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Comparative Dissection of Gen Zs' and Millennials' Perspectives on Premarital Sex among College Students and Employees at FEU-Manila

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***Abstract*—** *Premarital sex (PMS) has been a long-running debate between Gen Zs and Millennials because it is a complex and controversial topic that has garnered significant attention in recent years. This issue remained persistent as there was a gap between the viewpoints of these two generations about the issue. Hence, this study aimed to explore the generational differences in perceptions and beliefs towards PMS. Using the convenience sampling approach, the data were collected from 50 participants: 25 Gen Z college students and 25 Millennial unmarried employees at Far Eastern University-Manila. The findings revealed notable differences in generational perceptions of PMS, with Millennials generally more aware of the risks and consequences of PMS compared to Gen Zs. Additionally, millennials were also more confident about their self-efficacy compared to Gen Zs. The study also elucidated relevant factors influencing these perceptions, including age, gender, and sociocultural factors. These findings have important implications for understanding societal shifts in generational perceptions toward PMS and highlight the need for open dialogue and initiatives regarding PMS. Furthermore, the study concluded the opportunity to address the gap between the two cohorts in promoting safe sexual practices.*

Keywords— *Gen Zs; Millennials; Perceptions; Premarital Sex; Sex Education*

I. INTRODUCTION

Premarital sex, also referred to as PMS, is the act of engaging in sexual activities between individuals before being married to one another. According to Bocar and Perez (2013), the major population who are the most prone to PMS are adolescents. In the stage of sexual experimentation, they are most likely to engage in risky sexual behaviors which can lead to negative consequences such as unwanted pregnancies, sexually transmitted diseases, and social and emotional issues (Amalia & Nasution, 2021; Yau et al., 2020). The acceptance and prevalence of PMS vary from different cultures, societies, and religions. For Muslims, PMS is punishable as stated in the Quran while for Catholics and Christians, it is condemned as a sinful act (Romagos et al., 2023; Faisal et al., 2022; Kubo, 1980). Before, religious beliefs were dominant in teaching PMS as immoral and sinful until the Western societies underwent a sexual revolution that popularized, commercialized, and glorified sex in various forms of media (Eze & Adu, 2015). As shown by the relevant studies, this study builds upon previous research by assessing the perceptions of different cohorts regarding PMS, specifically Gen Zs and Millennials. It involves the sociocultural factors that influence generational beliefs towards PMS and its consequences. While several previous studies have explored similar themes, this research contributes by adding a more understanding of generational differences in perceptions of PMS, which can guide educators, policymakers, and healthcare professionals in developing culturally sensitive and effective sexual programs appropriately designed for the needs of different generations.

II. LITERATURE REVIEW

The research conducted by Ilbert and Marfuah (n.d.) entitled *"Pre-marital sexual behavior in Student Dating"* was able to determine that sexual-related talks sparked the students' strong urge to explore their partner's body. This research obtained their data through an online search process and screening articles. After gathering their data from selected journals, they found 7 themes associated with students' engagement in premarital sex. The 7 themes are the following: *Love is the main reason for PMS; Being a virgin is outdated; Having PMS is common and essential; Having PMS is a human right and a sign of adulting; A friend's invitation is a great influence; Premarital sexual behavior is a training ground to have successful marriage; Sexual conduct was initiated by instinct rather than intention.* This research study highlighted that the view regarding PMS has progressed throughout the years. In some countries, PMS has been deemed acceptable, while some still consider PMS as a sinful act. On the other hand, the research study figured that a friend's influence is a big factor in students' engagement in PMS; their casual conversation about premarital sexual relationship. In addition, one's personal beliefs and attitude are a major contribution to one's premarital sexual behavior.

A study in Indonesia by Oktriyanto & Alfiasari (2019) suggests that teenage boys are less concerned about PMS compared to girls. This aligns with the finding of a higher prevalence (7.3%) of PMS among male teenagers compared to females (2.3%). Among dating teenagers, hand-holding appears to be the most common form of physical affection, followed by kissing and then more intimate activities. The

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study further reveals a significant association between dating behaviors and PMS. Teenagers with a dating history are 14.12 times more likely to have engaged in PMS than those who haven't dated. Additionally, the likelihood of PMS increases with the level of physical intimacy during dating. Handholding, kissing, and touching private areas progressively increase the odds of engaging in PMS. Based on these findings, comprehensive sexual health education is crucial, which is suggested to begin at home and continue within schools and relevant institutions. To help teenagers navigate potential negative influences, collaboration between parents, teachers, and community leaders is essential. This collaboration can provide positive guidance and supervision within local environments, discouraging potentially risky dating behaviors among adolescents.

