## PROFESSIONAL PAPER

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# Aspects of Adolescent Reproductive Health in the Republic of Srpska 

ABSTRACT<br>Introduction. Results of numerous researches have shown that adolescents are not well informed about reproductive health.

Aim of the study. Inquire awareness and attitudes of adolescents in relation to reproductive health.

Patients and methods. The research was designed as a section study and it included 2.635 high school age adolescents from eight regions in the Republic of Srpska. Data on level of awareness and attitudes of adolescents about reproductive health were obtained by a questionnaire - survey. Methods of descriptive statistics were used for describing the sample group and $x 2$ test and non-parametric Fisher's test were used for establishing statistical significance of differences.

Results. When it comes to reproductive health awareness of adolescents, girls are more informed ( $80 \%$ ) than boys (20\%). About $11 \%$ of questioned adolescent are familiar with three contraceptive methods and $25 \%$ are familiar with two methods. The largest number of young people (55\%) is familiar with only one contraceptive method. Every third adolescent is familiar with syphilis, every sixth is familiar with hepatitis and every tenth is familiar with gonorrhea.

Conclusion. The results obtained in this study indicate the need for more intensive implementation of educational programmes in the field of reproductive health among adolescents in the Republic of Srpska.

Key words: reproductive health, adolescents, awareness, attitudes.
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## Introduction

Bearing in mind that adolescents are vulnerable, and from a demographic point of view the most important category of society because they representits future reproductive potential, the priority task of modern society is top reserve there productive health of this population. It is also one of the biggest challenges of the $21^{\text {st }}$ century
in the field of health care. It is based on protection from unwanted pregnancy and sexually transmitted diseases. ${ }^{1,2}$ The possession of knowledge about sexuality, physiology of reproduction, contraception, induced termination of pregnancy and sexually transmitted diseases are prerequisites for formation of correct attitudes related to family planning and taking responsibility for their own sexual behavior.

Results of some studies show that adolescents do not know enough about reproductive health, which has an impact on the increase in the number of sexually transmitted diseases and unwanted pregnancies. Knowledge is an important factorin establishing a certain system of values, forming attitudes, creating motivation, but also an important factor in the decision-making processin many areas of life. An integral part of the learning process must be mastering the skills that should enable the application of acquired knowledge.

The importance of knowledge was recognized upon defining the human and reproductive rights. In fact, one of the reproductive rights states that all people are entitled to obtain full information and appropriate education relevant to the sphere of reproductive health. It is known, however, that knowledge it self is not enough for responsible sexual behavior. Modern pedagogy emphasizes that it is important to develop critical thinking, as well as the opinion for the selection and analysis of information. It is necessary to provide knowledge simultaneously with the process of mastering different cognitive skills. ${ }^{3}$

## Patients and Methods

For the purposes of this study, sample was defined as aset of elements taken from the population on which the research would be conducted. In our case, awareness and the attitudes of adolescents regarding the reproductive health were investigated. The database was formed on the basis of data collected by a questionпaire. 2635 adolescents of secondary schoolagein the Republic of Srpskawere surveyed. This pattern was sufficient so that research results could be generalized to the entire population of adolescents within the limits of accuracy of $5 \%$. When it comes toterritorial demographic distribution, the size of the individual stratumin the sample was determined pro-
portionally to the size and number of secondary schools, and the regions of Banja Luka,Bijeljina, Doboj, Zvornik, East Sarajevo, Prijedor, Trebinje and Foca were covered. The methods of descriptive statistics were used to describe the test sample and $\chi 2$ test and non parametric Fisher (Fischer) test were used for determining the statistical significance of differences.

## Results

The largest percentage ( $58 \%$ ) of the total numberof respondent answers was related to the condom as a contraceptive method they know. $26 \%$ of surveyed people were familiar with the hormonal contraceptives, $11 \%$ were familiar with the interruption of sexual intercourse, while 6\% of young people were not sufficiently informed or did not answer this question. The distribution of answers to this question by gender data indicated that girls, when compared to boys, were more familiar with a large number of (wo or three correct answers) contraceptive methods. There was a statistically significant difference ( $\chi 2=0.0000, p<0.01$ ) between the answers of respondents who were familiar with condom or interruption of sexual intercourse compared to those who were familiar with the hormonal method of contraception.

