A School Based Intervention Study On Reproductive Health Education Among Cairo Secondary School Girls

THESIS PROPOSAL

Submitted for fulfillment of
PhD Degree in Medical Childhood Studies
(Child Health and Nutrition)

PRESENTED BY
Reham Sabrey Abdelaal
MB.BCh, MSC

SUPERVISED BY
Prof. Mervat El Rafiey
Professor of Community Medicine
Cairo University

Prof. Magdy Karam El Deen
Professor of Community Medicine
Institute of Postgraduate Childhood Studies
Ain Shams University

Prof. Samia Samy Aziz
Professor of Community Medicine
Institute of Postgraduate Childhood Studies
Ain Shams University

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CONTENTS

✍ *List of Abbreviations* ✍

ASRH	Adolescent sexual and reproductive health
CAPMAS	Central Agency of Public Mobilization and Statistics
CDC	Centers for Disease Control and Prevention
DHS	Demographic Health Survey
FGM	Female Genital Mutilation
FSH	Follicle stimulating hormone
HIV	Human immune Deficiency virus
ICPD	International Conference on Population and Development
LH	Luteinizing hormone
NRC	National Research Council
STDS	Sexually transmitted diseases
SYPE	Survey of Young People in Egypt
UNFPA	United Nations Population Fund
UNESCO	United Nations Educational, Scientific and Cultural Organization
WHO	World Health Organization

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INTRODUCTION

Reproductive health is a crucial part of general health and a central feature of human development. It is a reflection of health during childhood, and crucial during adolescence and adulthood, sets the stage for health beyond the reproductive years for both women and men, and affects the health of the next generation **(WHO, 1995).** The health of the newborn is largely a function of the mother's health and nutrition status and of her access to health care **(Parwej, 2005).**

Adolescents represent a major potential human resource for the overall development of a nation and it is the most important and sensitive period of one's life **(WHO, 1997).** It is marked by profound and dynamic physical, biological, sexual and psychosocial changes, yet it is virtually neglected by health care providers, by society and even by most parents, teachers and health professionals. The nutritional needs of adolescents increase; their lifestyle is formulated in such a way that it might influence their current or future morbidity. Their reproductive life may start prematurely while their intellectual abilities and cognitive and affective faculties are still being formed **(FHI, 2007).**

In Egypt, health education is weak and the public school curriculum offers little to educate students about health in general and about reproductive health in particular. Evidence from both developed and developing countries shows the importance of reproductive health education programs in improving the overall health of young people.

Women bear the greatest burden of reproductive health problems as pregnancy and labor complications, most of the burden of contraception, and are more exposed to contracting and suffering the complications of reproductive tract infections **(Wang, 2006).**

Reproductive health interventions are most likely to include attention to the issues of family planning, STD prevention and management and prevention of maternal and perinatal mortality and morbidity. Reproductive health should also address issues such as harmful practices, unwanted pregnancy, unsafe abortion, reproductive tract infections including sexually transmitted diseases and HIV/AIDS, gender-based violence, infertility, malnutrition and anemia, and reproductive tract cancers. Appropriate services must be accessible and include information, education, counseling, prevention, detection and management of health problems, care and rehabilitation **(Population info network, 2009).**

In the coming decade, Egypt will have the largest demographic cohort ever making its way to adulthood. Young people are important catalysts for development and change. Investment in this crucial age group provides an unprecedented opportunity to accelerate growth and reduce poverty.

The promotion of young people's reproductive health through a coordinated school-based approach is desirable for financial, developmental and practical reasons. Correct, carefully measured, properly timed and emphatically provided biological and sexual information is crucial for adolescents. This is to help them learn about their bodies and the functions of their reproductive system. The education should be viewed within cultural and religious norms.

Aim of the study:

To increase the awareness of school adolescent girls about reproductive health through a comprehensive school education program.

Objectives:

- To assess how much knowledge girls already have about reproductive health.
- To raise awareness and dispel any myths about reproductive health.
- To make the session interactive, trying to make the pupils comfortable talking about the change.
- To evaluate the knowledge they acquired through the sessions.

Hypothesis

The educational program will induce a desirable change in knowledge of the girls regarding reproductive health.

Chapter 1
Reproductive Health

Reproductive health is a crucial part of general health and a central feature of human development. It is a reflection of health during childhood and crucial during adolescence and adulthood, sets and stage for health beyond the reproductive years for both women and men, and affects the health of the next generation.

'Reproductive health' is defined as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and its functions and processes (ICPD, 1994).

Sexual and reproductive health of adolescents has been a major international concern and it had been very clearly indicated in the 1994 International Conference on Population and Development (ICPD) in Cairo. In the Program of Action, it is stated that “reproductive health programs should be designed to serve the needs of women, including adolescents”, and that innovative programs should be developed to “ensure information, counseling and services for reproductive health accessible for adolescents and adult men” (UN, 2000).

The importance of adolescent sexual and reproductive health had been neglected in reproductive health and population programs and studies due to the sensitivity of the issue for a long time. By the strong emphasize on adolescent sexual and reproductive health in ICPD in Cairo and in Beijing Platform for Action (Fourth World Conference on Women, 1995), where a comprehensive and holistic approach towards sexuality, sexual and reproductive health was developed as part of basic human rights.