In the study of Valenzuela and colleagues (2021) that investigated the attitude and perception of college students toward PMS, their findings reveal that the student's attitudes and perceptions have an inverse correlation. In other words, people with a negative attitude towards PMS tend to have a better comprehension of it and are less likely to participate in it. In their research, attitude is the "way of approach after a subjective assessment of how things would affect the person" while perception is the "general awareness about things." Furthermore, being age as the variable, older participants tend to have a higher perception of PMS than those who are younger. Bocar and Perez (2013) found from their participants ranging from 16 to 22 years old that males have a "slightly conservative" perception towards PMS while females do have a conservative perception. Similarly, Naz (2019) concluded that college students have a diminished degree of conservative thinking and behavior but they are not considered to have a liberal attitude. They slightly agreed on the immorality and social unacceptability of PMS, which corresponds to their low engagement in PMS, while having stringent views about virginity and sanctity of sex. However, they are less knowledgeable about the negative consequences of PMS such as unwanted pregnancies and sexually transmitted diseases.

Another study by Galimpin and Janiola (2023) formed a study entitled Perception of Students Towards PMS at the Holy Name University conducted in Tagbilaran City, Philippines. Out of the 240 respondents, most perceive that PMS is prohibited and discouraged which is due to the strong influence of religious teachings and societal values. Thus, this emphasized that cultural and religious beliefs play a significant role in shaping their attitudes and perceptions toward the subject as they have been taught abstinence before marriage as a moral and spiritual foundation. Abstaining in such activity is not solely about following rules but, for these students, it is a form of maintaining their faith, following the norms and values of their society, and a source of a sense of belonging in their community. The study also mentioned that despite the influence of social media, their belief about PMS remains. However, it is acknowledged that as this study only focused on a particular group of students, its generalizability is limited hence, this allows future studies to conduct further exploration into other factors influencing the perception of PMS.

In the local context particularly, in the Philippines, the 2021 Young Adult Fertility & Sexuality (YAFS) Study conducted by the University of the Philippines Population Institute reported the prevalence of premarital sexual activity among Filipino youth aged 15-24. Findings reveal that 32% of males and 27% of females have engaged in sexual activity before marriage. Of particular note is that most of these individuals, 87% of males and 60% of females, initiated sexual activity prior to marriage. Given these, an interference was produced wherein it is of importance to this country to address sociocultural influences, comprehensive and quality sexuality education, and enhancing healthcare service access for the purpose of promoting responsible sexual behavior and reproductive health among Filipino youth. Furthermore, this study also delves into the different points of view on the desirability of premarital sexual initiation among Filipino youth which revealed a range of instances and attitudes surrounding their first sexual experiences. The YAFS series then gives light on the importance of the role of our policymakers, educators, and healthcare providers given that this is a sensitive topic accompanied by societal norms (Midea et al., 2022).

Objectives and Statement of the Problem

Far Eastern University (FEU) distinguishes itself as an educational institution that stresses the development of globally competent graduates who embrace the key principles of fortitude, excellence, and uprightness. As FEU emphasizes the development of well-rounded individuals capable of navigating the complexities of a rapidly changing world, it is critical to investigate how these values influence the perspectives and behaviors of college students and millennials in terms of intimate relationships, particularly premarital sex. Understanding how FEU's values connect with Gen Z and Millennial attitudes regarding premarital sex might give useful insights into the changing societal norms and individual decision-making processes in the university. The authors of this study seek to determine whether the findings of the studies are the same for individuals belonging to different generations, specifically Gen Z college students and Millennial unmarried employees at Far Eastern University-Manila. According to Beresford Research (2024), individuals belonging to Gen Z were born between 1997 to 2012 and Millennials or Generation Y were born between 1981 to 1996. The sole focus of this study is to explain by comparing the perceptions of these two cohorts regarding PMS as the authors believe that this study will be an addition to the understanding of this topic of how these generations perceive this phenomenon. The underlying determinants shaping these perceptions among both Gen Zs and Millennials may be uncovered. Their perceived susceptibility, intensity, and self-efficacy on PMS will be assessed which will offer insights into the factors influencing individuals' viewpoints on PMS thus, this can have a significance on the healthcare of Filipino citizens by being utilized as a guide for health interventions. Specifically, the findings from this study may be used to disseminate the information to health and education sectors providing improved sexual health education in the Philippines

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customized accordingly to these perceptions and requirements of Gen Zs and Millennials. Ultimately, this study will add to the body of knowledge on generational differences in PMS beliefs and increase our understanding of health behavior theories such as the Health Belief Model.

