

Awareness about Reproductive Health Issues among Adolescents - A Review

Blessy Shalom Berry
(Ph.D Scholar, Sharda University)

Dr. Deepak Sethi
(Professor , Sharda University)

Abstract:- Latin word “Adolescere” means to grow up. The term adolescence is derived from this term .Age between 10-19 years is said to be adolescent period by WHO. During this period, the life characterized into critical physical and psychological changes towards adulthood. In this , we have discussed the awareness in various issues in adolescent period such as knowledge and attitude towards sexual and reproductive health, family planning, sexually transmitted diseases, menarche and menstruation. Various studies discussed shows that awareness level in reproductive health issues are very low. It is very important for the adolescents to attend training or the school and health services have to take active role in bringing awareness regarding reproductive health so that many of the complications and especially sexually transmitted diseases can be prevented among adolescents.

Keywords:- Adolescent, Reproductive Health, Family Planning, Awareness.

I. INTRODUCTION

According to 2011 census, India has 250 million adolescents which is highest population in the world. In India , 253 million adolescents which constitutes one- fifth of the population of our country.^[1] Reproductive health is a state in which a person’s physical dimension, mental dimension and social dimension should be complete and all the matters related to structures of reproduction and its physiology. Reproductive health advises that every individuals should be capable of having a satisfied and safe sex life style and also they have the ability to reproduce and independence to decide.

Reproductive health is women’s and men’s responsibility. If men take the responsibility of reproductive health, and when they are supported with reproductive health services, the barriers of gender inequality will be reduced, both men and women will enjoy reproductive health rights and adopt safe sexual behaviours and they will prove as best parents. Therefore the ultimate aim of men’s responsibility in reproductive health will bring down reproductive mortality and morbidity. ^[2] There are inequalities in understanding the sexual and reproductive rights which leads to poor health outcomes.^[3] World Health Organization defines adolescence as the period between post childhood period and preadulthood period which is 10-19 years.In this period which is from

weakness, owing to the not able to assess composite concepts and decision making which is poor over the area of sexual and reproductive health aspects. In India there are 243 million of adolescents constituting one fourth of the population.([www.http://www.who.int](http://www.who.int))

II. NEED OF THE STUDY

Sexual and reproductive health in adolescence is a major concern . In India, we have adolescent health programme keeping in mind the health needs of adolescence. Priority is given in the areas of nutrition, sexual and reproductive health, mental health, gender based violence is addressed , non communicable disease and substance abuse. Adolescents need to have protective factors to develop resilience to resist negative behaviours . Interventions in sexual and reproductive health of adolescents include sexually transmitted disease management, Adolescent friendly health services, family planning, Weekly Iron and Folic acid supplementation , Menstrual hygiene . ^[4]A study by Down to earth staff findings show that providing iron and folic acid tablets to school going as well as non school going adolescent boys and girls will cost Rs.3000 crore per year, Mental health care for adolescents Rs. 8134 crores and treatment costs include 2,745 crores. Thus there is a lot of need for adolescent health .^[5] Adolescent boys and girls are not having access to information on issues affecting their lives and have limited access to develop their capabilities which is important for their active participation. Nearly 43% of girls drop out before completing their secondary education due to various reasons which include responsibilities at home, child labour, marriage, less employment opportunities after education, school at distant place, lack of sanitation facilities at school. Each year 1.5 million girls getting married in India who are under 18 years which makes India the largest number of child brides .

To overcome all these factors, adolescent boys and girls need to aware about their reproductive health which helps them to take right decision in lives.(Unicef.org/ India)

III. KNOWLEDGE REGARDING SEXUAL AND REPRODUCTIVE HEALTH

Factors that influence sexual and reproductive health, information, attitude and practices of adolescents in Boko Province It showed that sexual and reproductive health information is lower among the adolescents who are staying in the rural districts than compared to Urban district.

