



“A Descriptive Study to Assess the Knowledge and Attitude Regarding Sexual and Reproductive Health Among Adolescent Girls of Selected High School of Bagalkot”

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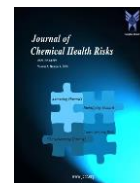
ABSTRACT

Background: Adolescence is considered as a period of transition from childhood to adulthood. This period of life between ages of 10 to 19 years. This period is very crucial, since these are the formative years of life of an individual when major physical, psychological and behavioural changes take place. This is an impressionable period of life; this is also a period of preparation for undertaking greater responsibilities including healthy responsible parenthood in future. Adolescence form prospective human resource for the society. The study was aimed to assess the knowledge and attitude regarding sexual and reproductive health among adolescent girls in selected High school at Bagalkot.

Methods: The conceptual frame work used was based on Modified Irwin Rosen stock (1966) health promotion Model. The research design used for the study was descriptive survey design. Purposive sampling was used to select the high school and Stratified random sampling technique was used to select 60 sample for the study. The tool used for the study was structured knowledge questionnaire to assess the knowledge and five-point Likert scale to assess the attitude regarding sexual and reproductive health. The data gathered were analysed using descriptive and inferential statistics.

Results: The mean score of knowledge are 7.733(S.D.2.20067) and attitude are 34.933 (S.D 6.3107). Area wise analysis of knowledge score was done. The correlation co-efficient of knowledge and attitude is (0.60) which is positively correlated.

Conclusion: The findings of the study showed that there is no significant association between knowledge scores with socio demographical variables age, type of family, religion, family income, residence, medium of instruction, family member, educational status of the mother and father, Irregular menstrual history, physical changes, sex education. There is no-association found between attitude scores with socio demographic variables.



Introduction

WHO defines adolescents as Individual in the age group 10 to 19 years¹ but adolescents are not merely a bunch of teenagers instead they represent the crucial phase of life between childhood and adulthood. In this period of life an individual undergoes physical, psychological as well as social development. ²This stepping stone to the adulthood brings a lot of challenges, be it the peer pressure, parental and societal pressure or the emotional challenges faced by adolescents.

In a developing country like India, adolescent face various issues like mental health problems ,malnutrition, substance abuse; violence etc.³ Likewise one such important matter is a sexual and reproductive health of adolescent .The sexual and reproductive health issues of adolescents is one of the most under discussed subject and it gives rise to unfavourable outcome like sexually transmitted infections, unwanted pregnancies, illegal abortions and it also leads deteriorating mental health and accounts for suicides of young teenagers.^{4,5}

Thus, in the current scenario, sexuality education and awareness are paramount. Sexuality education comprises of physiological, psychological and social issues related to sex, a lack of which may lead to inappropriate attitudes and practices. Sex education can help children transform into well-adjusted adults with established sexual identity, functioning, and ability.⁶

Materials And Methods

The conceptual frame work used was based on Modified Irwin Rosen stock (1966) health promotion Model. The research design used for the study was descriptive survey design. Purposive sampling was used to select the higher secondary schools and Stratified random sampling technique was used to select 60 sample for the study. The tool used for the study was structured knowledge questionnaire to assess the knowledge and five-point Likert scale to assess the attitude regarding sexual and reproductive health. The data gathered were analysed using descriptive and inferential statistics.

Research approach

The research approach adopted in this present study was **descriptive survey**, is considered as appropriate because this study was intended to assess the knowledge and

attitude regarding sexual and reproductive health among adolescence girls.

“Descriptive survey involves the events that have already taken place, concern, condition that are existing opinions that are evident”. The purpose of descriptive survey is to systematic collection and presentation of data to give a clear picture of a particular situation.

Research design

The research design adopted for the present study was non experimental i.e., **descriptive research design** because it describes the relationship which exists between the selected demographic variables and knowledge and attitude regarding sexual and reproductive health among adolescence girls.

Setting of the study

Setting refers to the physical location and condition in which the data collection takes place. For present study the setting of the study was **Laxmi Ranganath High School Kelavadi, Bagalkot**

Population

The target populations of the study s adolescent girls from all high schools of Bagalkot District.

