

Research Article

DOI: <http://dx.doi.org/10.18203/2394-6040.ijcmph20151034>

Attitude of adolescent school students towards reproductive health education

Rajnish S. Borkar^{1*}, Chanbas G. Patil², Swapnatai A. Meshram³

¹Department of Community Medicine, Government Medical College, Palakkad, Kerala, India

²Department of Community Medicine, Ashwini Rural Medical College & Hospital, Solapur, Maharashtra, India

³Department of Physiology, ESIC Medical College, Coimbatore, Tamil Nadu, India

Received: 30 July 2015

Revised: 26 August 2015

Accepted: 24 September 2015

***Correspondence:**

Dr. Rajnish S. Borkar,

E-mail: oshoborkar@rediffmail.com

Copyright: © the author(s), publisher and licensee Medip Academy. This is an open-access article distributed under the terms of the Creative Commons Attribution Non-Commercial License, which permits unrestricted non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

ABSTRACT

Background: Adolescence is a life's crucial transition phase with establishment of reproductive capacity. Sexual experimentations and lack of Reproductive Health information during this phase expose adolescents to serious health threats. Adolescents should have access to scientific Reproductive Health information to develop healthy attitude towards Reproductive Health issues. This study was undertaken to find out attitude of adolescent school students towards Reproductive Health Education and to identify communication pattern regarding reproductive health issues.

Methods: The study was cross sectional and carried out on 500 Adolescent Higher secondary school students in Solapur city. Pre-tested & Self-administered Questionnaire was used for collection of data.

Results: This study showed that students had favourable attitude towards Reproductive Health Education as majority (84.8%) of them recommended Reproductive Health Education in school curriculum. Lecture by expert was noted by 47% students as desired method of imparting Reproductive Health Education. Regarding Reproductive Health issues, 52.4% students preferred to communicate with Doctors/Health Workers followed by friends (35.6%).

Conclusions: Our study stressed the need of providing correct scientific information to adolescents regarding reproductive health by incorporating Reproductive Health Education in school curriculum.

Keywords: Adolescent, Attitude, Communication pattern, Reproductive health education

INTRODUCTION

Until a few years ago, most schools and parents equated Reproductive Health Education (RHE) with sex education and believed that it was a sure tool to corrupt the young adolescent and should therefore be avoided. However, increasing high-risk behaviour among the adolescents and more permissive popular mass media has led many to believe that it is not the question of should RHE be taught, but rather how it should be taught. Increased teenage pregnancies and indulgences of the adolescent in smoking, alcohol intake and drug use have necessitated that the adolescent should learn ways to

avoid peer pressure, need to understand more about their responsibilities in marriage and as parents, preparation for childbirth, etc. and lead a more productive & healthy life.¹

Sexual & reproductive health education is an educational experience that develops the capacity of adolescents to understand their sexuality in the context of biological, psychological, socio-cultural and reproductive dimensions and to acquire skills in managing responsible decisions and actions with regard to Sexual & Reproductive Health behavior.² Sexual & Reproductive Health education aims to achieve a range of behavioural

and health outcomes, including reduced sexual activity (including postponing age at first intercourse and promoting abstinence); reduced number of sexual partners; increased contraceptive use (especially use of condoms among adolescents who are sexually active, for dual protection); lower rates of child marriage; lower rates of early, unwanted pregnancy and resulting abortions; lower rates of infection with HIV and other sexually transmitted infections (STIs); and improved nutritional status³.

Thus the adolescents particularly in the age group of 15-19 yrs. need to be provided with correct scientific information to develop healthy attitude towards Reproductive Health. This study was therefore undertaken to find out attitude of adolescent school students towards Reproductive Health Education and to identify communication pattern regarding reproductive health issue in Solapur city.

METHODS

The present cross-sectional study was carried out on Adolescent Higher Secondary School Students in Solapur city, India. Those schools having all streams (arts, commerce and science) were sorted out and one school was selected by using simple random sampling technique. A written permission was obtained from the Principal of School before conducting the study. Data was collected with the help of pre-tested & self-administered Questionnaire. We assumed 50% proportion with 95 % confidence interval with error of 5% to determine the maximum sample size. The total sample size worked out to be 384 but in the present study 500 students were included. Students from one division of 11th and 12th

standard of each stream (Arts, commerce and science) were included in the study.

RESULTS

Out of 500 students, 211(42.2%) were girls and 289 (57.8%) were boys. Most of the students (88.4%) were in age group of 16 to 18 years. Overall student's mean age was 16.93 year.

Students attitude regarding family size, premarital sex & compulsory family planning

Table 1 shows that 57.2% students preferred one child as ideal family size while 42.6% student preferred two children and only 0.4% student preferred more than two children as ideal family size. Majority (85.8%) of students were against premarital sex while 7.6% had a neutral attitude and only 6.6% students were in favour of premarital sex. 84.2% students were of opinion that family planning should be made compulsory, 6.8% students were against it and 9% students were of undecided view.