The largest percentage of the total number of respondent's answers was about AIDS (47\%) and syphilis (17\%). The study indicated that young urban students were more familiar with the types of sexually transmitted diseases than their peers from the rural areas. Young people under the age of 19 on average were equally informed about sexually transmitted diseasesas young people who were 19 or above. A higher percentage of adolescents, 19 years and older, did not answer or stated that they were not sufficiently familiar with the types of sexually transmitted diseases compared with adolescents younger than 19 years. (Table 1.)

Table1: Distribution of respondents' answersin relation to the question to list a sexually transmitted disease that they knew

|  |  | One correct <br> answer \% | Two correct <br> answers \% | Three correct <br> answers \% | Four <br> correct an- <br> swers \% | I'm not familiar <br> enough/no res- <br> ponse \% |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Gender | Male | 46.01 | 20.18 | 17.22 | 4.30 | 12.29 |
|  | Female | 42.83 | 19.01 | 16.58 | 7.57 | 14.01 |

Out of 2635 surveyed $-1771(67 \%)$ did not know the answer to the question related to what period of pregnancy abortion is allowed in the Republic of Srpska. Only $33 \%$ of respondents gave the correct answer. Inanswering the above mentioned question(I donotknow -the rest) there was a statistically significant difference ( $\mathrm{X} 2=0.0000, \mathrm{p}<0.01$ ) between girls and boys. (Table 3.) The largest number of respondents(83\%) ans-
wered that they could talk with their parents about the dilemmas related to personal life. Girls ( $86 \%$ ), more likely than young men (79\%), stated that they would talk to their parents about the dilemmas related to personal life so, in relation to gender, there was a statistically significant difference ( $\chi 2=0.0000, p$ < O.O1). (Table 2.)

Table 2.: Distribution of respondents' answers to whether they could talk to their parents about the dilemmas regarding the personal life

|  | Yes \% | No \% | No answer <br> $\%$ |  |
| :---: | :---: | :---: | :---: | :---: |
| Gen- <br> der | Male | Female | 79.01 | 20.36 |

The largest number of respondents ( $66 \%$ ) said they could openly talk about serwith a friend/girlfriend, while the parents were cited by only 14\%. Only one of the seven adolescent stated that they could openly talk with their parents about sex. In answering this question, there was a statistically significant difference between boys and girls ( $\chi 2=0.0000$, P < o.01). Percentage of girls who said that they talked about sex with their parents was bigger than percentage of boys, while young men were more frequently keen to lead such discussions with friends.
The largest number of respondents (48\%) believed that sexual relations in adolescence were normal today and only $17 \%$ think that they carried a lot of risk. A higher number of girls ( $21 \%$ ) than boys ( $11 \%$ ) thought that sexual relations in adolescence carried a lot of risk, while $62 \%$ of boys considered that it was normal today. In answering this question there was a statistically significant difference (by gender $\chi 2$ $=0.0000, \mathrm{p}<0.01$ ).
"Is lowe an essential precondition for entering the sexual relationships?" - $61 \%$ of respondents said YES, while $38 \%$ of adolescents found that lowe was nota necessary prerequisite for sexual relations. In answering this question, there was a statistically significant difference between boys and girls ( $\mathrm{X} 2=0.0000, \mathrm{p}<0.01$ ). The percentage of girls who believed that lowe was a necessary prerequisite for sexual relations was higher than boys.
From 2635 surveyed, 1978 (74\%) believed that the responsibility of preventing unwanted pregnancy was common, i.e. included both partners. This issue was not contemplated o rтesponded by 329 ( $12 \%$ ) of respondents. Inanswering this question, there was a statistically significant difference by gender ( $\chi 2=0.0000, p<0.01$ ). The percentage of girls who believed that the responsibility of preventing unwanted pregnancy was common was higher than boys, while significantly more boys than girlsfelt it was entirely their responsibility.
$57 \%$ of respondents considered that the deliberate termination of pregnancy was dangerous and harmful to health. In answering this question, there was a statistically significant difference between boys and girls ( $\chi 2=0.0000, p<0.01$ ). Percentage of girls ( $63 \%$ ) who believed that the deliberate termination of pregnancy was dangerous and harmful to health was higher thanthe percentage of boys ( $49 \%$ ), while young men( $46 \%$ ), more likely thangirls ( $35 \%$ ), thought that it should be avoided. (Table 3.)

