

**AWARENESS AND ATTITUDE OF SECONDARY SCHOOL STUDENTS TOWARDS
REPRODUCTIVE HEALTH EDUCATION IN NNEWI, NNEWI NORTH L. G. A.**Ibebuikwe J. E.^{*1}, Nwokike I. G.¹, Ibebuikwe K. E.², Iquiro A. A.¹, Ezeama M. C.¹, Uduji O. G.³, Nwobodo H. U.¹¹Department of Nursing Science, Faculty of Health Sciences, Imo State University, Owerri, Nigeria.²Department of Neurosurgery, College of Medicine, Imo State University, Owerri, Nigeria.³Department of Public Health, College of Health Technology, Federal University of Technology, Owerri, Nigeria.***Corresponding Author: Ibebuikwe J. E.**

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ABSTRACT

The main purpose of the study was to assess Awareness and Attitude of Secondary School Students towards Reproductive Health Education in Nnewi, Nnewi, North L.G.A. The design adopted for the study was survey design. The target populations of the study is 400, the sample size consist of 200. Data were analysed using inferential statistics and presented in frequency, table. The following were the findings of the study: the study revealed that the respondents' awareness of reproductive health education is very poor since 118 (59%) stated that the respondents have positive attitude towards reproductive health education since 101 (50.5%) of the respondents have positive attitude towards reproductive health education since 101 (50.5%) of the respondents strongly disagreed that education regarding reproductive health is a waste of time, 123 (61.5%) strongly disagreed that health education regarding reproductive health profit, nothing also 112 (56%) strongly agreed that youth should endeavour to know how their sexual organs work, 148 (74%) strongly agreed that reproductive health education should teach their girl child how to deal with menses before it start. The result of the study also showed that reproductive health education is not been taught in these schools, as majority 144 (72%) of the respondents said that reproductive health education is not been thought in their school. The researcher made the following recommendation: Effective teaching of sexual health education on secondary school students will go a long way stopping unintended pregnancy.

KEYWORDS: awareness, attitude, Secondary School Students, reproductive health education, Nnewi.**INTRODUCTION**

Globally, we are witnessing one of the most profound demographic changes in the history of human race. About 43 percent of the world's population is younger than 25 years, and majority of them (60 percent) are residing in the least developed countries Furthermore, around 27 percent of the world's population are between 10 -24 years of age (United Nations Population Division & World Population Prospects, (UNPD & WPP) 2010).

Elder (2010) also reported that Approximately 1.2 billion people are adolescent (10-19 years) and almost 88 percent of these adolescents live in the developing countries this young brigade, often referred to as the 'window of opportunity' potentially represents future generations of parents, teachers, and upcoming leaders in the globalizing world.

May, Omneya, Mohamed, Sara, Shehata, Adel, Ibrahim & Hanaa (2013) state that Adolescents, often termed the "generation of hope," play a vital role in the health status

of any country. Their behaviours, attitudes, and beliefs are shaping the societies of the future. Thus, it is imperative to promote healthy practices during adolescence and to prepare them for the transition to adulthood.

The proportion of adolescent and school age children is growing faster in the world. Health education is a basic right of young people. It improves their knowledge about their bodies. Gives them the opportunity to understand their planning association (FPA) for Northern Ireland 2011 as cited by Ashfaque and Asif 2012) However, added that sexual and reproductive health is entangled in complex stigmas, fears, misconceptions and misinformation.

Joint United Nations Programme on HIV/AIDS (UNAIDS) (2007) affirmed that risky sexual behaviours, such as early sexual debut, premarital sex, multiple partners and bisexual orientation, are also increasingly becoming common among young people. Sex education for the young has remained a limited and controversial

issue in many countries across the world (Shaw 2009, as cited in Ashfaque & Asif 2012).

In Nigeria, however, health education is weak and the public school curriculum offers little to educate students about health in general and about reproductive health in particular. This represents a missed opportunity for the country, since the great majority of adolescents in Nigeria are enrolled in school.

Evidence from both developed and developing countries shows that the importance of sexual and reproductive health education programs in improving the overall health of young people and preparing them for their transition to adulthood. Youth are often reluctant to ask elders for details about sexuality, fearing that questions might raise suspicions of illicit activity. Alders, on the other hand, may wish to discuss sexuality with young people but are not equipped to do so. The end result is that young people are left in the dark and lack access to reliable information. (May, etal, 2013)

If unaddressed, this situation can put the health and well-being of adolescents at risk resulting in unintended pregnancy and other social problems the adolescent may not know how their body function. Schools are safe place for adolescent to learn about reproductive health matters in age and appropriate ways.