Sexual and procreative health information was mainly from educational institutes, friends, siblings, medical practitioners, media and the radio. In context of knowledge, (32.4%) that is one third of the adolescents does not know about modern contraceptives, 15.6% does not have the knowledge of the barrier methods for males or the pill. There was no considerable increase in the level of knowledge between boys (19.7%) and girls (12.2%), even though the boys know the barrier methods in male and the pill.^[3] Lack of knowledge about reproductive health and services provided for reproductive health leads to teenage pregnancy, unsafe abortions and sexually transmitted diseases.^[1]

IV. ATTITUDES TOWARDS SEXUAL AND REPRODUCTIVE HEALTH

Male gender in adolescents says to be older in the sexual activity. It is found that they have more eagerness, craving in start of sexual activity early as compared with girls. Increased level of hormones in male gender are the reason for the desire and inquisitiveness told by participants. Most of the participants used consistent condom use because they feared that they will develop STD and RTI. Participants believed that society around us admits and encourages teenage boys to involve in sexual activity as an early age to show their manhood and sexual orientation. Teenage girls are criticized and judged for the early initiation of sexual activity.^[6] In the Personal attitudes towards sexuality and reproductive health 79 (24.2%) agreed that live in relationship before marriage is acceptable, whereas 87 (26.7%) agreed that away from sexual activity during adolescence is a very difficult task.^[7]

➤ Awareness About Reproductive Health

Sexually transmitted Infection awareness very low ranging from 9.6% to 13%.^[8] At least two-thirds of boys wanted treatment, compared to approximately one in four girls. In rural 66.2% boys and 23.1% girls; In urban: 69.4% boys, 30.7% girls. The majority of the participants (86.8%, $n=283$) agreed that for preventing an unwanted pregnancy, family planning method is essential. 216 (66.3%) agreed that during sexual activity, females are accountable for protection.^[9] Only 9% of the awareness about procreative health is good. 13.7% average and 77.2% are very poor knowledge.^[10] Some parents had negative attitude towards sex education of adolescents. They also reluctant to learn about sex education.^[11] Adolescent boys are not in favour of getting information about reproductive health from authorities in hospitals as they don't feel comfortable. At the same time,

they are willing to discuss with their peer group about reproductive health information even though they don't get clear information.^[12]

➤ Awareness Towards Std And Hiv/Aids:

Adolescents are not having much awareness regarding STD or HIV/AIDS.^[10] They are exposed to many risks and it can lead to early pregnancy, STD, school drop out due to poor communication in the family. Parent adolescent communication helps to avoid these risks and help more awareness towards sexual and reproductive health issues.^[13] Girls who had adequate knowledge on STD & HIV/AIDS are found to have escaped from these diseases.^[14] Most of the adolescents has not heard about HIV/AIDS.^[15] Knowledge about HIV/AIDS was very poor in 97.05% adolescent girls.

➤ Awareness Towards Family Planning:

Many adolescent girls lack knowledge about family planning due to this they are not able to do decision making in the family. Nearly 18.46% were reporting that they are getting pressure from in laws to have children immediately after marriage. Women's decision making, communication between the couple, agreement towards contraception and fertility increases the use of contraceptives.^[16] Only 15% of married adolescent girls use latest contraceptives which leads to highest fertility rate. 90% of the adolescents has low knowledge about contraception.^[15]

➤ Awareness About Menarche And Menstruation:

Menstruation is a terrifying and uncomfortable situation where the adolescents was not aware of it. 51.94% girls told that they know about menarche through one of their family members. Out of 15 girls who used cloth, only 2 girls were using soap and water to clean the used cloth. Most of the girls (96%) show restriction towards attending religious ceremonies, whereas 84% going school, offices etc during menses.^[14]

V. CONCLUSION

Adolescent is a crucial age where they need decision making on few concepts like family, contraception and marriage. It is very important that they need to know about reproductive health and the importance in their family life. Adequate knowledge and awareness will bring them a responsible person in their family duties especially in family planning and it can avoid many bad consequences in their family life such as abortion, teenage pregnancy, sexually transmitted diseases etc. It is our duty to bring more awareness programmes for the adolescent through Government and private health agencies to bring a healthy generation.

ACKNOWLEDGMENT

The authors are thankful to the referred authors whose findings were helpful in compiling this review article.

CONFLICT OF INTEREST:

There is no conflict of interest.