Students attitude regarding reproductive health education

Majority (84.8%) of students recommended Reproductive health education in syllabus while very few (5.8%) students were against it. Higher Secondary level was the preferred stage of schooling to introduce RHE suggested by 61% students, secondary stage of schooling by 22.8% students and primary stage of schooling by only 22% students (Table 2).

Table 1: Attitude of students toward family size, premarital sex and compulsory family planning.

Sr.No	Questions	Response						
		Girls(n=211)		Boys(n=289)		Total(n=500)		
		No.	%	No.	%	No.	%	
1	Ideal Family Size	One Child	114	54.03	172	59.52	286	57.2
		Two Children	97	45.97	115	39.79	112	42.4
		More than two children	0	0	2	0.69	2	0.4
2	It is proper to have premarital sex?	Yes	3	1.42	30	10.38	33	6.6
		No	191	90.52	228	82.35	429	85.8
		Don't Know	17	8.06	21	7.27	38	7.6
3	Should family planning be made compulsory?	Yes	172	81.52	249	86.16	421	84.2
		No	15	7.11	19	6.57	34	6.8
		Don't Know	24	11.37	21	7.27	45	9

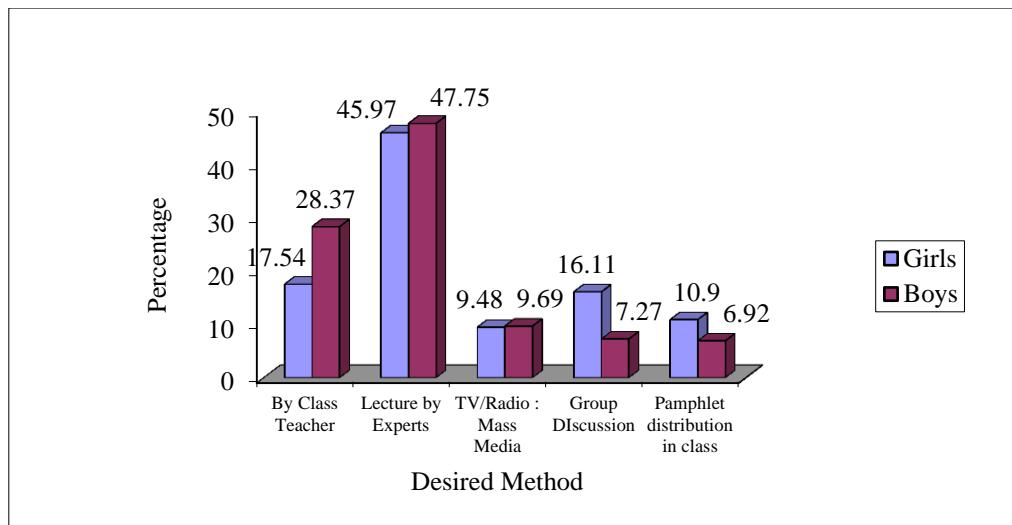


Figure 1: Desired method of impacting reproductive health education.

Table 2: Attitude of students toward reproductive health education (RHE).

Sr.No	Questions	Response					
		Girls(n=211)		Boys(n=289)		Total(n=500)	
		No.	%	No.	%	No.	%
Do you recommend RHE in curriculum?							
1	Yes	165	78.2	259	89.62	414	84.8
	No	17	8.06	12	4.15	29	5.8
	Don't Know	29	13.74	18	6.23	47	9.4
At what stage of schooling RHE should be introduced?							
2	Primary	1	0.47	10	3.46	11	2.2
	Secondary	38	18.0	76	26.20	114	22.8
	Higher Secondary	126	59.71	179	61.84	305	61
	Don't Know	46	21.8	24	8.30	70	14

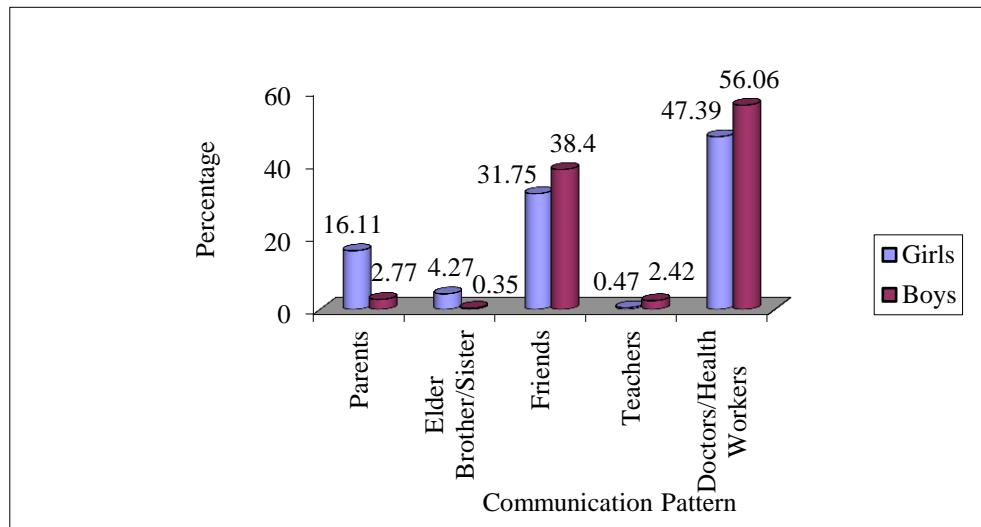


Figure 2: Communication pattern regarding reproductive health issues.