Sample

Sample consists of adolescent girls of age group 12-19 years.

Criteria for sample selection

Inclusion criteria

1. Adolescent girls studying at Laxmi Ranganath high School Kelavadi.
2. Adolescent girls who are willing to participate in the study.
3. Adolescent girls who have attained menarche.
- 4.who known to read and write Kannada or English.

Exclusion criteria

1. Adolescent girls who are absent during data collection.



2. Who don't know to read and write Kannada or English.

Sample size

Sample size consists of 60 adolescent girls.

Sampling technique

Disproportionate stratified random sampling technique was used in this study to select the sample. According to the inclusion criteria the students are selected from each section for 8th 9th and 10th standard.

Method of data collection

The researcher plan to collect relevant data from research subject by **structured knowledge questionnaires**. A questionnaire is a research instrument consisting of a series of questions for the purpose of gathering information from respondents. The questionnaire include closed ended questions were the respondents have to pick an answer from the given number of options.

Steps in development of the tool

- Information was collected by vast reviewing the literature and guidance from subject experts.
- Drafted to get approved from subject experts.
- Correction and modification of tool carried out as ask per suggestion of experts.
- Conducted pilot study tasted feasibility of tool. Item analysis was done and found reliability.

Validity of the tool

The content validity is the extent to which a measuring instrument provides adequate coverage of the topic under study. The content validity was obtained from experts in the field of Nursing.

Pilot study

After obtaining permission from the concerned authorities and subjects a pilot study was carried out at Shankarappa Sakri High School Bagalkot. Pilot study gave the information regarding the reliability of the

questionnaire, feasibility and practicability of the design methodology.

Reliability of the tool

Reliability is the degree of consistency and accuracy with which an instrument measures the attribute for which it is designed to measure

TOOL

- Section 1: Consist of socio demographic variables
- Section 2: Consist of knowledge regarding sexual and reproductive health
- Section 3: Consist of attitude regarding sexual and reproductive health

Collection of data

Data collection is the gathering of information needed to address a research problem. Prior to the data collection, investigator obtained permission from head master of Laxmi Ranganath High School Kelavadi. Data Collection was done 13-07-2023. The investigator explained the purpose of the study to the subjects. The data collection was done between 10.00 am - 12.00 pm in selected area. Care was taken to see that no suggestions were given to the participants by the investigator.

Ethical Approval

Ethical clearance has been obtained from,

- The institutional ethical committee of B.V.V.S. SAJJALASHREE INSTITUTE OF NURSING SCIENCES, BAGALKOT.
- Permission obtained from the high school head master.
- Consent was obtained from the participants.-

Statistical Analysis

The data collected was analysed by using descriptive and inferential statistics. The data analysis was done as follows



Table - 1

S.NO	Data analysis	Method	Purpose
1	Descriptive Statistics	Frequency percentage	To describe the demographic variables of adolescent girls.
		Mean, standard deviation	To assess the knowledge and attitude of adolescent girls regarding reproductive health.
		Karl pearson Correlation	To determine the relationship between knowledge and attitude regarding reproductive health among adolescent girls.
2	Inferential statistics	Chi square test	To find association between knowledge scores among adolescent girls with selected demographic variables. To find association between attitude scores among adolescent girls with selected demographic variables

The data was analysed by using descriptive and inferential statistics. Numerical data obtained from the sample was organized and summarized with the help of descriptive statistics like percentages, mean, median and standard deviation. Karl Pearson's coefficient correlation

formula was used to find out significance between Knowledge and Attitude. Application of chi-square test to find the association between socio-demographic variables with knowledge and attitude score of adolescents between 12-19 years.

