

Evaluation of Knowledge, Attitude and Practices of Teacher Regarding Reproductive Health of Male Adolescents

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ABSTRACT

Background: Teachers play an important role in guiding the adolescents. Adolescence is a developmental bridge between childhood and adulthood. India has the largest national population of adolescents (243 million) followed by China.

Materials and Methods: The present study contains ninety-eight male teachers at school. Data such as name, age, etc. was recorded. A questionnaire was prepared and distributed among all which contain information regarding reproductive health of adolescent.

Results: There was increase in knowledge and attitude about reproductive health of adolescent after intervention. Teacher knowledge regarding problems of adolescent. Before intervention sexual knowledge was seen in 82 and after intervention in 91, physical was 78 and 92 and psychosocial was 72 and 95 before and after intervention respectively.

Conclusion: Teachers had sufficient knowledge, attitude and

practices regarding reproductive health of adolescent.

Keywords: Attitude, Knowledge, Reproductive Health.

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INTRODUCTION

Adolescence is a developmental bridge between childhood and adulthood. This term is derived from the Latin verb *adolescere*, which means to grow up.¹ India has the largest national population of adolescents (243 million)² followed by China. Adolescents constitute about 22% of the population of India. It is a transition phase from childhood to adulthood. The transition is not only just physical but significant cognitive changes also take place. Most of the adolescents go through this period with little or no knowledge of the body's impending physical, physiological and psychological changes.³ As they are ill prepared to deal with these changes, they try to assemble information from peers and unauthentic sources. Demands of culture, gender, globalization and poverty push millions of adolescents prematurely into adult roles exposing them to serious risks, which makes them vulnerable to drug abuse, premarital sex, STDs, HIV/AIDS, depression etc.⁴ Adolescents have many doubts and questions about their sexuality, giving rise to anxiety and confusion. Also, our current education system has limited contribution in providing this knowledge to the adolescents, and this leads to many misbeliefs and indulgence into unsafe or risky sexual activities by this group of individuals.⁵ Thus, sexually transmitted diseases (STDs), unwanted pregnancies, substance abuse, and unsafe abortions are important problems in adolescents.⁶ Girls are more vulnerable

in this group because of marked unawareness and biological susceptibility to STDs. Adequate reproductive health education is the need of time. Debates are still going on about who should (eg, teachers, parents, etc.) and to what extent educate adolescents about sexual matters.⁷ Aim of the present study was to evaluate the knowledge, attitude and practices of teacher regarding reproductive health of adolescent.

MATERIALS AND METHODS

This cross-sectional study was conducted in the Department of Community Medicine, Hind Institute of Medical Sciences, Lucknow, Uttar Pradesh, during the period from January to April, 2018.

The present study contains ninety-eight male teachers of school. All were enrolled after obtaining their written consent. Data such as name, age, etc. was recorded. A questionnaire was prepared and distributed among all which contain information regarding reproductive health of adolescent. Pubertal changes, night fall, genital hygiene, STDs, HIV/AIDS, sex education etc. were topic of discussion. Response of each question was recorded and entered in MS excel sheet. A session on reproductive health of one hour duration was taught. Scoring before intervention and after intervention was recorded.

