

SEXUAL RISK BEHAVIOR IN UNIVERSITY WOMEN OF THE STATE OF MEXICO

¹Griselda Vega-Cruz, ²Juan Manuel Sánchez Soto, ³María de los Ángeles Maya Martínez, ⁴María Isabel Barco González, ⁵Ofelia Márquez Molina.

1. *Maestrante in Sociology of the health of the Centro Universitario UAEM Amecameca;*

2. *full-time professor for the University Center UAEM, Valle de Chalco;*

3. *full-time professor for the University Center UAEM Amecameca;*

4. *full-time professor for the University Center UAEM, Valle de Chalco;*

5. *full-time professor for the University Center UAEM Amecameca*

Abstract: An investigation was conducted of court quantitative, analytical and non-experimental, whose objective was to evaluate the sexual risk behavior in students of the feminine gender of a university in the State of Mexico. The evaluation was carried out through the instrument evaluation of psychological variables and risky sexual behavior in young university students, prepared by pineapple, oaks and Rivera, (2007). It was found that the protection in sexual relations, in the first instance is to avoid a pregnancy and subsequently to prevent sexually transmitted infections. There is no meaningful data with regard to multiple partners or the use of alcohol or other psychoactive substance that can lead to a sexual relationship of risk. However, an alarming fact is the absence of condoms in relationships oral, by deducting with this that the students they forget that the acquisition of infection is through mucous membranes and the greatest risk in the population is the acquisition in the mouth area genitals.

Key words: sexual behavior, risk, university women.

Introduction

Sexuality is an aspect imminent that conforms to the human being appearing from the moment of conception until death, not covers only the biological aspect but also the psychosocial dimension. In this sense Hurtado, (2015) refers to "sexuality is a fact of human beings where sex is the main base without excluding the identity, gender, sexual orientation eroticism, affective ties and love, speaking through thoughts, fantasies, desires, beliefs, values, etc" However for Guerrero, (1996) is only one form of expression that allows the relationship with the other (Quoted in Gonzalez, 2002). The sexuality, according to the prototypes established by society, religion and morality only relates to the conception; the suppression, prejudices and the prohibition inhibit the full development and involve the individual to develop certain risk behavior (Cruz Roja, S/A: 1-17)

The conduct, according to the Royal Academy of the Spanish language (2015), is defined as the group of actions that allow the individual to respond to a specific situation. Ruiz (2010), pointed out that the conduct is a motivation that involves the social components and psychological of the individual and a sexual behavior is the influence socio-cultural that originates mainly by the parent groups and the environment, manifesting through factors such as age, gender, culture and the society in which it develops and stating as a composition of expressions sexual intercourse (Monroy, 2002).

With regard to risk, is noted as the contingency or proximity of a damage and is associated with the possibility of injury or damage (SAR., 2015). There are 2 points for your understanding, the possibility of loss, injury, disadvantages or destruction or is anything that causes a dangerous situation or adverse (Sjöberg and Drotz-Sjöberg, 1976 cited in Echemendía, 2011).

It conduct sexual of risk according to Espada-Sanchez, Quiles-Sebastian and Mendez-carrillo, (2003), is defines "as the exhibition of the individual before a situation that can cause damage to his health or to the health of another person", these is characterized because them relations sexual is carry to out low them effects of the alcohol or of some narcotic, the sex with multiple couples sexual and/or the lack of protection , having as consequences pregnancy not planned and infections of transmission sexual (Pulido, et, to the, 2013).

In themes of sexuality the gender is a component essential of the topic, understand is as gender a construction mental that allows to the individual the identification in first place with them people of your same sex and in second with which have something in common to see who and that are and to where is directed. Socially is linked with the prototypes imposed by society and a cultural, political, religious, charging that standard tasks of men and women (gender role), in this sense belonging to male gender is synonymous with having certain privileges, among them sexual behaviour accepted by society, maintain relationships with various

couples, playing with the active role and the full enjoyment of their sexuality, meaning to them the power to the sex "weak" the woman, the stereotype implies certain limitations being the more notorious the pleasure sexual (Association Mexican of education Sexual, 2003).

In such a way that the sexuality in university women is a matter of great relevance, the level of study has allowed true empowerment for decision-making, postponing marriage without leaving to one side the sexual activity by asserting their sexual and reproductive rights (ENAIID, 2006; 2009; IMJUVE 2000; 2007, cited in Cerón, 2016). However, Morales et al., (2013) indicates that women have little control on behavior and sexual impulses, and the lack of or incorrect use of contraceptive methods are related with a low level of knowledge, the immaturity or lack of accountability, resulting in an increased incidence of HIV/AIDS (Technological Institute of Santo Domingo, 20016). Perez and Fonseca, (2011) indicate that the number of sexual partners does not imply the risk, but rather as are carried out the sexual practices.

Methodology

It is a cross-sectional study quantitative, transversal field, conducted a convenience sample, participating 12 per cent of the female population. The data were collected through the instrument evaluation of psychological variables and risky sexual behavior in young university students, prepared by Piña, Robles and Rivera, (2007), which is composed of 44 items with choice of response in a Likert scale ascending, which has a value of Cronbach Alpha 0.821. The variables that were considered for the operationalization were the use of condom, multiple partners and the use of psychoactive substances.