Results

Table 2: - Description of socio demographic characteristics of sample

S.N.	Socio-demographic variables	Frequency (f)	Percentage (%)
1	Age in year		
	10-12	8	13.33%
	13-14	52	86.66%
	15-16	0	0%
	17-19	0	0%
2	Religion		
	Hindu	60	100%
	Muslim	0	0%
	Christian	0	0%
	Others	0	0%
3	Monthly family income		
	Below Rs 3000	24	40%



	Rs 3001-5000	12	20%
	Rs 5001-10000	10	10.66%
	above 10000	14	23.33%
4	Type of family		
	Nuclear	36	60%
	Joint	24	40%
5	Area of residence		
	Urban	1	1.66%
	Rural	59	98.33%
6	Education of Father		
	No formal education	14	23.33%
	Primary education	28	46.66%
	PUC	13	21.66%
	Degree and above	5	8.33%
7	Education of Mother		
	No formal education	20	33.33%
	Primary education	4	6.66%
	Secondary education	3	5%
	Degree and above	33	55%
8	Medium of instruction		
	Urdu	1	1.66%
	Kannada	59	98.33%
	English	0	0
	Others	0	0
9	Family members		
	3 to 5	10	16.66%
	5 to 6	25	41.66%
	More than 7	25	41.66%
10	Irregular menstrual history		
	Yes	45	75%
	No	15	25%
11	Sex education		
	From teachers	53	88.33%
	From their peers	01	1.66%
	From their parents	06	10%
	From the internet	00	0%



Sl No	Variable	X ²	P value	Df
1	Age	0.913	0.339	1
2	Religion	2.326	0.508	3
3	Family	0.049	0.825	1
4	Area	0.548	0.459	1
5	Education of Mother	3.043	0.385	3
6	Medium of instructor	1.114	0.573	2
7	Number of family members	0.689	0.709	2
8	Education of Father	3.328	0.344	3
9	HIMC	3.444	0.063	1
10	Sex education	1.157	0.561	2
12	Physical changes			
	Mother	60	100%	
	Father	00	0%	
	Sister	00	0%	
	Brother	00	0%	

TABLE 3: - Standard deviation of knowledge regarding sexual and reproductive health among adolescent girls.

In order to find out the level of knowledge of students five range category was used. Categorization on the basis of the level of knowledge which is as follows.

Very poor Knowledge	0-4
Poor Knowledge	5-8
Average Knowledge	9-12
Good Knowledge	13-16
Very Good Knowledge	17-20

Table 4: - Level of knowledge of students regarding sexual and reproductive health among adolescent girls.

N=60

Table 4 depicts the findings of the knowledge of students on sexual and reproductive health. 56.66% of the students had Poor knowledge about Sexual and reproductive health, 35% of the students had average knowledge, 8.33% of the students had very Poor

knowledge, 0% of the students had good knowledge and 0% students have very good knowledge. The knowledge level was assessed by standard deviation values, the standard deviation is 2.20067 respectively.



Table 5: -Association between knowledge regarding sexual reproductive health and socio demographical variables.

Levels of Knowledge	Range of scores	No of study subjects	Percentage
Very poor	0-4	5	8.333%
Poor	5-8	34	56.666%
Average	9-12	21	35%
Good	13-16	0	0%
Very good	17-20	0	0%
Total		60	100%

Chi -square test was done to find out the association between the knowledge of Adolescent girls with their selected socio demographic variables. Hence there was no significant relationship between knowledge of Adolescent girls with any of selected socio demographical variables.

Table 6: - Association tween Attitude regarding Sexual and reproductive health and demographic variables.

Sl No	Variable	X ²	P value	Df
1	Age	2.308	0.129	1
2	Religion	0.374	0.946	3
3	Family	0.00	1.000	1
4	Area	1.017	0.313	1
5	Education of Mother	3.776	0.287	3
6	Medium of instructor	2.000	0.368	2
7	Number of family members	0.128	0.938	2
8	Education of Father	4.143	0.246	3
9	HIMC	1.491	0.222	1
10	Sex education	1.019	0.601	2



find out the association between the Attitude regarding sexual and reproductive health among Adolescent Girls with their selected socio demographic variables, there was no association between attitude with selected socio demographic variables of Adolescent Girls.