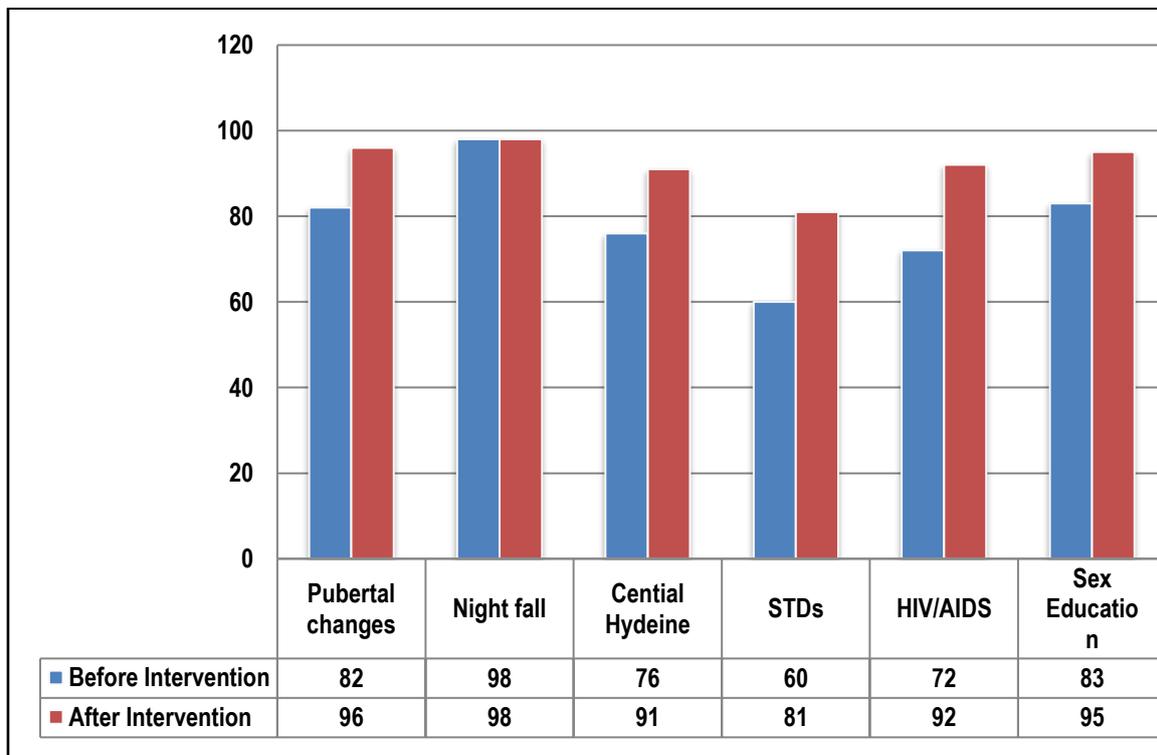


Fig 1: Assessment of questionnaire.

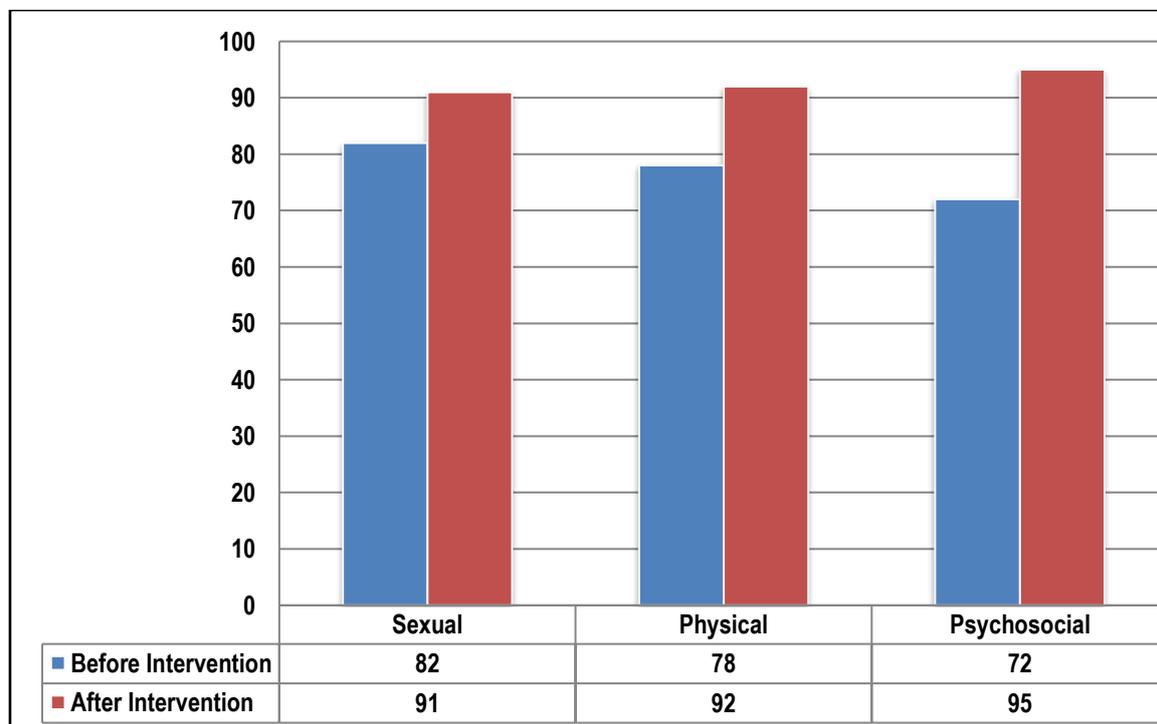


Fig 2: Assessment of knowledge of teachers about problems of adolescents.