This study therefore will access the awareness and attitude of secondary school students towards reproductive health education in Nnewi, Nnewi North Local Government area.

AIM

The main objective of the study is to assess awareness and attitude of secondary school students towards reproductive health education in Nnewi, Nnewi North L.G.A.

MATERIALS AND METHODS

Setting of the Study

The research study was conducted in Nnewi Community

Target Population

The target populations of the study is 400 from: SS1 to SS3 of these schools: to Okongwu Gramer School Nnewi, Maria Regina Girls Secondary School Nnewi and

Anglican Girls Secondary School Nnewi as shown in Table 3.1 below.

Sample

Out of the population of 400, the researcher selected 200 women as sample size. The sample size was statistically determined by Taro Yamene formula for a finite population. The

Table 1: Population and Sample distribution of secondary school students in each class.

Secondary Schools	Population (No of students in SS1 – SS3)	Sample (50% of the students)
Okongo memorial Gramer School Nnewi,	SS1 = 57	28
	SS2 = 43	22
	SS3 = 50	25
	150	75
Maria Regina Girls Secondary School Nnewi	SS1 = 47	23
	SS2 = 43	22
	SS2 = 40	20
	130	65
TOTAL	400	180

Source: From record of administration (principal offices).

Sampling Techniques

The secondary Schools were randomly selected; stratified sampling techniques was used together with simple random sampling. The students were group into class (strata) and simple random sampling was used to select students in each class, the technique involved a lucky dip without replacement, "Yes" and "NO" option was written for the students to pick and the student that picked "yes" were selected for the study.

Method of Data Collection

The respondent consent was obtained after some explanation about the nature and purpose of the study, consequently the researcher administered 200 copies of the questionnaire with five (5) research assistant, the researcher administers the questionnaire to the students and was collected the same day after filling. All 200 copies of the questionnaires were retrieved by hand the same day. The questionnaire was administers on different days, it lasted for five (5) days. It has 18 item of questionnaire.

Table 2: Major Variable and item Distribution.

S/N	Variable (RQ)	No of items	Section of the Questionnaire	Item Number
1	Demographic Data	4	A	1,2, 3 & 4
2	Awareness of Reproductive Health Education	4	B	5, 6, 7 & 8
3	Attitude Towards Reproductive Health Education	7	C	9, 10, 11, 12, 13, 14 & 15
4	Whether reproductive health education is been thought in their school	3	D	16, 17 & 18
	Total	18	4	18

Method of Data Analysis

Data were collected and tallied before computing. The data were analysed using descriptive statistics of frequencies (f), percentages, and presented using bar chart and tables.

Ethical Consideration

A letter of identification was collected from the Department of Nursing consequently. A letter was written to the principal of each school for permission to carry on the study, the principal gave permission letter to the researcher, which the researcher, which used to identify herself to the teacher for their permission for the study, and they gave their permission.

RESULTS

Table 3: Showing Socio-demographic characteristics of respondents N = 17 131.

Variable	Response	Frequency	Percentage
Age Group	Below 12 years	0	0
(in years)	12 – 17	131	65.5
	18 – 23	69	34.5
	24 and above	0	0
Total		200	100

Table 3: above shows that the highest age bracket are those between 12 – 17 131 (65.5%) while the lowest age bracket are 18 -23 69 (34.5%).

Table 7: Showing the respondents level of awareness of reproductive health education.

Variables	Response	Frequency	Percentage (%)
If yes you have heard about reproductive health education where did you first get the information?	Family/friends	4	4.9
	Health professionals	23	28.0
	Teacher	31	37.8
	Television/radio	13	15.9
	Awareness campaign	11	13.4
Total		82	100
If No why haven't you heard about it?	Nobody talk about reproductive health in my family	13	11.0
	In my school the teachers do not talk about it	13	11.0
	In my school the teachers do not talk about it	79	66.9
	My parent says I am too young to talk about it	15	12.7
	When you talk about reproductive the elder see you as a bad child	11	9.3
Total		118	100

The 7 above shows that out of 82 (41%) respondents that have heard about reproductive health education 31 (37.8%) said they heard for the first from Television/radio, 23 (28.0%) heard if from health professionals, very few 13 (15.39%) heard it from mass media. While out of 118 (59%) that have not heard about

Table 4: Showing gender of the respondents.

Variable	Response	Frequency	Percentage
Sex	Male	79	39.5
	Female	121	60.5
Total		200	100

Table 4: above showed that Female are more 121 (60.5%) to male 69 (39.5%).

Table 5: Showing religious of the respondents.

Variable	Response	Frequency	Percentage
Religious	Christian	200	100
	Muslim	0	0
	Traditionalist	0	0
Total		200	100

Table 5 showed that all 200 (100%) the respondents are Christians.