REFERENCES

- [1]. Sharma.S, Akhta F, Singh R.K, Mehra .S, July (2021), Comparing reproductive health awareness,Nutrition and hygiene among early and late adolescents from marginal population of India:A community based cross sectional study, *Health care*, Vol 9, Issue 8, P.No 2-11.
- [2]. Reeder et al(2018) , Maternity Nursing, Family, Newborn and women's health care, 19th edition, Wolter's Kluwer India, NewDelhi,Page no 11.
- [3]. Phongluxa K, Langeslaq G, Jat T.R, Sengchanh Kounnavona, Khan M.A, Essink D.R, August (2020), Factors influenzing sexual and reproductive health among adolescents in Lao PDR.
- [4]. Park.K, Park's Textbook of Preventive and Social Medicine , 24th edition, 2017, M/s Bhanot Banarsidas Publishers, Jabalpur India, P No 485.
- [5]. Bibek Debroy,Government needs to invest in young people's health,Express Health care, News Bureau, November 16,2021
- [6]. Larsson.F.M, Sword R.B, Narvez G, Ugarte W.J, March (2022), Exploring sexual awareness and decision making among adolescent boys and girls in rural Nicaragua- A socioecological approach.*Sexual and Reproductive health care*, Vol 31, P.No 1-6.
- [7]. Muanda F.M, Gahungu N.P, Wood F, Betrand J.T, Apr (2018), Attitudes towards sexual and reproductive health among adolescents and young people in Urban and Rural DR Congo, *Reproductive Health*,Vol 15, P.No 2-14.
- [8]. Desai.S, Pandey.N, Singh R.J, Bhasin.S, June 2021,Gender inequities in treatment seeking for sexual and reproductive health amongst adolescents: Finding from a cross sectional survey in India, *SSM-Population Health*, Vol.14, P.No 1-10.
- [9]. Desiree,Govender D, Solshni.N, Taylor.M, July (2019), Knowledge, attitudes and peer influences related to pregnancy, sexual and reproductive health among adolescents using Maternal health services in Ugu, Kwazulu-Natal, South Africa., *BMC Public health*, P.No 3-16.
- [10]. Shankar.P, Dubeja.P, Gadekar T, Mukherji.S, April (2017), Reproductive health awareness among adolescent girls in Government schools, at Urban slum, Pune, *Medical journal of Dr.D.Y Patil University*, Vol 10, Issue 2, P.No 133-137.
- [11]. Goli.S, Rahimi.F, Goli.M, April (2022), Experiences of teachers, educators and school counsellors about the sexual and reproductive health of educable intellectually disabled adolescent girls; a qualitative study, *Reproductive Health*, Vol 19, P.No 2-10.
- [12]. Kamath V.G, Kamath .A, Roy.K, Rao C.R, Hedge.A, Ashok.L, March (2016), A qualitative study on how adolescent males in South India view reproductive health, *International Journal of Mental Health*, P.No 1-7.
- [13]. Malango N.T, Hegena T.Y, Assefa N.A, May (2022), Parent adolescent discussion on sexual and reproductive health issues and its associated factors among parents in Sawla Town, Ethiopia, *Reproductive health*, Vol 19, Article no 108,P.no 2-11.
- [14]. Verma.M, Kazi.Y.K, Suryawashi, Sudam.R, Feb(2021), Reproductive and sexual health knowledge along with menstrual hygiene practices among late adolescent girls 15-19 years, in Urban slum,*International Journal of Community Medical Public health*, Vol 8, Issue 6, P.No 1849-1856.
- [15]. Sharma , Maheswari.S, Khumatada I, Shekha.C, Sunil.M, April (2021), Inequalities in the reproductive health knowledge and practices of unmarried adolescent boys and girls in Eastern India, a cross sectional survey. *Research square* ,Page no 1-29.
- [16]. Dixit.A,Bhana.N, Benmarhnia.T, Reed.E (2021)The association between early in marriage fertility pressure from in laws and family planning behaviours, among married adolescent girls,in Bihar and Uttar Pradesh, India.*Reproductive health*, 2021, 18-60.