

Research Papers



**AWARENESS TOWARDS ADOLESCENT REPRODUCTIVE HEALTH AMONG
TEACHER TRAINEES OF AWASSA, SOUTH ETHIOPIA.**

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Abstract

A study was undertaken to study the awareness of adolescent teacher trainees of Awassa College of teacher education, South Ethiopia regarding reproductive health aspects through a questionnaire. The study adopted a survey method. A total of 200 teacher trainees were selected randomly from Awassa College of Teacher Education, South Ethiopia. The tool for assessment consisted of Awareness test on ARHA consisting of sixty five items on the aspects of physical changes occurring in male and female during adolescence period(17 items); Reproductive health issue (33items) and HIV/AIDS(15 items). Results showed that the Male teacher trainees have better awareness on ARH when compared to that of female trainees; Trainees from urban background have better awareness than that of rural background; As the educational level of parents increase the awareness level of trainees on Adolescent Reproductive Health (ARH) also increases.; and Trainees whose parents are professionals have better awareness on ARH than non professional parents. Informative and educable interventions would help in bringing out a positive effect on awareness levels which would eventually encourage expansion of knowledge and positive health habits.

Adolescence is the most important period of human life. More than half of world population is under the range of adolescence period. These young people face serious health problems in modern times. More over adolescents girls, in particular are likely to suffer sexual abuse, violence, rape, unwanted pregnancy, abortion and STDs from which they need protection. There is lack of attention in almost every dimension as adolescent reproductive health. They found poorly informed regarding their own health needs, physical well being and their own bodies. The knowledge they have is incomplete and many a time confusing. The progress of a country depends on the maximum exploitation of its human resources. The sound health is one of the first requisite conditions of development. Reproductive health of adolescent boys and girls is decisive for individual health, family well being and improving their economic productivity.

Despite the fact that as many as one fifth of the population of Ethiopia comprises of adolescents aged 10-20 years, their reproductive health needs are poorly understood and ill served.

Problems faced by adolescents

As pointed by G.S.Hall this period as a period of “Stress and Strain” fraught with many problems. Adolescents face problems related with intensification of sex consciousness, home life relationship and social adjustment, hetero sexual adjustment problems, health adjust problems and so on. In order to solve these problems, psychologists and educationalists suggest different strategies. One among them is to render proper adolescent Reproductive Health education. This would help the adolescent to develop healthy relationship and positive attitude towards opposite sex. Sex Education is primarily concerned with the development of good mental health and adjustment to life and adulthood. The sources otherwise include mass media, picture magazines, television, cinema, newspapers etc. To counteract the impact of these experiences, the combined efforts of the home, school and religious institutions are required in order to provide children and youth with scientific information, sound sex

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attitude and desirable standard of conduct (Turner et.al.1957).

Adolescents are sexually mature, both males and females begin to have new attitude towards member of opposite sex and to develop an interest not only members of opposite sex but also in the activities in which they are involved, a sound and well planned educational program regarding sex is needed in their early lives (Hurlock, 1980). Adolescent Reproductive Health Education also helps them to have a clear idea about family planning at appropriate age etc.

Concept and importance of Adolescent Reproductive Health (ARH)

According to the World Health Organisation (WHO), Reproductive health is defined as a state of physical, mental, and social well-being in all matters relating to the reproductive system at all stages of life. Reproductive health implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when, and how often to do so. Implicit in this are the right of men and women to be informed and to have access to safe, effective, affordable, and acceptable methods of family planning of their choice, and the right to appropriate health-care services that enable women to safely go through pregnancy and childbirth.

Reproductive health care is defined as the constellation of methods, techniques, and services that contribute to reproductive health and well-being by preventing and solving reproductive health problems. It also includes sexual health, the purpose of which is the enhancement of life and personal relations, and not merely counseling and care related to reproduction and sexually transmitted infections. In support of this aim, WHO's reproductive health program has developed four broad programmatic goals:

- Experience healthy sexual development and maturation and have the capacity for equitable and responsible relationships and sexual fulfillment;
- Achieve their desired number of children safely and healthily, when and if they decide to have them;
- Avoid illness, disease, and disability related to sexuality and reproduction and receive appropriate care when needed;
- Be free from violence and other harmful practices related to sexuality and reproduction.

WHO, 1996 reported that family planning is more precisely the prevention of too early, unwanted and unplanned pregnancy in adolescence in some what different in nature for married and unmarried adolescent. The young unmarried adolescent boys and girls will face different obstacles to effective contraception dependent upon society in which society they live and that too with incomplete or wrong conception of sexual behavior and with half knowledge of methods to control, to obtain them and to use them. As a result they aren't aware of their degree of effectiveness is or possible side effects. When there is education on family life for example, in the school and college system it is more likely to deal with biological issues of reproduction and moral rules governing sexual behavior before marriage.