Research Questions:

1. To what extent do the following factors influence their perception of PMS among Gen Zs:
   1.1. Susceptibility
   1.2. Intensity
   1.3. Self-Efficacy
2. To what extent do the following factors influence their perception of PMS among Millennials:
   2.1. Susceptibility
   2.2. Intensity
   2.3. Self-Efficacy
3. Is there a significant difference between the perceptions of Gen Z and Millennials towards PMS?

Hypotheses

The following are the hypotheses of this research:

1. Null Hypothesis (H_0):

There is no significant difference between the perspectives on PMS between Gen Z college students and Millennial employees at FEU-Manila.

2. Alternative Hypothesis (H_a):

There is a significant difference between the perspectives on PMS between Gen Z college students and Millennial employees at FEU-Manila.

III. Materials and Methods

Research Design

This study used a descriptive-comparative research design to serve as the base of the study. To delve into the perceptions surrounding PMS among two distinct generational groups of Gen Z students and Millennial employees at Far Eastern University (FEU) in Manila, the authors of this study formulated a convenience sampling approach. Participants representing both generations were selected from the FEU community. Data collection was conducted via an online survey administered through Google Forms, allowing for the efficient gathering of responses.

Participant characteristics

The targeted participants of this study are the 2nd-year college students and the academic and non-academic employees of Far Eastern University-Manila for the school year 2023 - 2024 who are part of the Gen Z or Millennial age bracket respectively. The Gen Z age group is composed of individuals born from 1997 to 2012. The Millennial age group is composed of individuals born from 1981 to 1996 (Gorynski, 2023). Since this study focuses on the two cohorts' beliefs on PMS, unmarried participants are only included in this study.

Sampling procedures

The procedure used for selecting participants is convenience sampling, which is a non-probability sampling technique used to gather participants that are most convenient or available to the researchers (Simkus, 2023). Since this is a non-probability sampling method, the researchers followed no pattern when gathering participants for their study. The targeted number of participants with this sampling method is 50 individuals: 25 Gen Z college students and 25 Millennial unmarried employees. The reasoning for this number of participants is provided by Budiu & Moran (2021) who mentioned that a considerable and appropriate number of participants for quantitative studies is at least 40 participants. The 40-user guideline gives a guarantee of a small margin of error and a high degree of confidence which may result in strong inferences thus, it is deemed to be the most straightforward and likely to provide reliable results. Getting respondents below this number can still be acceptable, however it is riskier as it could lead to higher risk and bigger margins of error.

Data Collection and Data Analysis

The study investigated the "perspective gap" between these generations using adapted questions from the study by Yau and colleagues (2020) to determine whether Gen Zs and Millennials hold different views regarding PMS. To guarantee reliable and sufficient adapted questions, the previous study involved three experts who evaluated the tool's content validity. The reliability of the instrument was assessed through a pilot test with 47 students, a representative sample of the target population. The authors of this study chose only the 3 factors or subtopics from the questionnaire, namely Perceived Susceptibility, Perceived Severity, and Perceived Self-Efficacy, relevant in achieving this study's objectives. The Perceived Severity factor was changed into Perceived Intensity for this study (see Appendix A). To determine if there is a statistically significant difference between the two groups, the researchers used adapted questionnaires that will assess both groups' scores on Perceived Susceptibility, Perceived Intensity, and Perceived Self-efficacy in the context of PMS. The researchers will use Jamovi, a statistical software to calculate the descriptive statistics and perform an independent samples t-test analysis to compare and interpret the difference of perceptions with regards to the 3 factors between Gen Zs and Millennials based on the calculated results.

Data Scoring and Interpretation

The interpretation of the means was based on the following:

Legend:

Scale	Range Value	Verbal Interpretation
5	4.21-5.00	Strongly Agree / Can do it surely
4	3.41-4.20	Agree / Can do it
3	2.61-3.40	Neutral / Not sure
2	1.81-2.60	Disagree / Cannot do it
1	1.00-1.80	Strongly Disagree / Cannot do it surely

Ethical considerations

Researchers followed the code and principles of ethical consideration and protected the rights of every respondent. Voluntary participation, informed consent, anonymity, and

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confidentiality were observed during the study. Respondents were given the right to withdraw from participating in the study. Moreover, researchers would not pressure the respondents from ceasing to participate in the study.

