

PERCEPTION AND KNOWLEDGE REGARDING REPRODUCTIVE HEALTH AMONG ADOLESCENT MALES OF LALITPUR

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*“Adolescent is a
vulnerable state of life,
all responsible should be
careful about it”*

ABSTRACT

Background: Puberty is a significant phase of human growth. It has important implications for the development of regulatory competence and of physical, emotional, social maturity. Adolescents should have knowledge regarding their physical growth and reproductive health, so that unnecessary reservations and stress could be avoided. Adolescent males have as many health issues as adolescent females, but they are less likely to be seen in a clinical setting due to both individual factors and the health care system itself. Also, very few studies are done to access knowledge and perception of adolescent males regarding reproductive health. Hence, this study was designed to access the knowledge and perception of young adolescent males regarding physical growth and reproductive health which will help to design effective interventions mostly in terms of sex and health education.

Method: : A Self designed questionnaire was given to the participants after explaining the objective of the study and taking written consent .The data was tabulated and students’ perception and knowledge regarding reproductive health was analysed.

Result: 125 boys filled the form, mean age 13.2 ± 2.2 . Overall knowledge and perception regarding reproductive health was found to be satisfactory. Some shortcomings do exist like 50% participants did not know about contraceptives, 23% are worried about shape and size of their penis, and 23% feel no one understands them.

Conclusion: Adolescent possess some knowledge about reproductive health but still effective educational intervention is required to encourage more sensible and healthy behaviour which and may lessen stress and reservations that comes with pubertal maturation.

Key words: Adolescent, education, knowledge, male, puberty

INTRODUCTION

Adolescence constitutes a transition between childhood and adulthood whose onset includes pubertal maturation.¹ It can be a specifically turbulent as well as a dynamic period of ones' life. It has been defined as a period in which young people develop abstract thinking abilities, become more aware of their sexuality, develop clear sense of psychological identity and increase independence from parents.² Adolescents should have knowledge regarding their physical growth and reproductive health, so that unnecessary reservations and stresses could be avoided.

One in five people in the world today are between 10-19 years of age and 85% of them live in developing countries.³ However, as a group, they are not considered a health priority, which has resulted in poor sexual behaviour among them.⁴ Sexual reproductive health is one of the major causes of morbidity and mortality among young people.⁵

Even among the adolescents, issues regarding male puberty, reproductive health are still poorly addressed. Adolescent males have as many health issues and concerns as adolescent females, but they are much less likely to be seen in a clinical setting. This is related to both individual factors and the health care system itself. Working with adolescent boys involves gaining the knowledge and skills to address concerns such as puberty and sexuality, substance use, violence, risk-taking behaviours and mental health issues.⁶

Young people are vulnerable to negative sexual health outcomes, and they should be provided with information and skills to reduce such vulnerability. Like-skill based knowledge helps them to take important decisions.⁷

The perception and knowledge about pubertal changes and pubertal health has not been studied previously among adolescence in Nepal except few article related to menstruation done among females. Hence, this study was designed to access

the knowledge and perception of young adolescent males regarding physical growth and reproductive health which will help to design a effective interventions mostly in terms of sex and health education programs.

SUBJECTS AND METHODS

A Self designed questionnaire was prepared and projected to students of class seven and eight of two public schools in Kathmandu valley. The participants were explained the objectives of the study, they were ensured regarding the confidentiality of the response and then invited to participate. Written informed consent was obtained from students and teachers and head teacher. One hundred and twentyfive boys filled the form and returned. (Response rate about 96%).

RESULTS

The age of the participants ranges from 11-17. Mean 13.2 ± 2.2 . Fifty percent of participants did not have knowledge of contraceptives. Twenty eight percentages do not like the changes due to puberty, in their body. Twenty three percentages are worried about shape and size of their penis and 23% feel no one understands them. They were more comfortable in getting answers about reproductive health from friends rather than their family and teachers. The detail results are depicted in figure 1-7.

Figure:1 Response regarding pubertal change.

