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ISSUES AND RESEARCHES IN
ADOLESCENT'S REPRODUCTIVE
HEALTH KNOWLEDGE

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1 Abstract

This paper examines the various empirical researches on adolescent's reproductive health knowledge highlighting the potential dangers faced by adolescents. The paper recommends that sexuality education and adequate reproductive health services should be provided to adolescents in schools at all levels.

Introduction

The study of adolescent's reproductive health knowledge and sexual behaviour have revealed some controversial, contradictory and sometimes thought provoking issues, ideas or researches. 7 This paper attempts to highlight some of these issues and researches.

The controversial nature of 1 adolescents' reproductive health knowledge and sexual behaviour notwithstanding many researchers both local and foreign have attempted to investigate empirically the nature, factor, profile as well as relationship between adolescents' reproductive health knowledge and sexual behaviour or activities.

Consequently, the following related empirical studies will be highlighted: (1.) Causes, effects and remedies of unwanted pregnancies.

(2.) Adolescents' sexual relationship.

(3.) Sexual behaviour and contraceptive practices.

(4.) Attitude of parents and teachers towards sex education.

(5.) Pattern of adolescents' sexual behaviour.

(6.) Factors affecting productive health knowledge.

5 Causes, Effects and Remedies of Unwanted Pregnancies

Heise Moore and Toubia (1996) conducted an empirical survey on the causes, effects and remedies of unwanted pregnancy in Sub-Saharan Africa. Their findings show that 20 million pregnancies in the study are conceived each year, one-third or 6.75 million are unwanted pregnancy can be deadly leading to unsafe abortions causing the death of at least 200 women each month with a high rate of school drop-out among adolescent girls in the area of study. Their study recommended that 12 government and donor agencies should make programmatic changes to:

- (i) Ensure that all individuals including adolescent girls and unmarried women should have access to good quality confidential family planning service.
- (ii) Ensure that all health workers should provide information technical and communication skills necessary for offering high quality care.
- (iii) Offer reliable information and compassionate counselling to all women with an unwanted pregnancy.
- (iv) Ensure that women 6 have control over their sexuality and reproduction, rectify power imbalances between men and women and promote caring, responsible behaviour among men in sexual relations, contraception, pregnancy and childcare.
- (v). Address sexual coercion and all forms of sexual violence against women.
- (vi) Address the problem of unwanted pregnancy among young people and modify attitudes that stigmatise pregnant girls (Heisé Moore and Toubia 1996).

Adolescent's Sexual Relationship

Melgosa (1997) surveyed the profile of adolescent sexual relationship in Philippines using a sample of 3,000 urban and rural adolescent in secondary school. 9 The purpose of this survey was to determine the profile of adolescent sexual relationship, factors of adolescent sexuality, profile of adolescent sexual act as well as profile of adolescent mother.

Melgosa reported sexual relationship in adolescence usually occur in unfavourable circumstances very quickly in strange dark place with fear of being surprised, without having talked about the matter together with fear of a possible pregnancy, girls with vaginal pain and boys with premature ejaculation. Melgosa further reported that initial sexual relationship and experiences are not usually motivated by genuine love. On this basis Melgosa (1997) summarised that the factors of adolescent sexuality in her study to include:

- (1.) Physiological changes
- (2.) Search for affection
- (3.) Curiosity
- (4.) Demonstration of maturity and
- (5.) Fulfillment of group expectation

Finally, Melgosa (1997) reviewed two separate view points of adolescent sexual acts:

(a) Profile of Adolescent who Carries out Sexual Acts Early

- (i) Usually the son or daughter of a single mother, divorced parents or from an unstructured family.
- (ii) Low academic achievement
- (iii) Low socio-economic level
- (iv) Has brothers or sisters and friends who are sexually active
- (v) Has parents of a low cultural level
- (vi) He/she rejects religion
- (vii) Has tendency to consume tobacco, alcohol and other drugs
- (viii) Has few communication skills (Melgosa, 1997).

(b.) Profile of Adolescent who Postponed Sexual Acts

- (i) Has a stable family
- (ii) Has good scores in intelligence tests and school is going well
- (iii) The family's socio-economic level is comfortable
- (iv) Has brothers or sisters and friends who do not practice the sexual act

- (v) Has parents with a good cultural level
 - (vi) He/she is a believer with clear moral principles
 - (vii) He/she hardly ever uses psychoactive substance (or not at all)
 - (viii) Has good verbal expression ability
- (Melgosa, 1997).