IV. RESULTS

Profile of the Participants

TABLE 1. Distribution of Respondents by Age Range by Generation

Age Range by Generation	Number of Respondents	Percentage
Gen Z (18-27)	25	50%
Millennials (28-43)	25	50%

Table 1 shows that the total number of respondents was 50, wherein 50% or twenty-five (25) respondents are Gen Z (18-27) and 50% or twenty-five (25) respondents for Millennials (28-43). Hence, the equal distribution of respondents from each generation, with 50% falling into the Gen Z group and the other half labeled as Millennials, indicates a balanced and representative sample.

TABLE 2. Distribution of Respondents by Sex

Sex	Number of Respondents	Percentage
Male	21	42%
Female	29	58%

Table 2 shows that out of fifty (50) respondents, 42% or twenty-one respondents are male while 58% or twenty-nine (29) are female. This distribution shows a roughly balanced gender representation in the research sample, with a slightly higher proportion of female participants than male participants.

Questionnaire Score of the Gen Z and Millennial Participants

TABLE 3.1. Gen Z Participants' Scores of Perceived Susceptibility

Statement	Mean	SD	VI
1. Having a boy/girlfriend at school age is a risk for PMS.	3.32	1.11	Neutral
2. Seclusion with the opposite sex can lead to PMS.	2.80	1.04	Neutral
3. PMS at school age increases the risk of HIV/STIs.	3.76	0.97	Agree
4. PMS at school age increases the risk of pregnancy.	4.08	0.91	Agree
5. Sex education can reduce the risk of PMS at school age.	4.24	0.93	Strongly Agree
6. Pregnancy has no consequence for unmarried adolescents.	1.56	0.71	Strongly Disagree
7. Sexually provocative dress can induce PMS at school age.	2.32	1.18	Disagree
8. Drinking alcohol can lead to PMS at school age.	2.88	1.13	Neutral
9. Drug abuse/addiction can lead to PMS at school age.	3.08	1.12	Neutral
10. Watching pornography can result in PMS at school age.	3.52	1.33	Agree
OVERALL	3.16	3.88	Neutral

Table 3.1 shows the results of the perceived susceptibility of Gen Zs within FEU-Manila on PMS, with the interpretations grouped into "Strongly Disagree" (1.00–1.80), "Disagree" (1.81–2.60), "Neutral" (2.61–3.40), "Agree" (3.41–4.20), and "Strongly Agree" (4.21–5.00) ratings based on mean scores.

As shown in Table 3.1, the participants are found to be generally "Neutral," with mean scores ranging from 2.80–3.32 and SD scores ranging from 1.04–1.13, on factors like relationships at school age, seclusion with the opposite sex, and the use of substances like alcohol and drugs will eventually lead to PMS, while they "Agreed," with the mean scores ranging from 3.52–4.08 and SD scores ranging from 0.91–1.33 that PMS increases the risks of HIV/STIs and pregnancy and that watching pornography influences PMS at school age. The participants "Strongly Agreed," with a mean score of 4.24 with an SD score of 0.93, that sex education can greatly reduce the risk of PMS at school age, while they "Disagreed," with a mean score of 2.32 with an SD score of 1.18, that sexually provocative dress induces PMS. Lastly, the participants "Strongly Disagree," with a mean score of 1.56 with an SD score of 0.71, that pregnancy has no consequences for unmarried adolescents. Overall, the researchers find that, with an overall mean score of 3.16 and an SD score of 3.88, the Gen Zs of FEU-Manila are 'Neutral' when it comes to their perceived susceptibility to PMS.

