

## ACCESSIBILITY OF ADOLESCENTS TO SOURCES OF INFORMATION ON SEXUAL AND REPRODUCTIVE HEALTH

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### Application on the field of Public Healthcare

Given the current configuration and representation of sexuality among adolescents, this study presents data that can contextualize the indicators to identify and prioritize the needs to guide healthcare services and healthcare professionals, in order to work not only with the target population but also with the management of sexual transmissible diseases within the Brazilian population. The information of this study was generated from a variety of sources, having a school as its main source, we can work together and supporting those teaching institutions aiming at improving the information making it effective and efficient, in order to deliver adequate knowledge among adolescents through these educational institutions.

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### Abstract

**Introduction:** adolescence is a phase that entails biopsychosocial changes with specific emotional and behavioral impact on sexual and reproductive health of both sexes. The World Health Organization considers adolescents to be the ages from 10 to 19 years. Chronologically this is important for epidemiological research, for development of public health policies, to define programs and specific actions for this audience. The concern with the sexual and reproductive health of adolescents is due to early onset of sexual activity, which contributes to expose these young people to the risks of unplanned pregnancy and sexually transmitted diseases. **Objective:** to identify the sources of information used by adolescents in public schools about sexuality and reproduction. **Methods:** descriptive quantitative study. There were 90 Semi-structured interviews applied to adolescents with predominant age between 16 and 19 years old from the second year of high school in a Public School located in the urban periphery of a capital in the northeast of Brazil. **Results:** it was observed that the adolescents of this study has a relatively high accessibility to the educational activities in the area of sexual and reproductive health. The school was the main area cited by the participants of the study. As for the search for information on the subject, friends are the most sought after by adolescents. Afterwards, the most often cited are family members. The majority of the adolescents said that the source of information most sought was television (35.5%), followed by the internet, books and magazines. Contraception was practiced by only 14 (36.9%) of the adolescents. **Conclusion:** this study points to the school as the main area of participation in educational activities on sexual and reproductive health among adolescents, in addition to friends, television and the internet.

**Key words:** sexuality, adolescent, sexual health, reproductive health.

### INTRODUCTION

Adolescence is a phase that involves a significant biopsychosocial changes with specific emotional and behavioral impact on sexual and reproductive health of both sexes<sup>1</sup>. This special concern with the sexual and reproductive health of adolescents is due to the early onset of sexual activity, which contributes to exposing the adolescents at risk to unplanned pregnancy and Sexually Transmitted Diseases (STDs)<sup>2</sup>.

The World Health Organization reports that the age of adolescence is from 10 to 19 years<sup>3</sup>. This chronological concept is important for epidemiological research, development of public policies and the definition of specific actions and schedules for this target audience, but it does not cover the biopsychosocial characteristics, which should be considered particularly in addressing this population group.

Teenage Pregnancy constitutes a serious public health problem, since it can cause obstetric

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complications, with repercussions for the mother and newborn, as well as psychosocial and economic problems<sup>4</sup>. STDs among adolescents also constitute a public health problem. There is an estimated 340 million new cases per year, throughout the world<sup>5</sup>.

The high number of births among adolescents, the increasing number of early sexual relations and increase of STD/HIV/Acquired Immune Deficiency Syndrome (AIDS) in this age group justify the provision of an adequate care for this age group population's needs<sup>1</sup>. In this context, school is a strategic place for caring for adolescents, where they should be encouraged to participate in projects that inform them about the sexual and reproductive health, because it is a population that needs to have information to develop a healthy sexual behavior.

In addition, school may also refer the adolescents with sexual and reproductive healthcare needs to primary healthcare, facilitating their access to services. The link between the school and the staff of the Family Health Strategy (FHS) provides the approximation and the linking of adolescents with instances of care<sup>6</sup>.

The need for the school to function as the scenario for sexual education practices has led the Ministry of Education to launch the Health and Prevention in Schools Project (HPSP), having as goal perform actions for the promotion of sexual and reproductive health of young people, integrating healthcare and education. A future objective of this study is to reduce the vulnerability of young people and adolescents to STD/HIV/AIDS and teen pregnancy, having as a guideline to preventive education and the formation of a critical awareness of the population<sup>2</sup>.

It is observed the importance of the discussion in the disease prevention field and the extending of such approach to include the experiencing of sexuality in a healthy manner. It is important to know the information sources of adolescents on the subject of sexuality. It is noted that the information is a necessary resource for the prevention and promotion of their health.

Today, adolescents are using the *internet as a source* of information on sexual and reproductive health. In addition to the media, there are other ways of obtaining information on the sexual and reproductive health. Such as talking with parents, teachers, priests, friends, relatives and others.

Thus, the objective of this study is to identify sources of information on sexual and reproductive health used by adolescents in public schools.