Table 3.: Distribution of respondents' answerson induced abortion

|  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Gender | Male | 48.61 | 46.37 | 4.22 | 0.81 |
|  | Female | 63.03 | 35.00 | 1.32 | 0.66 |

The largest number of respondents ( $56 \%$ ) believed that having children in adolescence was dangerous for the child and the mother. However, $17 \%$ of young people justified child bearing in adolescence. A higher number of girls ( $65 \%$ ) than boys ( $44 \%$ ) thought that having children in adolescence was dangerous for the child and the mother. In answering this question, there was a statistically significant difference by gender ( $\chi 2=0.0000, p<0.01$ ). $80 \%$ of respondents considered that gething married in the age of early adolescence was too early. However, $10 \%$ of surveyed adolescents had nothing against marriage in adolescence. In answering this question, there was a statistically significant difference by gender ( $\chi 2=0.0000, \mathrm{p}<0.01$ ). More girls ( $88 \%$ ) than boys( $69 \%$ ) believed that it was too early to get married in the adolescence age, while significantly more boys ( $21 \%$ ) than girls ( $9 \%$ ) had nothing against marriage in adolescence or believed that it was normal. $43 \%$ of the surveyed adolescents would seek advice regarding sexual life, contraception or unwanted pregnancy from their peers. Only $26 \%$ of young people would discuss these issues with parents. In a higher percentage, girls (29\%) would seek advice from their parents than young men (22\%), while more boys (48\%) than girls (40\%) would talk with their peers. In answering this question in relation to sex there was a statistically significant difference ( $\chi 2=0.0000, \mathrm{p}$ <o.O1). (Table 4.)

Table 4.: Distribution of respondents' answersto whom they would turn to in case they needed advice regarding sexual life, contraception and unwanted pregnancy.

|  |  |  | $\begin{aligned} & \circ \\ & 0 \\ & \frac{\infty}{0} \\ & 0 \\ & 0 \end{aligned}$ |  | $\circ$ $\stackrel{0}{\oplus}$ $\stackrel{+}{0}$ |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Gender | Male | 21.69 | 47.60 | 8.29 | 13.73 | 8.69 |
|  | Female | 29.00 | 39.73 | 17.31 | 8.23 | 5.73 |

## Discussion

Our research has shown that the level of awareness of adolescents about reproductive health, responsible sexual behavior and family planning is insufficient. According to the survey, when it comes to condom ( $89 \%$ ), the adolescents had the best knowledge about contraception. Knowledge of hormonal contraception was significantly lower ( $40 \%$ ), while $16 \%$ of adolescents were familiar withthe interruption of sexual intercourse. Insufficient degree of responsibility in sexual behavior is primarily a reflection of a lack of knowledge about sexuality and contraception. An average of $11 \%$ of the surveyed adolescents was familiar with three methods of contraception, with only $25 \%$ was familiar with two methods. The largest number of young people - $55 \%$ was only familiar with one method of contraception. The knowledge that adolescents receive from the various areas of family planning is often insufficient and is only informative, while lacking essential knowledge of contraceptive methods as well as practical mastery of the skills in how to apply various methods. It is known that there may be a significant difference between information and knowledge. As more complex, knowledge is a factor that determines the level of taking responsibility for your own sexual behavior. Knowledge of sexually transmitted diseasesis limited, and relates primarily to AIDS ( $88 \%$ ). Only one in three adolescent was familiar with syphilis, one in six with hepatitis, and every tenth was familiar with gonorrhea. Solid knowledge referred to HV infection, but knowledge of sexually transmitted diseases nowadays was much lower, which could be associated with decreased sensitivity of youth to the problem because there is not threat of mortal end of disease. 4 Only $5 \%$ of respondents were familiar with four or more sexually transmitted diseases, while $49 \%$ of young people were familiar with such infection. The positive impactof information on responsible behavioris generally expressed in increased perception of their own risk. ${ }^{5}$

The school hasa very large potential for expansion of positive ideas about sexuality and responsible sexual behavior among adolescents. The education system of a large number of countries in Europeand the US includes some form of sexual education for young people. According to the findings of research in this area, sexual education in schools is often not comprehensive. The biological and medical aspects of family planning have the traditional advantage in the educational programs of schools, while the instructions in behavior, promotion of health and learning the skills necessary for the development of responsible sexual behavior are usually ignored.