TABLE 3.2. Gen Z Participants' Scores of Perceived Intensity

Statements	Mean	SD	VI
1. Teenage pregnancy can cause adverse health impacts.	4.44	0.92	Strongly Agree
2. Unsafe abortion can result in many health-damaging consequences.	4.76	0.52	Strongly Agree
3. HIV infection is injurious to health and quality of life.	4.60	0.50	Strongly Agree
4. STIs are damaging to health and quality of life.	4.64	0.57	Strongly Agree
5. Teenage pregnancy can affect adolescents' life planning choices.	4.76	0.52	Strongly Agree
6. PMS can affect the economic status of teenagers and their families.	4.48	0.96	Strongly Agree
OVERALL	4.61	0.46	Strongly Agree

Table 3.2 shows the results of the questions based on the perceived intensity among Gen Z participants regarding the potential risks and consequences of PMS. The questions *"Unsafe abortion can result in many health-damaging consequences"* and *"Teenage pregnancy can affect adolescents"* life-planning choices' both received a mean score of 4.76 with an SD of 0.52, and both are interpreted as "Strongly Agree". Similarly, perceptions are "Strongly Agreed" for the rest of the questions, with mean scores ranging from 4.44–4.64 and SD scores ranging from 0.50–0.96. Overall, the perceived intensity across all questions is interpreted as "Strongly Agree" as the overall questions resulted in a mean score of 4.61 with an SD of 0.46 for Gen Z participants.

Data from Table 3.3 suggests Gen Z participants at FEU-Manila reported high self-efficacy in resisting sexual pressure within romantic relationships. The mean score for question no. 2 *"Refusing sexual conversations"* was 4.24 with an SD of 0.97, indicating a strong perception of being able to do so. Similarly, all other questions received mean scores between 3.16 and 4.24 (SDs ranging from 0.85 to 1.40), interpreted as "Can do it" on the survey instrument. This trend is reflected in

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the overall mean score of 3.81 (SD = 0.86), again signifying a general sense of self-efficacy in this area. Notably, the lowest mean score of 3.16 was associated with question 6, *"Preventing being alone with a girl/boyfriend,"* suggesting some uncertainty among participants regarding this specific behavior.

TABLE 3.3. Gen Z Participants' Scores of Perceived Self-Efficacy

Statements	Mean	SD	VI
1. Rebuke obscene talk from my girl/boyfriend.	4.16	0.85	Can do it
2. Refuse sexual conversations with my girl/boyfriend.	4.24	0.97	Can do it surely
3. Disregard my girl/boyfriend's invitation to their house.	3.64	1.32	Can do it
4. Resist touches, hugs or kisses from girl/boyfriend.	3.44	1.29	Can do it
5. Reject girl/boyfriend's invitation to nightlife venues.	3.76	1.27	Can do it
6. Prevent being alone with a girl/boyfriend.	3.16	1.40	Not sure
7. Restrain my sexual desires.	4.00	1.00	Can do it
8. Deny my girl/boyfriend's request to have sex	4.08	1.04	Can do it
OVERALL	3.81	0.86	Can do it

TABLE 4.1. Millennial Participants' Scores of Perceived Susceptibility

Statements	Mean	SD	VI
1. Having a boy/girlfriend at school age is a risk for PMS.	4.20	0.58	Agre
2. Seclusion with the opposite sex can lead to PMS.	3.76	1.05	Agree
3. PMS at school age increases the risk of HIV/STIs.	4.28	0.74	Strongly Agree
4. PMS at school age increases the risk of pregnancy.	4.56	0.65	Strongly Agree
5. Sex education can reduce the risk of PMS at school age.	4.32	1.03	Strongly Agree
6. Pregnancy has no consequence for unmarried adolescents.	2.36	1.38	Disagree
7. Sexually provocative dress can induce PMS at school age.	3.76	1.13	Agree
8. Drinking alcohol can lead to PMS at school age.	3.60	0.76	Agree
9. Drug abuse/addiction can lead to PMS at school age.	4.08	0.70	Agree
10. Watching pornography can result in PMS at school age.	3.92	1.04	Agree
OVERALL	3.88	0.44	Agree

Table 4.1. presents the scores of the mean for the Millennial respondents and their verbal interpretation for each question under Perceived Susceptibility. The fourth question, *"Premarital sex at school age increases the risk of pregnancy,"* obtained the highest mean value of 4.56 interpreted as "Strongly Agree" with SD of 0.65. The sixth question, *"Pregnancy has no consequence for unmarried adolescents,"* had the lowest mean value of 2.36 interpreted as "Disagree" with an SD score of 1.38. The rest of the questions had a mean value ranging from 3.60-4.32 with varying interpretations of "Agree" and "Strongly Agree" with SD scores ranging from 0.76-1.03. Overall, the factor Perceived Susceptibility obtained a mean value of 3.88 with 0.44 as its SD for Millennial respondents.

