were apart from their spouses (wives) made it more difficult to accomplish the fulfillment of their sexual need. The only way to for the prisoners to fulfill their sexual needs is by using the Right to Take a Leave of Absence to visit Family in accordance with the Regulation of Minister of Law and Human Rights of the Republic of Indonesia No. 21/2013 on the subject of Requirements and Procedure of Remission, assimilation, leave of absence to visit family, Parole, pre-release treatment, and conditional leave of absence, article 35 in which the requirements extremely rigorous. A study by Lestari (2009) found that the efforts taken by Class I Prison Central Jakarta in fulfilling the prisoners' sexual needs are by using 3 methods, namely formal effort by giving assimilation, leave of absence to visit family, Parole, pre-release treatment, and conditional leave of

absence, informal by providing visiting room facilities, and deviant fulfillment by providing visiting room facilities that can be used to have sex. Informants admitted that basically there were the needs to release biological desire during in prison. However they realized that the condition they went through inside the prison made them should hold their biological needs. There were various ways for them to overcome the needs, among others were by joining autonomy and personality development program and also by conducting masturbation.

The autonomy development activities among others are carpentry, sewing, weaving, welding, fishery, farming, tie dyeing, making versatile batik barrel, motorbike and car wash, barber shop and integrated café. Meanwhile the personality activities are Islamic education program, legal session, nationalism program, religious session, counseling and assessment, sport, healthcare and library.

Based on the description above, the government should be able to conduct study toward various phenomena happen in correctional institution. Various activities of sexual needs fulfillment in prison should be appropriately responded by means of appropriate legal instruments. Several technical conditions about that matter can be strictly regulated by means of regulation instrument that is able to minimize the irregularities of the implementation in the field.

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