From the above report it is understood that unmarried adolescent reproductive health service is poorly treated and they are exposing themselves for unwanted pregnancy and Sexually transmitted diseases including AIDS.

All the adolescents are in need of education, information, counseling and health services with regard to their reproductive health, sexuality and responsible parental hood (Shirur, 2000).

Similarly the problems of trainees of Awassa College of Teacher Education, is not different from the general problem of an adolescent. Awassa is found in Souther Ethiopia, which is one of the developing countries. Awassa is also a capital city of southern Nation Nationality people region which is highly populated. Trainees reside outside the college in the rented rooms as many of the trainees come from rural districts. This rented room exposes to many environmental problems like sexual abuse, harassment, unwanted pregnancy, exploitation (especially in females) and boys are also addicted to may bad habits like usage of drugs, chewing chat etc. On one hand the biological onset of adolescence and on the other hand age of marriage is rising due to expansion of educational opportunities. As a consequence people have long interval between the onset of sexual maturity and marriage. There is lack of attention in almost every dimension of their reproductive health. They are found poorly informed regarding their own physical well-being, their health needs and their own bodies. Many researches hinted that premarital sex led to worries, anxieties, venereal problems, and psychological problems (Chauhan, 2004; Kochar, 1984; Arthur, 1974). Hence guidance and Counseling is most urgently needed for this age group. In this area very sparsely the research is conducted.

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One of the important resources of any country is its human resource. Education is aimed at the development of human resources to the fullest possible extent. A sound educational system is considered as a backbone of developing country like Ethiopia and the students and teachers are considered as the sole of the whole education system. Though there have been considerable improvements in the status of women's health the world over, the general status of women does not appear to have changed much. Nearly 1.3 million women around the world still die every year of reproductive health related and large preventable diseases.

In Ethiopia, professional guidance and counselors are very limited. In College of Teacher Education, a psychology graduate is assigned as a counselor but it is inadequate. Because of traditional and cultural influence, females are not free and open to share their personal problems with males. Consequently trainees face number of problems and even many got HIV infected. Investing in reproductive health of adolescent boys and girls is critical but profitable to achieve the qualities of individual health, family well being and improving their economical productivity. As they are all going to be the teachers of tomorrow who can enlighten the future citizens of nation. In this context the researcher undertook this study to examine their level of awareness towards reproductive health issues and also HIV Awareness.

Objectives

1. To study the difference in awareness level of male and female teacher trainees towards Adolescent Reproductive Health
2. To study the difference in awareness level of urban and rural teacher trainees towards Adolescent Reproductive Health
3. To study the difference in awareness level of teacher trainees on Adolescent Reproductive Health with respect to the Educational status of Parents
4. To study the difference in awareness level of teacher trainees on Adolescent Reproductive Health with respect to the occupational status of parents.

Hypotheses

- There is no significant difference in the mean score of awareness of trainees on ARH with respect to Gender
- There is no significant difference in the mean score of awareness of trainees on ARH with respect to Locale
- There is no significant difference on the mean score of awareness of trainees on ARH with respect to Educational level of parents
- There is no significant difference on the mean score of awareness of trainees on ARH with respect to Occupational status of parents

Method

The study is descriptive in nature involving survey method.

Participants

The sample for the study was selected from Awassa College of Teacher Education (ACTE). In Awassa, there are two primary second cycle Teacher Training Colleges, namely Awassa College of Teacher Education and South Ethiopia Teacher training College. Out of them, one was selected randomly for the study as it is Government College with different social class trainees are found and the age of all trainees is almost in the range of 18-21 years who are taken directly as soon as they completed their 10th Grade.

From 2003, the scenario of entry level to teacher education had changed along with the curriculum. The students who would teach for 5th to 8th grade will be taken after they have been completed Grade 10th. They have to study in this college for three years before they assign as a teacher. However the subjects for the present study included only two year trainees. A complete list of target population was made and following simple random sampling technique, the researcher selected 100 male and 100 female trainees from five streams namely natural science, social science, language, mathematics and aesthetics using simple random sampling technique.

Instrumentation : Awareness test on Adolescent Reproductive Health (ARH)

This test is developed by the researcher after reading different literatures and surveys related to ARH. The focus of the questionnaire was on the components like Awareness about physical changes occurring in male and female during adolescence period(17 items); Awareness on Reproductive health

issue (33 items) and Awareness about HIV/AIDS (15 items). The final form of tool comprised of 65 items.
Data Collection

The researcher took the permission from the Dean of the College, and collected the data through emails.