TABLE 4.2. Millennial Participants' Scores of Perceived Intensity

Statements	Mean	SD	VI
1. Teenage pregnancy can cause adverse health impacts.	4.60	0.50	Strongly Agree
2. Unsafe abortion can result in many health-damaging consequences.	4.78	0.48	Strongly Agree
3. HIV infection is injurious to health and quality of life.	4.89	0.41	Strongly Agree
4. STIs are damaging to health and quality of life.	4.84	0.37	Strongly Agree
5. Teenage pregnancy can affect adolescents' life planning choices.	4.76	0.52	Strongly Agree
6. PMS can affect the economic status of teenagers and their families.	4.72	0.54	Strongly Agree
OVERALL	4.73	0.35	Strongly Agree

Table 4.2. shows the scores of the mean for the Millennial respondents and their verbal interpretation for each question under Perceived Intensity. The third question, *"HIV infection is injurious to health and quality of life,"* obtained the highest mean value of 4.89 interpreted as "Strongly Agree" with SD of 0.41. The first question, *"Teenage pregnancy can cause adverse health impacts,"* had the lowest mean value of 4.60 interpreted as "Strongly Agree" with an SD score of 0.50. The rest of the questions had a mean value ranging from 4.72-4.84, all interpreted as "Strongly Agree" with SD scores ranging from 0.37-0.54. Overall, the factor Perceived Intensity obtained a mean value of 4.73 with 0.35 as its SD for Millennial respondents.

TABLE 4.3. Millennial Participants' Scores of Perceived Self-Efficacy

Statements	Mean	SD	VI
1. Rebuke obscene talk from my girl/boyfriend.	3.76	1.09	Can do it
2. Refuse sexual conversations with my girl/boyfriend.	3.60	0.91	Can do it
3. Disregard my girl/boyfriend's invitation to their house.	3.44	1.04	Can do it
4. Resist touches, hugs or kisses from girl/boyfriend.	3.08	1.38	Not sure
5. Reject girl/boyfriend's invitation to nightlife venues.	3.36	0.99	Not sure
6. Prevent being alone with a girl/boyfriend.	3.24	1.05	Not sure
7. Restrain my sexual desires.	3.76	0.78	Can do it
8. Deny my girl/boyfriend's request to have sex.	3.52	1.19	Can do it
OVERALL	3.47	0.86	Can do it

Table 4.3 shows the mean scores for the Millennial respondents and their verbal interpretation for each question under Perceived Self-Efficacy. Questions number 1 *"Rebuke obscene talk from my girl/boyfriend"* and number 7 *"Restrain my sexual desires"* got the highest mean score of 3.76 with a SD of 1.09 for question number 1 and a SD of 0.78 for question number 7; which is interpreted as "Can do it". On the other hand, question number 4 *"Resist touches, hugs or kisses from girl/boyfriend"* got the lowest mean score of 3.08 with a SD of 1.38; which is interpreted as "Not sure." As for the other questions, the mean score ranges from 3.24-3.60 with a SD ranging from 1.05 to 0.91, interpreted as "Not sure" and "Can do it." Overall, the factor Self-Efficacy obtained a mean value of 3.47 with 0.86 as its SD for Millennial respondents.

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TABLE 5. Independent Samples T-Test Statistics and Descriptives

Independent Samples	Mean	Median	SD	SE	p-value	Effect size (Cohen's d)
Gen Z *Perceived Susceptibility*	3.16	3.10	0.603	0.121		
Millennial *Perceived Susceptibility*	3.88	3.90	0.437	0.0873	< .001	-1.38
Gen Z *Perceived Intensity*	4.61	4.83	0.460	0.0920		
Millennial *Perceived Intensity*	4.73	4.83	0.347	0.0694	0.305	-0.293
Gen Z *Perceived Self-Efficacy*	3.81	4.00	0.856	0.171		
Millennial *Perceived Self-Efficacy*	3.47	3.50	0.862	0.172	0.168	0.396

Table 5 shows the comparison between Gen Zs and Millennials among the three factors (*Perceived Susceptibility, Perceived Intensity, and Perceived Self-Efficacy*) that was statistically analyzed using independent samples t-test. Among the three variables, there is only a significant difference between Gen Z and Millennial participants' mean scores on Perceived Susceptibility ($p = < 0.001$) with a mean difference of 0.72, that is interpreted as "Neutral" and "Agree" respectively. Also, it has the largest effect size (Cohen's $d = -1.38$) that can be interpreted as a large effect while the other two variables can be interpreted as only small effect. In the Perceived Intensity and Perceived Self-Efficacy factors, both groups' mean scores are interpreted as "Agree" and "Can do it" respectively, and there are no significant differences between both groups with regards to the respective factors.