Table 1: Demographic characteristics

Parameters	Variables	Frequency (%)
Social background	Urban	54 (55.1)
	Rural	44 (44.9)
Qualification	Graduation	32 (32.7)
	Post-graduation	51 (52.04)
	M. Phil	15 (15.3)
Total		98(100)

RESULTS AND DISCUSSION

The responses of only 98 male teachers, who came for the educational session and were followed up, were considered, and analysed. [Table 1] shows that age group 20-30 years had 28.6%, 30-40 years had 36.7, 40-50 years had 23.5 and >50 years had 11.2 subjects. Maximum number of frequencies belongs to in age group 30-40. [Table 1] shows that 54 had Rural and 44 had urban background. Qualification was graduation in 32, post-graduation in 51 and M. Phil in 15 subjects. [Fig.1] shows that there was increase in knowledge and attitude about reproductive health of

adolescent after intervention. [Fig. 2] shows teacher knowledge regarding problems of adolescent. Before intervention sexual knowledge was seen in 82 and after intervention in 91, physical was 78 and 92 and psychosocial was 72 and 95 before and after intervention respectively. School education has been described as a social vaccine and it can serve as a powerful preventive tool. As a large proportion of young people are in schools, schools provide an effective route for communicating with them. School-based programmes for smoking prevention have been widely developed and evaluated.

After parents, it is the teachers who spend most of the time and have maximum opportunity to communicate and educate adolescents. A lot of programs are going on for girls but not the same for boys.⁸ Boys have become the new disadvantaged as a result of efforts to eradicate female disadvantage in the education system. Boys have a greater exposure to the external environment than girls. While discussing their problems it was found that male students expressed a preference for male teachers because of the perceived shared experiences, interests and ways of thinking. Boys felt that men have a better comprehension of their play and were better able to relate.⁹ The present study was conducted to assess knowledge, attitude and practices of teacher regarding reproductive health of adolescent.

In present study, age group 20-30 years had 28, 30-40 years had 36, 40-50 years had 23 and >50 years had 11 subjects. Kaushal et al,¹⁰ included 155 teachers. Maximum 74 (47.7%) teachers were aware of psychosocial problems of adolescents as compared to the physical and sexual problems. Only 11 (11.2%) teachers had adequate knowledge about changes occurring during adolescence. Majority 125 (80.6%) of teachers had no knowledge regarding height and weight gained during adolescence and more than 2/3rd [110 (71%)] of teachers were unaware of daily calorie and protein requirements. Only 28 (18.1%) had adequate knowledge about drug abuse. After intervention significant favourable changes were observed in their knowledge, attitude and practices regarding most of above-mentioned topics. We found that 44 had Rural and 54 had urban background. Qualification was graduation in 32, post-graduation in 51 and M. Phil in 15 subjects.

Deshmukh et al,¹¹ included 300 adolescent students of 8th, 9th, and 10th standards. Girls were found to have less knowledge compared to boys. Higher the standard the student was in, more the level of knowledge; 10th standard students had more knowledge compared to 9th and 8th standard students. Parents need to have adequate communication with their adolescents regarding sex-related topics as parents were found to be among the least common source of information, while teachers were the most common source of information regarding the topic. We found that there was increase in knowledge and attitude about reproductive health of adolescent after intervention. We found that before intervention sexual knowledge was seen in 82 and after intervention in 91, physical was 78 and 92 and psychosocial was 72 and 95 before and after intervention respectively. A similar study conducted by Gupta et al,¹² in 8 schools in Rajouri district of Jammu and Kashmir on 100 teachers revealed that only 4% and 9% knew gonorrhoea and syphilis to be STDs although almost all of them knew AIDS to be an STD. Chitra¹³ in Darjeeling revealed that 75.9% to 94.4% of teachers had correct knowledge regarding routes of transmission of HIV. Toor et al¹⁴ on 50 teachers in 3

schools of Ludhiana district of Punjab which concluded that the teachers dominantly show positive attitude towards sex education but they require special training in discussing sexuality with students. Another study done by Gupta et al¹⁵, in Rajouri district of Jammu and Kashmir observed that the awareness of teachers on transmission of AIDS was reasonably good. Multiple sexual partners were felt to be important for transmission by 78% of the respondents. Blood transfusion (69%) and transmission from infected mother to foetus (52%) were also known to the respondents. In another study done by N Kotwal it was observed that the teachers overwhelmingly favoured reproductive health education program.¹⁶ For this, knowledge, attitude and practices of teacher regarding reproductive health of adolescent skills might prove helpful.

CONCLUSION

These findings suggest that, the teachers had sufficient knowledge, attitude, and practices regarding reproductive health of adolescent. This study highlights the need for regular training of the teachers in reproductive health education. It also emphasizes on the proactive role that the teachers must play in imparting reproductive health education to the adolescents. This can greatly contribute towards building a healthy and safe future for adolescents who are the future of our nation.

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