Table 7: -Correlation of knowledge scores with attitude scores regarding sexual and reproductive health among adolescent girls.

N =60

SR No	Variables	Mean± SD	r value	P value
1	Knowledge	7.733±2.20067	0.673	0.0352
2	Attitude	34.933±6.3107		

There is moderate Positive correlation between Knowledge and Attitude regarding Sexual and reproductive health. There is Significant correlation at 5% level of significance between Knowledge and Attitude.

Discussion

The discussion chapter deals with description of sample characteristics and objectives of the study. The aim of this present study was to assess the knowledge and attitude regarding reproductive health among adolescent girls in selected schools at Bagalkot.

Percentage distribution of adolescent girls according to their age Majority of the adolescent girls 52 (86.66%) were belonged to group of 13 – 14 years, 10- 12years adolescent girls were 8(13.33%).

Percentage distribution of adolescent girls according to their religion the highest 60(100%) were Hindus.

Percentage distribution of adolescent girls according to their family income there were 24(40%) of their income earning below Rs.3000, 12 (20%) of them were earning Rs.3001 – 5000, 10(16.6%) had income Rs.5001 – 10,000 and 14 (23.33%) of them belongs Rs.10, 000 and above income group.

Percentage distribution of adolescent girls according to their family type Majority of the adolescent girls 36

(60%) were belonged to nuclear family, 24 (40%) of adolescent girls belonged to joint family.

Percentage distribution of adolescent girls according to their residence Majority of the adolescent girls 1(1.66%) were belonged to urban area, 59 (98.33%) of the adolescent girls belongs to rural area.

Percentage distribution of adolescent girls according to their educational status of the mother were 20(33.33%) of their mother had no formal education, 4 (6.66%) of the adolescent girls mother studied primary education, 3(5%) of the adolescent girls mother studied secondary education and 33(55%) of their mother were graduates.

Percentage distribution of adolescent girls according to their medium of instruction Majority of the adolescent girl 59 (98.33%) were belonged to Kannada medium, 1(1.66%) of the adolescent girls belongs to Urdu medium.

Percentage distribution of adolescent girls according to their Family members were majority of responds 25(41.66%) were 5 to 6 members and 10(16.66%) were 3 to 5 members in family.

Percentage distribution of adolescent girls according to their education status of father were 14(23.33%) had no formal education ,28 (46.66%) had Primary education & 13(21.66%) had studied puc and 5(8.33%) studied Degree & above education.

Percentage distribution of adolescent girls according to their irregular menstrual history were 45(75%) girls had irregular menstrual history and 15 adolescent girls had regular menstrual history.

Percentage distribution of adolescent girls according to their source Sex education were 53(88.33%) from teachers ,1(1.665) from their peers, 6(10%) from their parents.

Percentage distribution of adolescent girls according to their physical changes were 60(100%) from mother.



Conclusion

The following conclusions were drawn on the basis of the present study i.e., to assess the knowledge and Attitude regarding Sexual and reproductive health among Adolescent Girls.

The study concluded that,

- The mean overall knowledge score of adolescence girl regarding sexual and reproductive health was 7.733 and standard deviation was 2.20067.

- The chi-square value showed that there was no significant relationship between knowledge of students with education of father.

- No significant relationship was found between the knowledge of the students with age, religion, education of mother, type of family, monthly income, irregular menstrual cycle, physical changes, sex education.

Contribution Of Authors

Add authors name in below, who is related to which heading.

Research concept: Dr. Deelip S. Natekar

Research Design: Mr Renukaraj Y. Nagammanavar

Supervision: Mr Renukaraj Y. Nagammanavar

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Data collection: Ms Muskan Attar, Ms Netra,

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Data analysis and interpretation: Ms Muskan Attar, Ms Netra, Mr Dayanand, Mr Praveen

Literature search: Ms Muskan Attar

Writing article: Ms Muskan Attar

Critical review: M

r Renukaraj Y. Nagammanavar

Article editing: Mr Renukaraj Y. Nagammanavar

Final approval: Dr. Deelip S. Natekar

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