Sexual Behaviour and Contraceptive Practices

In a survey designed ¹¹ to determine the pattern of sexual behaviour, contraceptive practice and reproductive health knowledge among school adolescents in rural Franschhoek (South Africa), Buga, Amoko and Ncayiyana (1998), concluded that sexual maturation occurs ¹³ at an earlier age than previous rural adolescents. According to them, sexual maturation in the rural adolescents under investigation in South Africa is associated with early initiation and ⁶ a high level of sexual activity coupled with low contraceptive usage as well as a high rate of adolescent pregnancy and sexually transmitted diseases, which exposes rural adolescents in South Africa to a high risk of HIV infection.

Attitude of Parents and Teachers Towards Sex Education

Conducting an empirical research on the attitude and belief of parents, teachers and students towards sex education in the Netherlands, (Holland), Forrest and Kanabus (2000) were interested in providing answers to the following question:

- (i) What is sex education?
- (ii) What are the aims of sex education?
- (iii) What skills should sex education provide or develop?
- (iv) Who should teach sex education?
- (v) What should constitute the content of sex education?
- (vi) What are the moral implications of teaching sex education to students?

The findings of Forrest and Kanabus revealed that sex education seek both ¹⁵ to reduce the risk of potentially negative outcomes from sexual behaviour like unwanted or

unplanned pregnancies and infection with sexually transmitted diseases and to ⁴ enhance the quality of relationships. Their feature noted that sex education should start early before young people could reach puberty and that ⁸ sex education should be provided by teachers, parents, or carers as well as prints and electronic media in schools, at home and other recreational centres with emphasis on fertility awareness and human reproduction.

Pattern of Adolescent Sexual Behaviour

In the Nigerian context, Oboro and Tobowei (2003) surveyed the pattern of sexual behaviour of Nigerian adolescents and its possible determinants. In the study, questionnaires were ⁴ administered to a sample of 516 secondary school adolescents in five urban centres of Delta State of Nigeria for the purpose of attaining their level of awareness on HIV, method of prevention and their sexual behaviour generally.

The findings of Oboro and Tabowei (2003) revealed that nearly ³ 94% of the adolescents sampled are aware of HIV/AIDS and have the information that it is sexually transmitted as a disease. They further reported that 69% of the sampled adolescents are sexually active having multiple sexual partners with less than 20% of them using condom. Poverty and family instability were found to be significantly associated with risky sexual behaviour.

Oboro and Tabowei (2003) concluded that informing and educating adolescents ³ about HIV/AIDS does not seem to be sufficient to motivate them to change their sexual behaviour. Finally, Oboro and Tabowie (2003) recommended that HIV/AIDS prevention programmes should place greater emphasis on encouraging. abstinence, fidelity, reducing ¹⁴ the number of sexual partners, practice the use of condom and other contraceptives as well as financial empowerment of adolescents for the purpose of reducing the activities of commercial sex workers among female adolescents.

Factors Affecting Reproductive Health Knowledge

Researching on affecting the reproductive health knowledge on students in tertiary

institutions in Delta State of Nigeria, Ugoji (2004) surveyed 1,500 respondents and reported that:

- (1.) Reproductive **2** health knowledge of students in tertiary institutions were not determined by their self-concept, locus of control and other socio-psychological factors.
- (2.) The attitude of students in tertiary institutions towards reproductive health was influenced by their locus of control, self-concept and other socio-psychological factors.
- (3.) There was significant difference in the reproductive health knowledge of male and female students in tertiary institutions.
- (4.) The attitude of students in tertiary institutions towards reproductive health knowledge do not differ significantly on the basis of gender.
- (5.) The reproductive health knowledge of students in tertiary institution is a correlate of their self-concept.
- (6.) **4** The locus of control of students in tertiary institutions is not significantly related to their reproductive health knowledge.
- (7.) The **10** attitude of students in tertiary institutions towards reproductive health knowledge is not a correlate of their self-concept.
- (8.) The attitude **2** of students in tertiary institutions towards the reproductive health knowledge is not related to their locus of control.
- (9.) The reproductive health knowledge of students in tertiary institutions is correlate of their attitude (Ugoji, 2004).

1 On the basis of the above conclusions Ugoji,(2004) recommends that reproductive health knowledge should be made available to all students in the tertiary institutions through provision of sex education. This can be achieved by incorporating sex education in the school curriculum as a partial content which involves incorporating the subject matter **8** of sex education in general study course of tertiary institutions.

Conclusion and Recommendations

4 The focus of this paper is centred around empirical researches on reproductive health

knowledge. The various researches reviewed indicate that there is an increasing awareness of the potential danger in ¹ adolescent's reproductive health knowledge. Consequently, the paper recommends that more awareness should be created through public awareness and possible provision of reproductive health services in schools at all levels in Nigerian educational system.

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