Table 6: Showing class of the respondents.

Variable	Response	Frequency	Percentage
Class	SSS 1	97	48.5
	SSS 2	68	34.0
	SSS 3	35	17.5
Total		200	100

Table 6 showed that the highest class is SSS1 97 (48.5%) While the lowest class is SS3 35 (17.5%).

it, said the following are the reasons: 79 (66.9) said their school the teachers do not talk about it, 15 (12.7%) ascertained that their parent says they are too young to talk about it while 13 (11.0%) said nobody talk about reproductive health in my family.

Table 8: Showing what the respondent understand by reproductive education.

Variable	Responses	Frequency	Percentage (%)
What do you understand by reproductive health education?	to be aware of matters relating to the reproductive system	22	26.8
	capability to reproduce and the freedom to decide if, when, and how often to do so	14	17.0
	to educate people about sexuality (how their sex organ function)	32	39.0
	to have access to safe, effective, affordable, and acceptable methods of family planning	5	6.1
	to teach people how to have safe sex	9	10.9
	I don't know	0	0
Total		82	100

The table 8 shows that 22 (26.8%) of the respondents said that what they understand by reproductive health education is to be aware of matters relating to the reproductive system, 14 (17.0%) said is a capability to reproduce and the freedom to decide if, when, and how

often to do so, 32 (39.0%) said it is to educate people about sexuality (how their sex organ function) while 9 (10.9%) are of the view that it is to teach people how to have safe sex.

Table 9: Showing the attitude of these secondary school students towards reproductive health education.

Variables	SA (%)	AG (%)	DG (%)	SD (%)	N (%)
Reproductive health education is not important	16 (8.0%)	18 (9.0%)	54(27.0%)	101(50.5%)	11(5.5%)
Education regarding reproductive health is a waste of time	9. (4.5%)	12 (6.0%)	55(27.5%)	106(53.0%)	18(9.0%)
Health education regarding reproductive health profit nothing	7 (3.5%)	10 (5.0%)	47(23.5%)	123(61.5%)	13(6.5%)
Youth should endeavour to know how their sexual organs work	112 (56%)	45(22.5%)	11 (5.5%)	9 (4.5%)	13(6.5%)
Reproductive health education should be though in secondary school	148(74. %)	26(13.0%)	5(2.5%)	14(7.0%)	11(5.5%)
Parents should teach their children about reproductive health earlier	120(60.0%)	49(24.5%)	9(4.5%)	15(7.5%)	7(3.5%)
Parents should teach their girls child how to deal with menses before it start	143(71.5%)	39(19.5%)	8(4.0%)	5(2.5%)	5(2.5%)

SA – Strongly Agreed, AG-Agreed, DG –Disagreed, SD- Strongly disagreed, N—Neutal

This 9 shows that 101 (53.0%) strongly disagreed that reproductive health education is not important while 16 (8.0%) strongly agreed, 106 (53.3%) strongly disagreed that education regarding reproductive health is a waste of time while 9 (4.5%) strongly agreed to that, 123 (61.5%) strongly disagreed that health education regarding reproductive health profit nothing while 7 (3.5%) strongly agreed to that, 112 (56.0%) strongly agreed that youth should endeavour to know how their sexual organs

work while 9 (4.5%) strongly disagreed, 148 (74.0%) strongly agreed that reproductive health education should be though in secondary school while 14 (7.0%) strongly disagreed to that, 120 (60.0%) strongly agreed that parents should teach their children about reproductive health earlier while 15 (7.5%) strongly disagreed to that, 143 (71.5%) strongly agreed parents should teach their girl child how to deal with menses before it start while 5 (2.5%) strongly disagreed to that.

Table 10: Showing whether reproductive health education is taught in their schools.

Variables	Response	Frequency	Percentage (%)
If they don't teach reproductive health education in your school what do you think that make them not to teach it?	They believe if been teach in secondary school the student will be corrupt	50	34.7
	They think it is too early to teach reproductive education	37	25.7
	We don't have teachers to teach that course	25	17.4
	It is not in our syllables	18	12.5
	If been teach the students are not interested in it.	14	9.7
Total		144	100

Table 10 shows that 50 (34.7%) said that the reason they don't teach reproductive health education in their school is due to they believe if been teach in secondary school the student will corrupt, 37 (25.7%) ascertain that they think it is too early to teach reproductive education, 25

(17.4%) said that they don't have teachers to teach that course in their school, 18 (12.5%) said it is not in their syllables while 14 (9.7%) said if been teach the students are not interested in it.

Table 11: Showing how reproductive health education is taught in their schools.