V. Discussion

The primary goal of this quantitative study is to compare Millennials' and Generation Z's perspectives on PMS among college students and employees at FEU-Manila utilizing predetermined factors namely, Perceived Susceptibility, Perceived Intensity, and Perceived Self-Efficacy. The researchers chose their respondents because college students and FEU-Manila personnel represented these two generations. The study's key findings are the following:

Perceived Susceptibility

The results showed that Millennials and Gen Z have different perceptions about their susceptibility to PMS. Participants from Generation Z demonstrated a neutral impression of susceptibility, indicating a lack of pronounced sensitivity or resilience to its detrimental effects. However, Millennials agreed more strongly with being susceptible to PMS, suggesting that they are more aware of the risks involved. The neutral stance of Gen Z about vulnerability could point to the necessity of focused initiatives to improve their comprehension of potential risks associated with PMS. On the other hand, Millennials' greater consensus regarding susceptibility points to a thorough knowledge of the possible repercussions of having sex before marriage. Although, there was disagreement among Millennials regarding the consequences of pregnancy for unmarried adolescents, indicating a divergence in opinions on this issue.

Perceived Intensity

Both generations showed a clear understanding of the seriousness of PMS-related side effects, such as unintended pregnancies, STIs, and psychological discomfort. This collective understanding highlights the value of all-encompassing programs for sexual health education that address the social, psychological, and physical effects of early sexual involvement. Both Gen Z and Millennials agreed that PMS might have serious implications, although Millennials were more acutely aware of and agreed upon the seriousness of those consequences. This implies that both generations understand the significance of having sex before marriage, despite differences in views of susceptibility.

Perceived Self-Efficacy

Individuals from both groups reported confidence in their capacity to set limits for sexual activities and withstand pressures associated to PMS. This suggests a feeling of autonomy in overcoming the difficulties involved with close relationships. It is important to note that millennials showed a higher feeling of self-efficacy than Gen Z. In order to close the perceptual gap between Gen Z and older generations, it may be necessary for programs encouraging responsible sexual conduct to concentrate on raising self-efficacy among Gen Z individuals.

Significant differences between Gen Z and Millennial views of PMS were found in the study regarding susceptibility. However, both generations supported the null hypothesis of this study in terms of perceived intensity and self-efficacy. Although, it is to be noted that Millennials had a stronger knowledge and agreement with the intensity of the consequences when compared to Gen Z, indicating a more profound comprehension of the health and socio-economic effects linked to early sexual engagement. Different exposure to sexual health education, cultural norms, and individual experiences might be the cause of these discrepancies. Because of shifting societal norms, views regarding sexual health, and the impact of digital media on their beliefs, Gen Zs appears to be neutral about susceptibility.

VI. Conclusion

The difference of perception towards PMS between Gen Zs and Millennials explains that it is uniquely influenced by their personal beliefs, cultural norms, religious teachings, societal views, and past experiences. These sociocultural factors mold their general idea of sex, which influences their knowledge and behavior towards PMS. This study revealed that Gen Zs and Millennials have a relatively small to moderate difference in the perception and understanding towards PMS, as only one factor (Perceived Susceptibility) demonstrates their significant difference in beliefs among the three factors. Knowing that Gen Zs were more exposed during their upbringing in the age of digital media influence and widespread information, this may be an explanation to address the disparities between the two generations. These findings not only add to the current discussion of premarital sex, but also open the door to new research pathways that investigate the impact of developing digital platforms, peer dynamics, and cultural transformations on various generations' sexual

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practices. Significantly, it can develop quality and effective initiatives and strategies for promoting and educating the different cohorts regarding the importance of safe sexual practices and reproductive health. In addressing the limitations of this study, the researchers of this study recommend to future researchers are the following: gather more participants and adapt a probability sampling to demonstrate the representativeness of the population and derive a more generalizable conclusions; and explore other factors that influence the perceptions of different cohorts through other research instruments that measure related variables aside from Perceived Susceptibility, Perceived Intensity, and Perceived Self-Efficacy.

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