The main prerequisite for the formation of proper attitudes related to family planning and taking responsibil-
ity for their own sexual behavior are knowledge about sexuality, physiology of reproduction, contraception, induced termination of pregnancy and sexually transmitted diseases. Sources of information in these areas are numerous, but the messages they convey can be unreliable and even completely opposite from the truth. Most of the surveyed adolescents in this study ( $43 \%$ ) stated that they would seek advice on reproductive health from their peers. The respondents were less likely to obtain information about sex from relevant sources - parents, gynecologists, health workers, and more often from their peers. Only $26 \%$ of respondents said that they obtained information about reproductive health from their parents, while only $14 \%$ talked openly about sex. The information from Abama (Abama) and colleagues have shown that $44 \%$ of adolescents talk with their parents about problems related to reproductive health. ${ }^{6}$ At the very bottom of the list of sources of information of adolescents in the Republic of Srpska are gynecologists and health workers (about 14\%), which emphasizes the need for establishing counseling centers for young people.

The longitudinal study data conducted among Scottish adolescents showed that inadequate parental control was associated with earlier initiation of sexual activity of young people of both genders, and among girls with a larger number of partners and rare use of condom. ${ }^{7}$ The attitude of modern society on the admissibility of sexual activity "as long as love lasts" is often misinterpreted, in a way that sexual relations begin "as soon as love happens." In contemporary society, sexual intercourse usually marks the beginning of an emotional connection, and not, as before, to establish a stable relationship. ${ }^{\text {B }}$ Over go\% of adolescent pregnancies are unplanned and unwanted and in more than halfof fall these cases they are ended by induced termination of pregnancy. ${ }^{\text {S D Due tothe }}$ incomplete psychophysical development, induced termination of pregnancy in adolescence is a very unpleasant experience for young girls, and can lead to complications after abortions, an increased number of spontaneous abortion and premature births in subsequent, desired pregnancies, even the secondary infertility. ${ }^{10}$

A large numberof young people have a uniqueopportunity to acquire knowledge and skills related to sexuality and reproductive health in the school. During childhood and youth learning and education is intense, and allows the development of physical and cognitive skills, knowledge and shaping values, atitude sand beliefs.

## Conclusion

Based on the results of the research conducted for this study, it can be concluded that there productive health of young people in the Republic of Srpska is endan-
gered. This is due tothe lack of knowledge of adolescents about sexuality, contraception and sexually transmitted diseases. The most common sources of relevant knowledge, namely peers and parents,are improper. There is no system of social measures that would help young people to channel their sexuality. Parents take passive attitude, and school and health workers are not sufficiently engaged. Education about sexuality, physiology of reproduction, contraception benefits and risks of the deliberate termination of pregnancy, as well as diseases that are transmitted through sexual contact, including the application of preventive measures, are the most important components in the adoption of responsibility in sexual behavior, as well as in reducing problems of unwanted pregnancies and sexually transmitted diseases.

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## Aspekti reproduktivnog zdravlja adolescenata u Republici Srpskoj

## SAŽETAK

Uvod. Rezultati velikog broja istraživanja pokazuju da adolescenti nisu dovoljno informisani kada je riječ oreproduktivnom zdravlju.
Cilj rada. Ispitati informisanost i stavove adolescenata u vezi s reproduktivnim zdravljem.
Ispitanici i metode. Istraživanje je dizajnirano kao studija presjeka kojom je obuhvaćeno 2635 adolescenta srednjoškolske dobi iz osam regiona Republike Srpske. Podaci o znanju i stavovima adolescenata o reproduktivnom zdravlju prikupljeni su putem upitnika - ankete. Za opisivanje ispitivanog uzorka korišćene su metode deskriptivne statistike a zautvrđivanje statističke značajnosti razlika, korišćenje $\chi 2$ test i neparametarski Fišerov (Fischer) test.

Rezultati. Kada je riječ o informisanosti adolescenata o reproduktivnom zdravlju, djevojke su mnogo bolje informisane (80\%) od mladića (20\%). Tri metoda kontracepcije poznaje u prosjeku $11 \%$ anketiranih adolescenata, a za samo dva metoda zna $25 \%$. Najveći broj mladih - 55\% poznaje samo jedno kontraceptivno sredstvo. Tek svaki treći adolescent zna za sifilis, svaki šesti za hepatitis, a svaki deset i zna zagonoreju.

Zaključak. Rezultati dobijeni ovim istraživanjem upućuju na potrebu intenzivnijeg sprovođenja edukativnih programa u oblasti reproduktivnog zdravlja među adolescentima u Republici Srpskoj.

Ključne riječi: reproduktivno zdravlje, adolescenti, informisanost, stavovi.