Variable	Response	Frequency	Percentage (%)
If yes what do you think that made it to be thought in your school?	it is in our syllables	6	12.0
	It will increase accurate knowledge about reproductive health.	21	42.0
	To educate the students the importance of reproductive health education	26	50.0
	Because the students want it	4	8.0
Total		50	100

Table 11 above shows that 21 (42.0%) said that reproductive health education is thought in their school and the reason is that it will increase accurate knowledge about reproductive health while 26 (50.0%) said that to educate the students the importance of reproductive health education.

DISCUSSION

The result of the study revealed that the respondents awareness of reproductive health education is very poor since 118 (59%) state that they are not aware of reproductive health education. Most 79 (66.9%) of the respondents state that they are not aware of it due to in their school the teachers does not talk about it. This study is not in line with the study conducted by Ashfaque and Asif and Raza in (2012) on awareness and attitude towards sex health education and sexual health services among youngsters in rural and urban setting of Sindh, Pakistan, they stated that the respondents are aware of sexual health education. These discrepancies in the two

studies may be due to geographical area, educational background and exposure.

But this study agreed with the study conducted by Lule, Ovuga, Mshilla, Ojara, Kimbugwe, Adrawa, and Mahuro (2013) they conducted a study of knowledge, perceptions and Acceptability to Strengthening Adolescents' Sexual and Reproductive Health Education amongst Secondary (ASRHE) Schools in Gula District. The researcher concluded that students had low knowledge levels and misconception about ASRHE.

The result of the study revealed that the respondents have positive attitude towards reproductive health education since 101 (50.5%) of the respondents strongly disagreed that reproductive health education is not important, 106 (53%) strongly disagreed that education regarding reproductive health is a waste of time, 123 (61.5%) strongly disagreed that health education regarding reproductive health is a waste of time, 123 (61.5%) strongly disagreed that health education regarding reproductive health profit nothing, also 112 (56%)

strongly agreed that youth should endeavour to know how their sexual organs work, 148 (74%) strongly agreed that reproductive health education should be taught in secondary and also 143 (71.5%) strongly agreed that parents should teach their girl child how to deal with menses before it starts.

This study concurs with the study conducted by Mesfin, Bezatu, Gudina and Ayalu (2012) they conducted a study on health workers' attitudes towards sexual and reproductive health services for unmarried adolescents in Ethiopia, they state that majority of health workers had positive attitudes towards sexual and reproductive health services.

But this study did not agree with study conducted by Ashfaq and Asif Raza in (2012) on awareness and attitude towards sex health education and sexual health services among youngsters in rural and urban settings of Sindh, Pakistan, The researcher concluded that young individuals in Pakistan have negative attitude towards sexual health education. The discrepancies in the two studies may be due to geographical area, educational background and exposure.

The result of the study shows that reproductive health education is not being taught in these schools. As 144 (72%) of the respondents said that reproductive health education is not being thought in their school. Out of 144 (72%) that state that reproductive health education is not being taught in these schools Majority 50 (34.7%) of them state that the reason reproductive health education is not taught in their school is because they believe if it were taught in secondary school the student will be corrupt also 37 (25.7%) said that they think it is too early to teach reproductive education.

The study agreed with the study conducted by Lule, Ovuga, Mshilla, Ojara, Kimbugwe, Adrawa, and Mahuro (2013) they conducted a study of knowledge, perceptions and Acceptability to Strengthening Adolescents' Sexual and Reproductive Health Education amongst Secondary (ASRHE) Schools in Gulu District.

The result shows that: Majority 96.1% (807) supported the teaching of a comprehensive ASRHE, citing no negative impact 71.5% (601). Majority 81.6% (686) agreed that such education could help prevention of STIs, abortion and teenage pregnancies, and that it should be taught by health workers 69.0% (580).

Majority 76.6% (203) reported that ASRHE was not currently being taught in their schools.

CONCLUSION

In conclusion the study revealed that the respondents' awareness of reproductive health education is poor since 118 (59%) stated they are not aware of reproductive health education. Most 79 (66.9%) of the respondents stated that they are not aware of it due to in their school

the teachers do not talk about it. The result also revealed that the respondents have positive attitude towards reproductive health education is not important, 106 (53%) strongly disagreed that education regarding reproductive health is a waste of time, 123 (61.5%) strongly disagreed that health education regarding reproductive health profit nothing, also 112 (56%) strongly agreed that youth endeavour to know how their sexual organs work, 148 (74%) strongly agreed that reproductive health education should be taught in secondary and also 143 (71.5%) strongly agreed parents should teach their girl child how to deal with menses before it starts. The result of the study shows that reproductive health education is not being taught in these schools, as 144 (72%) of the respondents said that reproductive health education is not thought in their school.

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