## METHODS

This is a quantitative descriptive study, carried out by interviews with adolescent students in a public school. Descriptive studies estimate parameters of a population and offer great importance since it is the first step of a study<sup>7</sup>.

The research was conducted in a High School in the city of Fortaleza, in the Northeast of Brazil. The School belonging to the Office of the Secretary of Education of the Government of the State of Ceara

(SEDUC) and has approximately 1,800 students enrolled in this high school, all in the age range of adolescence.

In this study, 90 students participated who were enrolled in their second year of High School, whose age predominates between 16 and 19 years. The delimitation of this age group was due to the concern in working with a more homogeneous population, favoring the uniformity of the information needs to be met. The students selected to participate in the study were those who were interested in contributing to the research and the selection was made randomly in classrooms, which had students within the desired age range.

The data were collected through a questionnaire, and answered individually by the adolescents. However, the questionnaire was read by the facilitator who asks the question, as participants proceed privately recording their answers. Thus, the interview facilitator clarified any doubts and coordinated the data collection completion, together and at the same time, which lasts an average of 10 minutes. The inclusion criteria for participation in the study is that the adolescent is registered in the public school.

The data were processed using the Statistical Package for Social Science (SPSS) version 13.0, and held up a univariate statistical analysis, through the absolute frequency and on and application of the Chi-square test. In variables of continuous values, we calculated the mean and standard deviation.

This research was approved by the Research Ethics Committee of the Fluminense Federal University of Ceará (UFC), with protocol No. 153/106101544.

## RESULTS AND DISCUSSION

According to the study objective it revealed that most adolescents in this study were female (55.6%) the rest were male (44.4%), as shown in Table 1. The age of adolescents ranged from 16 to 19 years with a mean of 16.8 and standard deviation of 7.17, with a predominance of adolescents 17 to 18 years, corresponding to 60 participants (66.7%). The age range of participants is adolescence according to the World Health Organization (WHO), because this organization define adolescence the age group between 10 to 19 years<sup>3</sup>.

Regarding the educational level of the participants' mothers, 40 (44.5%) had a high school education (complete and incomplete), which corresponds approximately nine to twelve years of schooling. It is noted that 10 (11.1%) of the adolescents' mothers were illiterate and 3 (3.3%) had college (complete or incomplete). According to the National Survey of Households - PNAD, the group aged 18 years or older that could have finished high school, i.e. at least 11 years of study, the average was 7.4 years, that is less than complete elementary school<sup>9</sup>. As for the group aged 25 and older, the average fell to 7.0 years of study<sup>10</sup>.

Regarding the educational level of the adolescents' fathers 41 (45.6%) had high school (complete and incomplete). It should be noted that

10 (11.1%) of the parents of adolescents were illiterate, and 3 (3.3%) had college (complete or incomplete). There has been a low parental education level of the adolescents of this study, which makes it difficult for them to construct a dialogue and answer questions from their children about sexual and reproductive health.

Family income ranged from up to more than five minimum wages, but the majority of the adolescents was in the range of above, up to two minimum wages (73.3%), characterizing the low socioeconomic status of adolescents. According to a National Survey of Households (2008), the average real monthly income of households had income of R\$1,968. The Northeast has the income of R\$1,915<sup>10</sup>.

As for union status, 30 (33.2%) of the adolescents had a regular partner, 38 (42.3%) had a casual partner and 22 (24.5%) had no partner during study.

Catholic religion was mentioned by 54 (60%) of the participants. This was expected as the Catholic religion is chosen by the majority of national, regional and local people. According census it is confirmed by IBGE in the year of 2000 in the Northeast, the region had the highest proportion of Catholics (79.9%) in relation to other regions<sup>11</sup>.

It is observed in table 2 that 62 adolescents (68.9%) have already participated in some educational activity on sexual and reproductive health at school, showing that these adolescents have an accessibility relatively high in these educational activities. School was the main area mentioned by study participants (51.6%) and a second space was the church (24.2%). The public policies involving sexual and reproductive health in schools has improved the participation of adolescents in projects and programs. Therefore, school has promoted educational actions as a way to promote and protect health.

A significant number of adolescents have cited the church as a place for the implementation of educational actions and as a reason for the participation of some students in church youth groups. Therefore, it can be seen that the young people can facilitate communication among them making it easy to talk about the subject.

Regarding the search for information on the subject, friends are the most sought after by adolescents. Afterwards, the most often cited are the family (represented by parents and other family members). Then comes the teachers and healthcare professionals. Respect the adolescents who sought information on sexual and reproductive health with someone 41 (67.2%) reported that the person who they sought clarified their doubts. It is clear that a significant number of adolescents had their doubts and questions answered. Family is one of the main regulators of sexuality and the information that parents pass on to their children is usually limited, discussing behavioral guidelines and are related to values for maintenance of the family system<sup>12</sup>. This study proves that there is a need for a social network for adolescent care related to family, school and health services so that these adolescents receive accurate information<sup>13</sup>.