Results and Discussion

The average age of the surveyed was 20.7 years, with a standard deviation of 2.36 of the total shows the 72.6% reported being Catholic and the 9.4% not specific. Within the study were considered family relations, being that there is a better relationship with the mother with the father 58.5% and 35.6% respectively. On sexuality issues the perception is good so indicated the 40.7%, this allows to reaffirm what was said by Bárcena, oaks and DIAZ-loving, (2013) which stipulate that the influence of the communication assertive of the parents to the children about sexual behavior protected is directly proportional, i.e. between greater communication and the level of knowledge about sexuality, will allow a greater care when using a condom ($r=0.25$) which implies the reduction of unplanned pregnancies and STIS. In the same direction. Cárdenas (2015), relates that the family is the principal link therefore there must be communication that allows trust, guidance and accompaniment with the aim of strengthening the decisions of the young. Climent, (2006), indicates that the mother is the central axis of the education of the family and sex education is paramount, within this training are transmitted values, behaviors and how to socialize with the opposite sex. In a study conducted by Morales, et al (2013), indicates that the information that young people receive about sexuality corresponds in a higher percentage of the family followed by friends, however, it is noted that the second group it is where there is a higher prevalence in unplanned pregnancies, therefore, the author notes that the influence of friends can be stronger than the family nucleus, therefore, the risk behaviors are more likely to occur.

Sexuality

The start of sexual life (IVS) fluctuates in the 16.83 years with a standard deviation of 2.19 years. There are several studies where there is a minimum difference in the IVS, among them is the de Celis, (2016), where it is reported that the IVS at women went to the 17 years, showing a minimum difference of 0.17 compared to the investigation carried out by Perez et al (2016), noting a large difference in the first sexual relationship this is carried out before the age of 15. Teva, Bermúdez y Buéla-Cazal, (2009), indicate that the IVS in women was 18.5 years, this allows to point out that the age for first sexual intercourse is at an early age, this being considered an important factor to carry out a sexual risk behavior. With regard to the use of the condom in the first sexual relation, the 64.8% reported having used a condom against a 34.3% that it did not do so, the greater percentage to be protected was preventing pregnancy and not for an STI, Teva, Bermúdez and Buéla-Cazal, (2009) indicate that 99.6 per cent of women use condoms in IVS and Folch, et al. (2015), as reported with a 86.1% It should be stressed that the use of protection in the first sexual relation is due to the fact that this is done with the person with whom there is a stable relationship and affection.

With regard to the number of sexual partners found an average of 2.7 couples, where only the 66.6% it was protected contrasting with the study of pineapple, et al. (2009) where in the universities in the northwest of the country the 36.3% has had 2 to 4 couples and a 10.9% with 5 or more, on the other hand, Garcia-Vega, et al, (2012), indicates that the average couples in girls was 2.02 and 85.5 % prevent AIDS/STIS and pregnancy with the use of condoms. In 2014, Lavielle et al., indicate that in Mexico City the 24.4% has had more than three sexual partners and only a 51.8% has been protected taking a great risk of acquiring a sexually transmitted infection or an unplanned pregnancy, demonstrating that there is a difference with regard to the State of Mexico.

With respect to sexual relations conducted under the influence of alcohol or any other psychoactive substance in the first sexual relation only 1.9 percent that was fortified and 1.0 did so under the effect of drugs, these behaviors increase with occasional partners where a 8.7 reported having been under the effect of alcohol being a dissimilarity with what is reported by Villegas, et al. (2016), which indicate that 50 per cent of women before sexual relations had consumed alcohol or any drug, which determines that the use of psychoactive substances the sexual behavior of risk increases. (Isorna, et al. 2015).

Con respecto a las relaciones orales el 50% de la muestra indicó que ha tenido relaciones orales, el 34.21% no las practica y el 15.78 no respondió, de los que practican sexo oral solo el 5.26% reporta protegerse con preservativo. Diversos estudios indican que el cuidado en las relaciones sexuales orales disminuye, entre los que se encuentran los realizados por Vinaccia, et al (2007), que reporta un 60.5% de mujeres que mantiene relaciones sexuales orales utilizando condón solo el 9.4% y en la investigación realizada por Villegas, et al. (2016), aumenta el riesgo de contraer una ITS en la zona oral reportando un 57,5% que realizan este tipo de práctica sin protección alguna.

With regard to relations oral 50 per cent of the sample indicated that has had sex oral, 34.21% not the practice and 15.78 not responded, those who practice oral sex only the 5.26% reported protected with condom use. Various studies indicate that the care in oral sex decreases, among which are those made by Vinaccia, et al (2007), which reported a 60.5 per cent of women who maintains oral sexual relations using condom only 9.4% and in the investigation conducted by Villegas, et al. (2016), increases the risk of contracting an STI in the area oral reporting 57.5% that perform this type of practice without any protection.

Conclusion

The sexual risk behavior in young university students, this determined by the use of condoms in the first sexual relation in a 64.8 and this use decreases to stabilise the relationship and is only used in casual relationships, it is important to note that the protection is for the prevention of a pregnancy forgetting that there are other problems that are of greatest risk as are the STI, there is no significant risk with regard to the number of couples and sex under the influence of alcohol or any other psychoactive substance. However and in spite of the fact that there is a care in sexual relations they forget to protection in sexual relations of type oral, so that you can determine that they forget that STIS are acquired through mucous membranes, it is important to consider that the mouth is a high source of microorganismos, for example *C. albicans* is normal flora in the mouth and is causing infections micóticas in the vagina.

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