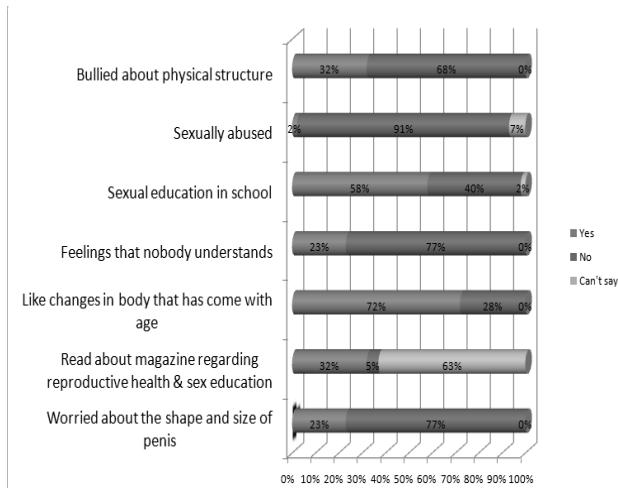


Figure: 4 How often do you bathe?.

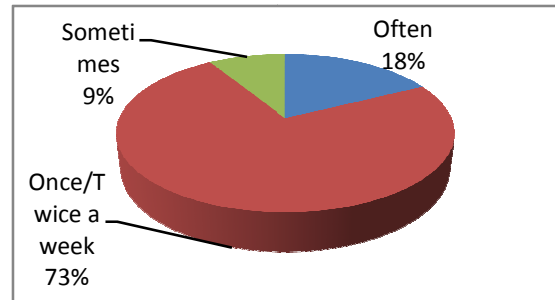


Figure5: How often do you change your undergarments?

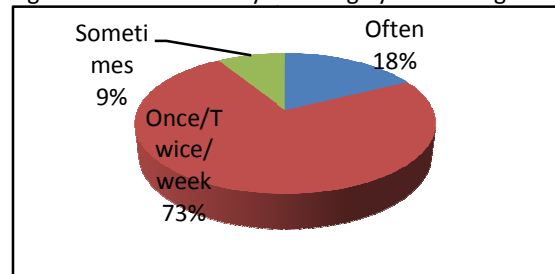


Figure 2: Do you undergo mood swing?

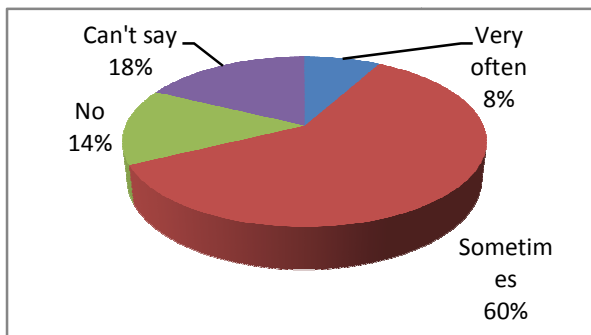


Figure:6 What do you think is the best medium for sex & health education?

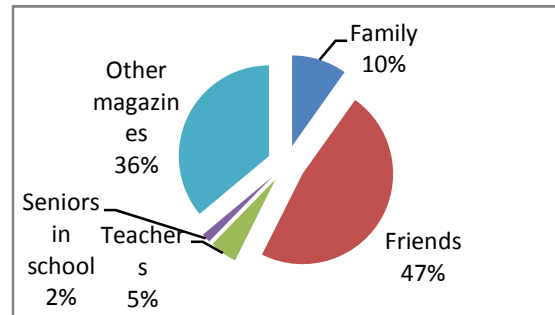


Figure: 3 Do you know about contraceptives?