Statistical Analysis of Data

Mean, Standard Deviation, student t test, ANOVA were employed to test the hypotheses formulated.

Table 1: 't' value for Trainees awareness and gender & locale

Variable	Groups	N	Mean	S.D.	t	df	Sig.
Gender	Male	100	37.01	9.38	2.343	198	0.020
	Female	100	34.06	8.40			
Locale	Urban	107	37.20	8.10	2.848	198	0.05
	Rural	93	32.62	9.61			

From the table 1 it is evident that there is significant difference in the awareness on ARHE between male and female trainees as the t value is 2.343 found to be significant. Male trainees have higher awareness on ARHE than that of female trainees. Teacher trainees from Urban background (37.20) have better awareness when compared to Rural background (32.62), the difference is significant as it is observed in table 1 (t value=2.848). Hence the hypothesis 1 & 2 are rejected.

In order to find out whether the trainees differ in their awareness with respect to the educational level of their father and mother, ANOVA was employed.

Table 2: Descriptives of Parents Educational level and awareness of trainees on ARH

Educational Level	Fathers' level of Education			Mothers' level of Education		
	N	Mean	S.D.	N	Mean	S.D.
Low	97	30.75	7.33	138	32.91	8.39
Medium	76	38.17	8.11	57	41.00	7.67
High	27	45.30	5.29	5	45.60	2.70
Total	200	35.53	9.00	200	35.53	9.00

Table 3: Results of ANOVA with respect to Educational Level of Parents

Source of Variation	Fathers' level of Education					Mothers' level of Education				
	Sum of squares	df	Mean square	F value	Sig.	Sum of squares	df	Mean square	F value	Sig.
Between groups	5319.28	2	2659.64	48.44	0.00	3157.59	2	1578.799	23.96	0.00
Within groups	10816.46	197	54.90			12978.16	197	65.879		
Total	16135.75	199				16135.75	199			

From the table 3, it is revealed that the obtained F values for Father's and Mother's level of education of teacher trainees (48.44 & 23.96) are significant. In other words, the trainees with highly qualified parents were found to have better awareness when compared to the other groups. We can even see the trend i.e. as the educational level of parents increase, the total awareness level of trainees on ARHE also increased, though most of the trainees' mothers educational level is found to be low and medium. Along with the educational status of parents, their occupational status is also considered as a back ground variable in the present study. The following table shows the description of occupational status of parents and the awareness of trainees on ARHE.

Table 4: Description of Parents Occupational status and awareness of trainees on ARHE

Occupational Status	Fathers' Occupational Status			Mothers' Occupational Status		
	N	Mean	S.D.	N	Mean	S.D.
Professional	78	41.42	8.04	43	43.58	7.39
Non Professional	78	32.78	7.58	29	34.07	8.37
Others	44	29.98	6.96	128	33.16	8.09
Total	200	35.53	9.00	200	35.53	9.00

Table 5: Results of ANOVA with respect to Occupational Status of Parents

Source of Variation	Fathers' Occupational Status					Mothers' Occupational Status				
	Sum of squares	df	Mean square	F value	Sig.	Sum of squares	df	Mean square	F value	Sig.
Between groups	4654.44	2	2327.2	39.9	0.0	3565.87	2	1782.9	27.9	0.0
Within groups	11481.3	19	58.28	3	0	12569.8	19	63.81	4	0
Total	16135.7	19				16135.7	19			
	5	9				5	9			

Table 4 and 5 shows that the trainees whose parents are professionals were found to have better awareness than that of the other groups (F values 39.93, 27.94).

Major findings of the study:

1. Male teacher trainees have better awareness on ARH when compared to that of female trainees
2. Trainees from urban background have better awareness than that of rural background.
3. As the educational level of parents increase the awareness level of trainees on ARH also increases.
4. Trainees whose parents are professionals have better awareness on ARH than non professional parents.

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Educational implications of the study:

From the findings of the study, the following implications are derived :

- It would be appropriate to include Adolescent reproductive health education as one of the subjects or as integrated subjects at high school level and also at teacher training colleges as they are the future source of transmission and transformation.
- NGOs investing in area of education should also take active part in organizing a series of workshops seminars involving training college personnel at different levels to increase the awareness levels on ARHE. In turn can assist financially those who take up projects and research studies in this area.
- Free and frank discussions to be encouraged by both parents and teachers about these issues.
- Appointing a guidance personnel and a counselor in each institution would help in overcoming many problems in future.

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