A research developed in the sexual and reproductive health area indicate that the main information sources on sexuality are friends, family, school, magazines and internet<sup>14</sup>.

School is a privileged place to socialize, in addition to being a place that many adolescents would like to the implementation of actions in the sexual and reproductive education area. Presently it can be observed, that sexual education programs and projects are fundamental and essential in educating adolescents on their sexuality<sup>15</sup>.

The majority of the adolescents said that the most sought source of information was television (35.5%), followed by the internet, books and magazines. According to a study by Afonso (2001), books and magazines were the most sought sources, which differs from the results of this study. However, the chronological distance between the two studies must be taken into account.

A survey of Portuguese students between 14 and 18 years of age showed that the internet was considered one of the most used information sources to answer questions about sexuality<sup>16</sup>.

Some adolescents did not seek information on the subject, because they, "never needed", "did not know or did not want to look" and "shame." According to the Health Ministry, many young people think they know everything about sex, but often have insufficient information or do not know them in practice, showing one of the main reasons that adolescents do not seek information about sexual and reproductive health<sup>17</sup>.

The average age of the adolescents of this study was 16.8 years with a standard deviation of 7.17, the finding of 38 (42.2%) of the adolescents have sex life started, this confirms the precocity of this event, as shown in Table 3. This precocity of the beginning of sexual life concerned with the sexual and reproductive health of adolescents, exposing the adolescents at risk of unplanned pregnancy and STD's<sup>2</sup>.

Contraception was practiced by only 14 (36.9%) of the adolescents. It is clear that the significant number of adolescents can expose this group to pregnancy and STDs. The fecundity rate decreases in all age ranges, less among adolescents, thus requiring efforts for the preparation of programs and projects in the area of sexual and reproductive health. The researcher studying sexually active teenagers found 42% using some type of contraceptive method in the last six months (and higher than that found in this study), on what led to the need for effective interventions on sexual behavior and reproductive health in this age group<sup>18</sup>.

Among fourteen adolescents who used any contraceptive method 7 (50%) of them wore condoms and 7 (50%) took pills. It is perceived that the other methods were not reported, showing the popularity that these contraceptive methods have among the adolescents.

The statements indicate that men consider it difficult to use a condom during the relationship, since its introduction will be related as a symbol of infidelity and distrust. Asking that the partner use a condom, you can put in doubt the fidelity between the two, causing conflicts<sup>19</sup>.

Therefore, school was the main area of participation in educational activities on sexual and reproductive health among the adolescents studied. However, this reality is not found in the

majority of schools. However, public policies have to aim to include the schools as a part of the strategy for education on sexual and reproductive health.

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## RESUMO

**Introdução:** a adolescência é uma fase que acarreta mudanças biopsicossociais, com especificidades emocionais e comportamentais que repercutem na saúde sexual e reprodutiva de ambos os sexos. A Organização Mundial da Saúde considera como adolescentes a faixa etária dos 10 aos 19 anos. Cronologicamente isso é importante para a investigação epidemiológica, para elaboração de políticas públicas e para definição de programas e ações específicas para esse público. A preocupação com a saúde sexual e reprodutiva dos adolescentes se deve a precocidade do início da atividade sexual, a qual contribui para expor esses jovens aos riscos da gravidez não planejada e das doenças sexualmente transmissíveis. **Objetivo:** identificar as fontes de informações utilizadas pelos adolescentes da escola pública sobre sexualidade e reprodução. **Método:** estudo descritivo de natureza quantitativa. 90 entrevistas semiestruturadas foram aplicadas em adolescentes do segundo ano do Ensino Médio de uma Escola Pública da periferia urbana de uma capital do Nordeste Brasileiro, cuja faixa etária predomina entre 16 e 19 anos. **Resultados:** observou-se que os adolescentes da pesquisa têm uma acessibilidade relativamente elevada a atividades educativas na área de saúde sexual e reprodutiva. A escola foi o principal espaço citado pelos participantes do estudo. Quanto à busca por informações sobre o assunto, os amigos são os mais procurados pelos adolescentes. Posteriormente os mais citados são os familiares. A maioria dos adolescentes disse que a fonte de informação mais buscada era a televisão (35,5%), seguido da internet e livros e revistas. A anticoncepção era praticada por somente 14 (36,9%) dos adolescentes. **Conclusão:** esse estudo aponta para a escola como principal espaço de participação em atividades educativas sobre saúde sexual e reprodutiva entre os adolescentes, além de os amigos, televisão e internet.

**Palavras-chave:** sexualidade, adolescente, saúde sexual, saúde reprodutiva.