DISCUSSION

In present study, student's attitude towards acceptance of small family norm was positive as almost all students (99.6%) favoured small family norm. Other studies^{4,5,6} also reported that most of the adolescent participants were in favour of small family. Students also had healthy attitude toward premarital sex as majority of them were of the opinion that it is not correct to have premarital sex and also were of opinion that family planning should be made compulsory. Verma et al⁷ in their study reported that respondent's attitude towards pre-marital sex was negative with only 5.2% respondents believing in it while 3.3% were in different.

In this study students had favourable attitude towards RHE as majority (84.8%) of them recommended RHE in school curriculum. Similar observations were also noted in other studies^{7,8,9} indicating need of RHE in school curriculum. Introduction of RHE at Higher Secondary level was suggested by 61% students. But as period of adolescence start at Secondary School level it will be more appropriate to introduce RHE at Secondary School level.

Lecture by expert was first choice as a desired method of impacting RHE for both boys and girls this suggests that students favoured scientific approach towards Reproductive Health. Bhasin et al¹⁰ in their study reported that school teacher and doctors were considered by 69.4% and 63.6% of the respondent respectively to be the most appropriate person for providing sex education.

In the present study, 52.4% of students preferred to communicate with Doctor / Health Worker regarding Reproductive Health issues this was followed by Friends. Sonia Singh¹¹ in her study also noted that friends (57%) were the primary source of consultation (communication) for physical problem related to reproductive health. Hence friends can play a role of peer educator for providing scientific information about Reproductive Health.

CONCLUSION

In our study, we found that student's had healthy & positive attitude towards reproductive health issues like ideal family size, premarital sex and family planning. Majority of students recommended Reproductive Health Education in school curriculum and lecture by experts was mentioned as desired method for imparting RHE by about half of the students. Most of the students preferred to communicate with Doctor / Health Worker followed by friends regarding Reproductive Health Issues. There is need of providing correct scientific information regarding reproductive health to adolescents by incorporating reproductive health education in school curriculum and

by evolving appropriate communication strategies like peer education & lecture by experts.

ACKNOWLEDGEMENTS

I express my gratitude to Department of PSM, Dr. VMGMC, Solapur, India for support and guidance throughout the study. I am very much thankful to the School Principal and participant students for allowing me to conduct the study.

Funding: No funding sources

Conflict of interest: None declared

Ethical approval: The study was approved by the Institutional Ethics Committee

REFERENCES

1. Reproductive Health Education and Training. A manual for trainers, Parivar Seva Sanstha, New Delhi, 1998.
2. United Nations Educational, Scientific and Cultural Organization (UNESCO) and United Nations Population Fund (UNFPA). Handbook for educating on adolescent reproductive and sexual health. Book 2: Strategies and materials on adolescent reproductive and sexual health education. Bangkok, UNESCO Principal Regional Office for Asia and the Pacific: Regional Clearing House on Population Education and Communication, 1998.
3. Rosen JE, Murray NJ, Moreland S. Sexuality education in schools: the international experience and implications for Nigeria. Washington, DC, United States Agency for International Development, 2004 (USAID Policy Working Paper No. 12).
4. Srinivasa K, Sahai A, Ramalingam G, Premarajan KC. Knowledge and perception of adolescents regarding factors affecting family formation. *Journal of Family Welfare.* 1993;39(4):47–51.
5. Durge PM, Varadpande U. Impact Assessment of Health Education on urban adolescent girls. *Journal of Obs. and Gyn. of India.* 1996;46(3):368–2.
6. Mukherjee GG, Chakraborty AK, Pradhan S, Kar A. Knowledge of reproductive health issues among the school going teenager of rural Bengal. *J Obs Gyn India.* 2001;51(1):115–8.
7. Verma M, Chhatwal J, Mathew E. Safe motherhood when to begin. *Indian Pediatric.* 1994;31(8):901–5.
8. Thakor HG, Kumar P. Need assessment for sex education amongst the school children. *Indian Journal of Community Medicine.* 1998;13(2):62–8.
9. Aggarwal O, Sharma A, Chhabra P. Study in sexuality of medical college students in India. *Journal of Adolescent Health.* 2000;26(3):226–9.
10. Bhasin SK, Aggarwal OP. Perception of teachers regarding sex education in National Capital territory

of Delhi. Indian Journal of Pediatrics. 1999;66(4):527-31.

11. Sonia Singh. Reproductive Health of adolescent. Social Welfare. 1998;45(6):25-8.

Cite this article as: Borkar RS, Patil CG, Meshram SA. Attitude of adolescent school students towards reproductive health education. *Int J Community Med Public Health* 2015;2:484-8.