Reproductive health education is described as educational experiences" aimed at developing capacity of adolescents to understand their sexuality in the context of biological, psychological, socio-cultural and reproductive dimensions and to acquire skills in managing responsible decisions and actions with regard to sexual and reproductive health behavior (UNESCO, 2000).

The goal of overall improved adolescent reproductive health involves: more responsible and equitable relationships between young men and young women, decreased incidence of pregnancy before maturity, lower rates of exposure to and contraction of sexually transmitted diseases and improvement in the status of women.

Adolescents are a target population for reproductive health education because

- There are more than 1.7 billion young people between the ages of 10 and 24, eighty-six percent living in less developed countries (Boyd, 2000).
- One in five people in Egypt is between the ages of 15 and 24, a total of 16 million in 2012 (UN, 2010).
- Adolescents lack reliable reproductive health information, and thus the basic knowledge to make responsible choices regarding their reproductive behavior.
- In many countries around the world, community members and parents are reluctant to provide such education to young men and women.
- During adolescence normal physical development may be adversely affected by inadequate diet and excessive physical stress.
- More than half of new HIV infections worldwide occur among young people under age 25 WHO estimates that up to 60 percent of all new sexually transmitted

infections occur among youth ages 15-24(UNAIDS,2002). Sixty-two percent of HIV infected youth are young females (Cheetham, 2003).

-Thirty-three percent of teenage girls in the developing world will give birth before the age of 20; many of these pregnancies are unplanned. Early pregnancy and childbearing are typically associated with less education, lower future income and negative health consequences for a young girl. Compared to women in their 20s, 15- to 19-year-olds are twice as likely to die from pregnancy-related complications; girls under 15 are at 25 times the risk (Cook,2000)

The means by which adolescent reproductive health is achieved include: improvement in the knowledge and understanding among all key groups of society - including young people themselves - of the physical, psychological and social aspects of adolescent reproductive health; increased training of adolescents and key people with influence on adolescents in counseling and communication skills; promotion of policies and programs that reflect the best ways of meeting the reproductive health needs of adolescents (WHO,1989).

Reproductive health is life-long, beginning even before women and men attain sexual maturity and continuing beyond a woman's child-bearing years. Comprehensive reproductive health education follows a life cycle approach and considers the bio-psycho-social and spiritual aspects of health (ElRafie, 2010)

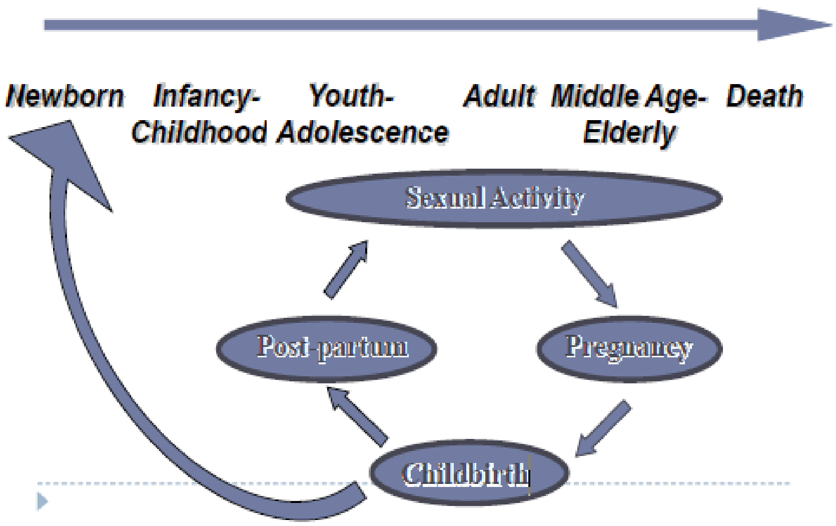

Figure 6: The Reproductive Life Cycle.

Reproductive health care should include: family-planning services, education and services for prenatal care, safe delivery, and post-natal care, especially breast-feeding, infant and women's health care, prevention and appropriate treatment of infertility, prevention of abortion and the management of the consequences of abortion; treatment of reproductive tract infections; sexually transmitted diseases and information, education and counseling, as appropriate on reproductive health

Active discouragement of harmful practices such as female genital mutilation, prevention and treatment of breast and cervical cancer, adolescents' care and education, and proper nutrition of women should also be integral components of reproductive health care programs (ICPD, 1994).

The practical benefits of greater investment in family life and reproductive health include a variety of *individual and public health benefits (UN, 2000):*

• Delayed initiation of sex

• Reduced unplanned and too-early pregnancies and their complications

• Fewer unwanted children

• Reduced risk of sexual abuse

• Greater completion of education and later marriages

• Reduced recourse to abortion and the consequences of unsafe abortion

• Slower spread of sexually transmitted diseases, including HIV/AIDS.

Social development benefits:

• Progress towards gender equity, social participation and grassroots partnerships for development

• Better preparation of young people for responsibility now and as adults, and skills development to facilitate response to social change and opportunity

• Stronger primary health care systems with emphasis on health promotion

• Stronger, more relevant education systems.

The crucial and critical factor that could contribute in alleviating or preventing adolescent reproductive health problems lie in education, information and communication.

School-based adolescent sexual and reproductive health (ASRH) programs have been recommended for widespread implementation because they have been shown