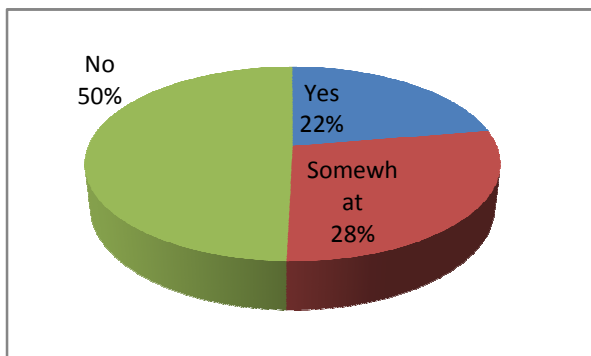
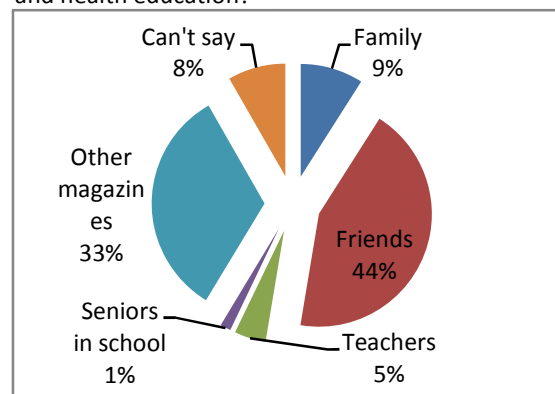


Figure:7 Whom do you ask your queries regarding sex and health education?



DISCUSSIONS

Adolescents are living in fast moving globalized world. Although, open discussion about sex and reproductive health is not done in most parts of our country, young people are more likely to be sexually active before marriage than their parents' generation due to open culture of western modernization through globalization of information.⁸ This can leave them vulnerable to negative health outcomes if they don't have proper information, skills and knowledge to reduce such vulnerability. Although, the knowledge level of our study subjects are satisfactory, there are some loops to be filled like 50% participants did not know about contraceptives (**Figure 3**). Sixty eight percentages did not answer a question regarding whether they have read any magazine related to sex and reproductive health (**Figure 1**). Twenty eight percentage do not like the changes due to puberty, in their body (Figure 1). Twenty three percentages are worried about shape and size of their penis (Figure 1) and 23% feel no one understands them (Figure 1). These facts strongly suggest the need of addressing young peoples' queries and stress regarding reproductive health. There should be an environment where they can communicate freely and gain knowledge about adolescence. In our study, participants were more comfortable in getting answers from friends rather than their family and teachers. (Figure 6, 7). Figure 6 shows that 47% and 36% of student think that friends and other Magazines are the best medium for sex education and 44% ask their queries regarding reproductive health to their friends but very few to their teachers and family (figure 7). This itself puts question in the validity of the response and knowledge they get. Therefore, proper channel is required to discuss about sex and reproductive health. Some may advocate that talking about sex and sexuality to young people could encourage earlier sexual experimentation. However, international evidence consistently reveals that

openness and sexual education encourages more sensible and healthy behavior and may also delay sexual debut.⁹

Education plays a vital role in guiding and changing young peoples' behavior and teachers are the main deliverers of sex and reproductive health education in school.¹⁰ Properly trained teachers to give life skill-based sex education in school is the essential requirement of today's time. School plays an important role in forming young people about sexual health matters. In our study also, 58% student wanted sex education in school (Figure 3). We do have National Adolescents Health and Development Strategy 2000¹¹ based upon which, students at higher secondary level are taught basic sex education using the textbook "Health, Population and Environment."¹² However, teaching sexual health in school may become faulty if it is examination orientated which overlooks the practical issues like feelings, stress and relationships involved in sex and reproductive health. Moreover, teachers' also have several problems which hinders effective reproductive health education in school. This includes embarrassment in teachers side to teach sex education, teachers may be confused as existing courses are insufficient to address young people's need.^{13,14} Most Nepalese teachers, from both government and private schools, are reluctant to discuss sex education. Improving teachers' training and skills is particularly successful in boosting the confidence of those teachers who think delivery of sex education curricula as most challenging. Various studies have also recognized that on-going professional development is needed to sustain teachers' confidence in delivering effective sex education.¹⁵ Teaching in Nepal often delivers facts and biological information, parents are more interested to give moral education and pupils are looking for life skill based sex education.⁷ Hence, even more refined health education system

is required to address the needs of adolescents. Our study also suggests that there are areas which needs to be dealt strongly for proper physical and mental growth of young people. In-depth qualitative research in this field can be a great support in addressing many fundamental issues.

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